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

ITEM 1 – REPORT TYPE
✓ New 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 National Instrument 81-106 Investment Fund Continuous Disclosure and the companion policy to NI 81-106.
ITEM 3 – ISSUER NAME AND OTHER IDENTIFIERS
Provide the following information about the issuer, or if the issuer is an investment fund, about the fund. Full legal name
Graph Blockchain Inc.
Previous full legal name If the issuer's name changed in the last 12 months, provide most recent previous legal name.
Website (if applicable)
If the issuer has a legal entity identifier, provide below. Refer to Part B of the Instructions for the definition of "legal entity identifier".
Legal entity identifier
Did two or more co-issuers distribute a single security? VNo Ves
If two or more issuers distributed a single security, provide the full legal name(s) of the co-issuer(s) other than the issuer named above. Full legal name(s) of co-issuer(s)

# ITEM 4 – UNDERWRITER INFORMATION

If an underwriter is completing the report, provide the underwriter's full legal name and firm NRD number.						
Full legal name						
Does the Underwriter's Firm have an NRD	Does the Underwriter's Firm have an NRD Number? Firm NRD number					
If the underwriter does not have a firm NR	D number, provide	e the head off	fice contact information of the und	erwriter.		
Street address	Municipality		Province/State	Postal/ZIP code		
Country	Telephone number		Website (if applicable)			

ITEM 5 – ISSUER INFORMATION					
a) Primary industry					
Provide the issuer's North American Indus corresponds to the issuer's primary busine		NCS) code (6 digits only) that	in your reasonable judgment most closely		
NAICS industry code					
If the issuer is in the <b>mining industry</b> , ind the mining industry. Select the category th Exploration Development Produc	at best describes the issuer's		that provide services to issuers operating in		
Is the issuer's primary business to invest a					
b) Number of employees					
<b>√</b> 0 - 49 <b>50</b> - 99 <b>100</b> - 499 <b>500</b>	or more				
c) SEDAR profile number					
Does the issuer have a <u>SEDAR</u> profile ? No ☑ Yes	If yes, provide SEDAR profile 00004990	screenshot of t	EDAR profile is a "private" profile, please provide a he issuer's profile by e-mail to ilings@osc.gov.on.ca		
d) Head office address		If the issuer does not	t have a SEDAR profile, complete Item 5(d) – (h).		
Street address	Municipality	Province/State	Postal/ZIP code		
Country	Telephone number				
e) Date of formation and financial yea	r-end	1			
Date of formation	Financial year-end				
f) Reporting issuer status		I			
Is the issuer a reporting issuer in any juriso	diction of Canada?				
If yes, select the jurisdictions of Canada ir	which the issuer is a reporting	g issuer.			
g) Public listing status					
Does the issuer have a CUSIP number?	CUSIP number (provide first	t 6 digits only)			
If the issuer is publicly listed, provide the r exchange and not a trading facility such as	÷		primarily trade. Provide only the name of an		
Exchange name:	onto Stock Exchange	TSX Venture Exchange	Canadian Securities Exchange		
Aequitas Neo Exchange	tralian Securities Exchange	Deutsche Boerse	Euronext		
London Stock Exchange	daq	New York Stock Exchange	Shanghai Stock Exchange		
Shenzhen Stock Exchange	ck Exchange Of Hong Kong 🗌	Tokyo Stock Exchange	OTHER		
If other, describe:					
h) Size of issuer's assets					
Select the size of the issuer's assets base	d on its most recently available	e annual financial statements	(Canadian \$). If the issuer has not prepared annual		
financial statements for its first financial ye	-				
\$100M to under \$500M \$50	0M to under \$1B	\$1B or over			

