► See separate instructions.

Ρ	art Reporting	ssuer						
1	Issuer's name				2 Issuer	s employer identification number (EIN)		
	CI Income Fund (P)					N/A		
3	Name of contact for additional information 4 Telephon			e No. of contact	5 Email a	ddress of contact		
	Duarte Boucinha 410			681-1752	dbou	dboucinha@ci.com		
6	Number and street (or P.O. box if mail is not delivered to stre			treet address) of contact	t address) of contact 7 City, town, or post offic			
	15 York Street, 2n	d floor		Toros		oronto, Ontario, M5J 0A3		
8	Date of action		9 Classification and description					
	Tax Year 2023			Non-taxable distribution				
10	CUSIP number	11 Serial number(s)	12 Ticker symbol	13 Accour	nt number(s)		
	N/A	N/A		N/A		N/A		
Pa			n additional	statements if needed. S	ee back of form f			
14	Describe the organiza	tional action and, if a	plicable, the	date of the action or the da	ate against which sh	nareholders' ownership is measured for		
	the action ►	A non-taxab	le distribut	ion was made to share	holders through	out the 2023 taxation year.		
		1	-	unit information of th	ne return of capi	tal that occurred throughout		
		the 2023 tax	able year.					
15	Describe the quantitat share or as a percenta				rity in the hands of	a U.S. taxpayer as an adjustment per		
16	Describe the calculation valuation dates ►		asis and the c	lata that supports the calcu	llation, such as the	market values of securities and the		
_								
For	Paperwork Reduction	Act Notice. see the	separate Ins	tructions.	Cat. No. 37752F	Form 8937 (12-2017)		

Form 8937 (12-2017) Page 2								
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