# Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 9704686

ITEM 1 - REPORT TYPE										
✓ New report										
Amended report If amended, provide filing date of report that is being amended (YYYY-MM-DD)										
ITEM 2 - PARTY CERTIF	YING THE	Report								
Indicate the party certifying th Instrument 81-106 Investment								restment fund, refer to secti	on 1.1 of National	
Investment fund										
Super (other that	n an inves	tment fund)								
Underwriter		,								
ITEM 3 - ISSUER NAME		HER IDENTI	FIERS							
Provide the following information	tion about th	e issuer, or if th	e issuer is ar	inves	tment fu	nd, abou	ut the fund.			
Full le	egal name	Cove Morte	gage Ltd.							
Previous full le	egal name									
If the issuer's name ch	nanged in the	last 12 month	s, provide mo	ost rece	ent previ	ous lega	al name.			
	Website	covemortg	age.com				(if applicabl	e)		
If the issuer has a legal entity	identifier, pro	vide below. Rej	fer to Part B	of the	Instructio	ons for t	he definition	of "legal entity identifier".		
Legal entity	/ identifier									
If two or more issuers distribut	ted a single s	curity, provide	the full lega	l name	e(s) of th	e co-issı	uer(s) other th	an the issuer named above	<u>.</u>	
Full legal name(s) of co	o-issuer(s)						(if applicabl	e)		
ITEM 4 - UNDERWRITE	r Inform	ATION								
If an underwriter is completing	, the report, μ	provide the und	erwriter's ful	l legal	l name a	nd firm i	NRD number.			
Full legal name	Cove Mo	tgage Ltd.								
Firm NRD number	Firm NRD number (if applicable)									
If the underwriter does not have	ve a firm NRI	D number, prov	ide the head	office	contact	informa	tion of the un	derwriter.		
Street address	415-145 (	Chadwick C	rt						]	
Municipality	North Var	ncouver				Prov	ince/State	British Columbia	]	
Country	Canada				Pos	tal code	e/Zip code	V7M 3K1		
Telephone number	6049298 <sup>2</sup>	56		Website         covemortgage.com         (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 3 9 9 0
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
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     415-145 Chadwick Court     Province/State     British Columbia
Municipality         North Vancouver         Postal code/Zip code         V7M 3K1
Country Canada Telephone number 6049298156
e) Date of formation and financial year-end
Date of formation     1976     05     28     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	S5M to under \$25M	□ \$25M to under \$100M
S100M to under \$500M	S500M to under \$1B	\$1B or over

If the issue is an investment fund, provide the following information:     a) Investment fund manager information     Full legal name     Furn NRD number      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 Municipality Province/State Guntry Postal code/Zip code Telephone number D Type of investment fund Tree of investment fund that most accurately identifies the issuer (select only one). Alternative strategies Cryptoasset Other (describe) Indicate whether one or both of the following apply to the investment fund. Investment fund that most accurately identifies the issuer (select only one). Alternative strategies Cryptoasset Other (describe) Indicate whether one or both of the following apply to the investment fund. Investment fund that most accurately identifies the issuer (select only one). Indicate whether one or both of the following apply to the investment fund. Investment fund issuers Is a UCIT's Fund' 'understaining for the Collective Investment fund issuers Is a UCIT's Fund' 'understaining for the Collective Investment of Transferable Securities funds (UCIT's Funds) are investment funds regulated by the European Union (C) Date of formation and financial year-end of the investment fund Suppresent fund a reporting issuer in any jurisdication of Canada? No Yes It he investment fund a reporting issuer in any jurisdication of Canada? No Yes It he investment fund hars a CUSP number, provide below (first 6 digits only) CUSP number On O Public listing status of the investment fund is a reporting issuer. All All All </th
Full legal name
Firm NRD number (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 Municipality   Province/State
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CUSIP number
name of an exchanae and not a tradina facility such as, for example, an automated tradina system
Exchange name
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 \$).
L L \$\the under \$\mathbf{S}M \qquad L \qquad \mathbf{S}M \text{ to under \$\mathbf{S}M \qquad  to
\$0 to under \$5M       \$5M to under \$25M       \$25M to under \$100M         \$100M to under \$500M       \$500M to under \$1B       \$1B or over       Date of NAV calculation:

# ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION

	ABOUT THE DISTRIBUTION				
purchasers resident in that juri	Canada completes a distribution in a juris isdiction of Canada only. Do not include a on, which must be disclosed in Item 8. The	in Item 7 securities issued	l as payment of c	ommissions or fir	nder's fees in
a) Currency					
Select the currency or currenci	ies in which the distribution was made. Al	ll dollar amounts provide	d in the report m	ust be in Canadia	an dollars.
✓ Canadian dollar	US dollar Euro	Other (describe)	)		
b) Distribution date(s)					
	d end dates. If the report is being filed for es. If the report is being filed for securities the report.				
Start	<sup>date</sup> 2021 12 21	End date	<sup>9</sup> 2021 <sup>-</sup>	12 21	
	YYYY MM DD		YYYY M	MM DD	
c) Detailed purchaser in	Iformation				
Complete Schedule 1 of t	this form for each purchaser and o	attach the schedule t	o the complete	ed report.	
d) Types of securities d	istributed				
	tion for all distributions reported on a per CUSIP number, indicate the full 9-digit C				ow to indicate the
				Canadian \$	
Security CUSIP number (if applicable)	Description of security	Number of securities	Single or lowest price	Highest price	Total amount
S M G	lortgage	1.00	717,500.00 00	717,500.00 00	717,500.00
e) Details of rights and	convertible/exchangeable securities	6			
	tions) were distributed, provide the exerci conversion ratio and describe any other t				xchangeable securities
Convertible / exchangeable Underlying security code security code	Exercise price (Canadian \$)	Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other it	ems (if applicable)
	Lowest Highest				
State the total dollar amount of purchaser resides and for each	bution by jurisdiction and exemption of securities distributed and the number of the exemption relied on in Canada for that of Canada, include distributions to purchas	of purchasers for each jun distribution. However, if c sers resident in that jurisd	an issuer located liction of Canada ch exemption reli	outside of Canad only. ied on in the juris	a completes a diction where a
This table requires a separate purchaser resides, if a purchas jurisdiction.	a, state the province or territory, otherwise	d (iii) each exemption reli	ied on in Canada,	i i u purchuser re	sides in a foreign
This table requires a separate purchaser resides, if a purchas jurisdiction.	ser resides in a jurisdiction of Canada, and	d (iii) each exemption reli se state the country.	ied on in Canada, Number of unique <sup>2</sup> purchasers	a	nount (Canadian \$)
This table requires a separate purchaser resides, if a purchas jurisdiction. For jurisdictions within Canado Province or	er resides in a jurisdiction of Canada, and a, state the province or territory, otherwis	d (iii) each exemption reli se state the country.	Number of unique <sup>2</sup>	a	-
This table requires a separate purchaser resides, if a purchas jurisdiction. For jurisdictions within Canada Province or country	er resides in a jurisdiction of Canada, and la, state the province or territory, otherwis Exemption relied Other	d (iii) each exemption reli se state the country.	Number of unique <sup>2</sup> purchasers	<sup>a</sup> Total an	nount (Canadian \$)
This table requires a separate purchaser resides, if a purchas jurisdiction. For jurisdictions within Canada Province or country	er resides in a jurisdiction of Canada, and a, state the province or territory, otherwis Exemption relied Other Tota	d (iii) each exemption reli se state the country. on	Number of unique <sup>2</sup> purchasers	<sup>a</sup> Total an	nount (Canadian \$) 717,500.00

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>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)

