# IT IS AN OFFENCE TO MAKE A MISREPRESENTATION IN THIS REPORT

ITEM 1 - REPORT TYPE								
X 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.								
Investment fund issuer								
X Issuer (other than an investment fund)								
Underwriter								
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 AI/ML Innovations Inc.								
Previous full legal name								
If the issuer's name changed in the last 12 months, provide most recent previous legal name.								
Website <a href="https://aiml-innovations.com/">https://aiml-innovations.com/</a> (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								
ITEM 4 - UNDERWRITER INFORMATION								
If an underwriter is completing the report, provide the underwriter's full legal name and firm National Registration Database (NRD) number.								
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 corresponds to the issuer's primary business activity. For more information on finding the NAICS industry code go to <b>Statistics Canada's NAICS industry search tool</b> .							
NAICS industry code 5 4 1 7 1 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							
b) Number of employees							
Number of employees: X 0 – 49 50 – 99 100 – 499 500 or more							
c) SEDAR profile number							
Does the issuer have a <u>SEDAR</u> profile?  No X Yes If yes, provide SEDAR profile number 0 0 0 7 4 8 4  If the issuer does not have a SEDAR profile complete Item 5(d) – (h).							
d) Head office address							
Street address Province/State Postal code/Zip code Country Telephone number							
e) Date of formation and financial year-end							
Date of formation Financial year-end MM DD							
f) Reporting issuer status							
Is the issuer a reporting issuer in any jurisdiction of Canada? No Yes							
If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer.							
AII 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 names of all exchanges on which its securities are listed. Include only the names of exchanges for which the issuer has applied for and received a listing, which excludes, for example, automated trading systems.							
Exchange names							

h) Size of issuer's assets
Select the size of the issuer's assets for its most recent financial year-end (Canadian \$). If the issuer has not existed for a full 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 investment fund, provide the following information.
a) Investment fund manager information
Full legal name
Firm NRD Number (if applicable)
If the investment fund manager 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
b) Type of hivestilleric range
Type of investment fund that most accurately identifies the issuer (select only one).  Money market  Equity  Fixed income
Balanced Alternative strategies Other (describe)
Indicate whether one or both of the following apply to the investment fund.  Invests primarily in other investment fund issuers
Is a UCITs Fund <sup>1</sup>
<sup>1</sup> Undertaking for the Collective Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) directives that allow collective investment schemes to operate throughout the EU on a passport basis on authorization from one member state.
c) Date of formation and financial year-end of the investment fund
Date of formation
d) Reporting issuer status of the investment fund
Is the investment fund a reporting issuer in any jurisdiction of Canada?
If yes, select the jurisdictions 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 of the investment fund
If the investment fund has a CUSIP number, provide below (first 6 digits only).

(	CUSIF	number									
							l exchanges on				
_			nvestr	nent i	fund has appl	lied for and re	eceived a listing,	which excludes,	, for example,	automated t	trading systems.
Ex	chang	je names									
f)	Net as	sset value	(NAV	) of th	ne investment	t fund					
Select the	NAV	range of t	he inv	estme	ent fund as of	f the date of t	he most recent l	NAV calculation	(Canadian \$).		
\$0 to under \$5M \$5M to under \$25M \$25M to under \$100M											
\$10	OM to	under \$5	00M		\$500M t	o under \$1B	\$1B c	or over D	ate of NAV ca	lculation:	YYY M D Y M D
Ітем 7	– In	FORMATI	on A	BOU.	T THE DIST	RIBUTION					
about pu	urchas fees, le 1 of	sers reside which sho the repor	ent in a	that ju	ırisdiction of (	Canada only.	on in a jurisdictio Do not include nation provided i	n Item 7 securiti	es issued as p	payment of c	
a)	Cur	rency									
	_	-		cies ir			1		ded in the rep	ort must be	in Canadian dollars.
X	Ca	nadian do	llar		US doll	ar	Euro O	ther (describe)			
b)		tribution d	. ,				g filed for securi				
			istribu		eriod covered		rt.	securities distri	2022 YYYY	ntinuous bas 03 25 MM DD	sis, include the start
c)	Det	ailed purc	haser	inforr	mation						
Comple	te Sc	hedule 1	of this	s forn	n for each p	urchaser an	d attach the sci	nedule to the co	ompleted rep	ort.	
d)	Тур	es of secu	urities	distril	outed						
the Instr	ructior		to ind							t CUSIP nun	Refer to Part A of nber assigned to the
	.,		CUSIP	,				T.,	Single or	Canadiar	n \$ 
	curity ode	l n	umbe pplical		D	escription of	security	Number of securities	lowest price	Highest price	Total amount
U	В	S		,		ommon Share are purchase	e and 1 Commor warrant)	4,000,000	\$0.15		\$600,000
1		'						•			
e)	Det	ails of righ	nts and	d con	vertible/excha	angeable sec	urities				
							the exercise pri the conversion				.h
		changeal					tile conversion	Tallo and descri	ue arry ourier t	erris ior eac	
Sec	urity c		nderly securi code	ty		se price dian \$) Highest	Expiry date (YYYY-MM- DD)	Conversion ratio	Describe	other terms	(if applicable)
W	N	T C	М	S	\$0.20	\$0.20	2023-03-24	1:1			
	1	1 - 1			1		1	1	1		

