# Form 45-106F1 Report of Exempt Distribution

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 A	ND OTHER IDENT	IFIERS						
Provide the following information about	the issuer, or if the issuer i	s an investment fund, about t	he fund.					
Full legal name	Miramont Resources	s Corp.						
Previous full legal name								
If the issuer's name changed in	n the last 12 months, provi	de most recent previous legal	name.					
Website	www.miramontresou	irces.com (if a	pplicable)					
If the issuer has a legal entity identifier, p	provide below. Refer to Par	t B of the Instructions for the	definition of "legal entity identif	ier".				
Legal entity identifier								
If two or more issuers distributed a single	e security, provide the full l	egal name(s) of the co-issuer(	's) other than the issuer named o	above.				
Full legal name(s) of co-issuer(s)		(if a	pplicable)					
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								
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		Wehsite		(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 in your reasonable judgment most closely corresponds to the issuer's primary business activity.							
NAICS industry code 2 1 2 2 0							
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  Cryptoassets							
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 4 0 0 7 3							
TO A TOO IT YOU, PIONIC DESTRICTIONS HAMBON TO							
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.							
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 CUSIP number							
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							
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, 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 manage	er does not have a firm NRD number, provide the head office contact information of the investment fund manager.							
Street Address								
Municipality	Province/State Province/State							
Country	Postal code/Zip code							
Telephone number	Website (if applicable)							
b) Type of investme	ent fund							
Type of investment fund that most accurately identifies the issuer (select only one).    Money market								
	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.							
Date of formation	Financial year-end MM DD MM DD							
d) Reporting issuer	status of the investment fund							
Is the investment fund a repor	ting issuer in any jurisdiction of Canada? No Yes							
If yes, select the jurisdictions of Canada in which the investment fund is a reporting issuer.  All AB BC MB NB NL NT  NS NU ON PE QC SK YT								
e) Public listing stat	us of the investment fund							
If the investment fund has a CUSIP number, provide below (first 6 digits only).  CUSIP number  If the investment fund is publicly listed, provide the name of the exchange on which the investment fund's 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	The a trading factory such as, for example, an automated trading system.							
f) Net asset value (	(NAV) of the investment fund							
Select the NAV range of the in \$0 to under \$5M \$100M to under \$500M	systement fund as of the date of the most recent NAV calculation (Canadian \$).  \$5M to under \$25M \$25M to under \$100M  \$500M to under \$1B \$1B or over Date of NAV calculation:  YYYY MM DD							

## 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	,
u,	,	

Select the currency or currencies in which the distribution was made. All dollar amounts provided in the report must be in Canadian dollars.

\/	O	110 -1-11	<b>—</b>	Otto ( -ll )	
ΙXΙ	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	2019 01 31 End date		End date	2019	01	31	
	YYYY	MM	DD		YYYY	MM	DD

#### c) Detailed purchaser information

#### Complete Schedule 1 of this form for each purchaser and attach the schedule to the completed report.

#### 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 (if applicable)	Description of security	Number of securities	Single or lowest price	Highest price	Total amount
U	В	S		Units, each Unit consisting of 1 CMS and 1 WNT	4,716,498	\$0.35	\$0.35	\$1,650,774.30

#### 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.

_	Convertible /		Underlying security code		-	Exercis (Canad	e price dian \$)	Expiry date		
sec	urity c	ode	sec	curity c	ode	Lowest	Highest	(YYYY-MM-DD)	ratio	, ,
W	Ν	Т	С	М	S	\$0.50	\$0.50	2021-01-31	1:1	

