# Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 9017611

ITEM 1 - REPORT TYPE						
✓ New report						
Amended report If	amended, provide filing date	of report that is being ame	ended	(YYYY-MM-DD)		
ITEM 2 - PARTY CERTIFYING	g the Report					
	ort (select only one). For guidance reg I Continuous Disclosure and the comp		restment fund, refer to section	on 1.1 of National		
Investment fund issue						
Suer (other than an i	investment fund)					
ITEM 3 - ISSUER NAME AND OTHER IDENTIFIERS						
_	bout the issuer, or if the issuer is an in					
Full legal n		s Fund				
Previous full legal name						
If the issuer's name changed	d in the last 12 months, provide most	recent previous legal name.				
We	ebsite	(if applicabl	e)			
If the issuer has a legal entity identif	fier. provide below. Refer to Part B of	the Instructions for the definition	of "legal entity identifier".			
Legal entity iden	ntifier					
If two or more issuers distributed a s	single security, provide the full legal n	ame(s) of the co-issuer(s) other th	an the issuer named above			
Full legal name(s) of co-issu	Jer(s)	(if applicabl	e)			
ITEM 4 - UNDERWRITER INF	FORMATION					
	report, provide the underwriter's full l	egal name and firm NRD number.		1		
Full legal name						
Firm NRD number		(if applicable)				
If the underwriter does not have a fir	irm NRD number, provide the head of	fice contact information of the un	derwriter.			
Street address						
Municipality		Province/State				
Country		Postal code/Zip code				
Telephone number		Website		(if applicable)		

ITEM 5 - ISSUER INFORMATION
If the issuer is an investment fund, do not complete Item 5. Proceed to Item 6.
a) Primary industry
Provide the issuer's North American Industry Classification Standard (NAICS) code (6 digits only) that in your reasonable judgment most closely corresponds to the issuer's primary business activity.
NAICS industry code
If the issuer is in the <b>mining industry</b> , indicate the stage of operations. This does not apply to issuers that provide services to issuers operating in the mining industry. Select the category that best describes the issuer's stage of operations.
Is the issuer's primary business to invest all or substantially all of its assets in any of the following? If yes, select all that apply.
🗌 Mortgages 🔄 Real estate 🔄 Commercial/business debt 🔄 Consumer debt 🔄 Private companies
Cryptoassets
b) Number of employees
Number of employees: 0 - 49 50 - 99 100 - 499 500 or more
c) SEDAR profile number
Does the issuer have a SEDAR profile?
No Yes If yes, provide SEDAR profile number
If the issuer does not have SEDAR profile complete item 5(d) - (h).
d) Head office address
Street address Province/State
Municipality Postal code/Zip code
Country Telephone number
e) Date of formation and financial year-end
Date of formation     Financial year-end       YYYY     MM       DD
f) Reporting issuer status
Is the issuer a reporting issuer in any jurisdication of Canada? No Yes
If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer.
AII AB BC MB NB NL NT
NS NU ON PE QC SK YT
g) Public listing status
If the issuer has a CUSIP number, provide below (first 6 digits only)
CUSIP number
If the issuer is publicly listed, provide the name of the exchange on which the issuer's equity securities primarily trade. Provide only the name of an exchange and not a trading facility such as, for example, an automated trading system.
Exchange name
h) Size of issuer's assets
Select the size of the issuer's assets based on its most recently available annual financial statements (Canadian \$). If the issuer has not prepared annual financial statements for its first financial year, provide the size of the issuer's assets at the distribution end date.

\$0 to under \$5M	\$5M to under \$25M	□ \$25M to under \$100M
S100M to under \$500M	S500M to under \$1B	S1B or over

ITEM 6 - INVESTMEN	FUND ISSUER INFORMATION
If the issuer is an inves	tment fund, provide the following information.
a) Investment fund m	anager information
Full legal name	NICOLA WEALTH MANAGEMENT LTD.
Firm NRD number	1         4         7         9         0         (if applicable)
If the investment fund man	ager does not have a firm NRD number, provide the head office contact information of the investment fund manager.
Street address	
Municipality	Province/State
Country	Postal code/Zip code
Telephone number	Website (if applicable)
b) Type of investmen	t fund
Type of investment fund the	at most accurately identifies the issuer (select only one) .
Money market	Equity Fixed income Balanced
✓ Alternative strates	jies Cryptoasset Other (describe)
Indicate whether one or bot	h of the following apply to the investment fund .
Invests primarily in	n other investment fund issuers
Is a UCITs Fund <sup>1</sup>	
	tive Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union ollective investment schemes to operate throughout the EU on a passport basis on authorization from one member state.
c) Date of formation a	and financial year-end of the investment fund
Date of forma	tion 2011 04 21 Financial year-end 12 31
	YYYY MM DD MM DD
	atus of the investment fund
	porting issuer in any jurisdication of Canada? 🖌 No 🗌 Yes
	s of Canada in which the investment fund is a reporting issuer.
	AB BC MB NB NL NT
	NU ON PE QC SK YT
e) Public listing status	s of the investment fund
If the investment fund has a	a CUSIP number, provide below (first 6 digits only)
	CUSIP number
	blicly listed, provide the name of the exchange on which the investment fund's securities primarily trade. Provide only the not a trading facility such as, for example, an automated trading system.
Exchange r	ame
f) Net asset value (NA	AV) of the investment fund
Select the NAV range of the	investment fund as of the date of the most recent NAV calculation (Canadian \$).
\$0 to under \$5M	S5M to under \$25M ✓ \$25M to under \$100M
\$100M to under \$50	OM         \$500M to under \$1B         \$1B or over         Date of NAV calculation:         2019         12         31
	YYYY MM DD