	l .			l		

#### 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 purchasers	Total amount (Canadian \$)
Alberta	Accredited Investor (NI 45-106 s. 2.3)	2	97,500
Alberta	Family, Friends and Business Associates (NI 45-106 s. 2.5)	2	52,500
British Columbia	Accredited Investor (NI 45-106 s. 2.3)	2	105,000
British Columbia	Family, Friends and Business Associates (NI 45-106 s. 2.5)	3	38,250
Manitoba	Accredited Investor (NI 45-106 s. 2.3)	1	30,000
Ontario	Accredited Investor (NI 45-106 s. 2.3)	3	55,500
United Arab Emirates	Accredited Investor (NI 45-106 s. 2.3)	1	33,750
Australia	Family, Friends and Business Associates (NI 45-106 s. 2.5)	1	22,500
United States	Accredited Investor (NI 45-106 s. 2.3)	2	165,000
			600,000
	Total number of unique purchasers	17	

<sup>&</sup>lt;sup>2</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.

## 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.<sup>3</sup> 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 \$)
N/A	
Total net proceeds to the investment fund	

<sup>&</sup>lt;sup>3</sup>"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.	N/A			

#### 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. **Complete additional copies of this page if more than one person was, or will be, compensated.** 

Indicate whether any compensation was paid, or will be paid, in connection with the distribution.									
No x Yes If yes, indicate number of persons compensated.									
a) Name of person compensated and registration status									
Indicate whether the person compensated is a registrant.									
x No Yes									
If the person compensated is an individual, provide the name of the individual.									
Full legal name of individual Fallis Howard Blake									
Family name First given name Secondary given names									
If the person compensated is not an individual, provide the following information.  Full legal name of non-individual									
r dii legal hame di hori-individual									
Firm NRD number (if applicable)									
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.									
x No Yes									
b) Business contact information									
If a firm NRD number is not provided in Item 8(a), provide the business contact information of the person being compensated.									
Street address Suite 203, 645 Fort Street									
Municipality Victoria Province/State British Columbia									
Country Canada Postal code/Zip code V8W 1G2									
Email address Fallisb4@gmail.com Telephone number +1 250 384 6725									
Email address Fallisb4@gmail.com Telephone number +1 250 564 6725									
c) Relationship to issuer or investment fund manager									
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Pal									
B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.  Connected with the issuer or investment fund manager									
Commenced with the isoder of investment fund manager									
Insider of the issuer (other than an investment fund)									
Director or officer of the investment fund or investment fund manager									
x Employee of the issuer or investment fund manager									
None of the above									
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 repor 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 \$25,337.81									
<u> </u>									
Value of all securities distributed  O Security code 1 Security code 2 Security code 3  Security code 1 Security code 2 Security code 3									
as compensation <sup>4</sup>									
Describe terms of warrants, options or other rights									
Other compensation <sup>5</sup> 0 Describe									
Total compensation paid \$25,337.81									
Check box if the person will or may receive any deferred compensation (describe the terms below)									

