► See separate instructions.

	Issuer's name	Issuer			2 Issuer's er	nployer identification number (EIN)		
	CI Canadian Fixed		. ,	No. of contact		N/A		
3				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 deliver			delivered to s	treet address) of contact	7 City, town, or	7 City, town, or post office, state, and ZIP code of contact		
	15 York Street, 2nd floor				Toror	nto, Ontario, M5J 0A3		
8	Date of action		9 Classi	9 Classification and description				
	Tax Year 2023			Non-taxable distribution				
10	CUSIP number	11 Serial number(s)	12 Ticker symbol	13 Account nu	imber(s)		
	N/A	N/A		N/A	N	J/A		
Pa	· · · · ·		n additional	statements if needed.				
14	Describe the organiza				-	nolders' ownership is measured for		
	the action ►				0	the 2023 taxation year.		
		1	-	unit information of	the return of capital	hat occurred throughout		
		the 2023 tax	able year.					
15	Describe the quantitat share or as a percenta				curity in the hands of a U.	S. taxpayer as an adjustment per		
16	Describe the calculation	on of the change in ba	asis and the d	lata that supports the cal	culation, such as the mar	ket values of securities and the		
	valuation dates	N/A						
For	Paperwork Reduction	Act Notice, see the	separate Inst	tructions.	Cat. No. 37752P	Form 8937 (12-2017)		

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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					
		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>		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