► See separate instructions.

1 Issuer's name						2 Issuer's employer identification number (EIN)				
	Signature Diversif	ied Vield Fund (/		N/A						
3	Signature Diversified Yield Fund (A) 3 Name of contact for additional information 4 Duarte Boucinha			Telephone No. of contact 416-681-1752		5 Email address of contact				
						dboucinha@ci.com				
6				vered to street address) of contact		7 City, town, or post office, state, and ZIP code of contact				
	2 Queen Street East, 20th Floor					Toronto, Ontario, M5C 3G7				
8	Date of action		9 Class	9 Classification and description Non-taxable distribution						
	Tax Year 2020					on				
10	CUSIP number	11 Serial number(s)	12 Ticker symbol		13 Account number(s)				
	N/A	N/A		N/A		N/A				
Pa				-	See back o	of form for additional questions.				
14	-					which shareholders' ownership is measured for				
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 tax	able year.							
15	Describe the quantitat	tive effect of the orag	nizational ac	tion on the basis of the secu	irity in the l	hands of a LLS, taxpaver as an adjustment 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 ac share or as a percentage of old basis ► 0.15152 per unit										
16		-	asis and the	data that supports the calcu	ulation, suc	h as the market values of securities and the				
	valuation dates	N/A								

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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	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and 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									
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