# **ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION**

If an issuer located outside of Can purchasers resident in that jurisdi connection with the distribution, w Schedule 1 of the report.	ada completes a ction of Canada	distribution in a ju only. Do not include	e in Item 7 securities iss	ued as payment	of comn	nissions or fi	nder's fees in
a) Currency							
Select the currency or currencies i	n which the distr	ibution was made.	All dollar amounts prov	ided in the repor	t must b	pe in Canadi	an dollars.
	US dollar	Euro	Other (descri	· ·			
b) Distribution date(s) State the distribution start and en as both the start and end dates. If distribution period covered by the	f the report is bei						
Start dat	<sup>te</sup> 2019	01 01	End c	ate 2019	12	31	
	YYYY	MM DD		YYYY	MM	DD	
c) Detailed purchaser infor	mation						
Complete Schedule 1 of this	s form for eac	h purchaser and	l attach the schedul	e to the comp	leted r	report.	
d) Types of securities distr	ibuted						
Provide the following information security code. If providing the CU							ow to indicate the
						Canadian \$	
Security CUSIP number (if applicable)	Description	of security	Number of securities	Single or lowest price	Hi	ghest price	Total amount
UNT			6,561.	59 7.509	96		48,000.00
e) Details of rights and cor	vertible/excha	ingeable securitie	es				
If any rights (e.g. warrants, option were distributed, provide the con							xchangeable securities
Convertible / exchangeable security code security code	(Cana	se price dian \$)	Expiry date (YYYY- MM-DD)	Conversion ratio	De	escribe other i	tems (if applicable)
	Lowest	Highest					
f) Summary of the distribut State the total dollar amount of si purchaser resides and for each ex distribution in a jurisdiction of Ca This table requires a separate line purchaser resides, if a purchaser r jurisdiction. For jurisdictions within Canada, si	ecurities distribu emption relied o nada, include dis e item for: (i) each esides in a jurisa	ted and the number n in Canada for tha stributions to purch h jurisdiction where liction of Canada, a	r of purchasers for each at distribution. However, asers resident in that ju a purchaser resides, (ii) nd (iii) each exemption	if an issuer locat risdiction of Cano each exemption	ted outs ada only relied o	ide of Canac /. on in the juris	la completes a sdiction where a
Province or		Exemption relie	· ·	Number of unio	ue <sup>2ª</sup>	Total a	mount (Canadian \$)
country		•		purchasers	5	i otai al	mount (Canadian \$)
British Columbia		3 [Accredited in	-		1		30,000.00
Manitoba		3 [Accredited in	-		1		10,000.00
Québec	NI 45-106 2.	3 [Accredited in	nvestor]		1		8,000.00
		То	otal dollar amount of s	ecurities distri	buted		48,000.00
		Total number of	of unique purchasers <sup>2</sup>	b	3		
<sup>2a</sup> In calculating the number of u	niaue purchasers	per row, count eac	h purchaser onlv once	loint purchasers	mav be	counted as a	one purchaser.

<sup>2b</sup> In calculating the total number of unique purchasers to which the issuer distributed securities, count each purchaser only once, regardless of whether the issuer distributed multiple types of securities to, and relied on multiple exemptions for, that purchaser.

#### g) Net proceeds to the investment fund by jurisdiction

If the issuer is an investment fund, provide the net proceeds to the investment fund for each jurisdiction of Canada and foreign jurisdiction where a purchaser resides.<sup>3</sup> If an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include net proceeds for that jurisdiction of Canada only. For jurisdictions within Canada, state the province or territory, otherwise state the country.

Province or country	Net proceeds (Canadian \$)
British Columbia	14,497.83
Manitoba	10,000.00
Québec	8,000.00
Total net proceeds to the investment fund	32,497.83

<sup>3</sup>"Net proceeds" means the gross proceeds realized in the jurisdiction from the distributions for which the report is being filed, less the gross redemptions that occurred during the distribution period covered by the report.

