Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 10165930

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 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.										
Instrument 81-106 Investment Fund Continuous Disclosure and the companion policy to NI 81-106. Investment fund issuer										
<u> </u>										
Underwriter	unoni rana)									
_										
ITEM 3 - ISSUER NAME AND OT										
Provide the following information about th										
Full legal name	Coast Capital Savings	Federal Credit Union								
Previous full legal name										
If the issuer's name changed in the last 12 months, provide most recent previous legal name.										
Website	http://www.coastcapital	oitalsavings.com (if applicable)								
If the issuer has a legal entity identifier, pro	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-issuer(s) other t	han the issuer named above	<u>.</u>						
Full legal name(s) of co-issuer(s)		(if applicab	le))						
ITEM 4 - UNDERWRITER INFORM	IATION									
If an underwriter is completing the report, p	provide the underwriter's full le	gal name and firm NRD number	:	٦						
Full legal name										
Firm NRD number		(if applicable)								
If the underwriter does not have a firm NRD number, provide the head office contact information of the underwriter.										
Street address										
Municipality		Province/State								
Country		Postal code/Zip code								
Telephone number		Website		(if applicable)						

ITEM 5 - ISSUER INFORMATION							
If the issuer is an investment fund, do not complete Item 5. Proceed to Item 6.							
a) Primary industry							
Provide the issuer's North American Industry Classification Standard (NAICS) code (6 digits only) that in your reasonable judgment most closely corresponds to the issuer's primary business activity.							
NAICS industry code 5 2 2 1 3 0							
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 ☐ 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 0 0 0 4 5 1 7 7							
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							
f) Penerting inquer status							
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. All 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 manager 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								
	If the investment fund is publicly listed, provide the name of the exchange on which the investment fund's 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								
-	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 2023 05 02 2023 05 02 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)	Description of security	Number of securities	Single or lowest price	Highest price	Total amount
N	0	Т	190330AN	8.875% Subordinated Notes, Series 3, due May 2, 2033 (Non- Viability Contingent Capital (NVCC))	90,000.00	1,000.0000		90,000,000.00

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		Underlying security code				se price adian \$)	Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other items (if applicable)		
							Lowest	Highest			
	Z	0	Т	0	Т	Н	0.0000			Note Value) / Conversion	Notes are an NVCC instrument convertible upon a Trigger Event into Class D Equity Shares of Coast Capital.

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	6,000,000.00
Ontario	NI 45-106 2.3 [Accredited investor]	11	69,000,000.00
Québec	NI 45-106 2.3 [Accredited investor]	4	15,000,000.00
	90,000,000.00		

- ^{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)
1.	Confidential Final Offering Memorandum	2023-04-25	Y	2023-05-11
	Confidential Preliminary Offering Memorandum	2023-03-14	Y	2023-05-11
3.	Confidential Amended and Restated Preliminary Offering Memorandum	2023-04-25	Y	2023-05-11

