► See separate instructions.

P	and Reporting	issuer						
1	Issuer's name				2 Issu	uer's employer identification number (EIN)		
	Select 60i40e M	anaged Portfo	lio Corpo	rate Class (IT8)		N/A		
3	Name of contact for add	ditional information	4 Telephon	e No. of contact	5 Ema	5 Email address of contact		
	Duarte Boucinh	ıa	416-681	1-1752	dbou	dboucinha@ci.com		
6	Number and street (or F	P.O. box if mail is not	delivered to s	elivered to street address) of contact		town, or post office, state, and Zip code of contact		
2 Queen Street East, 20th Floor		or	r		Toronto, Ontario, M5C 3G7			
8	Date of action		9 Class	9 Classification and description				
	Tax Year 2015			Non-taxable distr		ribution		
10	CUSIP number	11 Serial number(	s)	12 Ticker symbol		count number(s)		
	N/A			N/A				
P		N/A	ch additiona	-	e back of for	N/A m for additional questions.		
14						h shareholders' ownership is measured for		
••	the action ►					ers throughout the 2015		
						tion of the return of capital		
		•	1	ghout the 2015 taxab		· · · · · · · · · · · · · · · · · · ·		
15	Describe the quantitat	tive effect of the orga	anizational act	ion on the basis of the secur	ity in the hands	of a U.S. taxpayer as an adjustment per		
	share or as a percenta	-			,			
			<b>_</b> _					
16	Describe the calculation		basis and the	data that supports the calcul	ation, such as t	he market values of securities and the		
	valuation dates	N/A						
						- 0007		

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 ►