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

P	art I Reporting	Issuer								
1	Issuer's name				2	Issuer's employer identification number (EIN)				
	CI Select 80i20e N	Managed Portfolio		N/A						
3	Name of contact for add	ditional information	4 Telepho	Telephone No. of contact		Email address of contact				
	Duarte Boucinha		416-681-1752			dboucinha@ci.com				
6	6 Number and street (or P.O. box if mail is not of 15 York Street, 2nd floor			delivered to street address) of contact		City, town, or post office, state, and ZIP code of contact				
						Toronto, Ontario, M5J 0A3				
8	Date of action		9 Classification and description							
	Tax Year 2022			Non-taxable dist		tribution				
10	CUSIP number	11 Serial number(s)	12 Ticker symbol	13	Account number(s)				
	N/A	N/A	_	N/A		N/A				
Р					See back o	of form for additional questions.				
_										
14	Describe the organizational action and, if applicable, the date of the action or the date against which shareholders' ownership is measured for the action A non-taxable distribution was made to shareholders throughout the 2022 taxation year.									
						of capital that occurred throughout				
		the 2022 tax	-			1				
										
15	Describe the quantitative effect of the organizational action on the basis of the secur share or as a percentage of old basis • 0.00426 per unit					hands of a U.S. taxpayer as an adjustment per				
		_	-							
16	Describe the calculativaluation dates ►	on of the change in ${ m k} N/{ m A}$	asis and the	data that supports the calc	culation, suc	ch as 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	
	_		NI//				
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	
	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best obelief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any know						
Sign	.			M . 1 21	2022		
Here	9 S	Signature ▶			Date March 31,	<u> </u>	
	P	Print your name ▶ Darie Urbanky				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	