#### 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 unique purchas ers <sup>2a</sup>	Total amount (Canadian \$)
British Columbia	NI 45-106 2.3 [Accredited investor]	9	\$458,474.80
British Columbia	NI 45-106 2.5 [Family, friends and business associates]	2	\$54,250
Ontario	NI 45-106 2.3 [Accredited investor]	4	\$175,499.8
Saskatchewan	NI 45-106 2.5 [Family, friends and business associates]	2	\$31,500
Alberta	NI 45-106 2.3 [Accredited investor]	1	\$12,075
Thailand	NI 45-106 2.3 [Accredited investor]	1	\$35,000
Switzerland	NI 45-106 2.3 [Accredited investor]	1	\$24,500
Germany	NI 45-106 2.3 [Accredited investor]	1	\$52,500
USA	NI 45-106 2.3 [Accredited investor]	3	\$89,999.70
USA	NI 45-106 2.5 [Family, friends and business associates]	1	\$24,500

Austria	NI 45-106 2.3 [Accredited investor]	3	\$296,450		
China	ina NI 45-106 2.3 [Accredited investor]				
Malta	NI 45-106 2.3 [Accredited investor]	1	\$7,000		
Singapore	NI 45-106 2.3 [Accredited investor]	1	\$19,950		
Australia	NI 45-106 2.3 [Accredited investor]	1	\$31,500		
Netherlands	NI 45-106 2.3 [Accredited investor]	1	\$70,000		
Belgium	NI 45-106 2.3 [Accredited investor]	1	\$87,500		
Cayman Islands	NI 45-106 2.3 [Accredited investor]	1	\$105,000		
British Virgin Islands	NI 45-106 2.3 [Accredited investor]	1	\$40,075		
	stributed	\$1,650,774.30			
	36				

<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.

#### 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>quot;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)	Previous ly filed with or delivere d to regulator ? (Y/N)	Date previously filed or delivered (YYYY-MM-DD)
1.				
2.				
3.				

<sup>&</sup>lt;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 8 - COMPENSA	ATION INFO	RMATION							
Provide information for each pe									
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.  5									
a) Name of person compensated and registration status									
Indicate whether the person cor	mpensated is a re	gistrant.							
If the person compensated is an		de the name of the	individual.		1				
Full legal name of individual  Family name  First given name  Secondary given names									
If the person compensated is no		•	_	iairie	Secon	dary giveri	names		
Full legal name of r	- r	PI Financial Co	-						
_	NRD number	5 2 9	0	(if application	able)				
Indicate whether the person cor				<b>」'''</b>	•	ased port	al.		
b) Business contact i	information								
If a firm NRD number is not pro	ovided in Item 8(a	), provide the busir	ness contact informat	tion of the p	erson being	g compen	sated.		
Street address									
Municipality			Provi	nce/State					
Country			Postal code	Zip code					
Email address			Telephone	e number					
c) Relationship to iss	suer or investme	ent fund manage	er						
Indicate the person's relationship Part B(2) of the Instructions and Connected with the is	the meaning of	"control" in section							
Insider of the issuer (o		,							
Director or officer of the	ne investment fur	nd or investment fu	ınd manager						
Employee of the issue	er or investment f	und manager							
X None of the above									
d) Compensation det	tails								
Provide details of all compensation amounts in Canadian dollars. In payments for services incidenta details about, or report on, interiorsuer.	nclude cash comn I to the distributio	nissions, securities- on, such as clerical,	based compensation, printing, legal or acc	gifts, discou counting ser	unts or othe vices. An is	er compei suer is no	nsation. t requir	Do not report ed to ask for	
Cash commissions paid	\$420.00								
Value of all securities				ity code 1	Security	code 2	Secu	rity code 3	
distributed as compensation <sup>4</sup>		Secu	urity codes W	N T	СМ	l S			
Describe terms o	of warrants, option	ns or other rights	1,200 WNT exer	rcisable at	\$0.35 pe 2021	r CMS u	ntil Jar	nuary 31,	
Other compensation <sup>5</sup>	\$0.00	Describe							
Total compensation paid	\$420.00								
Check box if the person	will or may recei	ive any deferred co	ompensation (describ	oe the terms	s below)				
<sup>4</sup> Provide the aggregate value of all se issuer. Indicate the security codes for the issuer <sup>5</sup> Do not include deferred or	all securities distribu								

