► See separate instructions.

P	art Reporting	Issuer						
1	Issuer's name			2 Issuer's employer identification number (EIN)				
	CI Global Income & Growth Fund (E)					N/A		
3	Name of contact for additional information 4 Tele			ephone No. of contact		5 Email address of contact		
	Duarte Boucinha			416-681-1752		dboucinha@ci.com		
6	 Number and street (or P.O. box if mail is not delivered to 15 York Street, 2nd floor 			street address) of contact		7 City, town, or post office, state, and ZIP code of contact		
						Toronto, Ontario, M5J 0A3		
8 Date of action 9 Classification and description								
	Tax Year 2023			Non-taxable	distrib	tribution		
10	CUSIP number	11 Serial number(s)		12 Ticker symbol		13 Account number(s)		
	N/A	N/A		N/A		N/A		
P:			additiona	-	See bac	k of form for additional questions.		
_	-							
14	-				-	nst which shareholders' ownership is measured for		
	the action ►					s throughout the 2023 taxation year.		
		See question	15 for pe	r unit information of t	he retu	rn of capital that occurred throughout		
		the 2023 taxa	ole vear.					
			,					
15 Describe the quantitative effect of the organizational action on the basis of the security in the hands of a U.S. taxpayer as						ne hands of a U.S. taxpayer as an adjustment per		
	share or as a percentage of old basis ► 0.59868 per unit							
	•		<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>					
16	Describe the calculation	on of the change in bas	is and the	data that supports the calc	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	r penalties of perjury, I declare that I have examined this return, including accompanying sche	dules and statements	, and to the best of my knowledge and				
		it is true, correct, and complete. Declaration of preparer (other than officer) is based on all infor	mation of which prepa	arer has any knowledge.				
Sigr Her	<u> </u>		Date March 31, 2023					
пег	Sign							
	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