# Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 8822609

ITEM 1 - REPORT TYPE								
✓ New report								
☐ Amended report If amended, provide	ide 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	are and the companion policy to 141 or 100.							
✓ Issuer (other than an investment fund)	1)							
Underwriter	<del>-</del> /							
<del>-</del>								
ITEM 3 - ISSUER NAME AND OTHER IDENTII								
Provide the following information about the issuer, or if the								
	ntures (VCC) Inc.							
Previous full legal name								
If the issuer's name changed in the last 12 months	ths, provide most recent previous legal name.							
Website	(if applicable)							
If the issuer has a legal entity identifier, provide below. Ref	Refer to Part B of the Instructions for the definition of "legal entity identifier".							
Legal entity identifier								
If two or more issuers distributed a single security, provide	de the full legal name(s) of the co-issuer(s) other than the issuer named above.							
Full legal name(s) of co-issuer(s)	(if applicable)							
ITTLE A. HANDEDUNITED INFORMATION								
ITEM 4 - UNDERWRITER INFORMATION								
If an underwriter is completing the report, provide the under	nderwriter's full legal name and firm NRD number.							
Full legal name								
Firm NRD number	(if applicable)							
	ovide the head office contact information of the underwriter.							
Street address								
Municipality	Province/State							
Country	Postal code/Zip code							
Telephone number	Website (if applicable)							

ITEM 5 - ISSUER INFORMATION
If the issuer is an investment fund, do not complete Item 5. Proceed to Item 6.
a) Primary industry
Provide the issuer's North American Industry Classification Standard (NAICS) code (6 digits only) that in your reasonable judgment most closely corresponds to the issuer's primary business activity.
NAICS industry code 5 2 6 9 8 9
If the issuer is in the <b>mining industry</b> , indicate the stage of operations. This does not apply to issuers that provide services to issuers operating in the mining industry. Select the category that best describes the issuer's stage of operations.
Exploration Development Production
Is the issuer's primary business to invest all or substantially all of its assets in any of the following? If yes, select all that apply.
☐ Mortgages ☐ Real estate ☐ Commercial/business debt ☐ Consumer debt ☑ Private companies
☐ Cryptoassets
b) Number of employees
Number of employees: ✓ 0 - 49
c) SEDAR profile number
Does the issuer have a SEDAR profile?
✓ No ☐ Yes If yes, provide SEDAR profile number ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
If the issuer does not have SEDAR profile complete item 5(d) - (h).
d) Head office address
Street address 2970 Graymar Road Province/State British Columbia
Municipality West Kelowna Postal code/Zip code V1Z 1Y8
Country Canada Telephone number 6047909387
e) Date of formation and financial year-end
Date of formation 2017 01 18 Financial year-end 02 28  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

ITEM 6 - INVESTMENT	FUND ISSUER INFORMATION							
If the issuer is an inves	tment fund, provide the following information.							
a) Investment fund ma	anager 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	it most accurately identifies the issuer (select only one) .							
Money market	☐ Equity ☐ Fixed income ☐ Balanced							
Alternative strate	gies Cryptoasset Other (describe)							
Indicate whether one or bot	h of the following apply to the investment fund .							
Invests primarily in	n other investment fund issuers							
☐ Is a UCITs Fund¹								
	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	tion 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? No Yes							
If yes, select the jurisdictions	s 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	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 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 on								
-	AV) 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 S500M to under \$1B S1B 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. 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 2019 05 16 2019 05 16 YYYY MM DD YYYY MM DD 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 reported on a per security basis. Refer to Part A(12) of the Instructions for how to indicate the

security code. If providing the CUSIP number, indicate the full 9-digit CUSIP number assigned to the security being distributed.

				Canadian \$			
Security code	CUSIP number (if applicable)	Description of security	Number of securities	Single or lowest price	Highest price	Total amount	
C M S		Class "A" Common Voting Shares	22,000.00	1.0000		22,000.00	

### 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		Underlying security code		•	Exercise price (Canadian \$)		Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other items (if applicable)		
				Lowest	Highest						

# 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

For jurisdictions within Canada, state the province or territory, otherwise state the country.