#### h) Offering materials - This section applies only in Saskatchewan, Ontario, Québec, New Brunswick and Nova Scotia.

If a distribution has occurred in Saskatchewan, Ontario, Québec, New Brunswick or Nova Scotia, complete the table below by listing the offering materials that are required under the prospectus exemption relied on to be filed with or delivered to the securities regulatory authority or regulator in those jurisdictions.

In Ontario, if the offering materials listed in the table are required to be filed with or delivered to the Ontario Securities Commission (OSC), attach an electronic version of the offering materials that have not been previously filed with or delivered to the OSC.

Description	Date of document or other material (YYYY-MM-DD)	Previously filed with or delivered to regulator? (Y/N)	Date previously filed or delivered (YYYY-MM-DD)

ITEM 8 - COMPENSATION	NFORMATION				
Provide information for each perso the distribution. <b>Complete additi</b>					any compensation in connection with i <b>ted.</b>
Indicate whether any compensation	on was paid, or will be paid,	in connectio	on with the distributio	n.	
✓ No 🗌 Yes	If yes, indicate numbe	er of perso	ns compensated.		
a) Name of person compen-	sated and registration st	atus			
Indicate whether the person compe	nsated is a registrant.		No [	Yes	
If the person compensated is an inc	lividual, provide the name c	of the individ	lual.		
Full legal name of individu	al				
	Family name	e	First give	en name	Secondary given names
If the person compensated is not a	ו individual, provide the foll	owing inforr	nation.		
Full legal name of	non-individual				
Firm	NRD number			(if app	blicable)
Indicate whether the person compe	ensated facilitated the distrik	ution throu	ah a fundina portal or		portal. No Yes
b) Business contact informa					
If a firm NRD number is not provid		husiness co	ntact information of t	he person heina coi	mnensated
Street address					
				Province/State	
Municipality			_		
Country			Posta	al code/Zip code	
Email address			Те	lephone number	
c) Relationship to issuer or	nvestment fund manage	er			
Indicate the person's relationship w the Instructions and the meaning c					raning of "connected" in Part B(2) of
Connect with the issuer of	or investment fund manage	r	Insic	der of the issuer (ot	her than an investment fund)
Director or officer of the i	nvestment fund or investme	ent fund ma	nager 🗌 Emp	loyee of the issuer	or investment fund manager
None of the above					
d) Compensation details					
	missions, securities-based co ns clerical, printing, legal or o	ompensation accounting :	n, gifts, discounts or ot services. An issuer is n	ther compensation. ot required to ask f	stribution. Provide all amounts in Do not report payments for services for details about, or report on, internal
Cash commissions paid				Security code 1	Security code 2 Security code 3
Value of all securities distributed as compensation <sup>4</sup>		S	ecurity codes		
Describe term	ns of warrants, options or ot	ther rights			
Other compensation <sup>5</sup>		Describe			
Total compensation paid					
Check box if the perso	n will or may receive any de	eferred com	pensation (describe t	he terms below)	
<sup>4</sup> Provide the aggregate value of a					
additional securities of the issuer. rights exercisable to acquire addit <sup>5</sup> Do not include deferred compens	ional securities of the issue		rities distributed as co	ompensation, <u>inclu</u>	<u>ding</u> options, warrants or other

ITEM 9 - DIRECTORS, EXECU	TIVE OFFICERS	and <b>P</b> romot	ERS OF THE ISS	UER				
If the issuer is an investment fund	l, do not complete l	tem 9. Procced to	Item 10.					
Indicate whether the issuer is any o	f the following (select	the one that appli	es - if more than one	applies, select onl	y one).			
Reporting issuer in any jurisdiction of Canada								
Foreign public issuer								
Wholly owned subsidiary of	a reporting issuer in	any jurisdiction of	Canada <sup>6</sup>					
Provide nan	ne of reporting issue	r						]
Wholly owned subsidiary of	a foreign public issu	ler <sup>6</sup>						
Provide name of	foreign public issue	r						]
Issuer distributing only eligi	ole foreign securities	and the distributio	n is to permitted clie	ents only <sup>7</sup>				
If the issuer is at least one of the	above, do not comp	olete Item 9(a) – (d	c). Proceed to Item	10.				
<sup>6</sup> An issuer is a wholly owned subsidiary of a reporting issuer or a foreign public issuer if all of the issuer's outstanding voting securities, other than securities that are required by law to be owned by its directors, are beneficially owned by the reporting issuer or the foreign public issuer, respectively. <sup>7</sup> Check this box if it applies to the current distribution even if the issuer made previous distributions of other types of securities to non-permitted								
clients. Refer to the definitions of "e	0 0	, ,	( )					
			<i>item 5(u)</i> - (t).					
a) Directors, executive officer								
Provide the following information for territory; otherwise state the country.						tate the	province	or
Organization or company name       Family name       First given name       Secondary given name       Business location of non-individual or residentail jurisdiction of individual       Relationship to issuer (select all that apply)								
				Province or	country	D	0	Р
b) Promoter information								
If the promoter listed above is not an within Canada, state the province or								
Organization or company name	Family name	First given name	Secondary given names	Residential jurisdiction of individual	Rela (select c	tionship one or bo	to promo oth if appl	oter icable)
				Province or country	D		С	
c) Residential address of eac		ocidontial adda	for each individ	l listed in theme of	(a) and (1)	and -*	hack to the	
Complete Schedule 2 of this form completed report. Schedule 2 also					(a) ana (b)	ana at	ach to ti	ie

