Form 45-106F1 Report of Exempt Distribution

Item 1 – Report Type	ITEM 1 – REPORT TYPE							
X New report								
Amended report If amended, provide filing date of report that is being amended.								
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 IDEN								
Provide the following information about the issuer, or if the issuer								
Full legal name Athena Gold Corpo								
Previous full legal name If the issuer's name changed in the last 12 months, pro-	vide most recent previous legal name.							
Website https://athenagoldo	corp.com (if applicable)							
If the issuer has a legal entity identifier, provide below. Refer to Po	art B of the Instructions for the definition of "legal entity identifier".							
Legal entity identifier								
If two or more issuers distributed a single security, provide the full	l legal name(s) of the co-issuer(s) other than the issuer named above.							
Full legal name(s) of co-issuer(s)	(if applicable)							
ITEM 4 – UNDERWRITER INFORMATION								
If an underwriter is completing the report, provide the underwriter	r'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 Street address	head office contact information of the underwriter.							
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 in your reasonable judgment most closely corresponds to the issuer's primary business activity.								
NAICS industry code 2 1 2 2 2 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. Image: Image: Image of the stage of the stage of operation is the issuer's stage of operation. Image: Image of the stage of the stage of the stage of operation is the stage of operation. Image: Image of the stage of the stage of the stage of the stage of operation. Image: Image of the stage of the								
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 SEDAR profile? No x Yes If yes, provide SEDAR profile number 0 0 5 0 6 7 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 Financial year-end								
YYYY MM DD 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								
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 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 investr	nent fund, provide the following information.						
	manager information						
Full legal name							
Firm NRD Number	(if applicable)						
16 th - :							
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 investme	int tund						
Type of investment fund that Money market Alternative strate	most accurately identifies the issuer (select only one). Equity Fixed income Balanced egies Cryptoasset						
Indicate whether one or both of the following apply to the investment fund. Invests primarily in other investment fund issuers Is a UCITs Fund ¹ ¹ 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	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						
Is the investment fund a repo	rting issuer in any jurisdiction of Canada? No Yes						
If yes, select the jurisdictions of All	of 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	tus 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							
f) Net asset value (NAV) of the investment fund							
Select the NAV range of the investment fund as of the date of the most recent NAV calculation (Canadian \$). \$0 to under \$5M \$5M to under \$25M \$25M to under \$100M \$100M to under \$500M \$500M to under \$1B \$1B or over Date of NAV calculation: YYYY MM DD							

ITEM 7 – INFORMATION ABOUT THE DISTRIBUTION

purch conne in Scl	nasers ection hedule	resider with the second	nt in that jui he distributio he report.	risdicti	on of Canada	only. Do not	in a jurisdiction of include in Item 7 s n 8. The informati	ecurities is	sued a	s payment of	^f commission	s or finder's fees i	in
	a) Currency												
	Select the currency or currencies in which the distribution was made. All dollar amounts provided in the report must be in Canadian dollars. x Canadian dollar US dollar Euro Other (describe)												
	b)	Distrib	ution date	(s)									
date	as bo	th the s		d dates	. If the report		filed for securities of for securities distri						
			Start date		2023 04 YYY MM	4 24 DD	E	nd date	2023 YY	-	24 DD		
	c)	Detaile	ed purchas	ser inf	ormation								
						ch purchase	r and attach th	e schedu	le to t	the comple	eted report.		
	d)	Types	of securiti	ies dis	stributed								
							on a per security b -digit CUSIP numl						te the
					,			, and the second s			Canadian		1
	Secur	itv	CUSIP num	nber		D	.,	Numb	er of	Single or	Highest		1
	code	, I	(if applicab			Description of s	non share and one	secur	ities	lowest price	price	Total amount	4
U	В	S	04686B1	08		re purchase wa		9,064	,572	0.07	0.07	634,520.04	
													1
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If any	right	ts (e.g. 1	warrants, op	otions)	were distribu		e exercise price an						e
			stributea, pro	oviae t			cribe any other te	rms for ea	cn conv	ertible/exchi	angeable sec	urity.	-
e	xchan	rtible / geable / code	Underly security o			se price dian \$) Highest	Expiry date (YYYY-MM-DD)	Conver ratio		Describ	be other terms	(if applicable)	
V	/ N	ΙТ	C M	S	0.10	0.10	2025-04-24	1:1					7
	f)	Summ	any of the	dictrik	oution by jur	risdiction and	devemption						
State purch distri	the to the to bution	otal dol resides n in a ju	lar amount and for each irisdiction o	of secu h exen f Cana	urities distribu nption relied c rda, include di	ited and the n on in Canada ; istributions to	umber of purchase for that distribution purchasers residen	n. Howeve nt in that ju	r, if an urisdict	issuer locate ion of Canad	d outside of (la only.	Canada completes	s a
purch jurisa	naser liction	resides,	if a purcha	ser res	ides in a juriso	diction of Can	where a purchaser ada, and (iii) each	exemption					
Forji		<u>tions и</u> nce or	utnin Canad	ia, stat			otherwise state the	country.	Numbo	r of unique			1
		intry			Exe	mption relied or	1		purcl	hasers ^{2a}	Total amou	int (Canadian \$)	
	BC Sec. 2.3 of NI 45-106 1 21,000.00						1						
	BC Sec. 2.5 of NI 45-106							1		350,000.00	4		
	Alberta Sec. 2.3 of NI 45-106						1		52,500.00	4			
0	Ontario Sec. 2.3 of NI 45-106 7 211,020.04						4						
												004 500 0	4
					_		tal dollar amount					634,520.04	-
2aln or	lculati	na the ru	imber of union				of unique purcha naser only once. Joint			10 counted as on	e nurchasor		
11 00	iouiulii	.g alo 110		10 puiol				. puroriusors	indy be				

