## Form 45-106F1 Report of Exempt Distribution

## 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.									
National Instrument 81-106 Investment Fund Continuous Disclosure and the companion policy to NI 81-106.									
X Issuer (other than an investment fund)									
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 Alta Vista Ventures Ltd.									
Previous full legal name									
If the issuer's name changed in the last 12 months, provide most recent previous legal name.									
Website         www.altavistaventures.com         (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 2 1 2								
If the issuer is in the <b>mining industry</b> , 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.								
X 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 SEDAR profile?         No       X         Yes       If yes, provide SEDAR profile number         0       0       0       7       7       3       4								
If the issuer does not have a 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								
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.								
All AB BC MB NB NL NT								
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 investr	nent fund, provide the following information.
a) Investment fund	manager information
Full legal name	
Firm NRD Number	(if applicable)
If the investment fund manag	er 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 investme	ent fund
Money market Balanced Indicate whether one or both	most accurately identifies the issuer (select only one).         Equity       Fixed income         Alternative strategies       Other (describe)         of the following apply to the investment fund.         in other investment fund issuers
Is a UCITs Fund	1
	stment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) directives that allow perate throughout the EU on a passport basis on authorization from one member state.
c) Date of formation	n and financial year-end of the investment fund
Date of formation	YYYY     MM     DD     MM     DD
d) Reporting issuer	status of the investment fund
	ting issuer in any jurisdiction of Canada? No Yes f Canada in which the investment fund is a reporting issuer. AB BC MB NB NL NT NU ON PE QC SK YT
e) Public listing stat	us of the investment fund
CUSIP number	USIP number, provide below (first 6 digits only).
	/NAV) of the investment fund
,	
\$0 to under \$5M \$100M to under \$500	Important fund as of the date of the most recent NAV calculation (Canadian \$).         Important fund as of the date of the most recent NAV calculation (Canadian \$).         Important fund as of the date of the most recent NAV calculation (Canadian \$).         Important fund as of the date of the most recent NAV calculation (Canadian \$).         Important fund as of the date of the most recent NAV calculation (Canadian \$).         Important fund as of the date of the most recent NAV calculation (Canadian \$).         Important fund as of the date of the most recent NAV calculation (Canadian \$).         Important fund as of the date of the most recent NAV calculation (Canadian \$).         Important fund as of the date of the most recent NAV calculation (Canadian \$).         Important fund (Canadian \$).

## ITEM 7 – INFORMATION ABOUT THE DISTRIBUTION

purchasers reside	nt in that jurisdictio	la completes a distribution ii on of Canada only. Do not ii formation provided in Item	nclude in Item 7 sec	curities issued o	as payment of	commissions	or finder's fees, which
a) Currer	псу						
X Canad	dian dollar	which the distribution was m	1	ounts provided er (describe)	-	nust be in Ca	nadian dollars.
	ution date(s)				1 1 1 1	·	
date as both the s		dates. If the report is being fi . If the report is being filed for e report.					
	Start date	e 2016 09 2 YYYY MM DD		End date	2016 YYYY	09 28 MM DI	0
c) Detaile	ed purchaser inf	ormation					
Complete Sche	dule 1 of this f	orm for each purchaser	and attach the	schedule to	the complet	ed report.	
d) Types	of securities dis	tributed					
		r all distributions that take p security code. If providing the					
being distributed.		·				Canadian	\$
Security code	CUSIP number (if applicable)	Description of s	ecurity	Number of securities	Single or lowest price	Highest price	Total amount
U N T	021342	Each unit consists of one of one non-transferable share		9,720,000	0.05	0.05	\$486,000
e) Details	s of rights and co	onvertible/exchangeable	securities				
		were distributed, provide the he conversion ratio and desc					
securities were un		Exercise price				igeuble secu	Tuy.
Security code	Underlying security code	(Canadian \$) Lowest Highest	Expiry date (YYYY-MM-DD)	Conversion ratio	Describ	e other terms	(if applicable)
W N T	C M S	0.10 0.10	2017-09-28				
f) Summ	ary of the distrib	oution by jurisdiction and	exemption				
	-	irities distributed and the nu	•	s for each iuris	diction of Cana	ida and forei	an iurisdiction where a
purchaser resides	and for each exem	ption relied on in Canada fo	or that distribution.	However, if ar	n issuer located	outside of C	
-		da, include distributions to p				-	· · · · · · · · · · · · · · · · · · ·
		em for: (i) each jurisdiction w des in a jurisdiction of Cana					
jurisdiction.		-					. 5
	vithin Canada, stat	e the province or territory, o	therwise state the c		lumber of		
Province or country		Exemption relied or	ו		lumber of urchasers	Total amou	int (Canadian \$)
AB			NI 45-106 (2.3)				5,000
BC		NI 45-106 (2.3)			14 3		70,000
BC		NI 45-106 (2.5) NI 45-106 (2.3)	NI 45-106 (2.5)				2,500 2,500
ON		NI 45-106 (2.5)			2 35		96,000
			, tal dollar amount	of securities			36,000
			of unique purcha		62		