ITEM 7 – INFORMATION ADOUT 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 disclose						
a) Currency						
Select the currency or currencies in $\checkmark$ Canadian dollar $\square$ US dollar $\square$			le. All dollar amour	nts provided in the re	port must be in Cana	adian dollars.
b) Distribution date(s)						
State the distribution start and end date as both the start and end date the distribution period covered by th	s. If the report is being	•				
Start Date End D	late	-				
2020-06-03 2020-	06-03					
c) Detailed purchaser information	on					
Complete <u>Schedule 1</u> of this form	for each purchaser a	nd attac	the schedule to	the completed rep	ort.	
Graph Blockchain Inc Fo	rm 45-106F1 - Sched	ule 1.XLS	SX - 89 KB			
d) Types of securities distributed	I					
Provide the following information for code. If providing the CUSIP number						r how to indicate the security
			[		Canadian \$	
Security code	CU	SIP iber	Number of securities	Single or lowest price	Highest price	Total amount
UBS			11,666,666.0000	0.0300		350,000.0000
Description of security: Each Unit	consisted of one comr	non shar	e ("Share") and on	e-half of one Share p	ourchase warrant ("W	/arrant").
e) Details of rights and converti	ble/exchangeable se	curities				
If any rights (e.g. warrants, options) securities were distributed, provide			•			-
Not Applicable						
Convertible / Underlying exchangeable security	Exercise price (Canadian \$)		Expiry date		Conversion rati	in
a a surity a sola	owest High	est	- (YYYY-MM-DD)			
WNT CMS	0.0600		2022-06-03	1:1		
Describe other terms: Each Warra (if applicable)	nt is exercisable into c	ne Share	e at \$0.06 on or be	fore June 3, 2022.		
f) Summary of the distribution b						
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						
· · ·		-		or each iurisdiction o	f Canada and foreign	iurisdiction where a
State the total dollar amount of secu purchaser resides and for each exe	urities distributed and a motion relied on in Ca	he numb nada for i	per of purchasers fo that distribution. He	owever, if an issuer l	ocated outside of Ca	
State the total dollar amount of secu purchaser resides and for each exe distribution in a jurisdiction of Canad	rities distributed and a mption relied on in Ca da, include distribution	he numb nada for s to purc	per of purchasers for that distribution. He chasers resident in	owever, if an issuer le that jurisdiction of C	ocated outside of Ca anada only.	nada completes a
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the issuer distributed multiple type	s of securities to, and relied on multip	ole 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?	Previously filed Submission ID	Filename
1.			Y N		

ITEM 8 – COMPENSATIO	N INFORMATIO	ИС						
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. Complete additional copies of this page if more than one person was, or will be, compensated.								
Indicate whether any compensate	Indicate whether any compensation was paid, or will be paid, in connection with the distribution. ☐ No ☑ Yes							
PERSON 1								
a) Name of person compensa	ted and registration	on status						
Indicate whether the person com	pensated is a regis	trant.						
If the person compensated is an	individual, provide	the full legal name of	the individual.					
Family name	-	ven name	Secondary given	names				
If the person compensated is not	an individual. prov	ide the followina infor	mation.					
Full legal name of non-individual				D number <i>(if a</i>	pplicable)			
EMD Financial Inc.			36480					
Indicate whether the person com	pensated facilitated	the distribution throu	ugh a funding portal or a	n internet-bas	ed portal.			
b) Business contact informati	on							
If a firm NRD number is not prov	ided in Item 8(a), p	rovide the business o	contact information of the	e person beind	g compensated.			
Street address	Municip		Province/State		Postal/ZIP code			
Country	Telepho	one number	Email address					
c) Relationship to issuer or in	vestment fund m	anager						
		anager						
Indicate the person's relationship Part B(2) of the Instructions and	the meaning of "co	ntrol" in section 1.4 c	of NI 45-106 for the purp	oses of compl	eting this section.			
Connected with the issuer or i	nvestment fund ma	nager			estment fund mar	lager		
Insider of the issuer (other that	n an investment fur	nd)	✓ None of the about the other states of the states of	ove				
Director or officer of the invest	ment fund or invest	ment fund manager						
d) Compensation details								
Provide details of all compensation paid, or to be paid, to the person identified in Item 8(a) in connection with the 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.								
Cash commissions paid	11,192.0000						-	
Value of all securities		Security code1	Security code	92	Security code	3		
distributed as	L	Describe terms of w	arrants, options or other	r rights		L	1	
compensation <sup>4</sup>				-				
$\checkmark$ Other compensation <sup>5</sup>	0.0000	Describe					<u> </u>	
	0.0000		rants each broker warra	ant is exercised	nle into one Share	at \$0.06 on o	r	
186,533 broker warrants, each broker warrant is exercisable into one Share at \$0.06 on or before June 3, 2022.								