^{2b}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.³ 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	

³"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 - 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. 3								
a) Name of person compensated and registration status								
Indicate whether the person compensated is a registrant. No x Yes Yes 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 CASTLEWOOD CAPITAL CORPORATION								
Firm NRD number 7 5 7 3 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								
Municipality Province/State								
Country Postal code/Zip code								
Email address Telephone number								
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 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 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, 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 \$5,758.20								
Value of all securities Security code 1 Security code 2 Security code 3								
distributed as Security codes W N T								
Describe terms of warrants, options or other rights 189,403 broker warrants each exercisable for one common share of the Issuer a \$0.10 per share until April 24, 2025								
Other compensation ⁵ Describe								
Total compensation paid\$5,758.20								
Check box if the person will or may receive any deferred compensation (describe the terms below)								
⁴ 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. ⁵ 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. 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. 3								
e) 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. If the person compensated is not an individual, provide the following information.								
Full legal name of non-individual ECHELON WEALTH PARTNERS INC.								
Firm NRD number 3 2 4 2 0 (if applicable)								
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.								
f) 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								
Municipality Province/State								
Country Postal code/Zip code								
Email address Telephone number								
g) 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 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.								
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								
h) 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 \$1,260.00								
Value of all securities distributed as componention ⁴								
Describe terms of warrants, entions or other rights 18,000 broker warrants each exercisable for one common								
Other compensation ⁵ Describe Share of the Issuer a \$0.10 per share until April 24, 2025								
Total compensation paid \$1,260.00								
Check box if the person will or may receive any deferred compensation (describe the terms below)								
⁴ 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.								
⁵ 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. 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. 3								
a) Name of person compensated and registration status								
Indicate whether the person compensated is a registrant. No x Yes Yes 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 POLLITT & CO. INC.								
Firm NRD number 2 7 6 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								
Municipality Province/State								
Country Postal code/Zip code								
Email address Telephone number								
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 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								
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, 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 \$903.00								
Value of all security code 2 Security code 3 Security code 2 Security code 3								
distributed as compensation ⁴ Security codes W N T								
Describe terms of warrants, options or other rights 12,900 broker warrants each exercisable for one common share of the Issuer a \$0.10 per share until April 24, 2025								
Other compensation ⁵ Describe								
Total compensation paid \$903.00								
Check box if the person will or may receive any deferred compensation (describe the terms below)								
⁴ 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 the security codes for all securities distributed as compensation, <u>including</u> options, warrants or other rights exercisable to acquire additional securities of the security codes for all securities distributed as compensation.								
the issuer. ⁵ Do not include deferred compensation.								