<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 \$)
Total net proceeds to the investment fund	

<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.				
2.				
3.				

ITEM 8 – COMPENSAT	ion Inform	ΜΑΤΙΟΝ									
Provide information for each perso with the distribution. <b>Complete ac</b>										on in cor	nnection
Indicate whether any compensatio	-	l be paid, in connection es, indicate number of p				3	]				
a) Name of person com	pensated and r	egistration status									
Indicate whether the person compe	ensated is a registr	rant.									
If the person compensated is an in		he name of the individu	ıal.								
Full legal name of individu		mily name	Fi	rst giver	name		Seconda	rv aiver	names		
If the person compensated is not a		-		for given	namo		00001100	ry givei	manioo		
Full legal name of	ſ	_									
Firm	NRD number	9 0 0			(if apr	licable)					
	Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.										
b) Business contact info	ormation										
If a firm NRD number is not provid	led in Item 8(a), pr	rovide the business cont	tact info	ormatio	n of the pe	rson beir	ng comp	pensate	ed.		
Street address	2200–609 Gra	Inville Street									
Municipality	Vancouver			Pro	vince/Sta	te BC					
Country	Canada		Pos	tal coc	le/Zip coo	de V7	Y 1H2				
Email address	LEIIis@canaco	cordgenuity.com	- Te	elepho	ne numb	er 60-	4-643-	7300			
c) Relationship to issue	r or investment	fund manager	1								
Indicate the person's relationship v of the Instructions and the meanin Connected with the is Insider of the issuer ( Director or officer of the Employee of the issuer X None of the above	g of "control" in se ssuer or investme (other than an inve the investment fur	ection 1.4 of NI 45-106 ent fund manager estment fund) nd or investment fund r	for the <sub>l</sub>	purpose					f "conne	cted" in	Part B(2)
d) Compensation detail	9										
Provide details of all compensation		id, to the person identif	ied in Ite	em 8(a)	in connec	tion with	the dis	tributio	on Prov	ide all a	mounts
in Canadian dollars. Include cash of services incidental to the distribution report on, internal allocation arran Cash commissions paid	commissions, secur on, such as clerical	rities-based compensati l, printing, legal or acco	ion, gift: ounting :	s, discou services	unts or oth . An issuer	er compe is not re	ensatior quired	n. Do n to ask j	ot repor <sup>f</sup> or deta	t payme	ents for
Value of all securities distributed	Nil	Security	codes		urity code 1		curity co	de 2	Secu	rity code	3
as compensation <sup>4</sup>				W	ΝΤ						
Describe terms of warrants, options or other rights Describe terms of warrants, options or other rights											
Other compensation <sup>5</sup>		Describe									
Total compensation paid	\$20,000										
Check box if the person	n will or may rece	ive any deferred comp	ensatior	n (desci	ribe the ter	ms belo	w)				
<sup>4</sup> Provide the aggregate value of all securi Indicate the security codes for all securiti <sup>5</sup> Do not include deferred compensation.	ties distributed as con es distributed as com	mpensation, <u>excluding</u> optic pensation, <u>including</u> options	ons, warra s, warrani	ants or ot ts or othe	ther rights ex er rights exer	ercisable cisable to	to acquire acquire a	e additic additiona	nal secur al securitio	ities of the i	e issuer. issuer.

