Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 9390689

ITEM 1 - REPORT TYPE	ITEM 1 - REPORT TYPE									
✓ 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										
 ✓ Issuer (other than an inves										
Underwriter										
ITEM 3 - ISSUER NAME AND OT	THE DENTIFIED									
Provide the following information about the		vestment fund, about the fund								
Full legal name		vestment juna, about the juna.								
Previous full legal name	Tiernage Willing Etc.									
If the issuer's name changed in th		recent previous legal name.								
Website		(if applicable)								
If the issuer has a legal entity identifier, pr	ovide below. Refer to Part B of t	he Instructions for the definition	n of "legal entity identifier".							
Legal entity identifier										
If two or more issuers distributed a single :	security, provide the full legal no	nme(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 INFORM	MATION									
If an underwriter is completing the report,	provide the underwriter's full le	gal name and firm NRD numbe	er.							
Full legal name	•]						
Firm NRD number		(if applicable)		J						
If the underwriter does not have a firm NR	D number, provide the head off	ice contact information of the ι	nderwriter.							
Street address	Street address									
Municipality		Province/State]						
Country		Postal code/Zip code]						
Telephone number		Website		(if applicable)						

TEM 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 mining industry , indicate the stage of operations. This does not apply to issuers that provide services to issuers operating in the mining industry. Select the category that best describes the issuer's stage of operations.									
✓ Exploration									
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: ✓ 0 - 49 — 50 - 99 — 100 - 499 — 500 or more									
c) SEDAR profile number									
Does the issuer have a SEDAR profile?									
No ✓ Yes If yes, provide SEDAR profile number 0 0 0 5 0 8 9 2									
If the issuer does not have 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 jurisdication of Canada? No Yes									
If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer.									
_ AII _ AB _ BC _ MB _ NB _ NL _ NT									
NS NU ON PE QC SK YT									
g) Public listing status									
If the issuer has a CUSIP number, provide below (first 6 digits only)									
CUSIP number									
If the issuer is publicly listed, provide the 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

TEM 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 mand	ager does not have a firm NRD number, provide the head office contact information of the investment fund manager.							
Street address								
Municipality	Province/State							
Country	Postal code/Zip code							
Telephone number	Website (if applicable)							
b) Type of investment	fund							
Type of investment fund tha	t most accurately identifies the issuer (select only one) .							
Money market	Equity Fixed income Balanced							
Alternative strateg	ies Cryptoasset Other (describe)							
Indicate whether one or bot	h of the following apply to the investment fund .							
☐ Invests primarily ir	other investment fund issuers							
☐ Is a UCITs Fund¹								
¹ Undertaking for the Collec (EU) directives that allow c	tive Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union of ollective investment schemes to operate throughout the EU on a passport basis on authorization from one member state.							
c) Date of formation a	nd financial year-end of the investment fund							
Date of forma	Financial year-end MM DD							
d) Reporting issuer st	atus of the investment fund							
Is the investment fund a rep	orting issuer in any jurisdication of Canada?							
If yes, select the jurisdictions	of Canada in which the investment fund is a reporting issuer.							
AII	AB BC MB NB NL NT							
□ NS □	NU ON PE QC SK T							
e) Public listing status	of the investment fund							
If the investment fund has a	CUSIP number, provide below (first 6 digits only)							
	CUSIP number							
	olicly 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								
	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 \$500	DM \$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	

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

✓ 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 2021 02 19

YYYY MM DD

End date 2021 02 19

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 \$			
		curit ode		CUSIP number (if applicable)	Description of security	Number of securities	Single or lowest price	Highest price	Total amount	
	F	Т	U		Flow-Through Units	485,236.00	0.1700		82,490.12	
	U	Ν	Т		Units	3,338,006.00	0.1500		500,700.90	

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 / exchangeable security code			able		derlyir urity c	•		se price idian \$)	Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other items (if applicable)		
	Scounty code			300		5	Lowest	Highest	(**************************************	12.00	200020 Card. Holling (III applicable)		
	W	Ν	Т	C	М	S	0.2000		2024-02-19	1:1			
	W	N	Т	С	М	S	0.2000		2024-02-19	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 ²⁸ purchasers	Total amount (Canadian \$)
British Columbia	NI 45-106 2.3 [Accredited investor]	14	311,199.84
Ontario	NI 45-106 2.3 [Accredited investor]	4	137,719.85
Ontario	NI 45-106 2.5 [Family, friends and business associates]	24	123,730.08
Nova Scotia	NI 45-106 2.5 [Family, friends and business associates]	4	300.00

United States	NI 45-106 2.3 [Accredited investor]	1	10,241.25
	Total dollar amount of se	curities distributed	583,191.02
	Total number of unique purchasers ^{2b}	47	

^{2a} 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. 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)				

^{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.

