Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 8923765

ITEM 1 - REPORT TYPE											
✓ New report											
Amended report If amended, provide filing date of report that is being amended (YYYY-MM-DD)											
TEM 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 investment fund)											
Underwriter	and rand,										
ITEM 3 - ISSUER NAME AND OT											
Provide the following information about th	·		out the fund.								
Full legal name	Trez Capital Prime Tru	st ————————									
Previous full legal name											
If the issuer's name changed in the	e last 12 months, provide most	recent previous leg	gal name.								
Website	www.trezcapital.com		(if applicable)								
If the issuer has a legal entity identifier, pr	ovide below. Refer to Part B of t	he Instructions for	the definition (of "legal entity identifier".							
Legal entity identifier											
If two or more issuers distributed a single s	ecurity, provide the full legal no	ame(s) of the co-is	suer(s) other th	an the issuer named above	2.						
Full legal name(s) of co-issuer(s)			(if applicable	e)							
I / II I			ı								
ITEM 4 - UNDERWRITER INFORM											
If an underwriter is completing the report,	provide the underwriter's full le	gal name and firn	n NRD number.		٦						
Full legal name											
Firm NRD number		(if a	oplicable)								
If the underwriter does not have a firm NR	D number, provide the head off	ice contact inform	ation of the un	derwriter.	_						
Street address											
Municipality		Pro	ovince/State								
Country		Postal co	de/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 5 2 6 9 1 3
If the issuer is in the mining industry , 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 ☐ Commercial/business debt ☐ Consumer debt ☐ Private companies ☐ Cryptoassets
b) Number of employees
Number of employees: ☐ 0 - 49
c) SEDAR profile number
Does the issuer have a SEDAR profile?
No
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 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
\$100M to under \$500M	☐ \$500M to under \$1B	\$1B or over

ITEM 6 - INVESTMENT	FUND ISSUER INFORMATION
If the issuer is an inves	tment fund, provide the following information.
a) Investment fund ma	anager information
Full legal name	
Firm NRD number	(if applicable)
If the investment fund mand	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 investment	fund
Type of investment fund tha	nt most accurately identifies the issuer (select only one) .
Money market	☐ Equity ☐ Fixed income ☐ Balanced
Alternative strateg	gies 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 Fund¹	
¹ Undertaking for the Collec (EU) directives that allow c	tive Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union collective 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 Financial year-end MM DD MM DD
d) Reporting issuer st	atus of the investment fund
Is the investment fund a rep	orting issuer in any jurisdication of Canada? No Yes
If yes, select the jurisdictions	s of Canada in which the investment fund is a reporting issuer.
☐ AII ☐	AB BC MB NB NL NT
□ NS □	NU ON PE QC SK YT
e) Public listing status	s of the investment fund
If the investment fund has 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 on an exchange and h	
-	AV) of the investment fund
	investment fund as of the date of the most recent NAV calculation (Canadian \$).
\$0 to under \$5M	s5M to under \$25M s25M to under \$100M
\$100M to under \$500	DM \$500M to under \$1B \$1B or over Date of NAV calculation: YYYY MM DD

ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION 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 in connection with the distribution, which must be disclosed in Item 8. The information provided in Item 7 must reconcile with the information provided in Schedule 1 of the report. Currency a) Select the currency or currencies in which the distribution was made. All dollar amounts provided in the report must be in Canadian dollars. US dollar ✓ Canadian dollar Euro Other (describe) 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 End date 2019 2019 09 03 09 06 YYYY MM DD YYYY MM DD Detailed purchaser information Complete Schedule 1 of this form for each purchaser and attach the schedule to the completed report. Types of securities distributed Provide the following information for all distributions reported on a per security basis. Refer to Part A(12) of the Instructions for how to indicate the security code. If providing the CUSIP number, indicate the full 9-digit CUSIP number assigned to the security being distributed. Canadian \$ Single or CUSIP number Security Number of Total amount Description of security Highest price lowest (if applicable) securities code price NIT 66,337.50 10.0000 663,375.03

e) Details of rights and convertible/exchangeable securities

If any rights (e.g. warrants, options) were distributed, provide the exercise price and expiry date for each right. If any convertible/exchangeable securities were distributed, provide the conversion ratio and describe any other terms for each convertible/exchangeable security.