<b>ITEM 8 - COMPENSATION</b>	INFORMATION				
Provide information for each person the distribution. <b>Complete additi</b>				-	ny compensation in connection with ed.
Indicate whether any compensati	on was paid, or will be po	aid, in connecti	on with the distribu	ition.	
✓ No 🗌 Yes	If yes, indicate num	nber of perso	ns compensated	1.	
a) Name of person compen	sated and registration	status			
Indicate whether the person comp	ensated is a registrant.		🗌 No	Yes	
If the person compensated is an in	dividual, provide the nam	ne of the individ	lual.		
Full legal name of individu	lal				
	Family n	ame	First g	given name	Secondary given names
If the person compensated is not a	n individual, provide the †	following infor	nation.		
Full legal name of	non-individual				
Firm	NRD number			(if appli	cable)
Indicate whether the person comp		tribution throu	gh a funding porta	l or an internet-based p	ortal. 🗌 No 🗌 Yes
b) Business contact informa					
If a firm NRD number is not provid	led in Item 8 (a), provide t	the business co	ntact information o	of the person being com	pensated.
Street address					
Municipality				Province/State	
Country			Po	stal code/Zip code	
Email address			-	Telephone number	
c) Relationship to issuer or	investment fund mana	ager			
Indicate the person's relationship w the Instructions and the meaning o					ning of "connected" in Part B(2) of
	or investment fund mana		· · ·		er than an investment fund)
Director or officer of the	investment fund or inves	tment fund ma	nager 🗌 E	mployee of the issuer of	or investment fund manager
None of the above					
d) Compensation details					
allocation arrangements with the a	nmissions, securities-based as clerical, printing, legal	d compensation or accounting	n, gifts, discounts o services. An issuer i	r other compensation. D is not required to ask for	
Cash commissions paid				Security code 1	Security code 2 Security code 3
Value of all securities distributed as compensation <sup>4</sup>		S	ecurity codes		
Describe tern	ns of warrants, options of	r other rights			
Other compensation <sup>5</sup>		Describe			
Total compensation paid					
Check box if the perso	on will or may receive any	y deferred com	pensation (describ	be the terms below)	
<sup>4</sup> Provide the aggregate value of a additional securities of the issuer. rights exercisable to acquire addi <sup>5</sup> Do not include deferred compen-	Indicate the security cod tional securities of the iss	des for all secu			

ITEM 9 - DIRECTORS, EXECU	UTIVE OFFICERS	SAND PROMOT	ERS OF THE ISS	UER				
If the issuer is an investment fun	d, do not complete	ltem 9. Procced to	ltem 10.					
Indicate whether the issuer is any c	of the following (sele	ct the one that appli	es - if more than one	applies, select onl	y one).			
Reporting issuer in any juri	sdiction of Canada							
Foreign public issuer								
Wholly owned subsidiary o	f a reporting issuer	in any jurisdiction of	Canada <sup>6</sup>					
Provide na	me of reporting issu	er						]
Wholly owned subsidiary o	f a foreign public iss	suer <sup>6</sup>						
Provide name o	f foreign public issu	er						]
Issuer distributing only elig	ible foreign securitie	es and the distribution	n is to permitted clie	ents only <sup>7</sup>				
If the issuer is at least one of the	-			-				
securities that are required by law to respectively. <sup>7</sup> Check this box if it applies to the c clients. Refer to the definitions of "e	<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 "eligible foreign security" and "permitted client" in Part B(1) of the Instructions.							
a) Directors, executive office	rs and promoters	of the issuer						
Provide the following information fo territory; otherwise state the country						state the	province	or
Organization or company name	Family name	First given name	Secondary given names	Business loc non-individe resident jurisdictio individu	ual or ail n of		onship to ct all that	
				Province or	country	D	0	Р
	Briglio	Heather	Joy	British Columb	ia	✓	✓	
	Luptak	Caroline	Joyce	British Columb	ia	✓		
	Shivers	Michael	Charles	British Columb	ia	~		
	Schuman	Kurt		British Columb	ia	✓		
b) Promoter information								
If the promoter listed above is not an within Canada, state the province of								
Organization or company name	Family name	First given name	Secondary given	Residential jurisdiction of individual			to promo oth if app	
				Province or country	D		C	)
c) Residential address of eac	ch individual							
Complete Schedule 2 of this form	providing the full	residential address	s for each individua	l listed in Item 9	(a) and (b	) and at	tach to t	he

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	Cove Mortgage Ltd.						
Full legal name	Erickson Carly			Suzanne			
	Family name First given name		Secondary given names				
Title	Mortgage Broker/Underwriter						
Telephone number 6049298156		Email address	carly@c	ovemortg	age.com		
Signature	carly@covemortgage.com	Date	2021	12	24		
			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				Title	
	Family name	First given name	Secondary given names	_	
Name of company					
Telephone number		Er	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.