TEM 8 - COMPENSATION I	NFORMATION									
· · · · · · · · · · · · · · · · · · ·	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 compensatio	Indicate whether any compensation was paid, or will be paid, in connection with the distribution.									
No ✓ Yes	If yes, indicate nur	mber of perso	ons compensated.		6					
a) Name of person compensated and registration status										
Indicate whether the person compe	nsated is a registrant.		☐ No	✓ Ye	s					
If the person compensated is an ind	ividual, provide the nan	ne of the indivi	dual.							
Full legal name of individua	al									
	Family r	name	First giv	ven name			Secondary	given names	;	
If the person compensated is not an	individual, provide the	following infor	mation.							
Full legal name of r	non-individual PI Fir	nancial Corp.								
Firm	NRD number 5	2 9	0		(if a	pplica	ble)			
Indicate whether the person compe	nsated facilitated the di	stribution throu	gh a funding portal o	or an inte	rnet-base	ed port	tal. [✓ No [Yes	
b) Business contact informat	tion									
If a firm NRD number is not provide	ed in Item 8 (a), provide	the business co	entact information of	the perso	on being (compe	nsated.			
Street address										
Municipality				Provi	nce/Stat	te				
Country			Pos	tal code	/Zip cod	le				
Email address			Te	elephon	e numbe	er [
c) Relationship to issuer or in	nvestment fund man	ager								
Indicate the person's relationship we the Instructions and the meaning of							ng of "connec	ted" in Part	B(2) of	
Connect with the issuer o	r investment fund man	ager	Ins	ider of th	e issuer	(other	than an inve	stment fund)	
Director or officer of the in	nvestment fund or inves	stment fund ma	nager	nployee o	of the issu	ıer or i	nvestment fu	ınd manage	r	
✓ None of the above										
d) Compensation details										
Provide details of all compensation particles and compensation particles and compensation and compensation particles allocation arrangements with the distribution, such as allocation arrangements with the distribution.	missions, securities-base s clerical, printing, legal	ed compensation or accounting	n, gifts, discounts or o services. An issuer is	other con not requi	npensatio ired to asi	n. Do	not report pa	yments for s	ervices	
Cash commissions paid	6,930.00			Secu	urity code	1 S	ecurity code 2	Security of	ode 3	
Value of all securities distributed as compensation ⁴		5	Security codes	W	N T					
Describe term:	Describe terms of warrants, options or other rights 46,200 Warrants exercisable at a price of \$0.20 for 36 months									
Other compensation ⁵		Describe								
Total compensation paid	6,930.00									
Check box if the person	n will or may receive an	y deferred con	npensation (describe	the term	s below)					
⁴ Provide the aggregate value of all									nor.	
additional securities of the issuer. In rights exercisable to acquire additional security and the security a			iriues uistridutea as i	compens	ьаиОП, <u>INC</u>	uaing	i opuons, wa	riants of oth	U I	

⁵Do not include deferred compensation.

