See separate instructions.

Ρ	art Reporting I	ssuer						
1	Issuer's name		2 Issuer's employer identification number (EIN)					
	CI G5 20 2039 Q	2 Fund (A)	N/A					
3	3 Name of contact for additional information 4			e 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	7 City, town, or post office, state, and ZIP code of contact					
	15 York Street, 2n	d floor	Toronto, Ontario, M5J 0A3					
8	Date of action		9 Class	ification and description	·			
	Tax Year 2023 Non-taxable distrib				oution			
10	CUSIP number	11 Serial number(	s)	12 Ticker symbol	13 Account number(s)			
	N/A	N/A	1	N/A	N/A			
P	art II Organizatio	nal Action Atta	ch additiona	statements if needed. See bac	ck of form for additional questions.			
	-				· · · · · · · · · · · · · · · · · · ·			
14	-			-	inst which shareholders' ownership is measured for			
	the action ►				rs throughout the 2023 taxation year.			
		See question	<u>n 15 for pe</u>	r unit information of the retu	Irn of capital that occurred throughout			
		the 2023 tax	<u>able year.</u>					
			-					
15 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 ► 0.47181 per unit							
	•	-	<u>orni 101 pe</u>					
_								
16	Describe the calculation	on of the change in h	asis and the	data that supports the calculation	such as the market values of securities and the			
10		-			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							
	<b>.</b>			NI/A					
19	Provide	any other information necessary to implement the adjustment, such as the reportab	le tax year ►	N/A					
	Und	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							
		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>		Marsh 21 2022						
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