ITEM 8 - COMPENSATION	INFORMATION							
Provide information for each persthe distribution. Complete addi					•	•	in connection	with
Indicate whether any compensation was paid, or will be paid, in connection with the distribution.								
No ✓ Yes If yes, indicate number of persons compensated. 7								
a) Name of person compe	ensated and registra	tion status						
Indicate whether the person com	pensated is a registrar	t.	□ No •	∕ Yes				
If the person compensated is an i	individual, provide the	name of the indivi	dual.					
Full legal name of individ	dual							
	Far	nily name	First giver	n name		Secondary (jiven names	
If the person compensated is not	an individual, provide	the following infor	mation.					
Full legal name o	of non-individual D	ESJARDINS SE	CURITIES INC.					
Fir	m NRD number	1 0 3	0		(if app	licable)		
Indicate whether the person com	pensated facilitated th	e distribution thro	ıgh a funding portal or	an interr	 net-based _l	portal. 🗸] No 🗌	Yes
b) Business contact inform								
If a firm NRD number is not prov	rided in Item 8 (a), pro	vide the business co	ontact information of th	he person	being con	npensated.		
Street address								
Municipality				Provinc	ce/State			
Country			Posta	al code/Z	Zip code			
Email address			Tele	ephone	number			\exists
c) Relationship to issuer o	r investment fund n	nanager						
Indicate the person's relationship the Instructions and the meaning							ed" in Part B(2	?) of
Connect with the issue	r or investment fund n	nanager	Inside	er of the	issuer (oth	ner than an invest	ment fund)	
Director or officer of the	e investment fund or i	nvestment fund ma	anager Empl	loyee of t	the issuer	or investment fun	d manager	
✓ None of the above								
d) Compensation details								
Provide details of all compensation Canadian dollars. Include cash continuity in the distribution, such allocation arrangements with the	mmissions, securities- n as clerical, printing, l	based compensations are compensations are compensations accounting	n, gifts, discounts or otl services. An issuer is no	her comp ot require	ensation. I ed to ask fo	Do not report payı	ments for serv	vices
Cash commissions paid	276,750	00		Securit	ty code 1	Security code 2	Security code	e 3
Value of all securities distributed as compensation			Security codes					
Describe te	rms of warrants, optio	ns or other rights						
Other compensation	5	Describe						\exists
Total compensation paid	276,750.	00						
Check box if the pers	son will or may receive	any deferred con	npensation (describe th	he terms	below)			
⁴ Provide the aggregate value of	all securities distribut	ed as compensation	on, <u>excludina</u> options. v	warrants	or other ri	ights exercisable t	o acquire	_
additional securities of the issue rights exercisable to acquire add	er. Indicate the security	v codes for all sec	urities distributed as co	ompensai	tion, <u>includ</u>	<u>ding</u> options, warr	ants or other	

⁵Do not include deferred compensation.

a) Name of person comp	pensated and regis	stration status								
Indicate whether the person co	mpensated is a regist	trant.	☐ No	\checkmark	Yes					
If the person compensated is an individual, provide the name of the individual.										
Full legal name of individual										
		Family name	l	First given n	ame	Sec	ondary giv	en names		
If the person compensated is no	ot an individual, prov	ide the following in	formation.							
Full legal name of non-individual RBC DOMINION SECURITIES INC.										
F	Firm NRD number 3 1 6 0 (if applicable)									
Indicate whether the person co	mpensated facilitated	d the distribution th	rough a funding	portal or an	internet-ba	sed portal.	\checkmark	No 🗌	Yes	
b) Business contact infor	rmation									
If a firm NRD number is not pro	ovided in Item 8 (a), _I	provide the business	contact informa	ation of the	person being	compensated.				
Street address										
Municipality				Р	rovince/Sta	ate				
Country				Postal o	code/Zip co	ode				
Email address				Telep	hone numl	per				
c) Relationship to issuer	or investment fun	d manager								
Indicate the person's relationsh the Instructions and the meani							onnected	" in Part B	(2) of	
Connect with the issu			۰ <i>۲۵۰ ۵۰۰ و ۱۳۵</i> ۵		_	r (other than a	n investm	ent fund)		
Director or officer of t	the investment fund	or investment fund	manager Г	─ □ Employ	ree of the iss	suer or investm	nent fund	manager		
✓ None of the above										
d) Compensation details		id to the newsen ide	ntified in Items O	(a) in same	ation with th	a distribution	Drovido a	II amaayata		
Provide details of all compensate Canadian dollars. Include cash a incidental to the distribution, su allocation arrangements with th	commissions, securiti ch as clerical, printin	es-based compensa g, legal or accounti	tion, gifts, discoung services. An is	unts or other ssuer is not i	r compensati required to a	ion. Do not rep sk for details a	ort paym	ents for se	rvices	
Cash commissions pa	aid 276,7	50.00			Security code	e 1 Security of	code 2	Security co	de 3	
Value of all securities	es		Coourity code			or Coounty C				
distributed as compensation	on ⁴		Security code	S						
Describe t	terms of warrants, op	otions or other right	s							
Other compensatio	n ⁵	Describ	е							
Total compensation pa	276,7	50.00								
Check box if the pe	erson will or may rec	eive any deferred o	ompensation (d	escribe the	terms below	<i>ı</i>)				
⁴ Provide the aggregate value of additional securities of the issu- rights exercisable to acquire a ⁵ Do not include deferred comp	uer. Indicate the sec additional securities o	urity codes for all s							r	