a) Name of person comp	pensated and regis	stration status										
Indicate whether the person co	mpensated is a regist	rant.	✓ No		Yes							
If the person compensated is a	n individual, provide	the name of the indivi	dual.									
Full legal name of indi	vidual											
		Family name	Fire	st given r	name		Seconda	ry given names				
If the person compensated is not an individual, provide the following information.												
Full legal name	e of non-individual	Bullseye Consultir	ng Inc.									
Firm NRD number (if applicable)												
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. V 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	Street address 904-1205 Howe St											
Municipality	Vancouver			F	Province	e/State	British Colu	ımbia				
Country	Canada		ı	Postal o	code/Zi	p code	V6Z 0B2					
Email address	spencerreidcoulte	r@gmail.com		Telep	hone r	number	6047891135					
c) Relationship to issuer or investment fund manager												
Indicate the person's relationsh								cted" 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. Connect 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 Director or officer of the investment fund or investment fund manager Employee of the issuer or investment fund manager												
<u></u>				Linplo	,00 01 11	10 100001	or investment	and manager				
✓ None of the above												
d) Compensation details	3											
Provide details of all compensa Canadian dollars. Include cash incidental to the distribution, su allocation arrangements with to	commissions, securiti uch as clerical, printin	es-based compensatic g, legal or accounting	n, gifts, discounts services. An issue	or othe er is not	r compe requirea	nsation. I I to ask fo	Do not report p	ayments for services				
Cash commissions p	aid 4	20.00			Security	code 1	Security code	2 Security code 3				
Value of all securiti		<u></u>	Security codes		W	1 T						
distributed as compensation Describe	terms of warrants, o	otions or other rights	2,800 Warran	ts exer	cisable	at a pri	ce of \$0.20 fo	or 36 months				
Other compensation		Describe										
Total compensation pa		20.00										
Check box if the pe	Check box if the person will or may receive any deferred compensation (describe the terms below)											
⁴ Provide the aggregate value	of all securities distri	huted as compensation	on excluding ont	ione w	arrante d	or other ri	ahte evereiesh	le to acquire				
additional securities of the iss rights exercisable to acquire a ⁵ Do not include deferred comp	uer. Indicate the sec additional securities o	urity codes for all sect										

a) Name of person compensated and registration s	tatus											
Indicate whether the person compensated is a registrant. No 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 Couloir Capital Securities Ltd.												
Firm NRD number 6 6 0 4 0 (if applicable)												
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. V 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			Р	rovince	/State							
Country		F	ostal c	ode/Zip	o code							
Email address			Telep	hone n	umber							
c) Relationship to issuer or investment fund manager												
Indicate the person's relationship with the issuer or investmen							ed" 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. Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund)												
<u> </u>		_										
Director or officer of the investment fund or investment	nent fund mar	nager	Employ	ee of the	e issuer	or investment fur	id manager					
✓ None of the above												
d) Compensation details												
Provide details of all compensation paid, or to be paid, to the p												
Canadian dollars. Include cash commissions, securities-based of incidental to the distribution, such as clerical, printing, legal or												
allocation arrangements with the directors, officers or employe							·					
Cash commissions paid 3,150.00				Security	code 1	Security code 2	Security code 3					
Value of all securities	S	ecurity codes		w N	Т							
distributed as compensation ⁴	г	•										
Describe terms of warrants, options or o		21,000 Warra	nts exe	rcisable	e at a p	orice of \$0.20 for	r 36 months					
Other compensation ⁵	Describe											
Total compensation paid 3,150.00												
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 of	compensation	n excludina onti	ons wa	rrants o	r other r	rinhts exercisable	to acquire					
additional securities of the issuer. Indicate the security code rights exercisable to acquire additional securities of the issue	s for all secui											
⁵ Do not include deferred compensation.	<i></i>											

a) Name of person comper	nsated and regis	tration status													
Indicate whether the person comp	ensated is a registr	ant.	,	✓ No			Yes	S							
If the person compensated is an individual, provide the name of the individual.															
Full legal name of individ	ual Chin			Yim						Fong]				
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															
Firm NRD number (if applicable)															
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. V No Yes															
b) Business contact information															
If a firm NRD number is not provi	ded in Item 8 (a), p	rovide the busines	ss cont	tact info	rmation	of the	perso	on be	ring co	mpens	sated.				
Street address 11	940 Dewsbury [Or													
Municipality Ri	chmond					F	Provi	nce/	State	Br	itish (Colum	bia		
Country Ca	anada				Р	ostal	code	/Zip	code	Ve	6X 2Y	7			
Email address sc	hin@pifinancial.	com				Tele	ohon	e nu	mber	60	4664	2818			
c) Relationship to issuer or investment fund manager															
Indicate the person's relationship											of "co	nnecte	d" 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.															
Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund)															
Director or officer of the	investment fund c	r investment fund	d mana	ager	Ш'	Emplo	yee o	f the	issuei	r or inv	vestme	ent fun	d mar	nager	
✓ None of the above															
d) Compensation details															
Provide details of all compensation															
Canadian dollars. Include cash con incidental to the distribution, such															
allocation arrangements with the o													•		
Cash commissions paid	3,58	30.50					Secu	ırity c	ode 1	Sec	curity co	ode 2	Secu	rity cod	e 3
Value of all securities			Se	Security codes W N T											
distributed as compensation ⁴			-4- G	14 004 1	A /	4		-1-1-	-4		- f (h)	00 f	00	41	
	ms of warrants, op		Ļ	21,061	warrar	its ex	ercis	able	atap	price	οτ ఫ υ.	.20 for	36 N	nontns	
Other compensation ⁵		Descri	be _												
Total compensation paid	3,58	80.50													
Check box if the person	on will or may rece	ive any deferred	compe	ensation	(descri	ibe the	term	s be	low)						
⁴ Provide the aggregate value of a	all securities distrit	outed as compens	sation.	excludi	ng optic	ons. wa	arrant	's or	other i	rights (exerci	sable to	o aca	uire	
additional securities of the issuer rights exercisable to acquire additional	. Indicate the secu	rity codes for all													
⁵ Do not include deferred compen															

