## Report of Organizational Actions Affecting Basis of Securities

OMB No. 1545-0123

Dep	partment of the Treasury rnal Revenue Service			► See separate instructions.			
P	art I Reporting	Issuer					
1	Issuer's name				2 Issuer's employer ident	ification number (EIN)	
	CI Canadian Asse	et Allocation Corpo	N/A	N/A			
3				ne No. of contact	5 Email address of contact	-	
	Duarte Boucinha	Duarte Boucinha		-681-1752	dboucinha@ci.com	dboucinha@ci.com	
6	Number and street (or P.O. box if mail is not deliv		elivered to	street 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,	Toronto, Ontario, M5C 3G7			
8 Date of action 9 Classification and description			sification and description	- I			
	Tax Year 2021 Non-taxable distribution			stribution			
10	CUSIP number	11 Serial number(s)		12 Ticker symbol	13 Account number(s)		
	N/A	N/A		N/A	N/A		
Р			additiona	-		estions.	
Part II Organizational Action Attach additional statements if needed. See back of form for additional questions.  14 Describe the organizational action and, if applicable, the date of the action or the date against which shareholders' ownership is measure							
	the action ►	A non-taxable	distribu	tion was made to shareho	olders throughout the 2021 ta	axation year.	
		See question	5 for pe	r unit information of the	return of capital that occurre	d throughout	
		the 2021 taxal	ole year.				
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15	Describe the quantita	Describe the quantitative effect of the organizational action on the basis of the security				s an adjustment per	
	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 ► 0.28282 per unit						
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16	Describe the calculati valuation dates ▶	ion of the change in bas $\mathrm{N/A}$	is and the	data that supports the calcula	tion, such as the market values of s	ecurities and the	
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47		and the black of the second of	(2)		IDC
<b>17</b> Li	ist the	applicable Internal Revenue Code section	n(s) and subsection(s) upon which the tax treatment is base		
					312 and 316
1 <b>8</b> C	an anv	resulting loss be recognized? ► N/A	Λ		
	an any				
1 <b>9</b> P	rovide	any other information necessary to impler	nent the adjustment, such as the reports	able tax vear ▶	N/A
	TOVIGO	any other information necessary to impler	mont the adjustment, such as the report		21/12
	I Im -I	popultion of povium I dealers that I have	nined this veture including a	hadulan and atstance !	and to the heat of my lim and all
		penalties of perjury, I declare that I have exan it is true, correct, and complete. Declaration of			
Sign		<del>-16</del> ,			
Here	Signa	ture •	Date ►		
	Print	our name ► Darie Urbanky			and Chief Operating Office
Paid		Print/Type preparer's name	Preparer's signature	Date	Check if PTIN
Prepa	arer				self-employed
Use (	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