Convertible / exchangeable security code		eable Underlying		(Canadian %)		Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other items (if applicable)		
						Lowest	Highest			

f) Summary of the distribution by jurisdiction and exemption

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 relied on	Number of unique ² purchasers	Total amount (Canadian \$)			
British Columbia	NI 45-106 2.3 [Accredited investor]	1	45,000.00			
British Columbia	NI 45-106 2.9(1) [Offering memorandum] (BC, NL)	2	50,000.00			
Alberta	NI 45-106 2.3 [Accredited investor]	1	160,833.16			
Nova Scotia	NI 45-106 2.3 [Accredited investor]	1	12,391.87			
Ontario	NI 45-106 2.3 [Accredited investor]	8	273,400.00			
Québec	NI 45-106 2.3 [Accredited investor]	5	121,750.00			
	Total dollar amount of securities distributed					
	Total number of unique purchasers ^{2b}	18				

- ^{2a} In calculating the number of unique purchasers per row, count each purchaser only once. Joint purchasers may be counted as one purchaser.
- ^{2b} 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 \$)
Total net proceeds to the investment fund	

³"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 - COMPENSATIO	N INFORMATION									
Provide information for each pe the distribution. Complete add			-	-	•		on in connection with			
Indicate whether any compens	sation was paid, or will be p	aid, in connecti	on with the dist	ribution.						
No ✓ Yes If yes, indicate number of persons compensated. 10										
a) Name of person comp	ensated and registratio	n status								
Indicate whether the person cor	mpensated is a registrant.		☐ No	\checkmark	Yes					
If the person compensated is an	n individual, provide the nar	me of the individ	lual.							
Full legal name of individual Rajagopalan Vikram										
	Family	name	F	irst given na	ime	Seconda	ry given names			
If the person compensated is no	ot an individual, provide the	following infor	mation.							
Full legal name	of non-individual									
F	irm NRD number				(if app	licable)				
Indicate whether the person cor	mpensated facilitated the di	stribution throu	gh a funding po	ortal or an	internet-based p	oortal.	✓ No ☐ Yes			
b) Business contact infor										
If a firm NRD number is not pro	ovided in Item 8 (a), provide	the business co	ntact informati	on of the p	erson being con	npensated.				
Street address	1404-401 Bay St									
Municipality	Toronto			Pr	ovince/State	Ontario				
Country	Canada			Postal co	ode/Zip code	M5H 2Y4				
Email address				Teleph	none number					
c) Relationship to issuer	or investment fund mar	ager								
Indicate the person's relationshi the Instructions and the meanir						aning of "conne	ected" in Part B(2) of			
Connect with the issu	er or investment fund man	ager		Insider o	of the issuer (oth	ner than an inv	estment fund)			
Director or officer of the	he investment fund or inve	stment fund ma	nager 🗸	Employe	ee of the issuer	or investment	fund manager			
None of the above										
d) Compensation details										
Provide details of all compensat Canadian dollars. Include cash of incidental to the distribution, sur allocation arrangements with th	commissions, securities-bass ch as clerical, printing, lega	ed compensation	n, gifts, discoun services. An issi	ts or other Ier is not re	compensation. l equired to ask fo	Do not report p	ayments for services			
Cash commissions pa	id 713.54			3	Security code 1	Security code	2 Security code 3			
Value of all securitie distributed as compensatio	· · ·	5	Security codes							
Describe t	erms of warrants, options	or other rights								
Other compensation	n ⁵	Describe								
Total compensation pa	id 713.54									
Check box if the pe	rson will or may receive ar	ny deferred com	pensation (des	cribe the t	erms below)					
⁴ Provide the aggregate value of additional securities of the issurights exercisable to acquire as ⁵ Do not include deferred comp	uer. Indicate the security co dditional securities of the is	ndes for all secu								

