Report of Organizational Actions Affecting Basis of Securities

OMB No. 1545-0123

Dep	partment of the Treasury rnal Revenue Service			► See separate instructions.			
P	art I Reporting	Issuer					
1 Issuer's name					2 Issuer's employer ident	ification number (EIN)	
CI High Yield Bond Class (EF)					N/A	N/A	
3				ne No. of contact	5 Email address of contact		
	Duarte Boucinha		410	6-681-1752	dboucinha@ci.com	dboucinha@ci.com	
6	Number and street (or P.O. box if mail is not o		delivered to	street address) of contact	7 City, town, or post office, sta	7 City, town, or post office, state, and ZIP code of contact	
	2 Queen Street I	East, 20th Floor			Toronto, Ontario,	Toronto, Ontario, M5C 3G7	
8	Date of action	Date of action		ssification and description			
	Tax Year 2021 N		Non-taxable o	on-taxable distribution			
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 of form for additional qu	estions	
14							
	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 2021 taxation year.						
					ne return of capital that occurre		
		the 2021 tax		or the minormation of the	le return or capital that occurs	<u>A unougnout</u>	
		tile 2021 tu	iubic yeur.				
15	Describe the quantitative effect of the organizational action on the basis of the secu				rity in the hands of a U.S. taxpayer a	s an adjustment per	
share or as a percentage of old basis ▶ 0.58211 per unit							
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16		tion of the change in $^{ m k}$	pasis and the	data that supports the calcu	ulation, such as the market values of s	securities and the	
	valuation dates ►	N/A					
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47		and the black of the second of			IDC
17 Li	ist the	applicable Internal Revenue Code section	n(s) and subsection(s) upon which the tax treatment is based		
					312 and 316
1 8 C	an anv	resulting loss be recognized? ► N/A	Λ		
	an any				
1 9 P	rovide	any other information necessary to impler	nent the adjustment, such as the reports	able tax vear ▶	N/A
	TOVIGO	any other information necessary to impler	mont the adjustment, such as the report		21/12
	I Im -I	popultion of povium I dealers that I have	nined this veture including a	hadulan and atstance !	and to the heat of my lim and all
		penalties of perjury, I declare that I have exan it is true, correct, and complete. Declaration of			
Sign		-16 ,			
Here	Signa	ture •	Date ►		
	Print	our name ► Darie Urbanky			and Chief Operating Office
Paid		Print/Type preparer's name	Preparer's signature	Date	Check if PTIN
Prepa	arer				self-employed
Use (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