### **ITEM 10 - CERTIFICATION**

Provide the following certification and business contact information of an officer, director or agent of the issuer or underwriter. If the issuer or underwriter is not a company, an individual who performs functions similar to that of a director or officer may certify the report. For example, if the issuer is a trust, the report may be certified by the issuer's trustee. If the issuer is an investment fund, a director or officer of the investment fund manager (or, if the investment fund manager is not a company, an individual who performs similar functions) may certify the report if the director or officer has been authorized to do so by the investment fund.

The certification may be delegated, but only to an agent that has been authorized by an officer or director of the issuer or underwriter to prepare and certify the report on behalf of the issuer or underwriter. If the report is being certified by an agent on behalf of the issuer or underwriter, provide the applicable information for the agent in the boxes below.

If the individual completing and filing the report is different from the individual certifying the report, provide the name and contact details for the individual completing and filing the report in Item 11.

The signature on the report must be in typed form rather than handwritten form. The report may include an electronic signature provided the name of the signatory is also in typed form.

Securities legislation requires an issuer or underwriter that makes a distribution of securities under certain prospectus exemptions to file a completed report of exemt distribution.

By completing the information below, I certify, on behalf of the issuer/underwriter/investment fund manager, to the securities regulatory authority or regulator, as applicable, that I have reviewed this report and to my knowledge, having exercised reasonable diligence, the information provided in this report is true and, to the extent required, complete.

Name of issuer/underwriter/ investment fund manager/agent	NICOLA WEALTH MANAGEMENT LTD.							
Full legal name	MACDONALD DANNIELLE							
	Family name         First given name         Secondary given r							
Title	CHIEF COMPLIANCE OFFICER							
Telephone number	Email address COMPLIANCE@NICOLA COM							
Signature	DANNIELLE MACDONALD	2020	01	22				
			YYYY	MM	DD			

## **ITEM 11- CONTACT PERSON**

Provide the following business contact information for the individual that the securities regulatory authority or regulator may contact with any questions regarding the contents of this report, if different than the individual certifying the report in Item 10.

Same as individual certifying the report

Family name     First given name     Secondary given names       Name of company     Nicola Wealth Management Ltd.	Full legal name	Côté	Maia			Title	Compliance Analyst
Name of company Nicola Wealth Management Ltd.		Family name	First given name	Secondary	given names		
	Name of company	Nicola Wealth Managem	nent Ltd.				
Telephone number     6047306450     Email address     mcote@nicolawealth.com	Telephone number	6047306450		Email address	mcote@nice	plawealth	.com

#### Notice - Collection and use of personal information

The personal information required under this form is collected on behalf of and used by the securities regulatory authority or regulator under the authority granted in securities legislation for the purposes of the administration and enforcement of the securities legislation.

If you have any questions about the collection and use of this information, contact the securities regulatory authority or regulator in the local jurisdiction(s) where the report is filed, at the address(es) listed at the end of this form.

The attached Schedules 1 and 2 may contain personal information of individuals and details of the distribution(s). The information in Schedules 1 and 2 will not be placed on the public file of any securities regulatory authority or regulator. However, freedom of information legislation may require the securities regulatory authority or regulator to make this information available if requested.

By signing this report, the issuer/underwriter confirms that each individual listed in Schedule 1 or 2 of the report who is resident in a jurisdiction of Canada:

- a) has been notified by the issuer/underwriter of the delivery to the securities regulatory authority or regulator of the information
  pertaining to the individual as set out in Schedules 1 or 2, that this information is being collected by the securities regulatory
  authority or regulator under the authority granted in securities legislation, that this information is being collected for the purposes of
  the administration and enforcement of the securities legislation of the local jurisdiction, and of the title, business address and
  business telephone number of the public official in the local jurisdiction, as set out in this form, who can answer questions about the
  security regulatory authority's or regulator's indirect collection of the information, and
- b) has authorized the indirect collection of the information by the securities regulatory authority or regulator.