a) Name of person comp	ensated and regis	stration 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 Cooper David										
		Family name	I	First giv	ven name		Seco	ndary g	iven 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. • No Yes										
b) Business contact infor	mation									
If a firm NRD number is not pro	ovided in Item 8 (a), p	provide the business	contact info	ormation of	the perso	n being co	mpensated.			
Street address	1404-401 Bay St									
Municipality	Toronto				Provir	nce/State	Ontario			
Country	Canada			Pos	tal code/	Zip code	M5H 2Y	′ 4		
Email address				T	elephone	number				
c) Relationship to issuer	or investment fun	d manager								
Indicate the person's relationshithe Instructions and the meanir								nnecte	d" in Part B('2) of
Connect with the issu	-		o for the pur				 ther than an	investr	ment fund)	
<u> </u>		-				,			,	
Director or officer of the	ne investment tuna t	or investment rund	manager	✓ Em	ipioyee oi	the issue	r or investme	ent rund	ı manager	
None of the above										
d) Compensation details										
Provide details of all compensat	•	•								
Canadian dollars. Include cash c incidental to the distribution, su	ch as clerical, printin	g, legal or accountii	ng services. A	An issuer is	not requir	ed to ask ;				
allocation arrangements with th			n-individua	l compensa	ted by the	issuer.				
Cash commissions pa	aid 4	20.00			Secui	rity code 1	Security co	ode 2	Security cod	de 3
Value of all securitie distributed as compensatio			Security of	odes						
·	erms of warrants, or	 otions or other right	s							
Other compensation	n ⁵	Describ	e							=
Total compensation pa	id 42	20.00								
Check box if the pe	rson will or may rec	eive any deferred c	ompensatio	n (describe	the terms	s below)				
⁴ Provide the aggregate value of	of all securities distri	buted as compensa	ntion. exclud	lina options	s. warrants	s or other	riahts exercis	sable to	acauire	
additional securities of the issurights exercisable to acquire a	ier. Indicate the sect	urity codes for all se								r

a) Name of person comp	pensated and regi	stration status									
Indicate whether the person compensated is a registrant. No V Yes											
If the person compensated is an individual, provide the name of the individual.											
Full legal name of individual Jenkin Taylor											
		Family name	Firs	t given name		Secondary g	jiven names				
If the person compensated is not an individual, provide the following information.											
Full legal name	e 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. V No Yes											
b) Business contact info	rmation										
If a firm NRD number is not pr	rovided in Item 8 (a),	provide the business co	ntact information	of the person b	eing com	pensated.					
Street address	1404-401 Bay St										
Municipality	Toronto			Province	e/State	Ontario					
Country	Canada		P	ostal code/Zip	code	M5H 2Y4					
Email address				Telephone n	umber						
c) Relationship to issuer	or investment fun	d manager									
Indicate the person's relationsh						ning of "connecte	ed" in Part B(2) of				
the Instructions and the meani	ing of "control" in sec	tion 1.4 of NI 45-106 f	or the purposes of	completing this	section.						
Connect with the issu	uer or investment fur	nd manager		Insider of the is	suer (oth	er than an invest	ment fund)				
Director or officer of	the investment fund	or investment fund ma	nager 🗸	Employee of the	e issuer o	or investment fun	d manager				
None of the above											
d) Compensation details											
Provide details of all compensat											
Canadian dollars. Include cash incidental to the distribution, su											
allocation arrangements with th						,					
Cash commissions pa	aid 3	96.55		Security	code 1	Security code 2	Security code 3				
Value of all securities			Security codes								
distributed as compensation											
Describe	terms of warrants, o	ptions or other rights									
Other compensation	on ⁵	Describe									
Total compensation pa	aid 3	96.55									
Check box if the pe	erson will or may rec	eive any deferred com	pensation (descr	ibe the terms be	elow)						
⁴ Provide the aggregate value	of all securities distri	ibuted as compensation	n, excludina optic	ons, warrants oi	r other ric	nhts exercisable t	o acquire				
additional securities of the issi rights exercisable to acquire a	uer. Indicate the sec	urity codes for all secu									
Do not include deferred comp											

