# Form 45-106F1 Report of Exempt Distribution

## IT IS AN OFFENCE TO MAKE A MISREPRESENTATION IN THIS REPORT

ITEM 1 - REPORT TYPE											
✓ New report											
Amended report If amen	ided, provide filing date	of report that is being am	nended (YYYY-MM-DD)								
Item 2 - Party Certifying the Report											
Indicate the party certifying the report (select only one). For guidance regarding whether an issuer is an investment fund, refer to section 1.1 of National Instrument 81-106 Investment Fund Continuous Disclosure and the companion policy to NI 81-106.											
✓ Investment fund issuer											
☐ Issuer (other than an inves	stment fund)										
☐ Underwriter											
ITEM 3 - ISSUER NAME AND OTH	HER IDENTIFIERS										
Provide the following information about the	e issuer, or if the issuer is an in	vestment fund, about the fund.									
Full legal name	Hudson Total Mandate	Portfolio Fund									
Previous full legal name											
If the issuer's name changed in	the last 12 months, provide mo	ost recent previous legal name.									
Website	www.willoughbyasset.c	com	(if applicable)								
If the issuer has a legal entity identifier₋ pro	vide below. Refer to Part B of t	he Instructions for the definition	of "legal entity identifier".								
Legal entity identifier											
ITEM 4 - UNDERWRITER INFORM	ATION										
If an underwriter is completing the report, p	provide the underwriter's full leg	gal name and firm National Reg	istration Database (NRD) number.								
Full legal name											
Firm NRD number	Firm NRD number (if applicable)										
If the underwriter does not have a firm NRE	If the underwriter does not have a firm NRD number, provide the head office contact information of the underwriter.										
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 corresponds to the issuer's primary business activity.  For more information on finding the NAICS industry code go to <b>Statistics Canada's NAICS industry search tool.</b> 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.   Exploration  Development  Production							
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 Commerial/business debt Consumer debt Private companies							
b) Number of employees							
Number of employees:							
c) SEDAR profile number							
Does the issuer have a SEDAR profile?  No Yes If yes, provide SEDAR profile number  (6 the issuer does not have SEDAR profile samplete item 5(4)). (b)							
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 MM DD 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 names of all exchanges on which its securities are listed. Include only the names of exchanges for which the issuer has applied for and received a listing, which excludes, for example, automated trading systems.							
Exchange name(s):							
h) Size of issuer's assets							
Select the size of the issuer's assets for its most recent financial year-end (Canadian \$). If the issuer has not existed for a full financial year, provide the size of the issuer's assets at the distribution end date.							
So to under \$5M S5M to under \$25M S25M to under \$100M							
☐ \$100M to under \$500M ☐ \$500M to under \$1B ☐ \$1B or over							

ITEM 6 - INVESTMENT FUND ISSUER INFORMATION								
If the issuer is an investment fund, provide the following information.								
a) Investment fund manager information								
Full legal name Willoughby Asset Management inc								
Firm NRD number 5 0 4 4 0 (if applicable)								
If the investment fund manager does not have a firm NRD number, provide the head office contact information of the investment fund manager.								
Street address 3100-1021 Hastings St W								
Municipality Vancouver Province/State British Columbia								
Country Canada Postal code/Zip code V6E 0C3								
Telephone number 6045586822 Website (if applicable) www.willoughbyasset.com								
b) Type of investment fund								
Type of investment fund that most accurately identifies the issuer (select only one) .								
Money market Equity Fixed income								
✓ Balanced								
Indicate whether one or both of the following apply to the investment fund .								
☐ Invests primarily in other investment fund issuers								
☐ Is a UCITs Fund¹								
'Undertaking for the Collective Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) directives that allow collective investment schemes to operate throughout the EU on a passport basis on authorization from one member state.								
c) Date of formation and financial year-end of the investment fund								
Date of formation 2015 06 29 Financial year-end 12 31								
YYYY MM DD MM DD								
d) Reporting issuer status of the investment fund								
Is the investment fund a reporting issuer in any jurisdication of Canada?    No    Yes								
If yes, select the jurisdictions of Canada in which the investment fund is a reporting issuer.  All AB BC MB NB NL NT								
□ NS         □ NU         □ ON         □ PE         □ QC         □ SK         □ YT								
e) Public listing status of the investment fund								
If the investment fund has a CUSIP number, provide below (first 6 digits only)								
CUSIP number								
If the investment fund is publicly listed, provide the names of all exchanges on which its securities are listed. Include only the names of exchanges for which the issuer has applied for and received a listing, which excludes, for example, automated trading systems.								
Exchange names								
f) Net asset value (NAV) of the investment fund								
Select the NAV range of the investment fund as of the date of the most recent NAV calculation (Canadian \$).  \$\times \text{90 to under \$5M} \tag{\$5M to under \$25M} \tag{\$7 \$25M to under \$100M}								
\$100M to under \$500M \$500M to under \$1B \$1B or over Date of NAV calculation: 2017 09 15								
YYYY MM DD								

