Form 8937 (12-2017)

Cat. No. 37752P

► See separate instructions.

For Paperwork Reduction Act Notice, see the separate Instructions.

P	art Reporting	Issuer							
1	Issuer's name					2 Issuer's employer identification number (EIN)			
	Signature Income	& Growth Fund		N/A					
3	Name of contact for add	ditional information	4 Telephon	Telephone No. of contact		address of contact			
	Duarte Boucinha	ıcinha		416-681-1752		dboucinha@ci.com			
6	Number and street (or P.O. box if mail is not delivered to street address) of contact				7 City, tov	7 City, town, or post office, state, and ZIP code of contact			
	2 Queen Street Ea	ast, 20th Floor	Та	Toronto, Ontario, M5C 3G7					
8	Date of action		9 Classification and description						
	Tax Year 2019			Non-taxable distri					
10	CUSIP number 11 Serial number(		12 Ticker symbol		13 Accou	13 Account number(s)			
	N/A	N/A		N/A		N/A			
P					e back of form				
14		<b>rt II Organizational Action</b> 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							
17	the action ►								
						bital that occurred throughout			
		the 2019 tax	-		1	0			
46	5 Describe the quantitative effect of the organizational action on the basis of the security in the hands of a U.S. taxpayer as an adjustm								
15	share or as a percenta			ity in the natios of	r a 0.3. taxpayer as an adjustment per				
				unt					
16	Describe the calculative valuation dates ►	on of the change in b $\mathrm{N/A}$	asis and the o	data that supports the calcu	lation, such as the	e market values of securities and the			

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Part		Organizational Action (continued)			,		
<b>17</b> L	_ist the	applicable Internal Revenue Code section(s) and subsection(s) upon which the tax tr	eatment	is based I	<ul> <li>IRC section 301(c)(2), 312 and 316</li> </ul>		
					512 and 510		
		27/1					
18 (	Can any	v resulting loss be recognized? ►N/A					
<b>19</b> F	Provide	any other information necessary to implement the adjustment, such as the reportabl	e tax yea	ar 🕨	N/A		
	Unde belief	r penalties of perjury, I declare that I have examined this return, including accompanying scheor, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all inform	lules and mation of	statements which prepa	, and to the best of my knowledge and arer has any knowledge.		
Sign		$-\mathbf{h}$					
Here	e Signature ►			Date Mar 31, 2019			
				D. 11			
	Print	your name ► Darie Urbanky Print/Type preparer's name Preparer's signature	Title ► Date	Presid	ent and Chief Operating Office		
Paid	<b>0</b> 46 -				Check if self-employed		
Prep Use		Firm's name	·		Firm's EIN ►		
000	Jiny	Firm's address ►			Phone no.		