# Form 45-106F1 Report of Exempt Distribution (Non-investment fund issuer)

ITEM 1 – REPORT TYPE							
TIEW I - KEFOK							
✓ New report							
Amended report	Amended report If amended, provide Submission ID of report that is being amended: (Example: EDR1234567890-123)						
		•					
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							
			parding whether an issuer is an inve the companion policy to NI 81-106				
✓ Issuer (Other than							
Underwriter							
ITEM 2 _ ISSUED	NAME AND OT	HER IDENTIFIERS					
11EW 3 - 1330ER	NAME AND OT	HER IDENTIFIERS					
	information about the	issuer, or if the issuer is an in	nvestment fund, about the fund.				
Full legal name							
ThreeD Capital Inc.							
Previous full legal nan	ne If the issuer's nam	e changed in the last 12 mon	ths, provide most recent previous I	egal name.			
Website (if applicable	)						
If the issuer has a leg	al entity identifier, pro	vide below. Refer to Part B or	the Instructions for the definition of	f "legal entity identifier".			
Legal entity identifier							
Did two or more co-is	suers distribute a sing	le security? ✓ No ☐ Yes					
If two or more issuers	distributed a single se	ecurity, provide the full legal n	ame(s) of the co-issuer(s) other tha	n the issuer named above.			
Full legal name(s) of co	o-issuer(s)						
ITEM 4 – UNDER	WRITER INFOR	MATION					
	mpleting the report, p	rovide the underwriter's full leg	gal name and firm NRD number.				
Full legal name							
December 11 and a surface of First Insurance NIDD Morehand Company of the NIDD acceptance							
Does the Underwriter's Firm have an NRD Number? Firm NRD number  No Yes							
If the underwriter does not have a firm NRD number, provide the head office contact information of the underwriter.							
Street address	s not nave a tirm NRL	number, provide the head of Municipality	rice contact information of the unde Province/State	rwriter. Postal/ZIP code			
		wumupanty	1 TOVITICE/State	1 OSIGNZIF COUE			
Country		Telephone number	Website (if applicable)				
Country		rolophone number	Trousite (II applicable)				

ITEM 5 – ISSUER INFORMATION					
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					
523930					
If the issuer is in the <b>mining industry</b> , indicate the mining industry. Select the category that be Exploration Development Production		nat provide services to issuers operating in			
· · · · · · · · · · · · · · · · · · ·	or substantially all of its assets in any of the following? If ye /business debt				
b) Number of employees					
✓ 0 - 49	nore				
c) SEDAR profile number					
	screenshot of the	DAR profile is a "private" profile, please provide a sissuer's profile by e-mail to ngs@osc.gov.on.ca			
d) Head office address	If the issuer does not h	ave a SEDAR profile, complete Item 5(d) – (h).			
Street address Mu	unicipality Province/State	Postal/ZIP code			
Country Tel	elephone number				
e) Date of formation and financial year-end	nd				
	inancial year-end				
	Talloal your ond				
f) Reporting issuer status					
Is the issuer a reporting issuer in any jurisdictio ☐ No ☐ Yes	on of Canada?				
If yes, select the jurisdictions of Canada in which	nich the issuer is a reporting issuer.				
AII AB BC MB NB NL NT					
NS NU ON PE	_QC				
g) Public listing status					
Does the issuer have a CUSIP number? CU	USIP number (provide first 6 digits only)				
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:  Not Applicable  Toronto	Stock Exchange TSX Venture Exchange	Canadian Securities Exchange			
Aequitas Neo Exchange Australia	ian Securities Exchange   Deutsche Boerse	Euronext			
London Stock Exchange Nasdaq	New York Stock Exchange	Shanghai Stock Exchange			
Shenzhen Stock Exchange Stock Ex	xchange Of Hong Kong 🗌 Tokyo Stock Exchange	OTHER			
If other, describe:					
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, p	provide the size of the issuer's assets at the distribution enunder \$25M \qquad \qquad \qquad \qquad \qquad \qquad \qquad \qqqq \qqqq \qqqqq \qqqq \qqqqq \qqqqqq	·			
\$100M to under \$500M \$500M to	to under \$1B				

### 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. a) 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): b) 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** 2020-11-25 2020-11-25 c) Detailed purchaser information Complete Schedule 1 of this form for each purchaser and attach the schedule to the completed report. ThreeD-Sch1-Nov25-2020.xlsx - 43 KB d) 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 of Single or lowest Highest price Total amount number securities price 300,000.0000 **CMS** 0.4800 144.000.0000 Description of security: 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. √ Not Applicable Exercise price Underlying Convertible / Expiry date (Canadian \$) exchangeable security Conversion ratio (YYYY-MM-DD) security code code Lowest Highest Describe other terms: (if applicable) 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 of Canada, state the province or territory, otherwise state country.

Province or country	Exemption relied on No. of purc		Total amount (Canadian \$)
Quebec	NI 45-106 2.12 [Asset acquisition]	1	144,000.0000
	Total dollar amount of securiti	ies distributed	144,000.0000

<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>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.

## ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION

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.

