



25007218

OFFICIAL USE

Notice of Government Securities Broker or Government Securities Dealer Activities to be Filed by a Financial Institution under Section 15C(a)(1)(B) of the Securities Exchange Act of 1934



1. Check appropriate regulatory agency (ARA):
- A. Comptroller of the Currency
 - B. Board of Governors of the Federal Reserve System
 - C. Federal Deposit Insurance Corporation
 - D. Securities and Exchange Commission
2. Conducts business as:
- A. Government Securities Broker
 - B. Government Securities Dealer
 - C. Government Securities Broker and Dealer
3. Filing status of notice:
- A. Notice
 - B. Amendment

4. A. Full name of the financial institution The Bank of Nova Scotia, New York Agency

B. Address of principal office of financial institution:

250 Vesey Street
Address
New York NY 10281
City State Zip Code

C. Address of principal office where government securities broker or government securities dealer activities will be conducted (if different from item (B)):

Address

City State Zip Code

D. Mailing address if different from (B) or (C):

Address

City State Zip Code

E. Name, title, and telephone number of contact person with respect to this notice:

Name Title Area Code / Phone Number

5. Does financial institution conduct, or will it conduct, government securities broker or government securities dealer activities at any location other than given in Question 4 above? A. Yes B. No

(If yes, provide addresses and describe activities.)

One Raffles Quay Singapore Buy and sell government debt securities
Address City State Zip Code Describe Activities

40 Temperance Street Toronto, CDA Buy and sell government debt securities
Address City State Zip Code Describe Activities

6th, 201 Bishopsgate London Buy and sell government debt securities
Address City State Zip Code Describe Activities

150 King St. W. Toronto, CDA Operation
Address City State Zip Code Describe Activities

6. Furnish the name and title of each person who is directly engaged in the management, direction, or supervision of any of the financial institution's government securities broker or government securities dealer activities:

Full Name

Comiskey, Charles J. Last / First / Middle	Managing Director - US Rates Title
Kaushik, Kshamta Last / First / Middle	Head of US Capital Markets Title
Patel, Dhilan Last / First / Middle	Head of US CMF Title
Kelly, Christopher Last / First / Middle	Head of Sales Title
Patel, Hemang Last / First / Middle	Head of US Operations Title

NOTE: Attach a separate Form G-FIN-4 (or, if previously filed, a copy of Form MSD-4 or Form U-4) for each person named in item 6.

7. Has any "associated person" (see definition in paragraph A.7. of the instructions) responded "yes" to any question in Item 16 of Form G-FIN-4, or "yes" to one or more questions in Items 20 through 25 of Form MSD-4 on Page 22 of Form U-4?

A. Yes B. No

NOTE: The financial institution and the person executing this form are responsible for making an inquiry of all other employers of any associated person during the immediately preceding three years for the purpose of verifying the accuracy of the information furnished on Form G-FIN-4. (See 17 C.F.R. § 400.4(c)). Similar requirements are applicable to Form MSD-4 and Form U-4.

8. *The financial institution submitting this notice and the person executing it represent that all of the information contained herein is true, current, and complete.*

Please print name and title of person executing this notice:

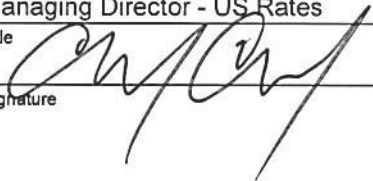
Charles J. Comiskey

Name (First, Middle, Last)

Managing Director - US Rates

Title

Signature



Date

4/1/25

6. Furnish the name and title of each person who is directly engaged in the management, direction, or supervision of any of the financial institution's government securities broker or government securities dealer activities:

Full Name

Cirillo, Robert W. Last / First / Middle	Senior Manager - GWO Settlements Title
Parrotta, Pasquale Last / First / Middle	Director - US Middle Office Title
_____ Last / First / Middle	_____ Title
_____ Last / First / Middle	_____ Title
_____ Last / First / Middle	_____ Title

NOTE: Attach a separate Form G-FIN-4 (or, if previously filed, a copy of Form MSD-4 or Form U-4) for each person named in item 6.

7. Has any "associated person" (see definition in paragraph A.7. of the instructions) responded "yes" to any question in Item 16 of Form G-FIN-4, or "yes" to one or more questions in Items 20 through 25 of Form MSD-4 on Page 22 of Form U-4?

A. Yes B. No

NOTE: The financial institution and the person executing this form are responsible for making an inquiry of all other employers of any associated person during the immediately preceding three years for the purpose of verifying the accuracy of the information furnished on Form G-FIN-4. (See 17 C.F.R. § 400.4(c)). Similar requirements are applicable to Form MSD-4 and Form U-4.

8. **The financial institution submitting this notice and the person executing it represent that all of the information contained herein is true, current, and complete.**

Please print name and title of person executing this notice:

Charles J. Comiskey
Name (First, Middle, Last)
Managing Director - US Rates
Title

Signature

Date