Form **8937**(December 2017) Department of the Treasury Internal Revenue Service

Report of Organizational Actions Affecting Basis of Securities

► See separate instructions.

OMB No. 1545-0123

P	art I Reporting	lssuer								
1	Issuer's name		2 Issuer's employer identification number (EIN)							
	Signature Corpora		N/A							
3	Name of contact for additional information 4 Telephor			e No. of contact	5 Email address of contact					
	Duarte Boucinha			-681-1752	dboucinha@ci.com					
6	Number and street (or F	O. box if mail is not	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 Classification				sification and description						
_	Tax Year 2019			Non-taxable di						
10	10 CUSIP number 11 Serial number(s) 12 Ticker symbol 1		13 Account number(s)							
	N/A	N/A	L	N/A	N/A					
P	art II Organizatio	onal Action Attac	h additiona	statements if needed. See	e back of form for additional questions.					
14	-									
	the action A non-taxable distribution was made to shareholders throughout the 2019 taxation year.									
_				r unit information of the	return of capital that occurred throughout					
		the 2019 tax	able 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 share or as a percentage of old basis ► 0.04543 per unit										
_										
16	Describe the calculativaluation dates ▶	on of the change in ${ m h}/{ m A}$	asis and the	data that supports the calcula	tion, such as the market values of securities and the					
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Par	t II		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	1			
19	Prov	vide a	any other information necessary to implen	nent the adjustment, such as the reportabl	e tax vear ▶	N/A	
	1 10	vide (any other information necessary to implem	non the adjustment, such as the reportable		11/11	
		Inder	penalties of perium. I declare that I have even	nined this return, including accompanying school	lules and statements	and to the hest of my knowledge and	
	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowled 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	gn TK						
Her		Signat	ure •	Date ► Mar 31, 2	019		
		Dudier ±	our name ▶ Darie Urbanky		Title ▶ President and Chief Operating Officer		
Paid		rint y	Print/Type preparer's name	Preparer's signature	Date	Check if PTIN	
Pre		er				self-employed	
Use			Firm's name ►			Firm's EIN ▶	
			Firm's address 27 (including accompanying statements) t	or Department of the Treasure Leteral De	vonuo Comitee Com	Phone no.	
Send	LOW	11 09	or uncluding accompanying statements) t	o: Department of the Treasury, Internal Re	vertue Service, Ugo	Jon, OT 04201-0004	