11	ITEM 9 – DIRECTORS, EXECUTIVE OFFICERS AND PROMOTERS OF THE ISSUER										
lf	If the issuer is an investment fund, do not complete Item 9. Proceed to Item 10.										
In	Indicate whether the issuer is any of the following (select the one that applies – if more than one applies, select only one).										
	x Reporting issuer in any jurisdiction of Canada										
	Foreign public issuer			. (O							
	Wholly owned subsidiary of a reporting issuer in any jurisdiction of Canada ⁶										
	Wholly owned subsidiary of a	ı foreign public issue	r ⁶								
	Provide name of fo	oreign public issuer									
	Issuer distributing only eligibl	e foreign securities a	and the distribut	tion is to permi	itted clie	nts only ⁷					
6A Iav ™C	the issuer is at least one of the all n issuer is a wholly owned subsidiary of a w to be owned by its directors, are benefici check this box if it applies to the current disl "eligible foreign security" and "permitted cl	reporting issuer or a fore ally owned by the reporti ribution even if the issue	ign public issuer if a ng issuer or the for r made previous di	all of the issuer's eign public issuer	outstandin r, respectiv	ig voting secu rely.					
	If the issuer is none of the a	bove, check this bo	x and complet	e Item 9(a) –	(c).						
	a) Directors, executive offi	cers and promoter	rs of the issue	r							
	rovide the following information for rritory, otherwise state the country. I							da, sta	ite the pro	ovince or	
	Organization or company name	Family name	First given name	-	Secondary given names names Business lo non-indivi resider jurisdict indivic		ividual or iss dential (selec iction of an		issuer	ct all that	
						Province or country		D	0	Р	
									_		
	b) Promoter information										
lo	the promoter listed above is not an cations within Canada, state the pro fficer.										
	Organization or company name Family name First given Secondary given individual Relationship to promoter (select one or both if applicable)										
			name	names		vince or ountry	D		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, 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	ATHENA GOLD CORPORATION						
Full legal name	Power	Power John Casey					
	Family name	First given nam	e	Secondary given names			
Title	Chief Executive Officer, President and Director						
Telephone number	707-291-6198	Email address	ess johnpower@athenagoldcorp.com				
Signature	"John C. Power"	Date 2023		05	01		
			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 rep	ort				
Full legal name	Shewchuk	Linda		Gail	Title	Securities Paralegal
	Family name	First given name	Secondary gir names	Secondary given names		
Name of company	0872144 BC Ltd.					
Telephone number	604-306-8854		Email address	lgshev	vchuk@g	mail.com

Notice - Collection and use of personal information

The personal information required under this form is collected on behalf of and used by the securities regulatory authority or regulator under the authority granted in securities legislation for the purposes of the administration and enforcement of the securities legislation.

If you have any questions about the collection and use of this information, contact the securities regulatory authority or regulator in the local jurisdiction(s) where the report is filed, at the address(es) listed at the end of this form.

The attached Schedules 1 and 2 may contain personal information of individuals and details of the distribution(s). The information in Schedules 1 and 2 will not be placed on the public file of any securities regulatory authority or regulator. However, freedom of information legislation may require the securities regulatory authority or regulator to make this information available if requested.

By signing this report, the issuer/underwriter confirms that each individual listed in Schedule 1 or 2 of the report who is resident in a jurisdiction of Canada:

a) has been notified by the issuer/underwriter of the delivery to the securities regulatory authority or regulator of the information pertaining to the individual as set out in Schedule 1 or 2, that this information is being collected by the securities regulatory authority or regulator under the authority granted in securities legislation, that this information is being collected for the purposes of the administration and enforcement of the securities legislation of the local jurisdiction, and of the title, business address and business telephone number of the public official in the local jurisdiction, as set out in this form, who can answer guestions 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.

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 Public official contact regarding indirect collection of information: FOIP Coordinator

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: FOI-privacy@bcsc.bc.ca
Public official contact regarding indirect collection of information: FOI Inquiries

The Manitoba Securities Commission

500 – 400 St. Mary Avenue Winnipeg, Manitoba R3C 4K5 Telephone: 204-945-2561 Toll free in Manitoba: 1-800-655-5244 Facsimile: 204-945-0330 Public official contact regarding indirect collection of information: Director

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 Public official contact regarding indirect collection of information: Chief Executive Officer and Privacy Officer

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 Public official contact regarding indirect collection of information: Superintendent of Securities

Government of the Northwest Territories

Office of the Superintendent of Securities P.O. Box 1320 Yellowknife, Northwest Territories X1A 2L9 Telephone: 867-767-9305 Facsimile: 867-873-0243 Public official contact regarding indirect collection of information: Superintendent of Securities

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 Public official contact regarding indirect collection of information: Executive Director

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 Public official contact regarding indirect collection of information: Superintendent of Securities

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 Public official contact regarding indirect collection of information: Superintendent of Securities

Autorité des marchés financiers

800, rue du 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) Public official contact regarding indirect collection of information: Corporate Secretary

Financial and Consumer Affairs Authority of Saskatchewan

Suite 601 - 1919 Saskatchewan Drive Regina, Saskatchewan S4P 4H2 Telephone: 306-787-5842 Facsimile: 306-787-5899 Public official contact regarding indirect collection of information: Director

Office of the Superintendent of Securities Government of Yukon

Department of Community Services 307 Black Street, 1st Floor P.O. Box 2703, C-6 Whitehorse, Yukon Y1A 2C6 Telephone: 867-667-5466 Facsimile: 867-393-6251 Email: securities@gov.yk.ca Public official contact regarding indirect collection of information: Superintendent of Securities