# 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.** 

a) Nama of reserve	If ye	ad ragiotratia	ototus								
a) Name of person c		-	status								
Indicate whether the person cor		-									
f the person compensated is ar		de the name of t	he individual.							1	
Full legal name of individu		mily name	F	irst given r	iame		Secondary	, aiven	names	j	
f the person compensated is no		•		_			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	9			
Full legal name of r	· 1	Haywood Se									
_	NRD number	1 6 3	0		(if app	licable)					
Indicate whether the person con  X No Yes				funding <sub>l</sub>			net-basea	d porta	ıl.		
b) Business contact	information										
f a firm NRD number is not pro	ovided in Item 8(a	), provide the bu	siness contact	informat	ion of the	person	being co	mpens	sated.		
Street address											
Municipality				Provi	nce/Sta	:e					
Country			Pos	tal code	/Zip cod	е					
Email address			<b>=</b> т	elephon	e numb	er					
c) Relationship to iss	suer or investm	ent fund mana	ger								
	other than an inv	,	fund manage	ar							
Director or officer of the issue X None of the above  d) Compensation delegrovide details of all compensation delagrounts in Canadian dollars. In coayments for services incidental details about, or report on, inter-	tails  tion paid, or to be nelude cash comm	nd or investment fund manager e paid, to the per nissions, securitie on, such as cleric	son identified es-based comp al, printing, le	in Item 8 ensation, gal or acc	gifts, dis ounting :	counts of services.	r other co An issuer	ompen r is not	sation t requi	. Do n red to	ot repo ask for
Director or officer of the issue X None of the above  d) Compensation del Provide details of all compensation del amounts in Canadian dollars. In payments for services incidenta details about, or report on, interests of the incidental compensation	tails  tion paid, or to be neclude cash commit to the distribution and allocation are	nd or investment fund manager e paid, to the per nissions, securitie on, such as cleric	son identified es-based comp al, printing, le	in Item 8 ensation, gal or acc	gifts, dis ounting :	counts of services.	r other co An issuer	ompen r is not	sation t requi	. Do n red to	ot repo ask for
Director or officer of the Employee of the issue X None of the above d) Compensation del Provide details of all compensation amounts in Canadian dollars. In Cayments for services incidental details about, or report on, interessuer.  Cash commissions paid	tails  tion paid, or to be nelude cash comm	nd or investment fund manager e paid, to the per nissions, securitie on, such as cleric	son identified es-based comp al, printing, le	in Item 8 ensation, gal or acc officers o	gifts, dis counting : or employ	counts of services. A ees of a	r other co An issuer non-indiv	ompen r is not vidual	sation t requi compe	n. Do n red to ensate	ot repo ask for d by th
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Director or officer of the Employee of the issue X None of the above  d) Compensation del C	tails tion paid, or to be nclude cash comn I to the distribution rnal allocation ar. \$11,886.00	nd or investment fund manager e paid, to the per nissions, securitie on, such as cleric rangements with	son identified es-based compal, printing, leather directors, the directors ecurity codes	in Item 8. nensation, gal or acc officers o	gifts, dis counting : r employ ity code 1	services. A sees of a l	r other co	ompen r is not vidual e 2	sation t requi compe Sec	n. Do n red to ensate urity co	ot repo ask for d by th
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Director or officer of the Employee of the issue X None of the above  d) Compensation del Provide details of all compensation details in Canadian dollars. In Canadian dollars, In Canadian dollars and details about, or report on, interests about.  Cash commissions paid Value of all securities distributed as compensation4  Describe terms of Other compensation5  Total compensation paid	tails  tion paid, or to be include cash commit to the distribution and allocation are \$11,886.00  \$11,886.00  \$11,886.00  a will or may rece	nd or investment fund manager  e paid, to the per nissions, securities on, such as cleric rangements with Describe ive any deferred as compensation, ex	son identified es-based compal, printing, let the directors, ecurity codes a 33,960 e compensatio	in Item 8in ensation, gal or accofficers of the warrants on the warrants on the security warrants of the security warrant	gifts, discounting: r employ  ity code 1  N T  xercisab  be the term other right	services. A sees of a sees	r other co An issuer non-indiv curity code M 0.35 per 21	e 2 S CMS	sation t requi compe Seco	n. Do n red to rensate urity cc  Janu  security	ot repo ask for d by th
Director or officer of the Employee of the issue X None of the above  d) Compensation details of all compensation details in Canadian dollars. In Canadian dollars, and the compensation of the compensation o	tails  tion paid, or to be include cash common all to the distribution and allocation are \$11,886.00  \$11,886.00  \$11,886.00  \$11,886.00  a will or may rece the compensation.	nd or investment fund manager  e paid, to the per nissions, securities on, such as clericarangements with Describe on the per nissions or other rights of the per nissions or other rights or other rights.	son identified es-based compal, printing, let the directors, ecurity codes a 33,960 e compensatio	in Item 8in ensation, gal or accofficers of the warrants on the warrants on the security warrants of the security warrant	gifts, discounting: r employ  ity code 1  N T  xercisab  be the term other right	services. A sees of a sees	r other co An issuer non-indiv curity code M 0.35 per 21	e 2 S CMS	sation t requi compe Seco	n. Do n red to rensate urity cc  Janu  security	ot repo ask for d by th

