► See separate instructions.

	Issuer's name	Issuer			2 Issuer's employer	identification number (FIN)		
•				2 Issuer's employer identification number (EIN)				
	CI Canadian Income & Growth Fund (EF)				N/A			
3	Name of contact for add	ditional information	4 Telephon	e No. of contact	5 Email address of cor	itact		
	Duarte Boucinha		416-	681-1752	dboucinha@ci.c	om		
6 Number and street (or P.O. box if mail is not deliv			delivered to s	treet address) of contact	7 City, town, or post offic	7 City, town, or post office, state, and ZIP code of contact		
	15 York Street, 2nd floor				Toronto, On	tario, M5J 0A3		
8	Date of action		9 Class	ification and description				
	Tax Year 2023			Non-taxable	distribution	ribution		
10	CUSIP number	11 Serial number(s	)	12 Ticker symbol	13 Account number(s)			
D,	N/A art II Organizatio	N/A	additional	N/A	N/A See back of form for additiona			
14	-				ate against which shareholders'	-		
14	the action ►		•		cholders throughout the 20	-		
					ne return of capital that occ	,		
		the 2023 tax			ie return of capital that oet			
			ioie jeuii					
15	Describe the quantitat	tive effect of the orga	nizational acti	ion on the basis of the seci	urity in the hands of a U.S. taxpa	ver as an adjustment per		
	share or as a percenta							
			.50725 per	unit				
16	Describe the coloulati	on of the change in b	nia and the c	lata that augments the color	lation such as the market value	a of accuritics and the		
10	valuation dates >	N/A			ulation, such as the market value	s of securities and the		
		11/11						
For	Paperwork Reduction	Act Notice, see the	separate Ins	tructions.	Cat. No. 37752P	Form <b>8937</b> (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						
	<b>–</b>			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>		March 31 2023					
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