Province or country	Exemption relied on	Number of unique <sup>28</sup> purchasers	Total amount (Canadian \$)
British Columbia	NI 45-106 2.9(1) [Offering memorandum] (BC, NL)	2	22,000.00
	22,000.00		
	Total number of unique purchasers <sup>2b</sup>	2	

<sup>&</sup>lt;sup>2a</sup> In calculating the number of unique purchasers per row, count each purchaser only once. Joint purchasers may be counted as one purchaser.

<sup>2</sup>b 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. If an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include net proceeds for that jurisdiction of Canada only. For jurisdictions within Canada, state the province or territory, otherwise state the country.

Province or country	Net proceeds (Canadian \$)			
Total net proceeds to the investment fund				

<sup>&</sup>lt;sup>3</sup>"Net proceeds" means the gross proceeds realized in the jurisdiction from the distributions for which the report is being filed, less the gross redemptions that occurred during the distribution period covered by the report.

# h) Offering materials - This section applies only in Saskatchewan, Ontario, Québec, New Brunswick and Nova Scotia.

If a distribution has occurred in Saskatchewan, Ontario, Québec, New Brunswick or Nova Scotia, complete the table below by listing the offering materials that are required under the prospectus exemption relied on to be filed with or delivered to the securities regulatory authority or regulator in those jurisdictions.

In Ontario, if the offering materials listed in the table are required to be filed with or delivered to the Ontario Securities Commission (OSC), attach an electronic version of the offering materials that have not been previously filed with or delivered to the OSC.

Description	Date of document or other material (YYYY-MM-DD)	Previously filed with or delivered to regulator? (Y/N)	Date previously filed or delivered (YYYY-MM-DD)

TEM 8 - COMPENSATION	INFORMATION							
Provide information for each perso the distribution. <b>Complete additi</b>			• •		•	•	n in connecti	on with
Indicate whether any compensati	on was paid, or will	be paid, in connect	ion with the distribu	ition.				
No ✓ Yes	If yes, indicate	number of perso	ons compensated	d. [	2			
a) Name of person compen	sated and registr	ation status						
Indicate whether the person compe	ensated is a registra	nt.	☐ No	✓ Yes	S			
If the person compensated is an inc	dividual, provide the	name of the indivi	dual.					
Full legal name of individu	ıal							
	Fa	mily name	First g	given name	·	Secondary	given names	
If the person compensated is not a								
Full legal name of	non-individual T	ri View Capital L	td.					
Firm	NRD number	4 0 8	3 0		(if appl	icable)		
Indicate whether the person compe		ne distribution throi	ugh a funding portal	l or an inte	ernet-based p	portal.	✓ No 🗆	Yes
b) Business contact informa								
If a firm NRD number is not provid	led in Item 8 (a), pro	vide the business co	ontact information o	of the perso	on being com	npensated.		
Street address			_					
Municipality				Provi	nce/State			
Country			Po	stal code	Zip code			
Email address			-	Telephon	e number			
c) Relationship to issuer or	investment fund ı	manager						
Indicate the person's relationship we the Instructions and the meaning of						ining of "connec	ted" in Part I	B(2) of
Connect with the issuer	or investment fund	manager	In	sider of th	e issuer (oth	er than an inve	stment fund)	i
Director or officer of the	investment fund or	investment fund ma	anager	mployee o	f the issuer	or investment fu	nd manager	
None of the above								
d) Compensation details								
Provide details of all compensation Canadian dollars. Include cash com- incidental to the distribution, such a allocation arrangements with the d	missions, securities as clerical, printing,	based compensation based compensation begal or accounting	on, gifts, discounts or services. An issuer is	r other com s not requi	npensation. I red to ask fo	Do not report pa	yments for se	ervices
Cash commissions paid	1,080	0.00		Secu	urity code 1	Security code 2	Security co	ode 3
Value of all securities distributed as compensation <sup>4</sup>		:	Security codes					
Describe term	ns of warrants, option	ons or other rights						
Other compensation <sup>5</sup>		Describe						
Total compensation paid	1,080	.00						
Check box if the perso	n will or may receiv	re any deferred con	npensation (describ	e the term	is below)			
<sup>4</sup> Provide the aggregate value of a	ll securities distribu	ted as compensation	on, excludina option	ns, warrant	ts or other ric	ghts exercisable	to acauire	
additional securities of the issuer. rights exercisable to acquire additional securities.	Indicate the securi	ty codes for all sec	urities distributed as	s compens	ation, <u>includ</u>	ling options, wai	rrants or oth	er

