Form 45-106F1 Report of Exempt Distribution

IT IS AN OFFENCE TO MAKE A MISREPRESENTATION IN THIS REPORT

ITEM 1 - REPORT TYPE									
 □ New report □ Amended report If amended, provide filing date of report that is being amended 2017 04 13 (YYYY-MM-DD) 									
✓ Amended report If amend	ded, provide filing date	or report that is being am	ended 2017 04 13 (YYYY-MM-DD)						
ITEM 2 - PARTY CERTIFYING THE I	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 investi	ment fund)								
☐ Underwriter									
ITEM 3 - ISSUER NAME AND OTH									
Provide the following information about the		vestment fund, about the fund.							
Full legal name	BTL Group Ltd.								
Previous full legal name									
If the issuer's name changed in th	ne last 12 months, provide mo	ost recent previous legal name.							
Website	btl.co		(if applicable)						
If the issuer has a legal entity identifier_ provi	ide below. Refer to Part B of t	he Instructions for the definition	of "legal entity identifier".						
Legal entity identifier									
T 4									
ITEM 4 - UNDERWRITER INFORMA	ATION								
If an underwriter is completing the report, pro	ovide the underwriter's full le	gal name and firm National Reg	istration Database (NRD) number.						
Full legal name									
Firm NRD number	m NRD number (if applicable)								
If the underwriter does not have a firm NRD	number, provide the head off	ice contact information of the un	derwriter.						
Street address	Street address								
Municipality	Municipality Province/State								
Country		Postal code/Zip code							
Telephone number		Website	(if applicable)						

Item 5 - Issuer Information									
If the issuer is an investment fund, do not complete Item 5. Proceed to Item 6.									
a) Primary industry									
Provide the issuer's North American Industry Classification Standard (NAICS) code (6 digits only) that corresponds to the issuer's primary business activity. For more information on finding the NAICS industry code go to Statistics Canada's NAICS industry search tool . NAICS industry code 5 4 1 5 1 4									
If the issuer is in the mining industry , indicate the stage of operations. This does not apply to issuers that provide services to issuers operating in the mining industry. Select the category that best describes the issuer's stage of operations. □ Exploration □ Development □ Production Is the issuer's primary business is to invest all or substantially all of its assets in any of the following? If yes, select all that apply. □ Mortgages □ Real estate □ Commerial/business debt □ Consumer debt □ Private companies									
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 3 2 4 1 5 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 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.									
L AII L AB L BC L MB L NB L NL L NT									
NS NU ON PE QC SK YT g) Public listing status									
If the issuer has a CUSIP number, provide below (first 6 digits only)									
CUSIP number									
If the issuer is publicly listed, provide the names of all exchanges on which its securities are listed. Include only the names of exchanges for which the issuer has applied for and received a listing, which excludes, for example, automated trading systems.									
Exchange name(s):									
h) Size of issuer's assets									
Select the size of the issuer's assets for its most recent financial year-end (Canadian \$). If the issuer has not existed for a full financial year, provide the size of the issuer's assets at the distribution end date.									
□ \$0 to under \$5M □ \$5M to under \$25M □ \$25M to under \$100M									
☐ \$100M to under \$500M ☐ \$500M to under \$1B ☐ \$1B or over									

Item 6 - Investment Fund Issuer Information							
If the issuer is an investment fund, provide the following information.							
a) Investment fund manager information							
Full legal name							
Firm NRD number	(if applicable)						
If the investment fund ma	nager 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 investment	fund						
Type of investment fund tha	t most accurately identifies the issuer (select only one) .						
☐ Money market	☐ Equity ☐ Fixed income						
☐ Balanced	Alternative strategies Other (describe)						
Indicate whether one or boti	h of the following apply to the investment fund .						
☐ Invests primarily in	other investment fund issuers						
☐ Is a UCITs Fund¹							
	ve Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) re investment schemes to operate throughout the EU on a passport basis on authorization from one member state.						
c) Date of formation a	and financial year-end of the investment fund						
Date of format							
d) Reporting issuer st	YYYY MM DD MM DD atus of the investment fund						
, 1							
	orting issuer in any jurisdication of Canada? No Yes of Canada in which the investment fund is a reporting issuer.						
All	AB BC MB NB NL NT						
□ NS □	NU ON PE QC SK TT						
e) Public listing status	s 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 names of all exchanges on which its securities are listed. Include only the names of exchanges for which the issuer has applied for and received a listing, which excludes, for example, automated trading systems.							
Exchange nam	es						
f) Net asset value (NA	AV) 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 \$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, which should be disclosed in Item 8. The information provided in Item 7 must reconcile with the information provided in Schedule 1 of the report. 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) 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 End date 2017 04 2017 06 04 06 MM חח MM DD YYYY Detailed purchaser information Complete Schedule 1 of this form for each purchaser and attach the schedule to the completed report. Types of securities distributed Provide the following information for all distributions that take place in a jurisdiction of Canada on a per security basis. Refer to Part A 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. The information included in item 7d must reconcile to item 7f. For examples on how to report convertible securities, see our Frequently Asked Questions.

