# Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 8703256

ITEM 1 - REPORT TYPE												
☐ New report												
Amended report If amended, provide filing date of report that is being amended 2019 01 16 (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												
Item 3 - Issuer Name and Ot	HER IDENTIFIERS											
Provide the following information about th	ne issuer, or if the issuer is an in	vestment fund, ab	out the fund.									
Full legal name	Tri City Group Monthly	Income Morto	gage Trust									
Previous full legal name												
If the issuer's name changed in th	e last 12 months, provide most	recent previous le	gal name.									
Website	www.tricitygroup.ca		(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	security, provide the full legal no	ame(s) of the co-is	suer(s) other th	an the issuer named above	<u>).</u>							
Full legal name(s) of co-issuer(s)			(if applicabl	e)								
ITEM 4 - UNDERWRITER INFORM	MATION											
If an underwriter is completing the report,	provide the underwriter's full le	gal name and firn	n NRD number.									
Full legal name												
Firm NRD number		(if a	pplicable)		-							
If the underwriter does not have a firm NR	D number, provide the head off	ice contact inform	nation of the un	derwriter.								
Street address					]							
Municipality		Pro	ovince/State		1							
Country		Postal co	de/Zip code		1							
Telephone number	Website (if											

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 <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 ☐ 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 1000-850 West Hastings St. Province/State British Columbia
Municipality Vancouver Postal code/Zip code V6C 1E1
Country Canada Telephone number 6045692015
e) Date of formation and financial year-end
Date of formation 2014 05 10 Financial year-end 12 31  YYYY 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 investment 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 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)								
	h of the following apply to the investment fund .								
	n other investment fund issuers								
☐ Is a UCITs Fund¹									
<sup>1</sup> Undertaking for the Collec (EU) directives that allow co	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	nd financial year-end of the investment fund								
Date of format	tion Financial year-end MM DD								
d) Reporting issuer st	atus of the investment fund								
Is the investment fund a rep	orting issuer in any jurisdication of Canada?								
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 T								
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 oot a trading facility such as, for example, an automated trading system.								
Exchange n									
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	\$5M to under \$25M \$25M to under \$100M								
\$100M to under \$500	DM S500M to under \$1B S1B 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 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) 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 2018 12 27 2019 01 04 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 \$	
	Security code	CUSIP number (if applicable)			Single or lowest price	Highest price	Total amount
	U N T		Series A-1 and P-1 Units	137.30	1,000.0000	1,000.0000	137,300.00

#### 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		le Underlying		Canadian Si		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 <sup>28</sup> purchasers	Total amount (Canadian \$)
British Columbia	NI 45-106 2.9(1) [Offering memorandum] (BC, NL)	3	137,300.00
	curities distributed	137,300.00	
	Total number of unique purchasers <sup>2b</sup>	3	

<sup>&</sup>lt;sup>2a</sup> In calculating the number of unique purchasers per row, count each purchaser only once. Joint purchasers may be counted as one purchaser.

<sup>&</sup>lt;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 \$)
Total net proceeds to the investment fund	

<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)				