<sup>&</sup>lt;sup>5</sup>Do 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	$\checkmark$	Yes				
If the person compensated is a	n individual, provide i	the name of the indivi	dual.						
Full legal name of indiv	vidual								
		Family name	Fir	st given n	ame		Secondary	given names	
If the person compensated is no	ot an individual, prov	ide the following infor	rmation.						
Full legal name	of non-individual	Cape Cove Finan	cial Manageme	ent					
F	Firm NRD number					(if app	licable)		
Indicate whether the person co	mpensated facilitated	the distribution thro	ugh a funding poi	rtal or an	interne	t-based <sub>l</sub>	portal.	✓ No 🗌 `	Yes
b) Business contact info	rmation								
If a firm NRD number is not pr	If a firm NRD number is not provided in Item 8 (a), provide the business contact information of the person being compensated.								
Street address	800-350 7 Ave SV	V							
Municipality	Calgary			Р	rovince	e/State	Alberta		
Country	Canada			Postal c	code/Zip	p code	T2P 3N9		
Email address	lwells@capecove	.ca		Telep	hone n	umber	4036901077	,	
c) Relationship to issuer	or investment fund	d manager							
Indicate the person's relationsh the Instructions and the meani							aning of "connec	ted" in Part B(2)	) of
Connect with the issu	-			•	-		ner than an inves	stment fund)	
Director or officer of	the investment fund o	or investment fund ma	anager $\square$	Employ	ee of th	e issuer	or investment fu	nd manager	
_			age:			0 100001		aaage.	
✓ None of the above									
d) Compensation details									
Provide details of all compensate Canadian dollars. Include cash incidental to the distribution, su allocation arrangements with the	commissions, securiti Ich as clerical, printin	es-based compensatic g, legal or accounting	on, gifts, discounts services. An issue	s or other er is not i	r compei required	nsation. I to ask fo	Do not report pay	ments for servi	ices
Cash commissions pa		00.00					0 " 10	T	
Value of all accomis					Security	code 1	Security code 2	Security code	3
Value of all securiti distributed as compensation			Security codes	L					
Describe	terms of warrants, or	otions or other rights							
Other compensation	on <sup>5</sup>	Describe							
Total compensation pa	aid 90	00.00							
Check box if the pe	erson will or may rece	eive any deferred con	npensation (desc	ribe the	terms b	elow)			
<sup>4</sup> Provide the aggregate value additional securities of the iss rights exercisable to acquire a <sup>5</sup> Do not include deferred comp	uer. Indicate the secundational securities of	urity codes for all secu							

# 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 Canada<sup>6</sup> Provide name of reporting issuer Wholly owned subsidiary of a foreign public issuer<sup>6</sup> 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. <sup>6</sup>An 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. <sup>7</sup>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. ✓ 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 D 0 Ρ Province or country **√** Vause Glen British Columbia /

# 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.

Alberta

Alberta

British Columbia

✓

Kent

Fred

Organization or company name	Family name	First given name	Secondary given names	Residential jurisdiction of individual	Relationship to promoter (select one or both if applicable)		
				Province or country	D	0	
RCMA Financial Group Inc.	Vause	Glen		British Columbia	✓	✓	

# c) Residential address of each individual

Britton

Munn

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	HCM Ventures (VCC) Inc.					
Full legal name	Munn	Fred				
	Family name	First given name	'	Seconda	ary given n	ames
Title	Director					
Telephone number	5878817845	Email address	fred@sherwoodcorporation.ca			n.ca
Signature	Fred Munn	Date	2019	05	23	
			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 individua	al certifying the report								
Full legal name				Title					
•	Family name	First given name	Secondary given names						
Name of company									
Telephone number		Er	nail address						

# 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.