a) Name of person compens	ated and regis	tration status								
Indicate whether the person compensated is a registrant.										
If the person compensated is an individual, provide the name of the individual.										
Full legal name of individual Lavoie Stephan										
	Family name							Secondary	given name	es
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. V No Yes										
b) Business contact informat	tion									
If a firm NRD number is not provide	ed in Item 8 (a), p	rovide the busines	ss contact ii	nformatio	n of the	person l	peing com	pensated.		
Street address 140	4-401 Bay St									
Municipality Toro	onto				F	Province	e/State	Ontario		
Country Can	nada			F	Postal	code/Zi	p code	M5H 2Y4		
Email address					Telep	ohone r	umber			
c) Relationship to issuer or ir	nvestment fund	l manager								
Indicate the person's relationship wi								ning of "connec	ted" in Pan	t B(2) of
the Instructions and the meaning of	f "control" in secti	on 1.4 of NI 45-1	06 for the p	urposes o	f compl	eting thi	s section.			
Connect with the issuer of	r investment fund	d manager			Insider	of the is	ssuer (oth	ner than an inves	tment fund	d)
Director or officer of the in	nvestment fund o	r investment fund	d manager	\checkmark	Emplo	yee of th	e issuer	or investment fu	nd manage	er
None of the above										
d) Compensation details										
Provide details of all compensation p										
Canadian dollars. Include cash commincidental to the distribution, such as										
allocation arrangements with the dir								ŕ	,	
Cash commissions paid	42	26.13				Security	code 1	Security code 2	Security	code 3
Value of all securities			Security	codes						
distributed as compensation ⁴	(Cara and the second				•				
Describe terms	s of warrants, op	tions or other righ	nts							
Other compensation ⁵		Descri	be							
Total compensation paid	42	6.13								
Check box if the person	will or may rece	ive any deferred	compensa	ion (desc	ribe the	terms b	elow)			
⁴ Provide the aggregate value of all	securities distrib	outed as compens	sation, excl	udina opti	ions. wa	arrants d	or other rid	ghts exercisable	to acquire	
additional securities of the issuer. I rights exercisable to acquire addition	Indicate the secu	rity codes for all s								
⁵ Do not include deferred compensa										

a) Name of person compensate	ed and registrat	on status										
Indicate whether the person compensor	nted is a registrant.		[No		\checkmark	Yes					
If the person compensated is an individ	dual, provide the n	ame of the	individı	ıal.								
Full legal name of individual	Lanteri			Isabe	le							
	Family name First given name Secondary given names							mes				
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. V No Yes												
b) Business contact information												
If a firm NRD number is not provided i	in Item 8 (a), provi	de the busin	ess cor	ntact info	rmation	of the	person	being con	npensated.			
Street address 1404-	401 Bay St											
Municipality Toron	to					F	Provinc	e/State	Ontario			
Country Canad	da				P	ostal	code/Z	ip code	M5H 2Y	' 4		
Email address						Telep	ohone i	number				
c) Relationship to issuer or inve	estment fund ma	anager										
Indicate the person's relationship with										nnected	d" in F	Part B(2) of
the Instructions and the meaning of "c	ontrol" in section	1.4 of NI 45-	106 fo	r the pur	poses of	compl	eting th	is section.				
Connect with the issuer or ir	nvestment fund ma	anager				Insider	of the i	ssuer (oth	ner than an	investr	nent f	und)
Director or officer of the inve	estment fund or inv	estment fu	nd mar	nager	\checkmark	Emplo	yee of tl	ne issuer	or investme	ent func	d man	ager
None of the above												
d) Compensation details												
Provide details of all compensation pai												
Canadian dollars. Include cash commis incidental to the distribution, such as commissions.												
allocation arrangements with the direc										·	,	•
Cash commissions paid	274.1	0					Security	code 1	Security co	de 2	Secur	ity code 3
Value of all securities			Se	ecurity co	odes							
distributed as compensation ⁴	f											
Describe terms o	f warrants, option		_									
Other compensation ⁵		Desc	ribe									
Total compensation paid	274.1	0										
Check box if the person w	ill or may receive	any deferre	d comp	ensation	n (descr	ibe the	terms l	pelow)				
⁴ Provide the aggregate value of all se	ecurities distribute	d as compe	nsation	n, <u>ex</u> clud	ing optic	ons. wa	arrants (or other ric	ghts exercis	sable to	acqu	ire
additional securities of the issuer. Indrights exercisable to acquire additional	licate the security	codes for a										
⁵ Do not include deferred compensation		-										