Item 8 - Compensatioi	N 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 compens	ation was paid, or will be p	aid, in connecti	on with the dist	ribution				
No ✓ Yes	If yes, indicate nur	mber of perso	ns compensa	ited.	3			
a) Name of person compo	ensated and registration	n status						
Indicate whether the person con	npensated is a registrant.		✓ No		Yes			
If the person compensated is an	individual, provide the nan	ne of the individ	lual.					
Full legal name of indivi	dual		Christina			M	larie	
	Family r	name	F	rst given	name		Secondary given names	
If the person compensated is no	t an individual, provide the	following infor	mation.					
Full legal name	of non-individual							
Fi	rm NRD number				(it	f appli	cable)	
Indicate whether the person con	nnensated facilitated the di	stribution throu	 ah a fundina na	ortal or a	 an internet-ho	ised no	ortal.  Ves	
·		stribution timou	gir a fariating po		an unternet be	iscu po	, , , , , , , , , , , , , , , , , , ,	
b) Business contact inform If a firm NRD number is not pro		the husiness co	ntact informati	on of th	e nerson hein	a comi	nensated	
	213A-6231 Blueback Ro		That injoirnati	on of th	e person being	y com	Jensuteu.	
L					D : (0)		D ::: 1 O 1 1 1 1	
Municipality 1	Nanaimo				Province/St	ate	British Columbia	
Country	Canada			Postal	code/Zip co	ode	V9V 1J3	
Email address t	inamu@hotmail.ca			Tele	phone num	ber	2507343919	
c) Relationship to issuer of	or investment fund man	ager						
Indicate the person's relationship the Instructions and the meaning							ning of "connected" in Part B(2) of	
Connect with the issue	er or investment fund mana	ager		Inside	er of the issue	er (othe	er than an investment fund)	
Director or officer of the	e investment fund or inves	stment fund ma	nager	Emplo	oyee of the is	suer o	r investment fund manager	
✓ None of the above								
d) Compensation details								
incidental to the distribution, suc allocation arrangements with the	ommissions, securities-base h as clerical, printing, legal e directors, officers or emplo	ed compensation or accounting	n, gifts, discoun services. An issu	ts or oth ier is no	er compensat t required to a	tion. D ask for	ribution. Provide all amounts in o not report payments for services details about, or report on, internal	
Cash commissions pai	d 900.80				Security cod	e 1	Security code 2 Security code 3	
Value of all securities distributed as compensation	-	S	Security codes					
Describe to	erms of warrants, options of	or other rights						
Other compensation	5	Describe						
Total compensation pai	d 900.80							
Check box if the per	son will or may receive an						hts exercisable to acquire	
additional securities of the issu- rights exercisable to acquire ad <sup>5</sup> Do not include deferred compa	er. Indicate the security co Iditional securities of the is	des for all secu						

inciuae aererrea compensatio

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 Peshkova Vera											
		'	First	given n	iame	· · · · · · · · · · · · · · · · · · ·	Sec	condary (	given name:	3	
If the person compensated is not an individual, provide the following information.											
Full legal name of non-individual											
F					(if app	olicable)					
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.  V No Yes											Yes
b) Business contact infor	rmation										
If a firm NRD number is not pro	ovided in Item 8 (a), p	provide the business	contact inf	ormation	of the	person l	being cor	npensated.			
Street address	320 Cordon PI										
Municipality	Vernon				P	rovinc	e/State	British	Colum	bia	
Country	Canada			Po	ostal d	code/Zi	p code	V1H 12	Z9		
Email address	sailview@junction	ı.net			Telep	hone r	number	250558	88633		
c) Relationship to issuer	or investment fund	d manager									
Indicate the person's relationsh the Instructions and the meani									connecte	ed" in Part	B(2) of
Connect with the issu	•		о јог тте раг		-	-		her than a	n invest	ment fund	)
<u> </u>		-		_			,				,
Director or officer of t	ne investment fund (	or investment fund	manager	Ш •	=mpioy	ee of tr	ie issuer	or investm	nent tun	d manage	r
✓ None of the above											
d) Compensation details											
Provide details of all compensate Canadian dollars. Include cash of incidental to the distribution, su allocation arrangements with the	commissions, securiti ch as clerical, printin	es-based compensa g, legal or accountii	tion, gifts, d ng services	iscounts c An issuer	or othe is not i	r compe required	ensation. I to ask fo	Do not rep	ort payı	ments for s	services
Cash commissions pa		31.20	m matriada	Compen							
·	-,-	3 T. 20				Security	code 1	Security of	code 2	Security of	ode 3
Value of all securitie distributed as compensation			Security of	odes	L						
Describe t	terms of warrants, or	otions or other right	s								
Other compensatio	n <sup>5</sup>	Describ	е								
Total compensation pa	3,63	31.20									
Check box if the pe	erson will or may rece	eive any deferred c	ompensatio	n (descri	be the	terms b	elow)				
<sup>4</sup> Provide the aggregate value of additional securities of the issu- rights exercisable to acquire a <sup>5</sup> Do not include deferred comp	uer. Indicate the secu dditional securities o	urity codes for all se									ner

