► See separate instructions.

	Issuer's name		2 Issuer's employer identification number (EIN) ${ m N/A}$				
	CI Canadian Asse	t Allocation Corr					
3	Name of contact for add			ne No. of contact	5 Email address of contact		
Duarte Boucinha			416	-681-1752	dboucinha@ci.com		
6	Number and street (or F	.O. box if mail is not	delivered 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	sification and description			
	Tax Year 2021			Non-taxable dis	bution		
10	Tax Year 2021 CUSIP number 11 Serial number(s)			12 Ticker symbol	13 Account number(s)		
10	COSIP number		5)		13 Account number(s)		
	N/A	N/A		N/A	N/A		
Pa	-				back of form for additional questions.		
14					against which shareholders' ownership is measured for		
	the action ►				lders throughout the 2021 taxation year.		
		-	-	r unit information of the	return of capital that occurred throughout		
		the 2021 tax	<u>able year.</u>				
15		-			in the hands of a U.S. taxpayer as an adjustment per		
	share or as a percenta	age of old basis ► _().06472 pe	r unit			
16	Describe the calculation	on of the change in h	asis and the	data that supports the calculati	on, such as the market values of securities and the		
10	valuation dates >	N/A			on, such as the market values of securities and the		
		11/11					
-							
					C + N = 077707 (10.001		

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Part		Drganizational Action (continued)			
17 L	ist the	applicable Internal Revenue Code section	(s) and subsection(s) upon which the tax tre	eatment is based ▶	• <u>IRC section 301(c)(2)</u> , 312 and 316
18 C	Can any	resulting loss be recognized? N/I	A		
19 P	Provide	any other information necessary to impler	nent the adjustment, such as the reportable	e tax year ►	N/A
Sign			nined this return, including accompanying schedu preparer (other than officer) is based on all inform		
Here				Date►	
	Print	our name ► Darie Urbanky			and Chief Operating Officer
Paid Prepa	arer	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed
Use (Firm's name ► Firm's address ►			Firm's EIN ► Phone no.

Send Form 8937 (including accompanying statements) to: Department of the Treasury, Internal Revenue Service, Ogden, UT 84201-0054