a) Name of person comp	ensated and regis	tration status									
Indicate whether the person cor	mpensated is a regist	rant.	✓ No		Yes						
If the person compensated is an individual, provide the name of the individual.											
Full legal name of indiv	vidual Parent		Matthey	v		J					
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											
Firm NRD number (if applicable)											
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.											
b) Business contact infor	mation										
If a firm NRD number is not pro	ovided in Item 8 (a), p	rovide the business c	ontact inforn	nation of the	e person	being com	pensated.				
Street address	2311 Woodfield R	d									
Municipality	Oakville				Provinc	e/State	Ontario				
Country	Canada			Postal	code/Z	ip code	L6H 6Y7				
Email address	mparent@investin	gnews.com		Tele	phone r	number	6475450338				
c) Relationship to issuer or investment fund manager											
Indicate the person's relationship							ning of "connecte	ed" 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.											
Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund)											
Director or officer of the	he investment fund o	or investment fund m	anager	Emplo	oyee of th	ne issuer d	or investment fur	d manager			
✓ None of the above											
d) Compensation details											
Provide details of all compensat											
Canadian dollars. Include cash of incidental to the distribution, sur											
allocation arrangements with th	ne directors, officers o	r employees of a non	-individual co	ompensatea	by the is	ssuer.					
Cash commissions pa	70 aid	03.50			Security	code 1	Security code 2	Security code 3			
Value of all securitie			Security cod	es	1 W	N T					
distributed as compensatio	erms of warrants, op	tions or other rights	4 600 Wa	vrrante ove	reieable	ot a pric	ce of \$0.20 for	36 months			
		Describe	4,090 002	III aliis exe	ercisable	at a pric		30 monus			
Other compensation											
Total compensation pa	iid 70	03.50									
Check box if the pe	erson will or may rece	eive any deferred cor	npensation (describe th	e terms l	pelow)					
⁴ Provide the aggregate value of	of all securities distril	buted as compensati	on, <u>excl</u> udina	<u>a</u> options. и	varrants d	or other ric	nhts exercisable	to acquire			
additional securities of the issurights exercisable to acquire a	uer. Indicate the secu	ırity codes for all sec									
⁵ Do not include deferred comp											