a) Name of person compensated and regist	ration status									
Indicate whether the person compensated is a registr	ant.	☐ No	✓ Yes							
If the person compensated is an individual, provide th	ne name of the individ	dual.								
Full legal name of individual										
F	amily name	First	given name		Secondary g	iven names				
If the person compensated is not an individual, provid	If the person compensated is not an individual, provide the following information.									
Full legal name of non-individual BMO NESBITT BURNS INC.										
Firm NRD number 2 5 8 0 (if applicable)										
Indicate whether the person compensated facilitated	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), pr	rovide the business co	ntact information	of the person be	eing compens	ated.					
Street address										
Municipality			Province	/State						
Country		P	ostal code/Zip	code						
Email address			Telephone nu	ımber						
c) Relationship to issuer or investment fund	manager									
Indicate the person's relationship with the issuer or in the Instructions and the meaning of "control" in secti					of "connecte	d" in Part B(2) of				
Connect with the issuer or investment fund		· · · <u>—</u>	nsider of the iss		an an invest	ment fund)				
Director or officer of the investment fund o		<u> </u>	Employee of the							
<u></u>				locaci ci iii	odinoni ran	a manager				
None of the above										
d) Compensation details										
Provide details of all compensation paid, or to be paid Canadian dollars. Include cash commissions, securitie incidental to the distribution, such as clerical, printing	s-based compensation	n, gifts, discounts o	or other compen	sation. Do no	t report payr	nents for services				
allocation arrangements with the directors, officers or					nis about, or	report on, unternat				
Cash commissions paid 24,30	0.00		Security of	code 1 Sec	urity code 2	Security code 3				
Value of all securities		Security codes								
distributed as compensation ⁴										
Describe terms of warrants, opt	ions or other rights									
Other compensation ⁵	Describe									
Total compensation paid 24,30	0.00									
Check box if the person will or may rece	ive any deferred com	pensation (descri	be the terms be	elow)						
⁴ Provide the aggregate value of all securities distrib										
additional securities of the issuer. Indicate the securights exercisable to acquire additional securities of		ırities distributed a	s compensation	n, <u>including</u> o	ptions, warra	ants or other				
⁵ Do not include deferred compensation.										

a) Name of person compen	sated and registra	ation status							
Indicate whether the person comp	ensated is a registran	ot.	☐ No	\checkmark	Yes				
If the person compensated is an in	dividual, provide the	name of the indiv	idual.						
Full legal name of individu	ual]
	Fan	nily name	Fi	rst given na	ame		Secondary	given names	_
If the person compensated is not a	n individual, provide	the following info	rmation.						
Full legal name of non-individual CIBC WORLD MARKETS INC.									
Firm NRD number 3 8 5 0 (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	ation								
If a firm NRD number is not provid	ded in Item 8 (a), prov	vide the business c	ontact informatio	on of the p	person be	eing con	npensated.		
Street address									
Municipality				Р	rovince/	/State			
Country			1	Postal c	ode/Zip	code			
Email address			1	Telep	hone nu	ımber			
c) Relationship to issuer or	investment fund n	nanager	-						
Indicate the person's relationship with the Instructions and the meaning of							ning of "connect	ed" in Part B(2) of	
Connect with the issuer				•	-		ner than an inves	tment fund)	
Director or officer of the			anager \Box				or investment fur		
<u></u>	investment fund of it	iivesiiileiit lalla III	anagei	шпрюу	ee or the	issuei	or investment for	iu managei	
✓ None of the above									
d) Compensation details									
Provide details of all compensation Canadian dollars. Include cash com incidental to the distribution, such	nmissions, securities-l as clerical, printing, l	based compensations are compensations and compensations are constinged as the compensations are compen	on, gifts, discount services. An issu	s or other er is not r	r compen: required t	sation. I to ask fo	Do not report pay	ments for services	l
allocation arrangements with the a			-individual comp	ensated b	y the issu	ıer.			
Cash commissions paid	24,300.	.00			Security of	ode 1	Security code 2	Security code 3	
Value of all securities distributed as compensation ⁴			Security codes						
·	ns of warrants, optio	ns or other rights							
Other compensation ⁵	, ,	Describe							
Total compensation paid	24,300.								
Check box if the person			nnensation (des	cribe the	terms he	low)			
Oncok box ii tilo poroc	The will of may receive	arry deferred our	inperioditori (deo		termo be				
⁴ Provide the aggregate value of a additional securities of the issuer. rights exercisable to acquire addi ⁵ Do not include deferred compen-	Indicate the security itional securities of th	y codes for all sec							