TEM	7 - IN	FORMAT	ION A	BOUT THE	DISTRIBUTION	ON							
If an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include in Item 7 and Schedule 1 information about purchasers resident in that jurisdiction of Canada only. Do not include in Item 7 securities issued as payment of commissions or finder's fees, which should be disclosed in Item 8. The information provided in Item 7 must reconcile with the information provided in Schedule 1 of the report.													
a)	Curren	су											
Select the currency or currencies in which the distribution was made. All dollar amounts provided in the report must be in Canadian dollars.													
	✓ Canadian dollar US dollar □ Euro □ Other (describe)												
	b) Distribution date(s)												
State the distribution start and end dates. If the report is being filed for securities distributed on only one distribution date, provide the distribution date as both the start and end dates. If the report is being filed for securities distributed on a continuous basis, include the start and end dates for the distribution period covered by the report.  Start date  2017  09  15  YYYY  MM  DD  YYYY  MM  DD  YYYY  MM  DD													
c)	Detaile	d purchase	er infori	mation									
Com	plete Sc	hedule 1 d	of this f	form for ea	ch purchaser a	nd attac	h the sche	dule to t	he com	npleted	report.		
d)	Types	of securitie	es distri	buted	•					-	-		
Ins dis	tructions	for how to ii The informa	ndicate t	he security co	ibutions that take ode. If providing th 7d must reconcile	ne CUSIP r	number, indic	ate the fu	ll 9-digit	t CUSIP n	umber assigned	to the security	_
											Canadian \$		
	Security code	CUSIP num		Desc	ription of security		Numbe securi		low	gle or vest rice	Highest price	Total amou	ınt
	UNT		CL	_ASS F			6	,456.76	9.9120			64,000.0	
e)	Details	of rights a	and con	vertible/exc	hangeable secu	urities							
		-	-		ibuted, provide the and describe any			-		-	•	xchangeable se	curities
	Security code	Underly security		(Cana	se price adian \$)		iry date - MM-DD)	Convers ratio		Descri	be other items (if a	applicable)	
	T			Lowest	Highest								
f)					diction and exen					-4.6	1 d f: :-		
State the total dollar amount of securities distributed and the number of purchasers for each jurisdiction of Canada and foreign jurisdiction where a purchaser resides and for each exemption relied on in Canada for that distribution. However, if an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include distributions to purchasers resident in that jurisdiction of Canada only.  This table requires a separate line item for: (i) each jurisdiction where a purchaser resides, (ii) each exemption relied on in the jurisdiction where a purchaser resides, if a purchaser resides in a jurisdiction of Canada, and (iii) each exemption relied on in Canada, if a purchaser resides in a foreign jurisdiction.  For jurisdictions within Canada, state the province or territory, otherwise state the country.													
		Province or country			Exemption	n relied on			Numbe		Total amou	nt (Canadian \$)	
	Briti	sh Colum	nbia	NI 45-10 (BC, NL)	06 2.9(1) [Offer )	ring mei	morandun	n]		1		64,000	0.00
						Total dol	lar amount	of securi	ties dist	tributed		64,000	0.00
					Total num	ber of un	ique purch	asers <sup>2</sup>		1			

<sup>2</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. 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	64,000.00
Total net proceeds to the investment fund	64,000.00

<sup>&</sup>lt;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)		