a) Name of person compe	ensated and regis	stration status												
Indicate whether the person compensated is a registrant.														
If the person compensated is an i	If the person compensated is an individual, provide the name of the individual.													
Full legal name of individ	dual MacKay			Alexa	nder									
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														
Firm NRD number (if applicable)														
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.														
b) Business contact information														
If a firm NRD number is not prov	rided in Item 8 (a), p	provide the busin	ness co	ntact info	rmation	of the	perso	n be	ing cor	npensat	ed.			
Street address 3	59464 Bayshore	Rd												
Municipality A	nnan					F	Provir	nce/	State	Onta	ırio			
Country C	Canada				P	ostal	code	/Zip	code	N0H	1B0			
Email address a	.of.alex@gmail.c	com				Tele	ohone	e nu	mber	4169	891097			
c) Relationship to issuer or investment fund manager														
Indicate the person's relationship											connect"	ed" 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.														
Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund)														
Director or officer of the	e investment fund o	or investment fu	nd ma	nager	Ш	Emplo	yee of	f the	issuer	or inves	stment fur	nd ma	nager	
✓ None of the above														
d) Compensation details														
Provide details of all compensation	•	•	-											
Canadian dollars. Include cash co incidental to the distribution, such														
allocation arrangements with the												•		
Cash commissions paid	1,4	00.00					Secu	rity c	ode 1	Securi	ty code 2	Sec	urity cod	le 3
Value of all securities			S	Security codes W N T					Т					
distributed as compensation			- Inde	0.000.1	\			-1		: f ch	0.00.6	00	41	
	rms of warrants, op		•	9,333 V	varrant	s exe	rcisai	ole a	at a pri	ice of \$	0.20 for	36 M	ontns	
Other compensation			cribe											
Total compensation paid	1,40	00.00												
Check box if the person will or may receive any deferred compensation (describe the terms below)														
⁴ Provide the aggregate value of	all securities distri	buted as compe	ensatio	n, exclud	ing optid	ons. wa	arrant.	s or	other ri	ights ext	ercisable	to acc	quire	
additional securities of the issue rights exercisable to acquire add	er. Indicate the secu	urity codes for a												-
⁵ Do not include deferred compe														

ITEM 9 - DIRECTORS, EXECUTIVE OFFICERS AND PROMOTERS OF THE ISSUER If the issuer is an investment fund, do not complete Item 9. Procced to Item 10. Indicate whether the issuer is any of the following (select the one that applies - if more than one applies, select only one). Reporting issuer in any jurisdiction of Canada Foreign public issuer Wholly owned subsidiary of a reporting issuer in any jurisdiction of Canada⁶ Provide name of reporting issuer Wholly owned subsidiary of a foreign public issuer⁶ Provide name of foreign public issuer Issuer distributing only eligible foreign securities and the distribution is to permitted clients only If the issuer is at least one of the above, do not complete Item 9(a) - (c). Proceed to Item 10. ⁶An issuer is a wholly owned subsidiary of a reporting issuer or a foreign public issuer if all of the issuer's outstanding voting securities, other than securities that are required by law to be owned by its directors, are beneficially owned by the reporting issuer or the foreign public issuer, respectively. ⁷Check this box if it applies to the current distribution even if the issuer made previous distributions of other types of securities to non-permitted clients. Refer to the definitions of "eligible foreign security" and "permitted client" in Part B(1) of the Instructions. ✓ If the issuer is none of the above, check this box and complete Item 9(a) - (c). Directors, executive officers and promoters of the issuer a) Provide the following information for each director, executive officer and promoter of the issuer. For locations within Canada, state the province or territory; otherwise state the country. For "Relationship to issuer", "D" – Director, "O" – Executive Officer, "P" – Promoter. Business location of non-individual or Relationship to issuer residentail Secondary given (select all that apply) jurisdiction of Organization or company name Family name First given name names individual Province or country D 0 Ρ Hermann / / Schloo Peter Ontario ✓ Patrick Mohan Ontario Fairbairn ✓ **James** Ontario Fenn Christopher Alberta Wray Carvelas Ontario Promoter information 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. Residential Relationship to promoter jurisdiction of Secondary given (select one or both if applicable) individual Family name First given name Organization or company name names Province or D 0 country 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 exemt 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	Heritage Mining Ltd.										
Full legal name	Sullivan	Patrick									
	Family name	First given name	<u>, </u>	Seconda	ıry given na	ames					
Title	Corporate Secretary										
Telephone number	6046922790	Email address psulliv									
Signature	(signed) "Patrick Sullivan"	Date	2021	03	01						
			YYYY	MM	DD						

TEM 11- CONTACT PERSON											
Provide the following business contact information for the individual that the securities regulatory authority or regulator may contact with any questions regarding the contents of this report, if different than the individual certifying the report in Item 10.											
Same as individual certifying the report											
Full legal name	Ladeur	Nicole				Title	Securities Paralegal				
	Family name	First given	name	Secondary	given names						
Name of company	Osler, Hoskin & Harcou	t LLP									
Telephone number	6046922757		Em	ail address	nladeur@os	sler.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 Schedules 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.