a) Name of person com	pensated and registration status								
Indicate whether the person co	ompensated is a registrant.	✓ No [Yes						
If the person compensated is a	n individual, provide the name of the in	ndividual.							
Full legal name of indi	vidual McDonald	Douglas							
	Family name	First give	en name	Secondary given names					
If the person compensated is n	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.									
b) Business contact info	rmation								
If a firm NRD number is not pr	rovided in Item 8 (a), provide the busine	ess contact information of t	the person being com	pensated.					
Street address	1404-401 Bay St								
Municipality	Toronto		Province/State	Ontario					
Country	Canada	Post	al code/Zip code	M5H 2Y4					
Email address		Te	elephone number						
c) Relationship to issue	r or investment fund manager								
	hip with the issuer or investment fund n ing of "control" in section 1.4 of NI 45-		•	ning of "connected" in Part B(2) of					
Connect with the iss	uer or investment fund manager	Insid	der of the issuer (oth	er than an investment fund)					
Director or officer of	the investment fund or investment fun	d manager 📝 Emp	ployee of the issuer of	or investment fund manager					
None of the above									
d) Compensation details	<u> </u>								
Provide details of all compensa Canadian dollars. Include cash incidental to the distribution, su	tion paid, or to be paid, to the person in commissions, securities-based compen uch as clerical, printing, legal or accoun the directors, officers or employees of a	sation, gifts, discounts or o ting services. An issuer is n	ther compensation. D not required to ask for	Do not report payments for services					
Cash commissions p	aid 697.29		Security code 1	Security code 2 Security code 3					
Value of all securiti distributed as compensati		Security codes							
·	terms of warrants, options or other rig	hts							
Other compensation	on ⁵ Descr	ibe							
Total compensation p	aid 697.29	L							
Check box if the p	erson will or may receive any deferred	compensation (describe	the terms below)						
additional securities of the iss	of all securities distributed as compen suer. Indicate the security codes for all additional securities of the issuer. pensation.								

a) Name of person com	pensated and regis	tration status							
Indicate whether the person co	ompensated is a regist	rant.	✓ No] Yes				
If the person compensated is a	ın individual, provide t	he name of the indivi	idual.						
Full legal name of individual Mayooran Kartheegan									
Family name First given name Secondary given names								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. Ves									
b) Business contact info	ormation								
If a firm NRD number is not p	rovided in Item 8 (a), p	provide the business c	ontact informa	tion of the	e person b	eing com	pensated.		
Street address	1404-401 Bay St								
Municipality	Toronto				Province	/State	Ontario		
Country	Canada			Postal	code/Zip	code	M5H 2Y4		
Email address				Tele	phone n	umber			
c) Relationship to issue	r or investment fund	d manager							
Indicate the person's relations the Instructions and the mean							ning of "connecte	ed" in Part B(2) of	
	uer or investment fun		or the purpose	_	-		er than an invest	ment fund)	
<u> </u>		-		_		•		,	
Director or officer of	the investment fund of	or investment fund m	anager ∠	[] Emplo	yee of the	e issuer o	or investment fun	d manager	
None of the above									
d) Compensation details	S								
Provide details of all compense									
Canadian dollars. Include cash incidental to the distribution, s									
allocation arrangements with t			-individual com	pensated	by the iss	uer.			
Cash commissions p	paid (58.30			Security	code 1	Security code 2	Security code 3	
Value of all securit distributed as compensati			Security codes						
·	terms of warrants, op	tions or other rights							
Other compensati	on ⁵	Describe							
Total compensation p		68.30							
Check box if the p	erson will or may rece	 eive any deferred cor	npensation (de	scribe the	e terms be	elow)			
_									
⁴ Provide the aggregate value additional securities of the iss									
rights exercisable to acquire of 5Do not include deferred com	additional securities o				-		- , .		
The state and th	,								