ITEM 8 – COMPENSATION INFORMATION								
Provide information for each person (as defined in NI 45-106) to whom the issuer dire with the distribution. <b>Complete additional copies of this page if more than one p</b>								
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.       3								
a) Name of person compensated and registration status								
Indicate whether the person compensated is a registrant.								
If the person compensated is an individual, provide the name of the individual.								
Full legal name of individual       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 Foremost Capital Corporation	on							
Firm NRD number 4 3 3 9 0	(if applicable)							
Indicate whether the person compensated facilitated the distribution through a fundin X No Yes								
b) Business contact information								
If a firm NRD number is not provided in Item 8(a), provide the business contact inform	nation of the person being compensated.							
Street address 459-409 Granville Street								
Municipality Vancouver	Province/State BC							
Country Canada Posta	code/Zip code V6C 1T2							
Email address ynieken@foremostcapital.com Tele	phone number 604-899-1144							
c) Relationship to issuer or investment fund manager								
Indicate the person's relationship with the issuer or investment fund manager (select of of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the put Connected with the issuer or investment fund manager								
Insider of the issuer (other than an investment fund)								
Director or officer of the investment fund or investment fund manager								
Employee of the issuer or investment fund manager								
X 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, o	liscounts or other compensation. Do not report payments for							
services incidental to the distribution, such as clerical, printing, legal or accounting ser report on, internal allocation arrangements with the directors, officers or employees of								
Cash commissions paid \$2,000								
Value of all securities distributed	Security code 1 Security code 2 Security code 3							
as compensation <sup>4</sup> Nil Security codes	W N T							
Describe terms of warrants, options or other rights Describe terms of warrants, options or other rights								
Other compensation <sup>5</sup> Describe								
Total compensation paid \$2,000								
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 Indicate the security codes for all securities distributed as compensation, <u>including</u> options, warrants of	s or other rights exercisable to acquire additional securities of the issuer. r other rights exercisable to acquire additional securities of the issuer.							
<sup>5</sup> Do not include deferred compensation.								

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       X       Yes       If yes, indicate number of persons compensated.       3
a) Name of person compensated and registration status
Indicate whether the person compensated is a registrant.           No         X         Yes
If the person compensated is an individual, provide the name of the individual.
Full legal name of individual         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 PI Financial Corp.
Firm NRD number 5 2 9 0 (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 1900-666 Burrard Street
Municipality Vancouver Province/State BC
Country Canada Postal code/Zip code V6C 3N1
Email address laurab@pifinancialcorp.com Telephone number 604-664-2900
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 Part E 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 Insider of the issuer (other than an investment fund) Director or officer of the investment fund or investment fund manager Employee of the issuer or investment fund manager
X 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 amount 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 \$500
Value of all security code 1 Security code 2 Security code 3
Describe terms of warrants, options or other rights Describe terms of warrants, options or other rights
Other compensation <sup>5</sup> Describe
Total compensation paid \$500
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 issue 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.

