► See separate instructions.

P	art Reporting	ssuer						
1 Issuer's name						2 Issuer's employer identification number (EIN)		
	CI Mosaic ESG Balanced Growth ETF Portfolio (FT5)					N/A		
				Telephone No. of contact		5 Email address of contact		
			416-	416-681-1752		dboucinha@ci.com		
6 Number and street (or P.O. box if mail is not delivere				ered to street address) of contact		7 City, town, or post office, state, and ZIP code of contac		
	15 York Street, 2nd floor				T	Toronto, Ontario, M5J 0A3		
8	Date of action		9 Class	9 Classification and description				
	Tax Year 2022			Non-taxable distribution				
10	CUSIP number	11 Serial number(s)		12 Ticker symbol		int number(s)		
	N/A	N/A		N/A		N/A		
Pa			additional		See back of form	for additional questions.		
14	-					hareholders' ownership is measured for		
	the action ►		•		-	hout the 2022 taxation year.		
						ital that occurred throughout		
		the 2022 taxa	-		le letuin of cap			
			ible year.					
15	Describe the quantitat	rive effect of the organ	izational act	ion on the basis of the secu	rity in the hands of	allS taxpaver as an adjustment per		
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 p share or as a percentage of old basis ► 0.37148 per unit								
16	Describe the calculation	on of the change in ba	sis and the o	data that supports the calcu	ulation, such as the	market values of securities and the		
	valuation dates >	N/A						
		<i>.</i>						
						- 0007		
For	Paperwork Reduction	Act Notice, see the s	eparate Ins	tructions.	Cat. No. 37752	P Form <b>8937</b> (12-2017		

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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>		belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.							
Sigr Her	<u> </u>		Date March 31, 2022						
	Sign		Date March 51, 2022						
	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