a) Name of person comp	pensated and regis	tration status							
Indicate whether the person co	mpensated is a regist	rant.	✓ No		Yes				
If the person compensated is an	n individual, provide t	he name of the indivi	dual.						
Full legal name of individual Yau Winnie									
Family name First given name Secondary given names								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. V No Yes									
b) Business contact information									
If a firm NRD number is not pro	ovided in Item 8 (a), p	provide the business co	ontact informatio	on of the	person be	eing com	pensated.		
Street address	1404-401 Bay St								
Municipality	Toronto			F	Province	/State	Ontario		
Country	Canada			Postal	code/Zip	code	M5H 2Y4		
Email address				Telep	ohone nu	umber			
c) Relationship to issuer	or investment fund	d manager	-						
Indicate the person's relationsh							ning of "connecte	ed" in Part B(2) of	
the Instructions and the meaning	-		or the purposes o		-				
Connect with the issu	uer or investment fun	d manager	Ц	Insider	of the iss	suer (oth	er than an invest	ment fund)	
Director or officer of t	the investment fund of	or investment fund ma	anager 🗸	Emplo	yee of the	e issuer o	or investment fun	d manager	
None of the above									
d) Compensation details	3								
Provide details of all compensat									
Canadian dollars. Include cash of incidental to the distribution, su									
allocation arrangements with th								•	
Cash commissions pa	aid (66.34			Security of	code 1	Security code 2	Security code 3	
Value of all securities			Security codes						
distributed as compensation									
Describe 1	terms of warrants, op								
Other compensatio	on ⁵	Describe							
Total compensation pa	aid (66.34							
Check box if the pe	erson will or may rece	eive any deferred con	npensation (desc	cribe the	terms be	elow)			
⁴ Provide the aggregate value of	of all securities distri	buted as compensation	on, excludina on	tions. wa	arrants or	other ric	nhts exercisable	to acquire	
additional securities of the issurights exercisable to acquire a	uer. Indicate the secเ	ırity codes for all sec							
Do not include deferred comp									

a) Name of person com	pensated and regis	stration status								
Indicate whether the person co	ompensated is a regist	rant.	☐ No)	\checkmark	Yes				
If the person compensated is a	If the person compensated is an individual, provide the name of the individual.									
Full legal name of individual Narayan Poornima										
	Family name First given name Secondary given names								mes	
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. Ves										
b) Business contact info	ormation									
If a firm NRD number is not p	rovided in Item 8 (a), ¡	provide the business	contact inf	ormation (of the p	person b	eing com	pensated.		
Street address	1404-401 Bay St									
Municipality	Toronto				Р	rovince	e/State	Ontario		
Country	Canada			Po	ostal c	ode/Zip	o code	M5H 2Y4		
Email address					Telep	hone n	umber			
c) Relationship to issue	r or investment fund	d manager								
Indicate the person's relations								ning of "connec	ted" in Po	art B(2) of
the Instructions and the mean	uer or investment fun		о јог тве ри		-	-		er than an inve	atmont fu	und)
<u> </u>		-					•			,
Director or officer of	the investment fund	or investment fund	manager	✓ E	mploy	ee of th	e issuer (or investment fu	nd mana	iger
None of the above										
d) Compensation details	S									
Provide details of all compensa										
Canadian dollars. Include cash incidental to the distribution, s										
allocation arrangements with t		r employees of a no	n-individud	l compens	sated b	y the iss	suer.			
Cash commissions p	paid 1	99.23				Security	code 1	Security code 2	Securi	ty code 3
Value of all securit			Security of	odes						
distributed as compensati Describe	terms of warrants, or	 otions or other right	s							
Other compensation		Describ								
Total compensation p		99.23								
	erson will or may rece		ompensatio	n (descrik	oe the	terms b	elow)			
⁴ Provide the aggregate value additional securities of the iss										
rights exercisable to acquire a 5Do not include deferred com	additional securities o				··h		, <u></u>			-
20 Not morado deferida com	p 5.110 at 1011.									