ITEM 9 – DIRECTORS, EXEC	UTIVE OFFICERS	AND PROM	OTERS OF <sup>-</sup>	THE IS	SUER				
If the issuer is an investment fund,	do not complete Ite	m 9. Proceed t	o ltem 10.						
Indicate whether the issuer is any of th	ne following (select al	l that apply).							
X Reporting issuer in any jurisd	X Reporting issuer in any jurisdiction of Canada								
Foreign public issuer									
Wholly owned subsidiary of a		ny jurisdiction of	of Canada6						
Provide name of reporting issuer									
Wholly owned subsidiary of a foreign public issuer <sup>6</sup>									
Provide name of fo	oreign public issuer								
Issuer distributing eligible for	eign securities only t	o permitted clier	nts <sup>7</sup>						
If the issuer is at least one of the all 6An issuer is a wholly owned subsidiary of a law to be owned by its directors, are beneficia 7Check this box if it applies to the current dist of "eligible foreign security" and "permitted cli	reporting issuer or a forei ally owned by the reportir ribution even if the issue	gn public issuer if a ng issuer or the fore r made previous dis	ll of the issuer's eign public issuer	outstandir , respectiv	ng voting secu vely.				
If the issuer is none of the a	bove, check this bo	x and complete	e Item 9(a) –	(c).					
a) Directors, executive offi	cers and promoter	s of the issue	r						
Provide the following information for the territory, otherwise state the country. I							da, sta	ite the pro	ovince or
Organization or company name	Family name	First given name	Secondary given resid names jurisdi		residential (sel		elationship to issuer select all that apply)		
					Province or country		D	0	Р
			-						
b) Promoter information									
If the promoter listed above is not an i locations within Canada, state the pro Officer.									
Organization or company name	Family name	First given name	Secondary given				er cable)		
			names	Province or country				0	
c) Residential address of e	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	Shaffer	Laara				
	Family name	First given name	e	iven names		
Title	Corporate Secretary	ary				
Name of issuer/underwriter/ investment fund manager	Alta Vista Ventures Ltd.					
Telephone number	604-669-5762	Email address	timelir	efilings@g	mail.com	
Signature	"Laara Shaffer"	Shaffer" Date		10	05=89-	
		-	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 ind	ividual certifying the repo	ort				
Full legal name	Tupper	Lee		Scott	Title	Solicitor
	Family name	First given name	Secondary giv names	ven		
Name of company	Tupper Jonsson Yeado	n, Barristers an	d Solicitors			
Telephone number	604-640-6358		Email address	tupper	@securiti	eslaw.bc.ca

#### 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 1 TO FORM 45-106F1 (CONFIDENTIAL PURCHASER INFORMATION)

# Schedule 1 must be filed in the format of an Excel spreadsheet in a form acceptable to the securities regulatory authority or regulator.

The information in this schedule 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.

#### a) General information (provide only once)

- 1. Name of issuer
- 2. Certification date (YYYY-MM-DD)

Provide the following information for each purchaser that participated in the distribution. For each purchaser, create separate entries for each distribution date, security type and exemption relied on for the distribution.

#### b) Legal name of purchaser

- 1. Family name
- 2. First given name
- 3. Secondary given names
- 4. Full legal name of non-individual (if applicable)

#### c) Contact information of purchaser

- 1. Residential street address
- 2. Municipality
- 3. Province/State
- 4. Postal code/Zip code
- 5. Country
- 6. Telephone number
- 7. Email address (if available)

#### d) Details of securities purchased

- 1. Date of distribution (YYYY-MM-DD)
- 2. Number of securities
- 3. Security code
- 4. Amount paid (Canadian \$)

#### e) Details of exemption relied on

- 1. Rule, section and subsection number
- 2. If relying on section 2.3 [*Accredited investor*] of NI 45-106, provide the paragraph number in the definition of "accredited investor" in section 1.1 of NI 45-106 that applies to the purchaser. (*select only one*)
- 3. If relying on section 2.5 [Family, friends and business associates] of NI 45-106, provide:
  - a. the paragraph number in subsection 2.5(1) that applies to the purchaser (select only one); and
  - b. if relying on paragraphs 2.5(1)(b) to (i), provide:
    - i. the name of the director, executive officer, control person, or founder of the issuer or affiliate of the issuer claiming a relationship to the purchaser. (*Note: if Item 9(a) has been completed, the name of the director, executive officer or control person must be consistent with the name provided in Item 9 and Schedule 2.*)
    - ii. the position of the director, executive officer, control person, or founder of the issuer or affiliate of the issuer claiming a relationship to the purchaser.
- 4. If relying on subsection 2.9(2) or, in Alberta, New Brunswick, Nova Scotia, Ontario, Québec, or Saskatchewan, subsection 2.9(2.1) [*Offering memorandum*] of NI 45-106 and the purchaser is an eligible investor, provide the paragraph number in the definition of "eligible investor" in section 1.1 of NI 45-106 that applies to the purchaser. (*select only one*)

