► See separate instructions.

Ρ	art Reporting	ssuer				
1	Issuer's name				2 Issuer's employer identification number (EIN)	
	Signature Global Dividend Corporate Class (AT5)			Class (AT5)	N/A	
3	Name of contact for add	ditional information	4 Telephon	e No. of contact	5 Email address of contact	
	Duarte Boucinha 416-6		416-681	1-1752	dboucinha@ci.com	
6	Number and street (or F	Number and street (or P.O. box if mail is not delivered			7 City, town, or post office, state, and Zip code of contact	
	2 Queen Street East, 20th Floo		or		Toronto, Ontario, M5C 3G7	
8	Date of action		9 Classification and description			
	Tax Year 2015		Non-taxable dist		istribution	
10	CUSIP number	11 Serial number(	s)	12 Ticker symbol	13 Account number(s)	
	N/A	N/A		N/A	N/A	
P	art II Organizatio		h additional		See back of form for additional questions.	
	-					
14	Describe the organiza the action ►				ate against which shareholders' ownership is measured for shareholders throughout the 2015	
					nit information of the return of capital	
				<u>ghout the 2015 taxa</u>		
				<u>gnout the 2015 taxa</u>	ble year.	
15					rity in the hands of a U.S. taxpayer as an adjustment per	
	share or as a percenta	age of old basis	0.19664 p	er unit		
16	Describe the calculation valuation dates ►	on of the change in t $\mathrm{N}/\mathrm{A}$	basis and the	data that supports the calcu	ulation, such as the market values of securities and the	
		•				

Form	8937	(Rev. 12-2011)

Pa	t II	Organizational Action (continued)			
17	List the	applicable Internal Revenue Code section(	s) and subsection(s) upon which the tax tre	eatment is based Ⅰ	• I <u>RC section 301(c)(2),</u> 312 and 316
18	Can an	$\prime$ resulting loss be recognized? $\blacktriangleright$ _ N/ A	A		
19	Provide	any other information necessary to implem	nent the adjustment, such as the reportable	e tax year ►	N/A
		· · · ·			
	Linde	r penalties of perjury, I declare that I have exami	ined this return including accompanying schedu	ules and statements	and to the best of my knowledge, and
	belie	, it is true, correct, and complete. Declaration of	preparer (other than officer) is based on all inform	nation of which prepa	arer has any knowledge.
Sigr		ΛηΛ			
Her	re Signature►			Date▶ 11/26	/2015
		David Pauli		Title▶ COO	
<u> </u>		your name ► David Pauli Print/Type preparer's name	Preparer's signature	Title► COO Date	Ohanta III if PTIN
Paie	d parer		-		Check if self-employed
	e Only	Firm's name			Firm's EIN ►
-		1			1

Send Form 8937 (including accompanyi	ng statements) to: Department of the Treas	sury, Internal Revenue Service, Ogden, UT 84201-0054

Phone no.

Firm's address ►