a) Name of person compe	nsated and registration statu	S								
Indicate whether the person compensated is a registrant.    No   Yes										
If the person compensated is an i	individual, provide the name of th	e individu	ıal.							
Full legal name of individ	dual									
	Family name		Fire	st given n	name		Second	ary giver	names	
If the person compensated is not an individual, provide the following information.										
Full legal name of non-individual Tri City Fund Management Ltd.										
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 inform	nation									
If a firm NRD number is not prov	ided in Item 8 (a), provide the bus	siness con	tact informatio	n of the	person b	eing con	npensated.			
Street address 1	000-850 Hastings St W									
Municipality V	ancouver			F	Province	e/State	British Co	umbia		
Country C	anada		I	Postal o	code/Zi	p code	V6C 1E1			
Email address ja	netc@tricity.ca			Telep	hone n	umber	60456920	15		
c) Relationship to issuer o	r investment fund manager									
Indicate the person's relationship the Instructions and the meaning								ected" i	n Part B(2	?) of
	r or investment fund manager	3 100 101		•	-		ner than an in	estmei	nt fund)	
Director or officer of the	e investment fund or investment	fund man	ager	Employ	ee of th	e issuer	or investment	fund m	anager	
None of the above			_							
d) Compensation details										
Provide details of all compensation	on naid or to be naid to the nerso	n identifi	ed in Item 8(a)	in conne	ection wi	th the dis	stribution Prov	ide all i	amounts i	'n
Canadian dollars. Include cash co.	mmissions, securities-based comp	ensation,	gifts, discounts	or othe	r compe	nsation. I	Do not report	aymen	ts for serv	rices
incidental to the distribution, such allocation arrangements with the							or details abou	, or rep	ort on, int	ternal
Cash commissions paid			•				Conveitor and	n   ca	a unitu a a a da	. 2
Value of all securities		_			Security	code i	Security code	2 36	ecurity code	3
distributed as compensation		Se	ecurity codes	L						
Describe ter	rms of warrants, options or other	rights								
Other compensation <sup>5</sup>	De	scribe								
Total compensation paid	3,706.00									
✓ Check box if the pers	son will or may receive any defer	red comp	ensation (desc	ribe the	terms b	elow)				
1% Annual Trailer F	ee paid in January									
<sup>4</sup> Provide the aggregate value of additional securities of the issue rights exercisable to acquire add <sup>5</sup> Do not include deferred compet	er. Indicate the security codes for ditional securities of the issuer.									

TEM 9 - DIRECTORS, EXECU	JTIVE OFFICERS	AND PROMOT	ERS OF THE <b>I</b> SSU	JER			
If the issuer is an investment fund, do not complete Item 9. Procced to Item 10.							
Indicate whether the issuer is any o	of the following (selec	t the one that applie	es - if more than one o	applies, select only one).			
Reporting issuer in any juris	sdiction of Canada						
Foreign public issuer							
Wholly owned subsidiary of	f a reporting issuer ir	n any jurisdiction of	Canada <sup>6</sup>				
Provide nar	me of reporting issue	er					7
Wholly owned subsidiary of	f a foreign public issi	uer <sup>6</sup>					
	f foreign public issue						٦
			. :	ta ant. 7			
Issuer distributing only eligi	-			·			
If the issuer is at least one of the above, do not complete Item 9(a) – (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					103 10 1101	r-permit	
✓ If the issuer is none of the	above, check this b	box and complete I	tem 9(a) - (c).				
a) Directors, executive officers and promoters of the issuer							
Provide the following information fo territory; otherwise state the country					state the <sub>l</sub>	orovince	or
Organization or company name	Family name	First given name	Secondary given names	Business location of non-individual or residentail jurisdiction of individual	Relationship to issuer (select all that apply)		
				Province or country	D	0	Р
	Goodman	Michael		British Columbia		✓	
	Oh	Sandy		British Columbia			
	Wong	Winston		British Columbia ✓			
	Birch	Michael		British Columbia ✓			
b) Promoter information							
If the promoter listed above is not ar within Canada, state the province or	•		·		•		
				Residential Rela	ationship	to promo	oter

Organization or company name	Family 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 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	Sandy Oh						
Full legal name	Crawford Janet			Elizabeth			
	Family name	First given name	Secondary given names		ames		
Title	Trust Administrator						
Telephone number	6048744543	Email address	janetc@tricitygroup.ca				
Signature	janetc@tricitygroup.ca	Date	2019	01	21		
			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 individua	al certifying the report						
Full legal name				Title			
•	Family name	First given name	Secondary given names		_		
Name of company							
Telephone number		En	nail address				

#### 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.