# Form 45-106F1 Report of Exempt Distribution

IT IS AN OFFENCE TO MAKE A MISREPRESENTATION IN THIS REPORT

ITEM 1 - REPORT TYPE
New report     Memoded report     If amended, provide filing date of report that is being amended     2018     02     13     (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 investment fund)
ITEM 3 - ISSUER NAME AND OTHER IDENTIFIERS Provide the following information about the issuer, or if the issuer is an investment fund, about the fund.
Full legal name Melior Resources Inc.
Previous full legal name
If the issuer's name changed in the last 12 months, provide most recent previous legal name. Website meliorresources.com (if applicable)
If the issuer has a legal entity identifier_ provide below. Refer to Part B of the Instructions for the definition of "legal entity identifier". Legal entity identifier
Item 4 - Underwriter Information
If an underwriter is completing the report, provide the underwriter's full legal name and firm National Registration Database (NRD) number.
Full legal name
Firm NRD number (if applicable)
If the underwriter does not have a firm NRD number, provide the head office contact information of the underwriter.
Street address
Municipality Province/State
Country Postal code/Zip code
Telephone number     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 <b>Statistics Canada's NAICS industry search tool.</b>
NAICS industry code 2 1 2 2 9 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.          If the issuer is in the <b>mining industry</b> , indicate the stage of operations.         If the issuer is in the category that best describes the issuer's stage of operations.         If the category that best describes the issuer's stage of operations.         If the category that best describes the issuer's stage of operations.
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         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 Ves If yes, provide SEDAR profile number 0 0 0 4 0 4 3
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
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.
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 investi	ment fund, provide the following information.
a) Investment fund ma	inager information
Full legal name	
Firm NRD number	(if applicable)
If the investment fund man	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 that	most accurately identifies the issuer (select only one) .
Money market	Equity Fixed income
Balanced	Alternative strategies Other (describe)
Indicate whether one or both	of the following apply to the investment fund .
Invests primarily in	other investment fund issuers
Is a UCITs Fund <sup>1</sup>	
<sup>1</sup> Undertaking for the Collectiv directives that allow collective	re Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) e investment schemes to operate throughout the EU on a passport basis on authorization from one member state.
	nd financial year-end of the investment fund
Date of formati	
	YYYY MM DD MM DD
d) Reporting issuer sta	atus of the investment fund
	orting issuer in any jurisdication of Canada? 🔲 No 🗌 Yes
If yes, select the jurisdictions of All	of Canada in which the investment fund is a reporting issuer.           AB         BC         MB         NL         NT
e) Public listing status	NU         ON         PE         QC         SK         YT           of the investment fund
	CUSIP number, provide below (first 6 digits only)
.,	CUSIP number
If the investment fund is pub	licly listed, provide the names of all exchanges on which its securities are listed. Include only the names of exchanges for
	for and received a listing, which excludes, for example, automated trading systems.
Exchange name	
f) Net asset value (NA	V) of the investment fund
-	nvestment fund as of the date of the most recent NAV calculation (Canadian \$).
\$0 to under \$5M	S5M to under \$25M \$25M to under \$100M
\$100M to under \$500	
	YYYY MM DD