a) Name of person of	compensated a	nd registration st	tatus					
Indicate whether the person co								
If the person compensated is a	n individual, prov	ride the name of the	e individual.					
Full legal name of individu		,						
	Fa	amily name	Fi	st given r	name	Secor	ndary giver	n names
If the person compensated is n	ot an individual, ¡	provide the followin	ng informatio	n.				
Full legal name of	non-individual	Sprott Capital	Partners					
Firm	NRD number	2 9 0	7 0		(if appl	cable)		
Indicate whether the person co	mpensated facilit	tated the distributio	n through a	funding <sub>l</sub>	portal or a	n internet-b	ased port	tal.
b) Business contact	information							
If a firm NRD number is not pr Street address	ovided in Item 8(	a), provide the busi	ness contact	informat	ion of the	person bein	g comper	nsated.
Municipality			1	Provi	nce/State			
· .			] ]					
Country   Email address					/Zip code e numbe			
c) Relationship to is:				ТОРПОП	- mannibe			
Director or officer of the issuer (  Employee of the issue X  None of the above	he investment fu	ind or investment fo	und manage					
d) Compensation de	tails							
Provide details of all compensor amounts in Canadian dollars. I payments for services incidente details about, or report on, inte issuer. Cash commissions paid	nclude cash comi al to the distributi	missions, securities- ion, such as clerical,	-based comp , printing, leg	ensation, al or acc	gifts, disc counting se	ounts or oth ervices. An is	er compe ssuer is no	ensation. Do not repo ot required to ask for
Value of all securities	700000	<u></u>		Secur	ity code 1	Security	code 2	Security code 3
distributed as		Sec	curity codes	W	N T	C N		Security code 3
compensation <sup>4</sup>		J						
Describe terms	of warrants, optic	ons or other rights	1,710 W	VT exe	cisable a	it \$0.35 pe 2021	r CMS ι	until January 31,
Other compensation <sup>5</sup>	\$0.00	Describe						
Total compensation paid	\$598.50							
Check box if the person	n will or may rece	eive any deferred c	ompensatior	(describ	e the terr	ns below)		
<sup>4</sup> Provide the aggregate value of all s issuer. Indicate the security codes fo the issuer. <sup>5</sup> Do not include deferred o	r all securities distrib							
ITEM 8 – COMPENS	ATION INE	ORMATION.						
Provide information for each p	erson (as defined	in NI 45-106) to w						
connection with the distribution Indicate whether any compens						rson was, o	r will be,	, compensated.
No X Yes		es, indicate numbe				5		
a) Name of person of	compensated a	nd registration st	tatus					
	mpensated is a re				·		·	

