See separate instructions.

## Part I Reporting Issuer

_	Issuer's name	155061	2 Issuer's employer id	2 Issuer's employer identification number (EIN)				
			NT/A					
3	CI Alternative Inv Name of contact for ad			e No. of contact	5 Email address of cont	N/A 5 Empil address of contact		
Ū								
Duarte Boucinha				-681-1752		dboucinha@ci.com		
6	Number and street (or P.O. box if mail is not delivered to street address) of contact			7 City, town, or post office,	state, and ZIP code of contact			
	15 York Street, 2nd floor				Toronto, Onta	Toronto, Ontario, M5J 0A3		
8	Date of action 9			ification and description				
	Tax Year 2023			Non-taxable	distribution			
10	CUSIP number 11 Serial number(s)		s)	12 Ticker symbol	13 Account number(s)			
D,	N/A art II Organizati	N/A		N/A	N/A See back of form for additional	questions		
14	-				ate against which shareholders' ov	-		
	the action ►				cholders throughout the 202	•		
					ne return of capital that occu			
		the 2023 tax	-		ie return of capital that occu			
			abie year.					
45	Deceribe the guestite	tive offect of the ever	nizational act	ion on the basis of the ease	with in the bands of a LLC townsur	v aa an adiustment nav		
15		-			urity in the hands of a U.S. taxpaye	r as an adjustment per		
	share or as a percent	age of old basis	0./2024 per	unit				
16	Describe the calculati	ion of the change in b	asis and the	data that supports the calc	ulation, such as the market values	of securities and the		
	valuation dates	N/A						
For	Paperwork Reduction	Act Notice, see the	senarate Ins	tructions	Cat. No. 37752P	Form <b>8937</b> (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					
	<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