#### f) Other information

- 1. Is the purchaser a registrant? (Y/N)
- 2. Is the purchaser an insider of the issuer? (Y/N) (not applicable if the issuer is an investment fund)
- 3. Full legal name of person compensated for distribution to purchaser. *If the person compensated is a registered firm, provide the firm NRD number only. (Note: the name must be consistent with name of the person compensated as provided in Item 8.)*

### **INSTRUCTIONS FOR SCHEDULE 1**

Any securities issued as payment for commissions or finder's fees must be disclosed in Item 8 of the report, not in Schedule 1.

**Details of exemption relied on** – When identifying the exemption the issuer relied on for the distribution to each purchaser, refer to the rule, statute or instrument in which the exemption is provided and identify the specific section and, if applicable, subsection or paragraph. For example, if the issuer is relying on an exemption in a National Instrument, refer to the number of the National Instrument, and the subsection or paragraph number of the specific provision. If the issuer is relying on an exemption in a local blanket order, refer to the blanket order by number.

For exemptions that require the purchaser to meet certain characteristics, such as the exemption in section 2.3 [*Accredited investor*], section 2.5 [*Family, friends and business associates*] or subsection 2.9(2) or, in Alberta, New Brunswick, Nova Scotia, Ontario, Québec, or Saskatchewan, subsection 2.9(2.1) [*Offering memorandum*] of NI 45-106, provide the specific paragraph in the definition of those terms that applies to each purchaser.

**Reports filed under paragraph 6.1(1)(j)** [*TSX Venture Exchange offering*] of NI 45-106 – For reports filed under paragraph 6.1(1)(j) [*TSX Venture Exchange offering*] of NI 45-106, Schedule 1 needs to list the total number of purchasers by jurisdiction only, and is not required to include the name, residential address, telephone number or email address of the purchasers.

# 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.

Complete the following only if Item 9(a) is required to be completed. This schedule also requires information to be provided about control persons of the issuer at the time of the distribution.

The information in this schedule 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.

#### a) General information (provide only once)

- 1. Name of issuer
- 2. Certification date (YYYY-MM-DD)

#### b) Business contact information of Chief Executive Officer (if not provided in Item 10 or 11 of report)

- 1. Email address
- 2. Telephone number

#### c) Residential address of directors, executive officers, promoters and control persons of the issuer

Provide the following information for each individual who is a director, executive officer, promoter or control person of the issuer at the time of the distribution. If the promoter or control person is not an individual, provide the following information for each director and executive officer of the promoter and control person. (Note: names of directors, executive officers and promoters must be consistent with the information in Item 9 of the report, if required to be provided.)

- 1. Family name
- 2. First given name
- 3. Secondary given names
- 4. Residential street address
- 5. Municipality
- 6. Province/State
- 7. Postal code/Zip code
- 8. Country
- 9. Indicate whether the individual is a control person, or a director and/or executive officer of a control person (*if applicable*)

#### d) Non-individual control persons (if applicable)

If the control person is not an individual, provide the following information. For locations within Canada, state the province or territory, otherwise state the country.

- 1. Organization or company name
- 2. Province or country of business location

#### **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 Iqaluit, Nunavut XOA 0H0 Telephone: (867) 975-6590 Facsimile: (867) 975-6594

#### **Ontario Securities Commission**

20 Queen Street West, 22<sup>nd</sup> 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.qc.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