No

X Yes

Full legal name of individual		e individual.			]
<b>.</b>	Family name	First given nam	e Sec	condary given names	<b>-</b> S
the person compensated is not a	n individual, provide the followir	ng information.			
Full legal name of nor	ı-individual Industrial Alliai	nce Securities Inc.			
Firm NF	RD number 1 5 4	0 0	if applicable)		
dicate whether the person compe X No Yes	ensated facilitated the distributio	on through a funding por	al or an interne	t-based portal.	
b) Business contact info	ormation				
a firm NRD number is not provid Street address	led in Item 8(a), provide the busi	iness contact information	of the person be	eing compensated.	
Municipality		Province	e/State		
Country		Postal code/Zi	o code		
Email address	<u> </u>	Telephone r	umber		
	r or investment fund manag	<u> </u>			
Insider of the issuer (other	er or investment fund manager er than an investment fund) investment fund or investment for or investment fund manager	und manager			
X None of the above					
d) Compensation detail	S				
mounts in Canadian dollars. Inclu nyments for services incidental to etails about, or report on, interna suer.	the distribution, such as clerical, l allocation arrangements with t	, printing, legal or accou	nting services. Ar	n issuer is not requ	ired to ask for
' <u></u>	\$11,999.99				
Value of all securities distributed as	Sec	Security codes NA N			curity code 3
compensation <sup>4</sup>		WN	T C	M S	
		0.4.0000.14/4.17		- 0140 (1	
Describe terms of w	varrants, options or other rights	34,286 WN1 exer	cisable at \$0.3 31, 202		January
Describe terms of w	\$0.00 Describe	34,286 WN1 exer			January
Other compensation <sup>5</sup>		34,286 WN1 exer			January
Other compensation <sup>5</sup> Total compensation paid	\$0.00 Describe		31, 202	1	January
Other compensation <sup>5</sup> Total compensation paid  Check box if the person wi  rovide the aggregate value of all securiver. Indicate the security codes for all	\$0.00 Describe  \$11,999.99  If or may receive any deferred continuous distributed as compensation, exclusive distributed as compensation.	ompensation (describe t	31, 202  the terms below)  er rights exercisable	1 e to acquire additional	securities of the
Other compensation <sup>5</sup> Total compensation paid  Check box if the person wi  rovide the aggregate value of all secur- uer. Indicate the security codes for all e issuer. Do not include deferred comp	\$0.00 Describe \$11,999.99  If or may receive any deferred continuous distributed as compensation, exclusive distributed as compensation densation.	ompensation (describe t	31, 202  the terms below)  er rights exercisable	1 e to acquire additional	securities of the
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Family name