tem 8 - Compensation Information								
Provide information for each person (as defined in NI 45-106) to whom the issuer directly provides, or will provide, any compensation in connection with the distribution. <b>Complete additional copies of this page if more than one person was, or will be, compensated.</b>								
Indicate whether any compensation was paid, or will be paid, in connection with the distribution.								
✓ No ☐ Yes If yes, indicate number of persons compensated.								
a) Name of person compensated and registration status								
Indicate whether the person compensated is a registrant.    No Yes								
If the person compensated is an individual, provide the name of the individual.								
Full legal name of individual								
Family name First given name Secondary given names								
If the person compensated is not an individual, provide the following information.	_							
Full legal name of non-individual								
Firm NRD number (if applicable)								
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.	es							
b) Business contact information								
If a firm NRD number is not provided in Item 8 (a), provide the business contact information of the person being compensated.								
Street address	]							
Municipality Province/State	]							
Country Postal code/Zip code	7							
Email address Telephone number	<u>-</u>							
c) Relationship to issuer or investment fund manager								
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.								
Connect with the issuer or investment fund manager  [Insider of the issuer (other than an investment fund)]								
Director or officer of the investment fund or investment fund manager  Employee of the issuer or investment fund manager								
None of the above								
d) Compensation details								
Provide details of all compensation paid, or to be paid, to the person identified in Item 8(a) in connection with the distribution. Provide all amounts in Canadian dollars. Include cash commissions, securities-based compensation, gifts, discounts or other compensation. Do not report payments for services incidental to the distribution, such as clerical, printing, legal or accounting services. An issuer is not required to ask for details about, or report on, internal allocation arrangements with the directors, officers or employees of a non-individual compensated by the issuer.								
Cash commissions paid Security codes Security code 1 Security code 2 Security code 3								
Value of all securities distributed as compensation⁴								
Describe terms of warrants, options or other rights	٦							
Other compensation <sup>5</sup> Describe	i							
Total compensation paid	_							
Check box if the person will or may receive any deferred compensation (describe the terms below)								
<sup>4</sup> Provide the aggregate value of all securities distributed as compensation, <u>excluding</u> options, warrants or other rights exercisable to acquire additional securities of the issuer. Indicate the security codes for all securities distributed as compensation, <u>including</u> options, warrants or other rights exercisable to acquire additional securities of the issuer. <sup>5</sup> Do not include deferred compensation.								

TEM 9 - DIRECTORS, EXECUTIVE C	OFFICERS A	ND PROMOT	TERS OF THE I	SSUER						
If the issuer is an investment fund, do not complete Item 9. Procced to Item 10.										
Indicate whether the issuer is any of the following (select all that apply).										
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 name of reporting issuer										
☐ Wholly owned subsidiary of a foreign public issuer <sup>6</sup>										
Provide name of foreign	public issuer									
Issuer distributing eligible foreign se	curities only to	permitted client	ts <sup>7</sup>							
If the issuer is at least one of the above,	do not compl	ete Item 9(a) – (	(c). Proceed to Ite	m 10.						
<sup>6</sup> An issuer is a wholly owned subsidiary of a securities that are required by law to be own <sup>7</sup> Check this box if it applies to the current disclients. Refer to the definitions of "eligible for	ned by its direc stribution even	tors, are benefic if the issuer mad	ially owned by the de previous distrib	reporting issuer utions of other ty	or the foreig pes of secui	n publi	ic issuer,	respectively.		
If the issuer is none of the above,	check this box	and complete	Item 9(a) - (c).							
a) Directors, executive officers and p	romoters of	the issuer								
Provide the following information for each territory; otherwise state the country. For "F						da, stat	te the pro	vince or		
Organization or company name Fa	First given  Business location of non-individual or residentail  First given  Secondary given  Business location of non-individual or residentail  intrinsiction of (select all that									
				Province o	r country	D	0	Р		
b) Promoter information										
If the promoter listed above is not an individual, provide the following information for each director and executive officer of the promoter. For locations within Canada, state the province or territory; otherwise state the country. For "Relationship to promoter", "D" – Director, "O" – Executive Officer.										
Organization or company name  First given name  Secondary given names  Residential jurisdiction of individual  Relationship to promoter (select one or both if applicable)										
				Province or country	D		0			
c) Residential address of each individ	c) Residential address of each individual									
Complete Schedule 2 of this form providi	ng the full res	idential addres	s for each individ	lual listed in Ite	m 9(a) and	(b) and	d attach	to the		

completed report. Schedule 2 also requires information to be provided about control persons.

### ITEM 10 - CERTIFICATION

Telephone number 6045586817

Provide the following certification and business contact information of an officer or director 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 not be delegated to an agent or other individual preparing the report on behalf of the issuer or underwriter. If the individual completing and filing the report is different from the individual certifying the report, provide their name and contact details 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.

### IT IS AN OFFENCE TO MAKE A MISREPRESENTATION IN THIS REPORT

By completing the information below, I certify to the securities regulatory authority or regulator that:

- I have read and understand this report; and
- all of the information provided in this report is true.

Full legal name	STIBBARD	LYNN						
	Family name First given name			Secondary given names				
Title	CHIEF FINANCIAL OFFICER							
Name of issuer/underwriter/ investment fund manager	WILLOUGHBY ASSET MANAGEMENT INC							
Telephone number	Email address							
Signature	LYNN STIBBARD	Date	2017	09	22			
		YYYY	MM	DD				

# 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 Full legal name STOWE KINDRA Title CONTROLLER Family name First given name Secondary given names Name of company WILLOUGHBY ASSET MANAGEMENT INC

### Notice - Collection and use of personal information

Email address kstowe@willoughbyasset.com

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.