► See separate instructions.

	Issuer's name	issuer	2 Issuer's employer	2 Issuer's employer identification number (EIN) N/A 5 Email address of contact				
	CI Salaat In aan	Managal						
3	CI Select Income Name of contact for ad	<u> </u>						
Ū				e No. of contact				
Duarte Boucinha				-681-1752		dboucinha@ci.com		
6 Number and street (or P.O. box if mail is not delivered t				street address) of contact	7 City, town, or post offic	ce, state, and ZIP code of contact		
	2 Queen Street E	ast, 20th Floor			Toronto, Ont	ario, M5C 3G7		
8	Date of action		9 Class	sification and description				
	Tax Year 2021			Non-taxable o	listribution	ibution		
10	CUSIP number 11 Serial number(s)		s)	12 Ticker symbol 13 Account				
				27/4				
D,	N/A art II Organizati	N/A		N/A	ee back of form for addition	al questions		
14	-				te against which shareholders'	-		
	the action ►				holders throughout the 20			
					e return of capital that oc			
		the 2021 tax	1		le letuill of capital that oc			
			abie year.					
15	Describe the quantita	tive effect of the oras	nizational act	ion on the basis of the secu	rity in the hands of a U.S. taxpa	ver as an adjustment per		
	share or as a percent					yor as an adjustment per		
			<u>.0270+ pc</u>	unit (				
16		-	asis and the	data that supports the calcu	lation, such as the market value	s of securities and the		
	valuation dates ►	N/A						
For	Paperwork Reduction	Act Notice, see the	separate Ins	structions.	Cat. No. 37752P	Form <b>8937</b> (12-2017)		

Form 89	937 (12-2	017)			Page <b>2</b>
Part		Drganizational Action (continued)			
<b>17</b> 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
<b>18</b> C	Can any	resulting loss be recognized? N/I	A		
<b>19</b> 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