► See separate instructions.

P	Reporting	ssuer							
1	Issuer's name				2	Issuer's employer identification	number (EIN)		
	Signature Global Income & Growth Corporate Class (PT8)					N/A			
3	Name of contact for add	ditional information	4 Telephon	e No. of contact	5	5 Email address of contact			
	Duarte Boucinha		416-	681-1752		dboucinha@ci.com			
6 Number and street (or P.O. box if mail is not delive				vered to street address) of contact		City, town, or post office, state, and ZIF	code of contact		
	2 Queen Street East, 20th Floor					Toronto, Ontario, M5C 3G7			
8	Date of action		9 Class	ification and description					
	Tax Year 2020			Non-taxable distribution					
10	CUSIP number	11 Serial number(s)	12 Ticker symbol		Account number(s)			
	N/A	N/A		N/A		N/A			
Pa			n additional		See back o	of form for additional questions.			
14	-					which shareholders' ownership is m	neasured for		
•••	the action ►				-	hroughout the 2020 taxation			
						of capital that occurred throu	/		
		the 2020 taxa	-		uic ictuiii	or capital that occurred throu	ignout		
			abie year.						
15	Describe the quantitat	tive effect of the organ	nizational act	on on the basis of the sec	curity in the l	ands of a LLS taxpaver as an adju	stment per		
15 Describe the quantitative effect of the organizational action on the basis of the security in the hands of a U.S. taxpayer as an adjust share or as a percentage of old basis ► 0.50583 per unit									
			.50565 per	umi					
16		-	asis and the o	lata that supports the calc	culation, suc	h as the market values of securities	and the		
	valuation dates \blacktriangleright	N/A							
For	Paperwork Reduction	Act Notice see the	sonarato Inc	tructions	0-1	lo. 37752P Form	8937 (12-2017		
. 01	· apermork neulouon				Jai. N				

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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	r penalties of perjury, I declare that I have examined this return, including accompanying scheo it is true, correct, and complete. Declaration of preparer (other than officer) is based on all infor	dules and statements mation of which prepa	, and to the best of my knowledge and arer has any knowledge.				
Sigr		-+						
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