See separate instructions.

Part I Reporting Issuer

_	Issuer's name	Issuer		2 Issuer's employer identification number (EIN)						
		ado Dond Eurod (NT / A						
3	CI Investment Gr			N/A 5 Email address of contact						
•	Duarte Boucinha			ohone No. of contact 416-681-1752						
					dboucinha@ci.com					
6	6 Number and street (or P.O. box if mail is not delivered to street address) of contact					7 City, town, or post office, state, and ZIP code of contact				
	15 York Street, 2n	ıd floor	r			Toronto, Ontario, M5J 0A3				
8	Date of action		9 Class	9 Classification and description						
	Tax Year 2023			Non-taxable distril		bution				
10	CUSIP number	11 Serial number(s)	12 Ticker symbol		13 Account number(s)				
P	N/A art II Organizatio	N/A		N/A	See bac	N/A k of form for additional questions.				
14	-					nst which shareholders' ownership is measured for				
	the action ► A non-taxable distribution was made to shareholders throughout the 2023 taxation year.									
	See question 15 for per unit information of the return of capital that occurred throughout									
		the 2023 tax	able year.							
15	Describe the quantitat	tive offect of the orac	nizational act	ion on the basis of the secu	urity in th	o hands of a LLS, taxpayor as an adjustment per				
15 Describe the quantitative effect of the organizational action on the basis of the security in the hands of a U.S. taxpayer as an adjust share or as a percentage of old basis ►0.28259 per unit										
16		-	asis and the	data that supports the calcu	ulation, s	such as the market values of securities and the				
	valuation dates	N/A								

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Pa	rt II	Organizational Action (continued)								
17		applicable Internal Revenue Code section(s) and subsection(s) upon which the tax to	reatment is based ▶	IRC section 301(c)(2),						
				312 and 316						
18	Can an	resulting loss be recognized? \blacktriangleright N/A								
	–			NI/A						
19	Provide	any other information necessary to implement the adjustment, such as the reportab	le tax year ►	N/A						
	Und	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and								
		belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.								
Sigr Her	<u> </u>		March 21, 2022							
пег	Sign		Date March 31,	Date March 31, 2023						
	Drint	your name ► Darie Urbanky	Title President	and Chief Operating Officer						
Pai		Print/Type preparer's name Preparer's signature	Date	Check if PTIN						
	a parer			self-employed						
	e Only	Firm's name		Firm's EIN ►						
		Firm's address ►		Phone no.						

Send Form 8937 (including accompanying statements) to: Department of the Treasury, Internal Revenue Service, Ogden, UT 84201-0054