					Canadian \$	
Security code	CUSIP number (if applicable)	Description of security	Number of securities	Single or lowest price	Highest price	Total amount
UBS	055766	Unit consisting of one (1) common share and one-half of one (1/2) common share purchase warrant	1,150,000.00	2.7000		3,150,000.00

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.

S	Security code				Underlying security code		Underlying security code Exercise price (Canadian \$)		Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other items (if applicable)
							Lowest	Highest			
W	N	ı [·	Т	С	М	S	3.7500		2019-04-06	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 purchasers	Total amount (Canadian \$)
Alberta	NI 45-106 2.3 [Accredited investor]	2	59,400.00
British Columbia	NI 45-106 2.3 [Accredited investor]	3	216,000.00
Ontario	NI 45-106 2.3 [Accredited investor]	9	180,900.00
United Kingdom	NI 45-106 2.3 [Accredited investor]	7	1,287,900.00
Hong Kong	NI 45-106 2.3 [Accredited investor]	1	540,000.00
Liechtenstein	NI 45-106 2.3 [Accredited investor]	1	270,000.00
Monaco	NI 45-106 2.3 [Accredited investor]	1	159,300.00

Malta	391,500.00		
	3,105,000.00		
	Total number of unique purchasers ²	25	

²In 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. 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)

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 ✓ 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 Ves								
If the person compensated is an individual, provide the name of the individual.								
Full legal name of individual								
Family name First given name Secondary given names								
If the person compensated is not an individual, provide the following information.								
Full legal name of non-individual PI Financial Corp.								
Firm NRD number 5 2 9 0 (if applicable)								
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. 🕡 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 666 Burrard Street, 19th Floor								
Municipality Vancouver Province/State British Columbia								
Country Canada Postal code/Zip code V6C 3N1	\equiv							
Email address laurab@pifinancial.com Telephone number 6046642764	一							
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.								
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 Employee of the issuer or investment fund manager								
✓ None of the above								
d) Compensation details								
Provide details of all compensation paid, or to be paid, to the person identified in Item 8(a) in connection with the distribution. Provide all amount 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 row, internal allocation arrangements with the directors, officers or employees of a non-individual compensated by the issuer.								
Cash commissions paid 5,400.00 Security codes Security code 1 Security code 2 Security code	de 3							
Value of all securities distributed as compensation ⁴								
Describe terms of warrants, options or other rights	\neg							
Other compensation ⁵ Describe	=							
Total compensation paid 5,400.00								
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.	ner							

a) Name of person comp	sated and registration status								
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 i	t an individual, provide the following information.								
Full legal name	Full legal name of non-individual Richardson GMP Limited								
F	Firm NRD number 2 1 9 7 0 (if applicable)								
Indicate whether the person	npensated facilitated the distribution through a funding portal or an internet-based portal.	☐ Yes							
b) Business contact info	tion								
If a firm NRD number is not p	ided in Item 8 (a), provide the business contact information of the person being compensated.								
Street address	5 - 8th Avenue SW, Suite 2000								
Municipality	gary Province/State Alberta								
Country	nada Postal code/Zip code T2P 1G1								
Email address	leung@richardsonGMP. Telephone number 4032603823								
	n								
c) Relationship to issuer	nvestment fund manager								
	with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Freaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.	Part							
Connect with the issu	or investment fund manager Insider of the issuer (other than an investment fund	nd)							
Director or officer of t	nvestment fund or investment fund manager Employee of the issuer or investment fund manage	ger							
✓ None of the above									
d) Compensation details									
Canadian dollars. Include cas services incidental to the distr	n paid, or to be paid, to the person identified in Item 8(a) in connection with the distribution. Provide all am mmissions, securities-based compensation, gifts, discounts or other compensation. Do not report payments ion, such as clerical, printing, legal or accounting services. An issuer is not required to ask for details about, nts with the directors, officers or employees of a non-individual compensated by the issuer.	for							
Cash commissions pa	675.00 Security codes Security code 1 Security code 2 Security	y code 3							
Value of all securitie distributed a compensatio	Security codes Security codes	, 5500 5							
	s of warrants, options or other rights								
Other compensatio	Describe								
Total compensation pa	675.00								
	Check box if the person will or may receive any deferred compensation (describe the terms below)								
additional securities of the is	all securities distributed as compensation, <u>excluding</u> options, warrants or other rights exercisable to acquer. Indicate the security codes for all securities distributed as compensation, <u>including</u> options, warrants of ditional securities of the issuer.								

