FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* BARCLAYS PLC					2. Issuer Name and Ticker or Trading Symbol CF Acquisition Corp. VIII [CFFE]								Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner						
(Last)	(Fir	First) (Middle)			3. Date of Earliest Transaction (Month/Day/Year) 02/22/2023									Office	er (give title v)		Other (sbelow)	specify	
1 CHURCHILL PLACE					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
CANARY WHARF														X	′				
(Street) LONDON X0 E14			14 5HI	4 5HP											Form Perso	filed by Mo on	re tha	an One Rep	orting
, Au					Rule 10b5-1(c) Transaction Indication														
(City)	iy) (State) (Zip)		<u>Z</u> ip)		$ _{\Box}$	Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.									an that is inte	nded to			
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day					Exec if an	Deemed cution Date, y nth/Day/Year)		3. Transaction Code (Instr. 8) 4. Securitie Disposed (5)							ties cially Following	Forn (D) c	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v	Amount	(A) or (D) Pri		rice		ransaction(s) nstr. 3 and 4)				
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Security (Instr. 3)	rivative Conversion Date curity or Exercise (Month/Day/Ye		3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		De Se (In	Price of rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa	ıble	Expiration Date	Title	Amou or Numb of Share	er					

Explanation of Responses:

a) The reporting persons did not engage in any reportable transactions during the relevant period. The reporting persons are no longer subject to Section 16 as a result of the unwind of certain stock borrow and repurchase transaction activity that did not create a change in the reporting persons, a pecuniary interest in the securities. b) Name of Person Filing: (1) Barclays PLC (2) Barclays Bank PLC (controlled by Barclays PLC) c) Address of Principal Business Office or, if none, Residence: (1) Barclays PLC 1 Churchill Place, London, E14 5HP, England (2) Barclays Bank PLC 1 Churchill Place, London, E14 5HP, England

Suejean Mott

03/31/2023

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.