a) Name of person compensated and registration status									
Indicate whether the person compensated is a registrant.	☐ No ✓ Yes								
If the person compensated is an individual, provide the name of the i	ndividual.								
Full legal name of individual									
Family name	First given name Secondary given nam	es							
If the person compensated is not an individual, provide the following	information.								
Full legal name of non-individual NATIONAL BANK FINANCIAL INC.									
Firm NRD number 1 9 6 0 (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 the busin	ess contact information of the person being compensated.								
Street address									
Municipality	Province/State								
Country	Postal code/Zip code								
Email address	Telephone number								
c) Relationship to issuer or investment fund manager									
Indicate the person's relationship with the issuer or investment fund the Instructions and the meaning of "control" in section 1.4 of NI 45-	manager (select all that apply). Refer to the meaning of "connected" in Par 106 for the purposes of completing this section	t B(2) of							
Connect with the issuer or investment fund manager	Insider of the issuer (other than an investment fun	d)							
Director or officer of the investment fund or investment fur	<u> </u>								
<u> </u>	Employee of the locate of investment fand manage	OI.							
✓ None of the above									
d) Compensation details									
Canadian dollars. Include cash commissions, securities-based comper	dentified in Item 8(a) in connection with the distribution. Provide all amou sation, gifts, discounts or other compensation. Do not report payments for nting services. An issuer is not required to ask for details about, or report o	services							
allocation arrangements with the directors, officers or employees of a		,							
Cash commissions paid 24,300.00	Security code 1 Security code 2 Security	code 3							
Value of all securities	Security codes								
distributed as compensation ⁴									
Describe terms of warrants, options or other rig	jhts								
Other compensation ⁵ Desc	ribe								
Total compensation paid 24,300.00									
Check box if the person will or may receive any deferred	d compensation (describe the terms below)								
⁴ Provide the aggregate value of all securities distributed as compet	nsation, excluding options, warrants or other rights exercisable to acquire	— <u>—</u>							
additional securities of the issuer. Indicate the security codes for all rights exercisable to acquire additional securities of the issuer.	securities distributed as compensation, including options, warrants or o								
⁵ Do not include deferred compensation.									

