See separate instructions.

Part Beporting Issue

P	art Reporting	ssuer						
1	Issuer's name		2 1	2 Issuer's employer identification number (EIN)				
	CI Global Real As	sset Private Pool		N/A				
3	Name of contact for add	ditional information	4 Telephor	phone No. of contact		5 Email address of contact		
	Duarte Boucinha			416-681-1752		dboucinha@ci.com		
6	Number and street (or P	delivered to	street address) of contact	7 Ci	7 City, town, or post office, state, and ZIP code of contact			
	15 York Street, 2n	d floor				Toronto, Ontario, M5J 0A3		
8	Date of action Tax Year 2022		9 Class	9 Classification and description Non-taxable distrib				
						ibution		
10	CUSIP number	11 Serial number(5)	12 Ticker symbol	13 A	Account number(s)		
	N/A	N/A		N/A		N/A		
Pa					e back of t	form for additional questions.		
14	Describe the organiza	tional action and, if a	pplicable, the	e date of the action or the dat	te against wi	nich shareholders' ownership is measured for		
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.								
		See question	n 15 for pe	r unit information of the	e return of	capital that occurred throughout		
		the 2022 tax	able year.					
15	Describe the quantitative effect of the organizational activ			tion on the basis of the securi	ity in the har	nds of a U.S. taxpayer as an adjustment per		
16	Describe the calculation	an of the change in h	agia and the	data that augments the coloui	ation auch a	as the market values of accurities and the		
10	valuation dates >	N/A		uata that supports the calcula	alion, such a	as the market values of securities and the		
		21/22						

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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