Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 8708170

ITEM 1 - REPORT TYPE							
✓ New report							
Amended report	If amen	ded, provide fil	ing date	of report th	at is being ame	ended) (YYYY-MM-DD)
ITEM 2 - PARTY CERTIF	YING THE	Report					
Indicate the party certifying the Instrument 81-106 Investment						restment fund, refer to secti	on 1.1 of National
✓ Investment fund i	ssuer						
Ssuer (other than	ו an inves	ment fund)					
ITEM 3 - ISSUER NAME				vostro ont film	d chaut the fund		
	Provide the following information about the issuer, or if the issuer is an investment fund, about the fund. Full legal name Edgepoint Variable Income Portfolio						
Previous full le	-						
	•						
If the issuer's name ch	-	-			is legal name.		
	Website www.edgepointwealth.com (if applicable)						
If the issuer has a legal entity i	dentifier <u>,</u> pro	vide below. Refer to) Part B of t	he Instruction	s for the definition	of "legal entity identifier".	
Legal entity	identifier	549300DVX80)DW6Y1	W243			
If two or more issuers distribute	ed a single se	ecurity, provide the	full legal n	ame(s) of the o	co-issuer(s) other th	an the issuer named above	<u>}</u>
Full legal name(s) of co)-issuer(s)				(if applicabl	e)	
Item 4 - Underwriter		ΑΤΙΟΝ					
If an underwriter is completing		roviae the underwi	iter's fuil le	gal name ana	firm NRD number.		7
l	Firm NRD number (if applicable)						
If the underwriter does not hav	'e a firm NRE) number, provide t	he head off	ice contact in	formation of the un	derwriter.	7
Street address						[
Municipality					Province/State		
Country				Posta	l 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
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
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
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.
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
S100M to under \$500M	S500M to under \$1B	S1B or over

ITEM 6 - INVESTMEN	t Fund Issuer Information					
If the issuer is an inves	stment fund, provide the following information.					
a) Investment fund m	anager information					
Full legal name	EdgePoint Wealth Management Inc.					
Firm NRD number	2 7 4 9 0 (if applicable)					
If the investment fund man	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	4169639353 Website (if applicable)					
b) Type of investmen	t fund					
Type of investment fund the	at most accurately identifies the issuer (select only one) .					
Money market	Equity Fixed income Balanced					
Alternative strateg	gies Cryptoasset 🗸 Other (describe) Variable Income					
Indicate whether one or bot	th of the following apply to the investment fund .					
Invests primarily in	n other investment fund issuers					
Is a UCITs Fund ¹						
	ctive 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	<u>,</u>				
c) Date of formation a	and financial year-end of the investment fund					
Date of forma	tion 2018 03 16 Financial year-end 12 31					
	YYYY MM DD MM DD					
,	tatus of the investment fund					
	porting issuer in any jurisdication of Canada? \checkmark No \square Yes					
	s of Canada in which the investment fund is a reporting issuer.					
	NU ON PE QC SK YT					
e) Public listing status of the investment fund						
If the investment fund has a CUSIP number, provide below (first 6 digits only)						
	CUSIP number					
If the investment fund is publicly listed, provide the 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 n	name					
f) Net asset value (NA	AV) of the investment fund					
Select the NAV range of the	e investment fund as of the date of the most recent NAV calculation (Canadian \$).					
\$0 to under \$5M	S5M to under \$25M ✓ \$25M to under \$100M					
\$100M to under \$50	0M \$500M to under \$1B \$1B or over Date of NAV calculation: 2018 12 31					

ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION

ITEM 7 - INFORMATION P							
If an issuer located outside of Car purchasers resident in that jurisdi connection with the distribution, w Schedule 1 of the report.	ction of Canada	only. Do not include	e in Item 7 securities iss	ued as paymer	nt of com	missions or fi	inder's fees in
a) Currency							
Select the currency or currencies i	in which the distr	ibution was made.	All dollar amounts prov	ided in the rep	ort must	be in Canadi	an dollars.
✓ Canadian dollar	US dollar	Euro	Other (descri	be)			
b) Distribution date(s)							
State the distribution start and er as both the start and end dates. I distribution period covered by the	f the report is bei						
Start da	^{te} 2018	03 16	End c	late 2018	12	31	
	YYYY	MM DD		YYYY	MM	DD	
c) Detailed purchaser info	rmation						
Complete Schedule 1 of this	s form for eac	h purchaser and	l attach the schedul	e to the com	pleted	report.	
d) Types of securities distr	ributed						
Provide the following information security code. If providing the CU							ow to indicate the
						Canadian \$	
Security code CUSIP number (if applicable)	Description	of security	Number of securities	Single o lowest price		lighest price	Total amount
			100,116.	80 9.6	422	10.2056	1,000,000.00
e) Details of rights and cor	nvertible/excha	ingeable securitie	es				<u> </u>
If any rights (e.g. warrants, optior were distributed, provide the con	ns) were distribut	ed, provide the exer	rcise price and expiry da				exchangeable securities
Convertible / exchangeable Underlying security code security code		se price idian \$)	Expiry date (YYYY- MM-DD)	Conversion ratio	C	Describe other	items (if applicable)
	Lowest	Highest					
f) Summary of the distribut	tion by jurisdict	tion and exemption	on				
State the total dollar amount of s purchaser resides and for each ex distribution in a jurisdiction of Ca This table requires a separate line purchaser resides, if a purchaser r jurisdiction. For jurisdictions within Canada, s	remption relied o Inada, include dis e item for: (i) eacl resides in a jurisa	n in Canada for tha stributions to purch h jurisdiction where liction of Canada, a	nt distribution. However, asers resident in that ju a purchaser resides, (ii) and (iii) each exemption	if an issuer loo risdiction of Ca each exemptio	cated out mada on on relied	tside of Canad ly. on in the juri	da completes a sdiction where a
Province or country		Exemption relie	d on	Number of u purchas		Total a	mount (Canadian \$)
British Columbia	NI 45-106 2.	.3 [Accredited in	nvestor]	paronas	10		850,000.00
British Columbia		-	mount investment		1		150,000.00
		-	tal dollar amount of s		ributed		1,000,000.00
		Total number of	of unique purchasers ²	b	11		
 ^{2a} In calculating the number of u ^{2b} In calculating the total number 		-		-	-		-