a) Name of person compensa	ted and registration s	status							
Indicate whether the person compens	ated is a registrant.		✓ No		Yes				
If the person compensated is an indiv	idual, provide the name	of the individ	lual.						
Full legal name of individual	Castonguay		Nicolas	1					
Family name First given name Secondary given names							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. V No Yes									
b) Business contact information									
If a firm NRD number is not provided	in Item 8 (a), provide th	e business co	ntact inforr	mation of th	ne person l	being com	pensated.		
Street address 1404	-401 Bay St								
Municipality Toron	nto				Province	e/State	Ontario		
Country Cana	ıda			Posta	ıl code/Zi	p code	M5H 2Y4		
Email address				Tele	ephone r	number			
c) Relationship to issuer or inv	estment fund manag	ger							
Indicate the person's relationship with							ning of "connecte	ed" in Part B(2) of	
the Instructions and the meaning of "			or the purpo						
Connect with the issuer or i	nvestment fund manage	er		Insid	er of the is	ssuer (oth	er than an invest	ment fund)	
Director or officer of the inv	estment fund or investm	nent fund ma	nager	√ Empl	loyee of th	ne issuer o	or investment fun	d manager	
None of the above									
d) Compensation details									
Provide details of all compensation pa									
Canadian dollars. Include cash commit incidental to the distribution, such as									
allocation arrangements with the dire									
Cash commissions paid	121.75				Security	code 1	Security code 2	Security code 3	
Value of all securities		S	ecurity cod	les					
distributed as compensation ⁴	of warrants, options or o	othor rights							
	or warrants, options or t	ŭ							
Other compensation ⁵		Describe							
Total compensation paid	121.75								
Check box if the person v	vill or may receive any o	deferred com	pensation	(describe th	ne terms b	elow)			
⁴ Provide the aggregate value of all s	securities distributed as	compensatio	n, <u>exc</u> ludin	<u>a</u> options. ı	warrants d	or other ric	ghts exercisable t	o acquire	
additional securities of the issuer. In rights exercisable to acquire addition	dicate the security code	es for all secu							
⁵ Do not include deferred compensat									

ITEM 9 - DIRECTORS, EXECUTIVE OFFICERS AND PROMOTERS OF THE ISSUER 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 the one that applies - if more than one applies, select only one). Reporting issuer in any jurisdiction of Canada Foreign public issuer Wholly owned subsidiary of a reporting issuer in any jurisdiction of Canada⁶ Provide name of reporting issuer Wholly owned subsidiary of a foreign public issuer⁶ Provide name of foreign public issuer Issuer distributing only eligible foreign securities and the distribution is to permitted clients only If the issuer is at least one of the above, do not complete Item 9(a) - (c). Proceed to Item 10. ⁶An 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. ⁷Check 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 "eligible foreign security" and "permitted client" in Part B(1) of the Instructions. ✓ If the issuer is none of the above, check this box and complete Item 9(a) - (c). Directors, executive officers and promoters of the issuer a) Provide the following information for each director, executive officer and promoter of the issuer. For locations within Canada, state the province or territory; otherwise state the country. For "Relationship to issuer", "D" - Director, "O" - Executive Officer, "P" - Promoter. Business location of non-individual or Relationship to issuer residentail Secondary given (select all that apply) jurisdiction of Organization or company name Family name First given name names individual D 0 Ρ Province or country ✓ / **√** Greene Morley British Columbia Derek ✓ ✓ **√** Perkins Robert British Columbia Maxwell ✓ ✓ Alexander British Columbia ✓ Manson Hin-Fai I ai Ken British Columbia Scott British Columbia Vorwaller Gregory 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. Residential Relationship to promoter jurisdiction of Secondary given (select one or both if applicable) individual Family name First given name Organization or company name names Province or D 0 country

c) Residential address of each individual

Complete Schedule 2 of this form providing the full residential address for each individual listed in Item 9(a) and (b) and attach to the completed report. Schedule 2 also requires information to be provided about control persons.

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	Trez Capital Fund Management Limited Partnership as Manager of Trez Capital Prime Trust								
Full legal name	LaFontaine								
	Family name	Secondary given names							
Title	Director of Compliance								
Telephone number	6044841461 Email address		andral@trezcapital.com						
Signature	"Sandra LaFontaine"	Date	2019 09 12						
			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								
Full legal name	Paton	Ron				Title	Barrister & Solicitor	
	Family name	First given	name	Secondary given names		•		
Name of company	Owen Bird Law Corpora	tion						
Telephone number	6046917504		Ema	ail address	rpaton@ow	enbird.co	m	

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.