1 Issuer's name

2 Issuer's employer identification number (EIN)

7 City, town, or post office, state, and ZIP code of contact

Toronto, Ontario, M5C 3G7

N/A 5 Email address of contact

dboucinha@ci.com

13 Account number(s)

See separate instructions.

Non-taxable distribution

	CI G5 20i 2035 Q2 Fund (O)						
-	3 Name of contact for additional information			Telephone No. of contact			
	Duarte Boucinha			416-681-1752			
-	6 Number and street (or P.O. box if mail is not delivered to street address) of contact						
	2 Queen Street East, 20th Floor						
-	8 Date of action			9 Class	ificati	on and description	
	Tax Year 2020					Non-taxable	
	10 CUSIP number	11 Serial number(s	5)		12	Ticker symbol	
	NT / A					NT / A	

N/A N/A N/A N/AOrganizational Action Attach additional statements if needed. See back of form for additional questions. Part II Describe the organizational action and, if applicable, the date of the action or the date against which shareholders' ownership is measured for 14 the action ► A non-taxable distribution was made to shareholders throughout the 2020 taxation year. See question 15 for per unit information of the return of capital that occurred throughout the 2020 taxable 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 per 15 share or as a percentage of old basis ► 0.12672 per unit

Describe the calculation of the change in basis and the data that supports the calculation, such as the market values of securities and the 16 valuation dates N/A

Form	8937 (12-	017)		Page 2	
Pa	rt II	Drganizational Action (continued)			
17		applicable Internal Revenue Code section(s) and subsection(s) upon which the tax tr	reatment is based ▶	►	
				312 and 316	
40	Con on	resulting lass he recognized $\sim N/A$			
18	Can an	resulting loss be recognized? ► N/A			
19	Provide	any other information necessary to implement the adjustment, such as the reportabl	le tax year ►	N/A	
	Und	, and to the best of my knowledge and arer has any knowledge.			
Sigr		it is true, correct, and complete. Declaration of preparer (other than officer) is based on all infor			
Her	<u> </u>		Date March 31, 2020		
		your name ► Darie Urbanky Print/Type preparer's name Preparer's signature	Title ► President	and Chief Operating Officer	
Paie	d parer	Print/Type preparer's name Preparer's signature		Check if 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