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	ed, provide filing date of report that is being am	ended (YYYY-MM-DD)			
ITEM 2 - PARTY CERTIFYING THE R	EPORT				
	only one). For guidance regarding whether an issuer is an in Continuous Disclosure and the companion policy to NI 81-1				
Investment fund issuer					
Issuer (other than an investm	nent fund)				
ITEM 3 - ISSUER NAME AND OTHE	R IDENTIFIERS suer is an investment fund, about the fund.				
	lanet Ventures Inc.				
L	Planet Mining Exploration Inc.				
	If the issuer's name changed in the last 12 months, provide most recent previous legal name.				
Website	ww.planetventuresinc.com	(if applicable)			
	le below. Refer to Part B of the Instructions for the definition	of "legal entity identifier".			
	49300XT7QN9YJ4MZD39				
ITEM 4 - UNDERWRITER INFORMAT	ΓΙΟΝ				
If an underwriter is completing the report, prov	vide the underwriter's full legal name and firm National Reg	istration Database (NRD) number.			
Full legal name					
Firm NRD number	(if applicable)				
	umber, provide the head office contact information of the un	nderwriter.			
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 Statistics Canada's NAICS industry search tool.
NAICS industry code 5 2 3 9 9 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.
Mortgages Real estate Commerial/business debt Consumer debt Private companies
b) Number of employees
Number of employees: Image: O - 49 Image: 50 - 99 Image: 100 - 499 Image: 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 2 5 6 7 0 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
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
S100M to under \$500M S500M to under \$1B \$1B or over

ITEM 6 - INVESTMEN	t Fund Issuer Information
If the issuer is an invest	tment fund, provide the following information.
a) Investment fund m	anager 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
Country	Postal code/Zip code
Telephone number	Website (if applicable)
b) Type of investmen	t fund
Type of investment fund the	at most accurately identifies the issuer (select only one) .
Money market	Equity Fixed income
Balanced	Alternative strategies 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 Fund ¹	ive Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU)
directives that allow collecti	ve investment of transferable securities tands (och's runds) are investment tands regulated by the European onion (EO) ve 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 forma	tion Financial year-end MM DD MM DD
d) Reporting issuer s	tatus of the investment fund
Is the investment fund a rep	porting issuer in any jurisdication of Canada? 🔲 No 🗌 Yes
If yes, select the jurisdictions	of Canada in which the investment fund is a reporting issuer. AB BC MB NB NL NT
	s of the investment fund
If the investment fund has a	a CUSIP number, provide below (first 6 digits only)
	CUSIP number
	blicly listed, provide the names of all exchanges on which its securities are listed. Include only the names of exchanges for I for and received a listing, which excludes, for example, automated trading systems.
Exchange nam	les
f) Net asset value (NA	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 \$50	
	YYYY MM DD

ITEM 7 - INFORMATION A	BOUT THE DISTRIBUTIO	ON					
If an issuer located outside of Can purchasers resident in that jurisdic should be disclosed in Item 8. The	ction of Canada only. Do not inc	clude in Ite	em 7 securitie	es issued a	s payment of	commissions or fin	der's fees, which
a) Currency							
Select the currency or currencies in	n which the distribution was ma	de. All do	llar amounts	provided i	n the report n	ust be in Canadia	n dollars.
🖌 Canadian dollar] US dollar 🛛 🗌 Eur	0	Other	(describe)		
b) Distribution date(s)							
State the distribution start and en as both the start and end dates. distribution period covered by th Start o	If the report is being filed for sec e report.	curities dis			us basis, inclue		
c) Detailed purchaser infor	mation						
Complete Schedule 1 of this	form for each purchaser a	nd attac	ch the sche	dule to t	he complet	ed report.	
d) Types of securities distr	•				,	• • •	
Provide the following informatic Instructions for how to indicate distributed. The information incl <u>Asked Questions.</u>	the security code. If providing th	ne CUSIP r	number, indic	ate the ful	l 9-digit CUSI	P number assigned	I to the security being
						Canadian	6
Security code CUSIP number (if applicable)	Description of security		Numbe securi		Single or lowest price	Highest price	Total amount
U B S 727053 cc	ach unit consists of one ommon share and one co nare purchase warrant.	20,000.00		0.050	0	1,000,000.00	
e) Details of rights and cor	nvertible/exchangeable secu	urities					
lf any rights (e.g. warrants, optio were distributed, provide the co							exchangeable securities
Security Underlying code security code	Exercise price (Canadian \$) Lowest Highest		Expiry date Conversion (YYYY- MM-DD) ratio Describe other items (if a			applicable)	
W N T C M S	0.1000	2019	9-11-16	1:1			
	ion by jurisdiction and exem	nption					
State the total dollar amount of purchaser resides and for each e distribution in a jurisdiction of C This table requires a separate lin purchaser resides, if a purchaser jurisdiction. For jurisdictions within Canada,	xemption relied on in Canada fo anada, include distributions to p ne item for: (i) each jurisdiction v resides in a jurisdiction of Cana	or that dis ourchasers where a pu uda, and (i	tribution. Ho s resident in t urchaser resid iii) each exem	wever, if a hat jurisdi des, (ii) eac nption relie	n issuer locate ction of Cana h exemption i	d outside of Canad la only. elied on in the juri	da completes a sdiction where a
Province or country	Exemption	n relied on			Number of purchasers	Total amou	unt (Canadian \$)
British Columbia	NI 45-106 2.3 [Accredi	ted inve	estor]			6	750,000.00
Cayman Islands	NI 45-106 2.3 [Accredi	ted inve	estor]			1	250,000.00
		Total dol	llar amount	of securit	ies distribut	ed	1,000,000.00
	Total num	ber of ur	nique purcha	asers ²		7	
² In calculating the total number the issuer distributed multiple ty						chaser only once, i	regardless of whether