First given name

Secondary given names

If the person compensated is no	ot an individual, p	provide the follow	ving informatio	n.										
Full legal name of	-	Canaccord G	-	<u> </u>										
Firm	NRD number				(i <sup>†</sup>	f applic	cable)							
Indicate whether the person co.  No Yes	mpensated facilita	nted the distribut	tion through a	unding					base	d port	al.			
b) Business contact	information													
If a firm NRD number is not pro	ovided in Item 8(a	), provide the bu	ısiness contact	inform	ation o	of the p	oerson	ı beii	ng co	omper	isated.			1
Municipality			$\overline{}$	Pro	vince	/State				<del>-</del>				1
Country			Post	al cod	le/Zip	code		_	_					î
Email address			≓ ⊤∈	elepho	ne nı	umber								i
c) Relationship to iss	suer or investm	ent fund mana												1
Indicate the person's relationsh Part B(2) of the Instructions and Connected with the is Insider of the issuer ( Director or officer of t Employee of the issue None of the above d) Compensation de Provide details of all compensa	d the meaning of ssuer or investment other than an investment fur er or investment fur er or investment for tails	"control" in section of the fund manager estment fund) and or investment fund fund manager	ion 1.4 of NI 45	-106 fc	or the <sub>l</sub>	purpos	es of a	com	pletir	ng this	s section	on.		
amounts in Canadian dollars. I payments for services incidenta details about, or report on, inte issuer.  Cash commissions paid	Include cash comn al to the distributio	nissions, securitie on, such as cleric	es-based compe al, printing, leg	ensatio al or a	n, gift: ccount	s, disco ting sei	ounts o rvices.	or ot	her o	compe er is no	ensatio ot requ	n. Do n uired to	ot repo ask for	r
Value of all securities	\$3,130.00	1		Sec	urity co	nde 1	Se	ecurit	tv cod	de 2	Se	curity co	nde 3	.
distributed as compensation <sup>4</sup>		Se	ecurity codes	W	N	T	С	Т	M	S				<u> </u>
Describe terms of	of warrants, optior	ns or other right:	s 9,000 Wi	VT ex	ercisa	able at	t \$0.3 202		er C	MS t	ıntil J	anuary	/ 31,	
Other compensation <sup>5</sup>	\$0.00	Describe	е											]
Total compensation paid	\$3,150.00													
Check box if the persor	າ will or may recei	ive any deferred	compensation	(desci	ibe th	ie term	s belo	ow)						,
<sup>4</sup> Provide the aggregate value of all so issuer. Indicate the security codes fo the issuer. <sup>5</sup> Do not include deferred contains the issuer contains the issuer contains the issuer contains the include deferred contains the issuer contains the	r all securities distribu													
тем 9 – Directors, E					HE I	SSUE	R							
f the issuer is an investment fu	ınd, do not comp	lete Item 9. Pro	oceed to Item	10.										
ndicate whether the issuer is any	_		at applies – if n	าore th	an on	e appli	es, sel	lect o	only	one).				
X Reporting issuer in any ju	ırisdiction of Cana	ada												
Foreign public issuer				۰										
Wholly owned subsidiary  Provide n	of a reporting iss name of reporting i		liction of Cana	¹aº										
Wholly owned subsidiary  Provide name	of a foreign public i													
Issuer distributing only el	igible foreign sec	urities and the d	listribution is to	permi	tted cl	ients c	nly <sup>7</sup>							

If the issuer is at least one of the above, do not complete Item 9(a) – (c). Proceed to Item 10.

lav 7C	n issuer is a wholly owned subsidiary of a v to be owned by its directors, are benefici heck this box if it applies to the current dis "eligible foreign security" and "permitted cl	ally owned by the reportir tribution even if the issuel	ng issuer or the forei r made previous dist	gn public issuer, respecti	vely.			, ,
	If the issuer is none of the a			Item 9(a) – (c).				
	a) Directors, executive offi	cers and promoter	s of the issuer					
	ovide the following information for rritory, otherwise state the country.			·		da, stat	e the pro	ovince or
	Organization or company name	ganization or company name Family name		Secondary given names	Business location of non-individual or residential jurisdiction of individual	Relationship to issuer (select all that apply)		
					Province or country	D	0	Р
	<ul><li>b) Promoter information</li></ul>							

If the promoter listed above is not an individual, provide the following information for each director and executive officer of the promoter. For locations within Canada, state the province or territory, otherwise state the country. For "Relationship to promoter", "D" – Director, "O" – Executive Officer.

Organization or company name	Family name	First given	Secondary given	Residential jurisdiction of individual		o to promoter oth if applicable)
			names	Province or country	D	0

#### 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, 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/investment fund manager, 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/ investment fund manager/agent	Miramont Resources Corp.					
Full legal name	Hodges	Leah				
	Family name	First given name		Secondary given names		
Title	Corporate Secretary					
Telephone number	604.377.0403	Email address	Ihodges@miramontresources.com		sources.com	
Signature	/s/ "Leah Hodges"	Date	Date 2019 01 31		31	
		•	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.									
X Same as indi	vidual certifying the re	port							
Full legal name				Title					
-	Family name	First given name	Secondary given names	<u> </u>		_			
Name of company									

#### Notice - Collection and use of personal information

Email address

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.

Telephone number

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.