(December 2017 Department of the Treasury

Report of Organizational Actions Affecting Basis of Securities

▶ See separate instructions.

OMB No. 1545-0123

Internal Revenue Service Part I Reporting Issuer 2 Issuer's employer identification number (EIN) 1 Issuer's name CI Mosaic Balanced Income ETF Portfolio Class (FT5) N/A 3 Name of contact for additional information 4 Telephone No. of contact 5 Email address of contact Duarte Boucinha 416-681-1752 dboucinha@ci.com 7 City, town, or post office, state, and ZIP code of contact 6 Number and street (or P.O. box if mail is not delivered to street address) of contact 15 York Street, 2nd floor Toronto, 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 Account number(s) N/A N/A N/A N/A Organizational Action Attach additional statements if needed. See back of form for additional questions. Describe the organizational action and, if applicable, the date of the action or the date against which shareholders' ownership is measured for 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 taxable year. Describe the quantitative effect of the organizational action on the basis of the security in the hands of a U.S. taxpayer as an adjustment per share or as a percentage of old basis ► 0.11545 per unit Describe the calculation of the change in basis and the data that supports the calculation, such as the market values of securities and the valuation dates ►

Par	t II	C	Organizational Action (continued)			· -
17	List	the a	applicable Internal Revenue Code section	(s) and subsection(s) upon which the tax tr	eatment is based ▶	IRC section 301(c)(2), 312 and 316
18 Can any resulting loss be recognized? ► N/A						
19 Provide any other information necessary to implement the adjustment, such as the reportable tax year ► N/A						N/A
		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				
۵.		belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.				
Sign Here	.				Date March 31,	2023
	P	Print your name ▶ Darie Urbanky		Title President	and Chief Operating Officer	
Paic			Print/Type preparer's name	Preparer's signature	Date	Check if PTIN
Pre	oare					self-employed
Use	On	ıly	Firm's name ► Firm's address ►			Firm's EIN ▶
Send	Form	n 893	Firm's address ► Phone no. 8937 (including accompanying statements) to: Department of the Treasury, Internal Revenue Service, Ogden, UT 84201-0054			