► See separate instructions.

| Pé | arti Reporting | Issuer | | | | | |
|---|---------------------------|-------------------------|---------------------|----------------------------------|----------------------------------|-------------------------------|--|
| 1 | Issuer's name | | | | 2 Issuer's employer ide | entification number (EIN) | |
| | CI High Yield Bo | nd Fund (P) | N/A | | | | |
| 3 | Name of contact for add | ditional information | 4 Telephon | e No. of contact | 5 Email address of conta | 5 Email address of contact | |
| | Duarte Boucinha | | 416- | 681-1752 | dboucinha@ci.co | m | |
| 6 Number and street (or P.O. box if mail is not deliv | | | delivered to s | treet address) of contact | 7 City, town, or post office, | state, and ZIP code of contac | |
| | 15 York Street, 2nd floor | | | Toronto, Ontario, M5J 0A3 | | | |
| 8 | Date of action | | 9 Class | ification and description | | | |
| | Tax Year 2022 | | | Non-taxable dis | stribution | ition | |
| 10 | CUSIP number | 11 Serial number | s) | 12 Ticker symbol | 13 Account number(s) | | |
| | NI/A | | | NT/A | NI/A | | |
| P۶ | N/A art II Organizatio | N/A | | N/A statements if needed. See | back of form for additional | questions | |
| 4 | - | | | | against which shareholders' ow | - | |
| 4 | | | | | - | | |
| | the action ► | | | | olders throughout the 2022 | | |
| | | See question | <u>1 15 for per</u> | unit information of the | return of capital that occu | <u>rred throughout</u> | |
| | | the 2022 tax | able year. | | | | |
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| 15 | Describe the quantitat | tive effect of the oras | nizational act | ion on the basis of the security | y in the hands of a U.S. taxpaye | r as an adjustment per | |
| 15 | | | | | y in the hands of a 0.5. taxpaye | as an adjustment per | |
| | share or as a percenta | age of old basis | 0.20270 per | unit | | | |
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| 16 | Describe the calculation | on of the change in b | asis and the o | data that supports the calculat | tion, such as the market values | of securities and the | |
| | valuation dates | N/A | | | | | |
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| or | Paperwork Reduction | Act Notice, see the | separate Ins | tructions. | Cat. No. 37752P | Form 8937 (12-201) | |
| | | | | | | | |

| Form 8937 (12-2017) Page 2 | | | | | | | | |
|----------------------------|------------|---|-----------------------|---------------------------------------|--|--|--|--|
| 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 | | | | |
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| 18 | Can an | resulting loss be recognized? \blacktriangleright N/A | | | | | | |
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| 40 | | | 1. I | N/A | | | | |
| 19 | Provide | any other information necessary to implement the adjustment, such as the reportab | le tax year ► | IN/Λ | | | | |
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| | Und | r penalties of perjury, I declare that I have examined this return, including accompanying sche | dules 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