a) Name of person compensated and registration state	ıs							
Indicate whether the person compensated is a registrant. No Ves								
If the person compensated is an individual, provide the name of t	he individual.							
Full legal name of individual								
Family name	<u>'</u>	First given na	ame	Secondary	given names			
If the person compensated is not an individual, provide the follow	ing information.							
Full legal name of non-individual SCOTIA C	APITAL INC.							
Firm NRD number 3 4 6 0 (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 the bu	ısiness contact inform	ation of the p	person being c	ompensated.				
Street address								
Municipality		Р	rovince/State	e				
Country		Postal c	ode/Zip code	9				
Email address		Telep	hone numbe	r				
c) Relationship to issuer or investment fund manager								
Indicate the person's relationship with the issuer or investment fu the Instructions and the meaning of "control" in section 1.4 of NI					ed" in Part B(2) of			
Connect with the issuer or investment fund manager			-	other than an inves	tment fund)			
Director or officer of the investment fund or investment	fund manager			er or investment fur				
<u> </u>	Tuna managor				a managor			
None of the above								
d) Compensation details								
Provide details of all compensation paid, or to be paid, to the pers Canadian dollars. Include cash commissions, securities-based com- incidental to the distribution, such as clerical, printing, legal or acc	pensation, gifts, disco	ounts or other	compensation	. Do not report pay	ments for services			
allocation arrangements with the directors, officers or employees				for details about, or	report on, unternat			
Cash commissions paid 24,300.00			Security code 1	Security code 2	Security code 3			
Value of all securities	Security code							
distributed as compensation ⁴								
Describe terms of warrants, options or othe	r rights							
Other compensation ⁵	escribe							
Total compensation paid 24,300.00								
Check box if the person will or may receive any defe	rred compensation (describe the	terms below)					
⁴ Provide the aggregate value of all securities distributed as con	pensation, excluding	options, wa	rrants or other	rights exercisable	to acquire			
additional securities of the issuer. Indicate the security codes for rights exercisable to acquire additional securities of the issuer.								
⁵ Do not include deferred compensation.								

	pensated and registrat	ion status							
Indicate whether the person co	mpensated is a registrant		☐ No	✓ Yes					
If the person compensated is a	n individual, provide the r	name of the indivi	idual.						
Full legal name of indiv	/idual								
	Fami	ly name	Firs	t given name	Secondary given names				
If the person compensated is no	ot an individual, provide t	he following info	rmation.						
Full legal name	of non-individual TD	SECURITIES	INC.						
Firm NRD number 5 8 6 0 (if applicable)									
Indicate whether the person co	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	ovided in Item 8 (a), provi	de the business c	ontact information	of the person being co	ompensated.				
Street address									
Municipality				Province/State	e				
Country			- 	Postal code/Zip code					
Email address]	Telephone numbe	r				
c) Relationship to issuer	or investment fund m	anager							
Indicate the person's relationsh	ip with the issuer or inves	tment fund man	ager (select all tha	t apply). Refer to the m	neaning of "connected" in Part B(2) of				
the Instructions and the meani			for the purposes of						
Connect with the issu	uer or investment fund ma	anager		Insider of the issuer (other than an investment fund)				
Director or officer of	the investment fund or in	vestment fund m	anager	Employee of the issue	er or investment fund manager				
None of the above									
d) Compensation details									
					distribution. Provide all amounts in				
	Canadian dollars. Include cash commissions, securities-based compensation, gifts, discounts or other compensation. Do not report payments for services								
incidental to the distribution, such as clerical, printing, legal or accounting services. An issuer is not required to ask for details about, or report on, internal allocation arrangements with the directors, officers or employees of a non-individual compensated by the issuer.									
					for details about, or report on, internal				
	ne directors, officers or em	ployees of a non-			for details about, or report on, internal Security code 2 Security code 3				
allocation arrangements with th	ne directors, officers or emaid 24,300.0	iployees of a non-		nsated by the issuer.					
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allocation arrangements with the Cash commissions particle. Value of all securities distributed as compensation. Describes Other compensation. Total compensation particle. Check box if the perfect of the issue additional securities of the issue rights exercisable to acquire and interest of the issue rights.	terms of warrants, option aid 24,300.0 terms of warrants, option aid 24,300.0 terms of warrants, option aid 24,300.0 erson will or may receive of all securities distribute uer. Indicate the security additional securities of the pensation.	s or other rights Describe Describe any deferred cor d as compensation codes for all sectors is suer.	Security codes Security codes mpensation (description, excluding optimities distributed) OTERS OF TH	Security code 1	Security code 2 Security code 3				
allocation arrangements with the Cash commissions particle. Value of all securities distributed as compensation. Describe of the compensation particle. Total compensation particle. Check box if the perticle of the issue additional securities of the issue rights exercisable to acquire a solution of the compensation. ITEM 9 - DIRECTORS, EXECUTED IN CASH COMMISSION OF THE CASH COMMISSI	terms of warrants, option and 24,300.0 terms of warrants, option and 24,300.0 terms of warrants, option and 24,300.0 terson will or may receive terms of all securities distribute and all securities of the and	s or other rights Describe Describe any deferred cor d as compensation codes for all sector issuer. AND PROM	Security codes Security codes Impensation (description, excluding optivarities distributed OTERS OF TH	Security code 1	Security code 2 Security code 3				
allocation arrangements with the Cash commissions provided in the Cash commissions provided in the Cash commissions provided in the Cash compensation of the compensation of the Cash compensation provided in the Cash compensation of the Cash compe	terms of warrants, option and 24,300.0 terms of warrants, option and 24,300.0 terms of warrants, option and 24,300.0 terson will or may receive terms of all securities distribute and all securities of the and	s or other rights Describe Describe any deferred cor d as compensation codes for all sector issuer. AND PROM	Security codes Security codes Impensation (description, excluding optivarities distributed OTERS OF TH	Security code 1	Security code 2 Security code 3				

