► See separate instructions.

P	art Reporting	Issuer						
1	Issuer's name CI Marret Alternative Enhanced Yield Fund (PH)					2 Issuer's employer identification number (EIN)		
						N/A		
3	3 Name of contact for additional information 4 Te Duarte Boucinha			Telephone No. of contact		5 Email address of contact		
				416-681-1752		dboucinha@ci.com		
6	6 Number and street (or P.O. box if mail is not de			elivered to street address) of contact		7 City, town, or post office, state, and ZIP code of contact		
	15 York Street, 2r				Toronto, Ontario, M5J 0A3			
8	Date of action		9 Classification and description					
	Tax Year 2022			Non-taxable distri		bution		
10	CUSIP number	11 Serial number(s	;)	12 Ticker symbol	1:	3 Account number(s)		
	N/A	N/A		N/A		N/A		
P	art II Organizatio	onal Action Attac	h additional	statements if needed. S	See back	of form for additional questions.		
	-					· · · · · · · · · · · · · · · · · · ·		
14	the action ►	Describe the organizational action and, if applicable, the date of the action or the date against which shareholders' ownership is measured for he action A non-taxable distribution was made to shareholders throughout the 2022 taxation year.						
	n of capital that occurred throughout							
15	Describe the quantitative effect of the organizational action share or as a percentage of old basis \triangleright 0.05311 per un				urity in the	hands of a U.S. taxpayer as an adjustment per		
	share or as a percenta		0.05511 pei	unit				
16	Describe the calculation of the change in basis and the data that supports the calculation dates \blacktriangleright N/A					ch as the market values of securities and the		

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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								
	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