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

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

-	TEM 9 – DIRECTORS, EXECUTIVE OF	FICERS AND PROMOT	TERS OF THE ISSU	JER									
If	the issuer is an investment fund	, do not complete l	tem 9. Proceed	to Item 10.									
Ir	ndicate whether the issuer is any of	the following (select	all that apply).										
	X Reporting issuer in any jurisdiction of Canada												
	Foreign public issuer												
	Wholly owned subsidiary of a	reporting issuer in a	any jurisdiction o	of Canada <sup>6</sup>									
	Provide name	e of reporting issuer											
	Wholly owned subsidiary of a	a foreign public issue	r <sup>6</sup>										
	Provide name of f	oreign public issuer											
	Issuer distributing eligible for	eign securities only t	o permitted clier	nts <sup>7</sup>									
6) th re	If the issuer is at least one of the above, do not complete Item 9(a) – (c). Proceed to Item 10. <sup>6</sup> 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. <sup>7</sup> 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).												
				no nom o(u)	(0).								
	a) Directors, executive officer	s and promoters of t	he issuer										
<i>P</i>	Provide the following information for r territory, otherwise state the count	each director, execu ry. For "Relationship	tive officer and p to issuer", "D" –	promoter of the - Director, "O" -	issuer. – Execu	For location tive Officer	ns within Car ; "P" – Promo	nada, s oter.	tate the	province			
	Organization or company name	Family name	First given name	Secondary (	_	non-ind resic jurisdi	ividual or lential	Urganization of company name   Family name   5   1   Urisdiction of   1					
							Province or country						
						Province		D	0	Р			
						Province		D	0	Р			
						Province		D	0	P			
						Province		D	0	P			
						Province		D	0	P			
	b) Promoter information					Province		D	0	P			
lc	b) Promoter information  If the promoter listed above is not an ocations within Canada, state the procedure Officer.					or and exe	or country  cutive officer	of the	promote	er. For			
lc	the promoter listed above is not an ocations within Canada, state the pr		therwise state th	Secondary given	"Relatio Resi jurisd	or and exe	or country  cutive officer	of the - Direc	promotetor, "O"	er. For			
lc	i the promoter listed above is not an ocations within Canada, state the pre- executive Officer.	ovince or territory, of	therwise state th	e country. For Secondary	Resi jurisd indi	or and exe nship to pr dential iction of	cutive officer omoter", "D"	of the - Direc	promotetor, "O"	er. For			
lc	i the promoter listed above is not an ocations within Canada, state the pre- executive Officer.	ovince or territory, of	therwise state th	Secondary given	Resi jurisd indi	or and exe nship to pr dential iction of vidual ince or	cutive officer omoter", "D"	of the - Direc	promote tor, "O"	er. For			

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 or director 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 not be delegated to an agent or other individual preparing the report on behalf of the issuer or underwriter. If the individual completing and filing the report is different from the individual certifying the report, provide their name and contact details 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.

#### IT IS AN OFFENCE TO MAKE A MISREPRESENTATION IN THIS REPORT

By completing the information below, I certify to the securities regulatory authority or regulator that:

- I have read and understand this report; and
- all of the information provided in this report is true.

Full legal name	l name Fallis Robert			Morgan			
	Family name	First given nan	ne	Secondary given names			
Title	Office Manager						
Name of issuer/underwriter/ investment fund manager	AI/ML Innovations Inc.						
Telephone number	778-405-0882	Email address	Morganf.aiml@gmail.com				
Signature	Morgan Fallis	Date	2022	03	25		
		· •	YYYY	MM	DD		

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.

X Same as indiv	idual certifying the report				
Full legal name				Title	
	Family name	First given name	Secondary given names		
Name of company					
Telephone number		E	mail 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 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.