a) Name of person compensated ar	d registration status							
Indicate whether the person compensated is a registrant. No Ves								
If the person compensated is an individual	If the person compensated is an individual, provide the name of the individual.							
Full legal name of individual								
	Family name	First given name	e Seco	ondary given names				
If the person compensated is not an indiv	idual, provide the following inf	ormation.						
Full legal name of non-indiv	ridual Foster & Associates	s Financial Service	s Inc.					
Firm NRD nu	mber 5 0 0	0	(if app	licable)				
Indicate whether the person compensated	I facilitated the distribution thr	ough a funding portal	or an internet-bas	ed portal.				
b) Business contact information				<u> </u>				
If a firm NRD number is not provided in Ite	em 8 (a), provide the business c	ontact information of	the person being c	ompensated.				
Street address 372 Bay St	eet, Suite 1100							
Municipality Toronto			Province/State	Ontario				
Country Canada		Posta	I code/Zip code	M5H 2W9				
Email address pdarcy@for	stergroup.ca	Tele	ephone number	4163693199				
c) Relationship to issuer or investme	ent fund manager							
Indicate the person's relationship with the B(2) of the Instructions and the meaning o				3 .				
Connect with the issuer or investment	ent fund manager	Inside	er of the issuer (otl	ner than an investment fund)				
Director or officer of the investmen	t fund or investment fund mar	nager Empl	oyee of the issuer	or investment fund manager				
✓ None of the above								
d) Compensation details								
Provide details of all compensation paid, or Canadian dollars. Include cash commission services incidental to the distribution, such on, internal allocation arrangements with t	s, securities-based compensations as clerical, printing, legal or ac	on, gifts, discounts or c counting services. An	other compensation issuer is not require	n. Do not report payments for ed to ask for details about, or report				
Cash commissions paid	5,940.00	ecurity codes	Security code 1	Security code 2 Security code 3				
Value of all securities distributed as compensation⁴		ecunty codes	Joseph Market Property Control of the Control of th					
Describe terms of warr	Describe terms of warrants, options or other rights							
Other compensation ⁵	Describe							
Total compensation paid 5,940.00								
Check box if the person will or n	nay receive any deferred comp	pensation (describe th	ne terms below)					
⁴ Provide the aggregate value of all securi								
additional securities of the issuer. Indicate rights exercisable to acquire additional se ⁵ Do not include deferred compensation.		rurities distributed as d	compensation, <u>inc</u>	luding options, warrants or other				

ГЕМ	9 - DIRECTORS, EXECUTIV	VE OFFICERS A	AND PROMO	TERS OF THE IS	SSUER					
If t	he issuer is an investment fund, o	do not complete I	tem 9. Procced t	o Item 10.						
Indicate whether the issuer is any of the following (select all that apply).										
Reporting issuer in any jurisdiction of Canada										
Foreign public issuer										
	Wholly owned subsidiary of a reporting issuer in any jurisdiction of Canada ⁶									
	Provide name of reporting issuer									
	☐ Wholly owned subsidiary of a foreign public issuer ⁶									
	Provide name of foreign public issuer									
Issuer distributing eligible foreign securities only to permitted clients ⁷										
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. 7 Check this box if it applies to the current distribution even if the issuer made previous distributions of other types of securities to non-permitted clients. Refer to the definitions of "eligible foreign security" and "permitted client" in Part B(1) of the Instructions.										
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.										
	Organization or company name	Family name	First given name	Secondary give	Business location of non-individual or residentail jurisdiction of individual		Relationship to issuer (select all that apply)		that	
					Province o	r country	D	0	Р	
b)	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.										
	Organization or company name	Family name	First given name	Secondary given names	Residential jurisdiction of individual	Relationship to promoter (select one or both if applica				
					Province or country	D		C)	
c)	Residential address of each in	ndividual								

Complete Schedule 2 of this form providing the full residential address for each individual listed in Item 9(a) and (b) and attach to the completed report. Schedule 2 also requires information to be provided about control persons.

ITEM 10 - CERTIFICATION

Provide the following certification and business contact information of an officer or director of the issuer or underwriter. If the issuer or underwriter is not a company, an individual who performs functions similar to that of a director or officer may certify the report. For example, if the issuer is a trust, the report may be certified by the issuer's trustee. If the issuer is an investment fund, a director or officer of the investment fund manager (or, if the investment fund manager is not a company, an individual who performs similar functions) may certify the report if the director or officer has been authorized to do so by the investment fund.

The certification may not be delegated to an agent or other individual preparing the report on behalf of the issuer or underwriter. If the individual completing and filing the report is different from the individual certifying the report, provide their name and contact details in Item 11.

The signature on the report must be in typed form rather than handwritten form. The report may include an electronic signature provided the name of the signatory is also in typed form.

IT IS AN OFFENCE TO MAKE A MISREPRESENTATION IN THIS REPORT

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

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

Full legal name	Full legal name Halford-Thompson Guy						
	Family name First given name			Secondary given names			
Title	Chief Executive Officer						
Name of issuer/underwriter/ investment fund manager	BTL Group Ltd.						
Telephone number		Email address					
Signature	"Guy Halford-Thompson"	Date	2017	04	21		
		_	YYYY	MM	DD		

ITEM 11- CONTACT PERSON

Telephone number 4032981049

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	Chmilar	Gordon		Title	Partner			
	Family name	First given name	Secondary given names					
Name of company Gowling WLG (Canada) LLP								

Notice - Collection and use of personal information

Email address gordon.chmilar@gowlingwlg.com

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.