²⁰ In calculating the total number of unique purchasers to which the issuer distributed securities, count each p 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.³ If an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include net proceeds for that jurisdiction of Canada only. For jurisdictions within Canada, state the province or territory, otherwise state the country.

Province or country	Net proceeds (Canadian \$)
British Columbia	1,000,000.00
Total net proceeds to the investment fund	1,000,000.00

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.	Offering Memorandum	2018-03-16	Y	

ITEM 8 - COMPENSATION	INFORMATION				
Provide information for each person the distribution. Complete additi				-	y compensation in connection with e d.
Indicate whether any compensati	on was paid, or will be pa	id, in connecti	on with the distribu	tion.	
✓ No 🗌 Yes	If yes, indicate num	nber of perso	ns compensated	I.	
a) Name of person compen	sated and registration	status			
Indicate whether the person compe	ensated is a registrant.		No No	Yes	
If the person compensated is an in	dividual, provide the nam	e of the individ	lual.		
Full legal name of individu	la				
	Family na	ame	First g	given name	Secondary given names
If the person compensated is not a	n individual, provide the f	following inform	mation.		
Full legal name of	non-individual				
Firm	NRD number			(if appli	cable)
Indicate whether the person compo	ensated facilitated the dist	tribution throu	gh a funding porta	l or an internet-based po	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	iger			
Indicate the person's relationship v 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 invest	tment fund ma	nager 🗌 E	mployee of the issuer o	r investment fund manager
None of the above					
d) Compensation details					
allocation arrangements with the a	nmissions, securities-based as clerical, printing, legal	l compensation or accounting	n, gifts, discounts o services. An issuer i	r other compensation. D s not required to ask for	
Cash commissions paid				Security code 1	Security code 2 Security code 3
Value of all securities distributed as compensation ⁴		S	ecurity codes		
Describe tern	ns of warrants, options or	other rights			
Other compensation ⁵		Describe			
Total compensation paid					
Check box if the perso	on will or may receive any	deferred com	pensation (describ	e the terms below)	
4					
⁴ Provide the aggregate value of a additional securities of the issuer. rights exercisable to acquire addit ⁵ Do not include deferred compen- security of the security of	Indicate the security cod tional securities of the iss	les for all secu			

ITEM 9 - DIRECTORS, EXECU	TIVE OFFICERS	AND PROMOT	ERS OF THE ISS	UER					
If the issuer is an investment fund, do not complete Item 9. Procced to Item 10.									
Indicate whether the issuer is any o	f the following (select	t the one that appli	es - if more than one	applies, select onl	y one).				
Reporting issuer in any juris	Reporting issuer in any jurisdiction of Canada								
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 issu	ier ⁶						_	
Provide name of	foreign public issue	r]	
Issuer distributing only eligi	ble foreign securities	and the distributio	n is to permitted clie	ents only ⁷					
If the issuer is at least one of the	above, do not comp	olete Item 9(a) – (a	c). Proceed to Item 2	10.					
⁶ An issuer is a wholly owned subsid securities that are required by law to respectively. ⁷ Check this box if it applies to the cu clients. Refer to the definitions of "e	o be owned by its dir urrent distribution evo	ectors, are benefic en if the issuer mad	ially owned by the re de previous distributi	porting issuer or t ions of other types	the foreign	public is	suer,		
If the issuer is none of the			. ,						
			(c).						
a) Directors, executive officer	·								
Provide the following information for territory; otherwise state the country.						tate the	province	or	
Organization or company name	Organization or company nameFamily nameFirst given nameSecondary given namesBusiness location of non-individual or residentail jurisdiction of individualRelationship to issuer (select all that apply)								
				Province or	country	D	0	Р	
b) Promoter information									
If the promoter listed above is not an individual, provide the following information for each director and executive officer of the promoter. For locations within Canada, state the province or territory; otherwise state the country. For "Relationship to promoter", "D" – Director, "O" – Executive Officer.									
Organization or company name	Family name	First given name	Secondary given	Residential jurisdiction of individual	Rela (select o	tionship one or bo	to promo oth if appl	oter icable)	
				Province or country	D		С)	
c) Residential address of eac		oridontial address	for oach individue	l listed in them. A	(a) and (b)	and at	tach 1- 1		
Complete Schedule 2 of this form completed report. Schedule 2 also					(a) and (b)	ana at	lach to ti	IC .	

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	EdgePoint Wealth Management Inc.							
Full legal name	Childs							
	Family name	First given name		Seconda	iry given n	ames		
Title	Chief Compliance Officer	hief Compliance Officer						
Telephone number	4169634254	Email address	childs@e	dgepoint	wealth.c	om		
Signature	Sayuri Childs	2019	01	25				
			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 T	Tang	Judy			Title	Compliance Manager
	Family name	First given name	Secondary	given names		
Name of company E	EdgePoint Wealth Mana	gement Inc.				
Telephone number 4	169634602	En	nail address	judy@edgep	ointweal	th.com

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.