► See separate instructions.

1	Issuer's name				2 Issuer's employer ident	tification number (EIN)			
	Portfolio Series Ir	ncome Fund (O)			N/A				
3	Name of contact for ad		4 Telephone N	lo. of contact	5 Email address of contact				
	Duarte Boucinha		416-68	31-1752	dboucinha@ci.com				
6	Number and street (or F	P.O. box if mail is not d	lelivered to stre	et address) of contact	7 City, town, or post office, sta	7 City, town, or post office, state, and ZIP code of contact			
	2 Queen Street Ea	ast, 20th Floor			Toronto, Ontario,	, M5C 3G7			
8	Date of action		9 Classific	ation and description					
	Tax Year 2019			Non-taxable o	listribution	oution			
10	CUSIP number	11 Serial number(s)	1	2 Ticker symbol	13 Account number(s)				
	N/A	N/A		N/A	N/A				
Pa			additional st		ee back of form for additional qu	estions.			
14		Describe the organizational action and, if applicable, the date of the action or the date against which shareholders' ownership is measured for							
	the action ►	A non-taxabl	e distribution	n was made to share	holders throughout the 2019 t	axation year.			
		See question	15 for per u	nit information of th	e return of capital that occurre	ed throughout			
		the 2019 taxa	-		1	0			
			-						
15		tive effect of the organ age of old basis ►			rity in the hands of a U.S. taxpayer a	s an adjustment per			
16	Describe the calculati valuation dates ►	on of the change in ba N/A	sis and the data	a that supports the calcu	lation, such as the market values of s	securities and the			
For	Paperwork Reduction	Act Notice, see the s	eparate Instru	ctions.	Cat. No. 37752P	Form 8937 (12-2017)			

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Part		Organizational Action (continued)			,
17 L	_ist the	applicable Internal Revenue Code section(s) and subsection(s) upon which the tax tr	eatment	is based I	 IRC section 301(c)(2), 312 and 316
					512 and 510
		27/1			
18 (Can any	v resulting loss be recognized? ►N/A			
19 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	0 46 -				Check if self-employed
Prep Use		Firm's name	·		Firm's EIN ►
000	Juny	Firm's address ►			Phone no.