ITEM	7	- II	١F	ORM	IAT	ION	АВОИТ ТН	DISTRIBUTIO	ON						
								s a distribution in							L
								la only. Do not inc provided in Item 7							1
a)	Сι	ırre	nc	у											
Select	the	e cur	rei	ncy or	curr	encie	es in which the di	stribution was ma	de. All dol	lar amounts	provided in	the report m	ust be in Canadia	n dollars.	
$\checkmark$	Са	ana	dia	an dol	lar		US dollar	🗌 Eur	0	Other	(describe)				
b)	Di	strik	out	ion d	ate(	s)									
as bo	oth	the	sta	rt ana	end	date d by	es. If the report is the report. art date 2018		ourities dis			basis, incluc	te the start and en		n date
							YYYY	MM DD	)			YYYY	MM DD		
C)	De	etail	ed	purc	hase	ər in	formation								
Сотр	olet	te S	ch	edule	2 1 c	of th	is form for ea	ch purchaser a	nd attac	h the sche	dule to the	e complete	d report.		
d)		•					stributed								
Inst	ruc ribi	tions ited.	s fc Tł	or how ne info	to ir	ndica	te the security co	ibutions that take <sub>i</sub> ode. If providing th 7d must reconcile	e CUSIP n	umber, indic	ate the full s	9-digit CUSII	, number assigned	d to the security	
													Canadian	\$	
:		urity ode		CUSIP (if app				ription of security		Numbe secur		Single or lowest price	Highest price	Total amou	
(	CI	MS	5 !	5854	8A1	04		ares in the cap ull voting rights		16,247	7,500.00	0.080		1,299,80	00.00
V	N	N	Г				CMS trade a The TSX Ve greater than period of 10 days at any month anniv	ars, provided i t a closing prio nture Exchang \$0.15 per CM consecutive tr time after the 6 ersary of the c sed Offering, (	ce on je of S for a ading S losing			0.000	0		0.00
V	N	N	Г				CMS trade a The TSX Ve greater than a period of 1 trading days 6 month ann	ars, provided i t a closing prio nture Exchang \$0.15 per CM 0 consecutive at any time af iversary of the e Proposed Of	ce on je of S for ter the			0.000	0		0.00
e)				-				hangeable secu							
								ibuted, provide the and describe any						exchangeable se	curities
	vere distributed, provide the conversion ratio and describe any other terms for each convertible/exchangeable security.         Security code       Underlying (Canadian \$)         Exercise price (YYYY- MM-DD)       Conversion ratio         Describe other items (if applicable)														
N	w	N	Т	· c	м	s	Lowest 0.1050	Highest	2020	9-01-25	1:1	the ex by giv thereo Warra 30th o	ompany may a spiry date of the ing notice to the of and in such unts will expire day after the d such notice is	he Warrants he holders case the on the ate on	

the Company.

W N	T C M S	0.1050	2020-02-01		the Company may accelerate the expiry date of the Warrants by giving notice to the holders thereof and in such case the Warrants will expire on the 30th day after the date on which such notice is given by the Company.
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## 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 \$)
Germany	Other	5	210,800.00
Australia	Other	2	500,000.00
Liechtenstein	Other	3	144,000.00
Jersey	Other	1	73,000.00
New Zealand	Other	1	16,000.00
Ontario	NI 45-106 2.3 [Accredited investor]	3	356,000.00
	Total dollar amount of sec	urities distributed	1,299,800.00
	Total number of unique purchasers <sup>2</sup>	15	

<sup>2</sup>In calculating the total number of unique purchasers to which the issuer distributed securities, count each purchaser only once, regardless of whether the issuer distributed multiple types of securities to, and relied on multiple exemptions for, that purchaser.

### g) Net proceeds to the investment fund by jurisdiction

If the issuer is an investment fund, provide the net proceeds to the investment fund for each jurisdiction of Canada and foreign jurisdiction where a purchaser resides.<sup>3</sup> If an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include net proceeds for that jurisdiction of Canada only. For jurisdictions within Canada, state the province or territory, otherwise state the country.

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

<sup>3</sup>"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. <b>Complete additional copies of this page if more than one person was, or will be, compensated.</b>
Indicate whether any compensation was paid, or will be paid, in connection with the distribution.
No Ves If yes, indicate number of persons compensated.
a) Name of person compensated and registration status
Indicate whether the person compensated is a registrant. Vo Vo
If the person compensated is an individual, provide the name of the individual.
Full legal name of individual Hochwimmer Georg
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. 📝 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 Burgstrasse 12
Municipality Province/State Muenchen
Country Germany Postal code/Zip code
Email address Hochwimmer@generalresea Telephone number 498925004330
rch.de
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 amounts in Canadian dollars. Include cash commissions, securities-based compensation, gifts, discounts or other compensation. Do not report payments for services incidental to the distribution, such as clerical, printing, legal or accounting services. An issuer is not required to ask for details about, or report on, internal allocation arrangements with the directors, officers or employees of a non-individual compensated by the issuer.
Cash commissions paid       13,040.00         Security codes       Security code 1         Security code 2       Security code 3
Value of all securities distributed as compensation <sup>4</sup>
Describe terms of warrants, options or other rights
Check box if the person will or may receive any deferred compensation (describe the terms below)
<sup>4</sup> 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.