## √ Not Applicable

	Description	Date of document or other material	Previously filed with or delivered to regulator?	,	Filename
1.			$\square$ Y $\square$ N		

ITEM 8 – COMPENSATION 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 compensation was paid, or will be paid, in connection with the distribution.  ✓ No ☐ Yes							
PERSON 1							
a) Name of person compensat	ted and registration	on status					
Indicate whether the person compensated is a registrant.  ☐ No ☐ Yes							
If the person compensated is an individual, provide the full legal name of the individual.  Family name First given name Secondary given names							
If the person compensated is not Full legal name of non-individual	an individual, prov	ide the following inform	nation.	Firm NRD number (if a	applicable)		
Indicate whether the person com	pensated facilitated	I the distribution throu	gh a funding p	cortal or an internet-bas	sed portal.		
b) Business contact information	on						
If a firm NRD number is not provi	ided in Item 8(a), p	rovide the business co	ontact informa	ation of the person beir	ng compensated.		
Street address	Municip		Province/Sta	•	Postal/ZIP code		
Country	Telepho	one number	Email addres	3S			
			<u></u>				
c) Relationship to issuer or in	vestment fund ma	anager					
Indicate the person's relationship Part B(2) of the Instructions and  Connected with the issuer or in	the meaning of "co	ntrol" in section 1.4 of	f NI 45-106 fo		pleting this section	1.	
Insider of the issuer (other tha	n an investment fur	nd)	None	e of the above			
Director or officer of the invest	ment fund or invest	ment fund manager					
d) Compensation details							
Provide details of all compensation in Canadian dollars. Include cash for services incidental to the distrabout, or report on, internal allocations.	h commissions, sec ribution, such as c	curities-based comper lerical, printing, legal c	nsation, gifts, or accounting	discounts or other com services. An issuer is i	npensation. Do not not required to asi	t report payme k for details	
Cash commissions paid							
Value of all securities		Security code1	Sec	curity code2	Security code	3	
☐ distributed as compensation <sup>4</sup>		Describe terms of wa	arrants, optior	ns or other rights			
Other compensation <sup>5</sup>		Describe					
Total compensation Paid	0.0000	J					
Check box if the person will o	or may receive any	deferred compensation	n (describe th	e terms below)			

<sup>4</sup> Provide the aggregate value of all securities distributed as compensation, excluding options, warrants or other rights exercisable to acquire additional securities of the issuer. Indicate the security codes for all securities distributed as compensation, including options, warrants or other rights exercisable to acquire additional securities of the issuer.

 $^{5}\,\mathrm{Do}$  not include deferred compensation.

ITEM 9 – D	IRECTORS, EXECUTIVE OFFICERS	S AND PROMOTERS OF	THE ISSUER				
Indicate whether the issuer is any of the following (select the one that applies - if more than one applies, select only one).							
Reporting	Reporting issuer in any jurisdiction of Canada						
☐ Foreign p	Foreign public issuer						
•	Wholly owned subsidiary of a reporting issuer in any jurisdiction of Canada <sup>6</sup> Provide name of reporting issuer						
Wholly ow	☐ Wholly owned subsidiary of a foreign public issuer <sup>6</sup>						
-	ame of foreign public issuer						
	tributing only eligible foreign securities and the	·	•				
<sup>6</sup> An issue securities <sup>7</sup> Check th	uer is at least one of the above, do not com r is a wholly owned subsidiary of a reporting is that are required by law to be owned by its dire his box if it applies to the current distribution eve efer to the definitions of "eligible foreign securit	suer or a foreign public issuer if al ectors, are beneficially owned by t ren if the issuer made previous dis	ll of the issuer's outstanding voting se the reporting issuer or the foreign pub stributions of other types of securities	olic issuer, respectively.			
☐ If the iss	uer is none of the above, check this box an	d complete Item 9(a) – (c).					
a) Directors	, executive officers and promoters of the iss	suer					
	ollowing information for each director, executive rwise state the country. For "Relationship to iss			he province or			
Individual? Organization or company name  Family name  Family name  Business location of issue issue in the property of the pr			Relationship to issuer (select all that apply)				
□Y □N				□D □O □P			
b) Promoter	information						
	er listed above is not an individual, provide the f a, state the province or territory, otherwise state						
	Organization or company name First given name Secondary given name Residential jurisdiction of individual Relationship to promoter (select one or both if applicable)						
				□ D □ O			
c) Resident	c) Residential address of each individual						
	Complete <u>Schedule 2</u> 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 exempt distribution.

By completing the information below, I certify, on behalf of the issuer/underwriter, 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/agent	ThreeD Capital Inc.			
Full legal name - Family name	First given	First given name		Secondary given names
Feldman				
Title		Telephone	e number	Email address
CFO		41694189	900	feldman@threedcap.ca
Signature /s/ Gerry Feldman		Date 20	020-11-30	

#### 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 - Family name First given name		Secondary given names		Title	
Shneider Illana				Law Clerk	
Name of company	Telephone number	Email	address		
Fogler, Rubinoff LLP	4168649700	ishnei	der@fogers.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 Schedule 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.

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