► See separate instructions.

P	art Reporting	ssuer				
1	Issuer's name				2 Issuer's employer identifi	cation number (EIN)
	CI High Income (	Corporate Class (E	N/A			
3	Name of contact for add	ditional information	Telephone No. of cont	act	5 Email address of contact	
	Duarte Boucinha		416-681-1752		dboucinha@ci.com	
6	Number and street (or P	.O. box if mail is not c	elivered to street address	s) of contact	7 City, town, or post office, state, and ZIP code of contact	
	15 York Street, 2nd floor				Toronto, Ontario, M5J 0A3	
8	Date of action		9 Classification and description			
	Tax Year 2022		Non-taxable distrib		bution	
10	CUSIP number	11 Serial number(s)	12 Tickers	symbol	13 Account number(s)	
	N/A	N/A		N/A	N/A	
Pa			additional statements		ck of form for additional ques	stions.
14	Describe the organiza	tional action and, if ap	plicable, the date of the a	ction or the date aga	inst which shareholders' owners	hip is measured for
	the action ►	A non-taxabl	e distribution was ma	ade to shareholde	rs throughout the 2022 tax	ation year.
		-	*	mation of the retu	urn of capital that occurred	throughout
		the 2022 taxa	ble year.			
15		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  0.01614 per unit						
16	Describe the calculation valuation dates ►	on of the change in ba $\mathrm{N/A}$	sis and the data that sup	ports the calculation,	such as the market values of sec	curities and the
		11/11				
For	Paperwork Reduction	Act Notice, see the s	eparate Instructions.	C	at. No. 37752P	Form <b>8937</b> (12-2017)

Form 8937 (12-2017) Page <b>2</b>									
Pa	rt II	Organizational Action (continued)							
17		applicable Internal Revenue Code section(s) and subsection(s) upon which the tax to	reatment is based ▶	►					
				312 and 316					
18	Can an	resulting loss be recognized? $\blacktriangleright$ N/A							
40			1. I	N/A					
19	Provide	any other information necessary to implement the adjustment, such as the reportab	le tax year ►	IN/Λ					
	Und	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and							
<u>.</u>		it is true, correct, and complete. Declaration of preparer (other than officer) is based on all infor	mation of which prepa	arer has any knowledge.					
Sigr Her	<u> </u>		Date March 31, 2022						
	Sign								
	Print	your name Darie Urbanky	Title President	and Chief Operating Officer					
Pai		Print/Type preparer's name Preparer's signature	Date	Check if PTIN					
	a parer			self-employed					
	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