Schedule 2 to Form 45-106F1 (Confidential Director, Executive Officer, Promoter and Control Person Information)

Schedule 2 must be filed in the format of an Excel spreadsheet in a form acceptable to the securities regulatory authority or regulator.

N/A

## Questions:

Refer any questions to:

## **Alberta Securities Commission**

Suite 600, 250 - 5th Street SW Calgary, Alberta T2P 0R4 Telephone: (403) 297-6454 Toll free in Canada: 1-877-355-0585

Facsimile: (403) 297-2082

## **British Columbia Securities Commission**

P.O. Box 10142, Pacific Centre 701 West Georgia Street Vancouver, British Columbia V7Y 1L2 Inquiries: (604) 899-6854 Toll free in Canada: 1-800-373-6393

Facsimile: (604) 899-6581

Email: inquiries@bcsc.bc.ca

## The Manitoba Securities Commission

500 - 400 St. Mary Avenue Winnipeg, Manitoba R3C 4K5 Telephone: (204) 945-2548

Toll free in Manitoba 1-800-655-5244

Facsimile: (204) 945-0330

#### Financial and Consumer Services Commission (New Brunswick)

85 Charlotte Street, Suite 300 Saint John, New Brunswick E2L 2J2 Telephone: (506) 658-3060 Toll free in Canada: 1-866-933-2222

Facsimile: (506) 658-3059 Email: info@fcnb.ca

## Government of Newfoundland and Labrador **Financial Services Regulation Division**

P.O. Box 8700 Confederation Building 2nd Floor, West Block Prince Philip Drive

St. John's, Newfoundland and Labrador A1B 4J6

Attention: Director of Securities Telephone: (709) 729-4189 Facsimile: (709) 729-6187

## **Government of the Northwest Territories** Office of the Superintendent of Securities

P.O. Box 1320

Yellowknife, Northwest Territories X1A 2L9

Attention: Deputy Superintendent, Legal & Enforcement

Telephone: (867) 920-8984 Facsimile: (867) 873-0243

# **Nova Scotia Securities Commission**

Suite 400, 5251 Duke Street **Duke Tower** P.O. Box 458 Halifax, Nova Scotia B3J 2P8

Telephone: (902) 424-7768 Facsimile: (902) 424-4625

## **Government of Nunavut Department of Justice**

Legal Registries Division P.O. Box 1000, Station 570 1st Floor, Brown Building Igaluit, Nunavut X0A 0H0 Telephone: (867) 975-6590 Facsimile: (867) 975-6594

## **Ontario Securities Commission**

20 Queen Street West, 22nd Floor Toronto, Ontario M5H 3S8 Telephone: (416) 593-8314

Toll free in Canada: 1-877-785-1555

Facsimile: (416) 593-8122

Email: exemptmarketfilings@osc.gov.on.ca Public official contact regarding indirect collection of information:

Inquiries Officer

## **Prince Edward Island Securities Office**

95 Rochford Street, 4th Floor Shaw Building P.O. Box 2000

Charlottetown, Prince Edward Island C1A 7N8

Telephone: (902) 368-4569 Facsimile: (902) 368-5283

#### Autorité des marchés financiers

800, Square Victoria, 22e étage C.P. 246. Tour de la Bourse Montréal, Québec H4Z 1G3

Telephone: (514) 395-0337 or 1-877-525-0337 Facsimile: (514) 873-6155 (For filing purposes only) Facsimile: (514) 864-6381 (For privacy requests only)

Email: financementdessocietes@lautorite.gc.ca (For corporate finance issuers); fonds\_dinvestissement@lautorite.qc.ca (For

investment fund issuers)

## Financial and Consumer Affairs Authority of Saskatchewan

Suite 601 - 1919 Saskatchewan Drive Regina, Saskatchewan S4P 4H2 Telephone: (306) 787-5879 Facsimile: (306) 787-5899

# Government of Yukon

## **Department of Community Services** Law Centre, 3rd Floor

2130 Second Avenue Whitehorse, Yukon Y1A 5H6 Telephone: (867) 667-5314 Facsimile: (867) 393-6251