► See separate instructions.

	art Reporting I Issuer's name	Issuer			2 Issuer's employe	r identification number (EIN)				
-										
_	Signature Canac				N/A					
3	Name of contact for add			e No. of contact	5 Email address of co					
	Duarte Boucinh	a	416-68	1-1752	dboucinha@ci.	com				
6	Number and street (or F	P.O. box if mail is not	delivered to	street address) of contact	7 City, town, or post off	ice, state, and Zip code of contact				
	2 Queen Street East, 20th Floor				Toronto, Onta	rio, M5C 3G7				
8	Date of action		9 Class	ification and description						
	Tax Year 2014			Non-taxable di	stribution	ibution				
10	CUSIP number	11 Serial number((s) 12 Ticker symbol		13 Account number(s)				
	N/A	N/A		N/A	N/A					
Pa	•		h additiona	-	ee back of form for addition	nal questions.				
14	-				te against which shareholders	•				
	the action ►	A non-tax	able distri	bution was made to	shareholders through	out the 2014				
					nit information of the	return of capital				
		that occur	red throug	<u>ghout the 2014 taxal</u>	ole year.					
15	Describe the quantitat	tive effect of the orga	inizational act	ion on the basis of the secu	rity in the hands of a U.S. taxp	ayer as an adjustment per				
	share or as a percenta	age of old basis \blacktriangleright	0.16995 p	er unit						
16	Describe the calculation	on of the change in b	asis and the	data that supports the calcu	lation, such as the market valu	es of securities and the				
	valuation dates >	N/A								
For	Paperwork Reduction	Act Notice, see the	separate Ins	tructions.	Cat. No. 37752P	Form 8937 (12-2011)				

Form 8937	(Rev.	12-2011)
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Pa	t II	Organiz	ational Ac	tion (continu	ued)										
17	List the			enue Code se		and subsect	tion(s) upor	which the	e tax trea	atment	t is based	I► II 3	<u>RC</u> sect 12 and	<u>ion 30</u> 316	1(c)(2),
18	Can ar	ny resulting	loss be reco	gnized?►	N/A										
19	Provid	le any other	information r	necessary to in	npleme	ent the adjust	ment, such	as the rep	ortable	tax ye	ar 🕨	Ν	/A		
		-			-	-				-					
				clare that I have nplete. Declarati											owledge and
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Her						/				ata 🕨	03-2	24-20	015		
	Sigr	nature ►							D	ate 🕨					
	Prin	nt vour name	David	Pauli					Т	itle Þ	COO				
Pai		Print/Type	preparer's na	me	P	Preparer's signa	ature			Date		Che	eck 🗌 if	PTIN	
	a parer	·											f-employed		
	e Only		ne 🕨									Firr	n's EIN ►		
	j											Dha			