Foreign public issuer							
Wholly owned subsidiary of a reporting issuer in any jurisdiction of Canada ⁶							
Provide name of reporting issuer							
Wholly owned subsidiary of a foreign public issuer ⁶							
Provide name of foreign public issuer							
Issuer distributing only eligible foreign securities and the distribution is to permitted clients only ⁷							
If the issuer is at least one of the above, do not complete Item 9(a) – (c). Proceed to Item 10.							
⁶ 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.							
⁷ 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.							
✓ If the issuer is none of the above, check this box and complete Item 9(a) - (c).							
a) Directors, executive officers and promoters of the issuer							

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.

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
	Trumpy	Christopher	Michael	British Columbia	✓		
	Armstrong	Robert	S.	British Columbia	✓		
	Lambert	Valerie		British Columbia	✓		
	McKenzie	Nancy		British Columbia	✓		
	Wong	Jeffrey	Chee Fai	British Columbia		✓	
	Blackburn	Helen	Elizabeth	British Columbia		✓	
	MacInnis	Calvin		British Columbia	✓	✓	
	Burke	Charlotte		Ontario	✓		
	Dujmovic	Susan		British Columbia	✓		
	Dwight	Jerome		Ontario	✓		
	Jaffer	Pharid		British Columbia	✓		
	Somji	Firdos		Ontario	✓		
	Nahirney	Lois		British Columbia	✓		
	Manzi	Mauro	Fabrizio	British Columbia		✓	
	Roberts	Peter	Melville	British Columbia		✓	
	Сох	Ania		British Columbia		✓	
	Wood	Catherine		Ontario		✓	
	Skakun	Lisa	Dawn	British Columbia		✓	
	Chilsom	Tod	Aaron Ned	British Columbia		✓	
	Thompson	Wayne	Anthony	British Columbia		✓	

b) Promoter information

If the promoter listed above is not an individual, provide the following information for each director and executive officer of the promoter. For locations within Canada, state the province or territory; otherwise state the country. For "Relationship to promoter", "D" – Director, "O" – Executive Officer.

Organization or company name	Family name	First given name	Secondary given names	Residential jurisdiction of individual		p to promoter both if applicable)	
		G		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	Coast Capital Savings Federal Credit Union							
Full legal name	Blackburn	Elizabeth						
	Family name	First given name	Secondary given names					
Title	Chief Financial Officer							
Telephone number	6045177183		elen.Blackburn@coastcapitalsavin .com					
Signature	Helen Blackburn		2023 05 11					
			YYYY MM DD					

ITEM 11- CONTACT F	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	Il 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.