## 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

Р	art I Reporting	Issuer													
1	Issuer's name					2 Issuer's employer identification number (EIN)									
	CI Select 70i30e N	Managed Portfoli		N/A											
3	Name of contact for additional information 4 T			Telephone No. of contact		nail address of contact									
	Duarte Boucinha		416	416-681-1752		dboucinha@ci.com									
6	6 Number and street (or P.O. box if mail is not delivered			ed to street address) of contact		y, town, or post office, state, and ZIP code of contact									
	15 York Street, 2r	nd floor				Toronto, Ontario, M5J 0A3									
8	Date of action		9 Class	9 Classification and description											
	Tax Year 2022			Non-taxable dist		ribution									
10	CUSIP number	CUSIP number 11 Serial number(s		12 Ticker symbol		ccount number(s)									
	N/A	N/A	1	N/A		N/A									
P					See back of fo	orm for additional questions.									
Describe the organizational action and, if applicable, the date of the action or the date against which shareholders' ownership is measured the action ►  A non-taxable distribution was made to shareholders throughout the 2022 taxation year.  See question 15 for per unit information of the return of capital that occurred throughout															
											the 2022 tax	able year.			
_															
15	Describe the quantita share or as a percenta				curity in the han	ds of a U.S. taxpayer as an adjustment per									
_															
16	Describe the calculati valuation dates ▶	on of the change in $N/A$	pasis and the	data that supports the calc	culation, such a	s the market values of securities and the									
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Par	t II	C	Organizational Action (continued)			· -	
17	List	the a	applicable Internal Revenue Code section	(s) and subsection(s) upon which the tax tro	eatment is based ▶	IRC section 301(c)(2), 312 and 316	
	_						
18	Can	any	resulting loss be recognized? ► N/A	1			
-							
-							
19	Prov	vide a	any other information necessary to impler	nent the adjustment, such as the reportable	e tax vear ▶	N/A	
			any earler information necessary to impler	non and adjactment, each ac and reportable			
-							
	U	Jnder	penalties of periury. I declare that I have exan	nined this return, including accompanying sched	ules and statements.	and to the best of my knowledge and	
	b			preparer (other than officer) is based on all inform			
Sign	.			M . 1 21	2022		
Here	<b>9</b>   S	Signature ▶			Date March 31,	<u> </u>	
	P	Print your name ▶ Darie Urbanky			Title ▶ President and Chief Operating Officer		
Paid			Print/Type preparer's name	Preparer's signature	Date	Check if PTIN	
Pre		er↓				self-employed	
Use			Firm's name			Firm's EIN ▶	
Send	Form	n 893	Firm's address ► 37 (including accompanying statements) t	o: Department of the Treasury, Internal Re	venue Service, Oad	Phone no. den, UT 84201-0054	