Form **8937**(December 2017) Department of the Treasury Internal Revenue Service

Report of Organizational Actions Affecting Basis of Securities

► See separate instructions.

OMB No. 1545-0123

Part I Reporting Issuer						
1 Issuer's name			2 Issuer's employer identification number (EIN)			
CI Select 70i30e Managed Portfo	N/A					
3 Name of contact for additional information	1 4 Telepho	ne No. of contact	5 Email address of contact			
Duarte Boucinha	410	6-681-1752	dboucinha@ci.com			
6 Number and street (or P.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 Clas	ssification and description				
Tax Year 2021		Non-taxable distrib	Non-taxable distribution			
10 CUSIP number 11 Serial numb	er(s)	12 Ticker symbol	13 Account number(s)			
N/A N	/A	N/A	N/A			
Part II Organizational Action Att	tach addition	al statements if needed. See ba	ck of form for additional questions.			
14 Describe the organizational action and,	if applicable, th	ne date of the action or the date aga	inst which shareholders' ownership is measured for			
			rs throughout the 2021 taxation year.			
			urn of capital that occurred throughout			
•	axable year.		or out that the obtained throughout			
Hic 2021	taxabic year.					
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 per share or as a percentage of old basis ► 0.18001 per unit						
chare of as a personnage of old Sadie P		or unit				
Describe the calculation of the change in valuation dates ► N/A	n basis and the	e data that supports the calculation,	such as the market values of securities and the			

47		and the black of the second of	(A)		IDC
17 Li	ist the	applicable Internal Revenue Code section	(s) and subsection(s) upon which the tax	treatment is based ▶	
					312 and 316
1 8 C	an anv	resulting loss be recognized? ► N/A	Λ		
	an any				
1 9 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		-16 ,			
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