► See separate instructions.

_	Issuer's name	ISSUEI			2 Issuer's employer i	2 Issuer's employer identification number (EIN)		
	$CI \in 1 + 70.20$			N/A				
3		Managed Portfolio	-	N/A 5 Email address of contact				
				e No. of contact				
	Duarte Boucinha			-681-1752	dboucinha@ci.co			
6	Number and street (or P.O. box if mail is not delivered to street address) of contact			street address) of contact	7 City, town, or post office	e, state, and ZIP code of contact		
	2 Queen Street East, 20th Floor				Toronto, Onta	rio, M5C 3G7		
8	Date of action		9 Class	sification and description				
	Tax Year 2021			Non-taxable distribution				
10	CUSIP number 11 Serial number(s)		)	12 Ticker symbol	13 Account number(s)	13 Account number(s)		
D,	N/A art II Organizati	N/A	additiona	N/A	N/A ee back of form for additiona	lauestions		
14	-				te against which shareholders' of	-		
14	the action ►				nolders throughout the 202			
		-	-	r unit information of th	e return of capital that occ	urred throughout		
		the 2021 taxa	able year.					
15					rity in the hands of a U.S. taxpay	er as an adjustment per		
	share or as a percent	age of old basis $\blacktriangleright$ _0	.20977 per	r unit				
			-					
16	Describe the calculation	ion of the change in ba	asis and the	data that supports the calcul	lation, such as the market values	of securities and the		
	valuation dates $\blacktriangleright$	N/A						
						_ 0007		
For	Paperwork Reduction	Act Notice, see the s	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