<sup>5</sup>Do not include deferred compensation.

a) Name of person compensated a	nd registration status			
Indicate whether the person compensa	ted is a registrant.	✓ No	Yes	
If the person compensated is an individuo	l, provide the name of the in	dividual.		
Full legal name of individual				
	Family name	First given r	name Sec	ondary given names
If the person compensated is not an ind	vidual, provide the following	information.		
Full legal name of non-ind	ividual General Researc	h GmbH		
Firm NRD n	umber		(if app	blicable)
Indicate whether the person compensate	ed facilitated the distribution	through a funding po	ortal or an internet-bas	sed portal. 🔽 No 🗌 Yes
b) Business contact information		5, 5,		
If a firm NRD number is not provided in I	tem 8 (a), provide the busines	s contact information	n of the person being o	compensated.
Street address Burgstrass	se 12			
Municipality		7	Province/State	Muenchen
Country Germany		_ ] Po	stal code/Zip code	D-80331
	ner@generalresea	-	Telephone number	41442896020
rch.de	lei egeneraliesea			41442890020
c) Relationship to issuer or investm	ent fund manager			
Indicate the person's relationship with the B(2) of the Instructions and the meaning		-		-
Connect with the issuer or invest				her than an investment fund)
Director or officer of the investme	ent fund or investment fund n	nanager 🕅 E	mployee of the issuer	or investment fund manager
None of the above				
d) Compensation details				
Provide details of all compensation paid, Canadian dollars. Include cash commissio services incidental to the distribution, such on, internal allocation arrangements with	ns, securities-based compens a as clerical, printing, legal or	ation, gifts, discounts accounting services.	or other compensatio An issuer is not requir	n. Do not report payments for ed to ask for details about, or report
Cash commissions paid	1,100.00	Security codes	Security code 1	Security code 2 Security code 3
Value of all securities distributed as		occurry coucs		
compensation <sup>4</sup>				
Describe terms of war	rants, options or other rights			
Other compensation <sup>5</sup>	Describe			
Total compensation paid	1,100.00			
Check box if the person will or	may receive any deferred co	mpensation (describ	be the terms below)	
<sup>4</sup> Provide the aggregate value of all secu additional securities of the issuer. Indica rights exercisable to acquire additional s <sup>5</sup> Do not include deferred compensation.	te the security codes for all s			

Ітем 9	- DIRECTORS, EXECUTIV	/E OFFICERS A	ND PROMO	TERS OF THE I	SSUER				
If the	issuer is an investment fund, a	lo not complete Ite	em 9. Procced to	o Item 10.					
Indicat	te whether the issuer is any of the	e following (select a	ll that apply).						
$\checkmark$	Reporting issuer in any jurisdic	tion of Canada							
	Foreign public issuer								
	Wholly owned subsidiary of a r	eporting issuer in a	iny jurisdiction of	f Canada <sup>6</sup>					
	Provide name o	of reporting issuer							
Wholly owned subsidiary of a foreign public issuer <sup>6</sup>									
	Provide name of foreign public issuer								
	Issuer distributing eligible foreign securities only to permitted clients <sup>7</sup>								
If the	issuer is at least one of the ab	ove, do not compl	ete Item 9(a) –	(c). Proceed to Ite	m 10.				
securitie <sup>7</sup> Check	uer is a wholly owned subsidiary ies that are required by law to be this box if it applies to the curre Refer to the definitions of "eligib If the issuer is none of the abo	e owned by its direc nt distribution even ole foreign security'	ctors, are benefic if the issuer ma and "permitted	cially owned by the de previous distrib client" in Part B(1)	reporting issuer utions of other ty	or the foreig pes of secu	n publ	ic issue	er, respectively.
a) D	Virectors, executive officers a	nd promoters of	the issuer						
	de the following information for ory; otherwise state the country. I						da, sta	te the p	province or
ο	rganization or company name	Family name	First given name	Secondary give names	Business lo non-indivio residen jurisdicti indivio	dual or ntail ion of		ationsh issuer ect all apply)	that
					Province o	r country	D	0	Р
b) P	romoter information		·						
	promoter listed above is not an n Canada, state the province or t		-				-		
0	Organization or company nameFamily nameFirst given nameSecondary given namesResidential jurisdiction of individualRelationship to promoter (select one or both if applicable)								
					Province or country	D		C	)
c) R	esidential address of each ir	ndividual							
Compl	lete Schedule 2 of this form pro	oviding the full res	sidential addre	ss for each individ	lual listed in Ite	m 9(a) and	(b) an	d atta	h 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	McCauley	Mark				
	Family name	First given name	Secondary given names			
Title	Chief Executive Officer					
Name of issuer/underwriter/ investment fund manager	Molior Besources Inc.					
Telephone number	610732336306	Email address mm	ccauley@rmmcapit	tal.com.au		
Signature	(Signed) Mark McCauley	Date 2	2018 02	12		
		Y	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.

 $\checkmark$  Same as individual certifying the report

Full legal name				Title
	Family name	First given name	Secondary given names	
Name of company				
Telephone number		E	mail 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.