g) Net proceeds to the investment fund by jurisdiction

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

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

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

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

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

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

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

ITEM 8 - COMPENSATIO	DN INFORMATION				
	person (as defined in NI 45-106) to whom t ete additional copies of this page if mor				on in connection
Indicate whether any compen	sation was paid, or will be paid, in connection	on with the distribution.			
🗌 No 🗹 Yes	If yes, indicate number of perso	ons compensated.	1		
a) Name of person com	pensated and registration status				
Indicate whether the perso	on compensated is a registrant.	✓ No] Yes		
If the person compensated is	an individual, provide the name of the indi	ividual.			
Full legal name of indi	vidual				
	Family name	First given name	e Secor	ndary given name	S
If the person compensated	is not an individual, provide the following ir	nformation.			
Full legal name	e of non-individual BWC Managemer	nt Inc.			
F	Firm NRD number		(if appli	icable)	
Indicate whether the persor	n compensated facilitated the distribution th	nrough a funding portal	or an internet-base	d portal.	🖊 No 🔲 Yes
b) Business contact info	ormation				
If a firm NRD number is not	provided in Item 8 (a), provide the business	contact information of	the person being co	mpensated.	
Street address	306-1110 Hamilton St				
Municipality	Vancouver]	Province/State	British Colur	nbia
Country	Canada	Postal	code/Zip code	V6B 2S2	
Email address		Tele	phone number		
c) Relationship to issue	r or investment fund manager				
Indicate the person's relation	nship with the issuer or investment fund ma the meaning of "control" in section 1.4 of NI				ected" in Part
Connect with the iss	uer or investment fund manager	Inside	er of the issuer (oth	er than an inves	stment fund)
Director or officer of	the investment fund or investment fund ma	anager 🗍 Emplo	oyee of the issuer c	or investment fu	nd manager
None of the above					
d) Compensation details	S				
Canadian dollars. Include cas services incidental to the dist	sation paid, or to be paid, to the person identifies to be paid, to the person identifies to commissions, securities-based compensation is such as clerical, printing, legal or a gements with the directors, officers or emplo	tion, gifts, discounts or c accounting services. An i	other compensation. ssuer is not required	. Do not report p d to ask for deta	payments for
Cash commissions p	aid 70,000.00	Security codes	Security code 1	Security code 2	Security code 3
Value of all securiti distributed					
compensati					
Describe	terms of warrants, options or other rights				
Other compensation	on ⁵ Describe				
Total compensation p	aid				_
Check box if the p	erson will or may receive any deferred con	npensation (describe th	e terms below)		
additional securities of the i	ue of all securities distributed as compensa issuer. Indicate the security codes for all se e additional securities of the issuer. mpensation.				

ITEM 9 - DIRECTORS, EXECUTI	VE OFFICERS A	ND PROMO	TERS OF THE I	SSUER				
If the issuer is an investment fund,	do not complete It	em 9. Procced to	o Item 10.					
Indicate whether the issuer is any of th	e following (select o	all that apply).						
Reporting issuer in any jurisdie	ction of Canada							
Foreign public issuer								
Wholly owned subsidiary of a	reporting issuer in a	any jurisdiction of	f Canada ⁶					
Provide name	of reporting issuer							
Wholly owned subsidiary of a	oreign public issue	r ⁶						
Provide name of fo	reign public issuer							
Issuer distributing eligible fore	gn securities only t	o permitted clien	ts ⁷					
If the issuer is at least one of the al	oove, do not comp	lete Item 9(a) –	(c). Proceed to Ite	<i>m 10</i> .				
⁶ An issuer is a wholly owned subsidiar securities that are required by law to b ⁷ Check this box if it applies to the curre clients. Refer to the definitions of "eligi	e owned by its direc ent distribution even ble foreign security	ctors, are benefic n if the issuer ma " and "permitted of	ially owned by the de previous distrib client" in Part B(1)	reporting issuer utions of other ty	or the foreign pes of securit	public	c issuer, respec	
If the issuer is none of the ab			ltem 9(a) - (c).					
a) Directors, executive officers a	and promoters of	the issuer						
Provide the following information for territory; otherwise state the country.						a, state	e the province o	or
Organization or company name	Family name	First given name	Secondary give names					
				Province o	r country	D	O P	
b) Promoter information								
If the promoter listed above is not an within Canada, state the province or								ations
Organization or company name	Family name	First given name	Secondary given names	Residential jurisdiction of individual			promoter if applicable)	
				Province or country	D		0	
c) Residential address of each i	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	Kropivnitski	Zula			
	Family name	First given name)	Secondary giv	en names
Title	Chief Financial Officer				
Name of issuer/underwriter/ investment fund manager	Planet Ventures Inc.				
Telephone number	6046810084	Email address	zkropivnits m	ki@preakne	ssgroup.co
Signature	Zula Kropivnitski	Date	2017 YYYY	11 MM	22 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.

Full legal name	Kropivnitski	Zula		Title	Chief Financial Officer
-	Family name	First given name	Secondary given names	-	
lame of company	Planet Ventures Inc.				
Felephone number	6046810084		Email address zkropivni	tski@preakn	essgroup.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.