Check box if the person will or may receive any deferred compensation (describe the terms below)

11,192.0000

**Total compensation Paid** 

<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 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. <sup>5</sup> Do not include deferred compensation.							
PERSON 2							
a) Name of person compensa	a) Name of person compensated and registration status						
Indicate whether the person com	pensated is a regist	rant.					
If the person compensated is an individual, provide the full legal name of the individual. Family name First given name Secondary given names							
				secondary given names			
If the person compensated is not Full legal name of non-individual	an individual, provid	de the following inform	mation.	Firm NRD number (i	f applicable)		
PI Financial Corp.				5290			
Indicate whether the person com	pensated facilitated	the distribution throug	ıgh a fu	nding portal or an internet-b	ased portal.		
b) Business contact information	on						
If a firm NRD number is not prov. Street address	ided in Item 8(a), pr Municipa			information of the person be ce/State	ing compensated. Postal/ZIP code	1	
Country	Telephor	ne number	Email	address		]	
a) Deletionekin te inguer er in		]					
c) Relationship to issuer or in	vestment fund ma	nager					
Indicate the person's relationship Part B(2) of the Instructions and Connected with the issuer or i	the meaning of "cor	ntrol" in section 1.4 of			npleting this section	n.	
Insider of the issuer (other tha	n an investment fun	d)	~	None of the above			
Director or officer of the invest	ment fund or investr	nent fund manager					
d) Compensation details							
Provide details of all compensati in Canadian dollars. Include cash for services incidental to the dist about, or report on, internal alloc	h commissions, sec ribution, such as cle	urities-based comper erical, printing, legal c	nsation, or acco	, gifts, discounts or other co unting services. An issuer is	mpensation. Do no s not required to as	ot report payments sk for details	
✓ Cash commissions paid	7,000.0000						
Value of all securities distributed as		Security code1		Security code2	Security cod	e3	
compensation <sup>4</sup>		Describe terms of wa	arrants,	options or other rights			
$\checkmark$ Other compensation <sup>5</sup>	0.0000	Describe					
		233,333 broker warn before June 3, 2022.		ach broker warrant is exerci:	sable into one Sha	re at \$0.06 on or	
Total compensation Paid	7,000.0000						
Check box if the person will c	or may receive any c	deferred compensatio	n (desc	cribe the terms below)			
4 Provido the operation of the off		uted on compared "		ding options worsets as i	hor rights ourseits	bla to opquire additional	
<sup>4</sup> Provide the aggregate value of	an securities distribl	neu as compensatior	i, exclu	ung options, warrants or ot	ner rignis exercisa	bie 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.

<sup>5</sup> Do not include deferred compensation.

	IRECTORS, EXECUTIVE OFFICERS	S AND PROMOTERS OF TH	HE ISSUER					
	her the issuer is any of the following (select the issuer in any jurisdiction of Canada	one that applies - if more than one	applies, select only one).					
Foreign public issuer								
Wholly owned subsidiary of a reporting issuer in any jurisdiction of Canada <sup>6</sup> Provide name of reporting issuer								
	Wholly owned subsidiary of a foreign public issuer 6         Provide name of foreign public issuer							
	ributing only eligible foreign securities and the	distribution is to permitted clients o	nly <sup>7</sup>					
<b>If the issu</b> <sup>6</sup> An issue securities <sup>7</sup> Check th	<b>ter is at least one of the above, do not com</b> <i>r</i> is a wholly owned subsidiary of a reporting is: that are required by law to be owned by its dire is box if it applies to the current distribution ev efer to the definitions of "eligible foreign securit	plete Item 9(a) – (c). Proceed to I suer or a foreign public issuer if all o ectors, are beneficially owned by the ren if the issuer made previous distr	tem 10. of the issuer's outstanding voting se e reporting issuer or the foreign pub ibutions of other types of securities	lic issuer, respectively.				
	uer is none of the above, check this box an							
a) Directors	, executive officers and promoters of the is	suer						
	llowing information for each director, executive wise state the country. For "Relationship to iss			he province or				
Individual?	Organization or company name	Family name First given name Secondary given name	Business location of non-individual or residential jurisdiction of individual	Relationship to issuer (select all that apply)				
□ Y □ N				D O P				
b) Promoter	information			11				
	r listed above is not an individual, provide the t a, state the province or territory, otherwise state							
	Organization or company nameFamily name First given name Secondary given nameResidential jurisdiction of individualRelationship to promoter (select one or both if applicable)							
c) Resident	al address of each individual							
Complete <u>Sc</u> attach to the	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	Graph Blockchain Inc.			
Full legal name - Family name First given name		ame		Secondary given names
Scovenna	Christian			
Title		Telephone	number	Email address
Chief Executive Officer		416-453-47	708	cscovenna@graphblockchain.com
Signature Christian Scovenna		Date 202	20-06-10	

## 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	
Name of company		Telephone number	Email 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 regulatory authority or regulator.

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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Submission ID	Date