► See separate instructions.

-	Issuer's name	Issuer			2 Issuer's employer	identification number (EIN)		
3	CI Enhanced Sho	ditional information	Fund (WH)			ntact		
3								
	Duarte Boucinha	416-681-17			dboucinha@ci.com			
6 Number and street (or P.O. box if mail i			ot delivered to street address) of contact		7 City, town, or post offic	7 City, town, or post office, state, and ZIP code of contact		
	15 York Street, 2nd floor			Toronto, On	Toronto, Ontario, M5J 0A3			
8	Date of action		9 Classification	and description				
	Tax Year 2023			Non-taxable distribution				
10	CUSIP number	11 Serial number(s)	12 Ti	cker symbol	13 Account number(s)			
	N/A	N/A		N/A	N/A			
Pa			additional statem		e back of form for addition	al questions.		
14	-	tional action and, if ap	plicable, the date of	the action or the dat	e against which shareholders'	ownership is measured for		
	the action ►				olders throughout the 20			
See question 15 for per unit information of the return of capital that occurred throughout								
			ble year.					
15		Describe the quantitative effect of the organizational action on the basis of the securit share or as a percentage of old basis \blacktriangleright <u>0.23497 per unit</u>				yer as an adjustment per		
16	Describe the calculation valuation dates ►	on of the change in bas $\mathrm{N/A}$	sis and the data tha	t supports the calcula	ation, such as the market value	s of securities and the		
For	Paperwork Reduction	Act Notice. see the set	eparate Instruction	IS.	Cat. No. 37752P	Form 8937 (12-2017)		

Form 8937 (12-2017) Page 2							
Pa	rt II	Organizational Action (continued)					
17		applicable Internal Revenue Code section(s) and subsection(s) upon which the tax to	reatment is based ▶	IRC section 301(c)(2),			
				312 and 316			
18	Can an	resulting loss be recognized? \blacktriangleright N/A					
	–			NI/A			
19	Provide	any other information necessary to implement the adjustment, such as the reportab	le tax year ►	N/A			
	Und	r penalties of perjury, I declare that I have examined this return, including accompanying sche	dules and statements	, and to the best of my knowledge and			
		it is true, correct, and complete. Declaration of preparer (other than officer) is based on all infor	mation of which prepa	arer has any knowledge.			
Sigr Her	<u> </u>		March 31 2023				
пег	Sign		Date March 31, 2023				
	Drint	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			
	e 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