# Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 9017508

ITEM 1 - REPORT TYPE	
✓ New report	
☐ Amended report If amended, provid	ride 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). Fo Instrument 81-106 Investment Fund Continuous Disclosur	For guidance regarding whether an issuer is an investment fund, refer to section 1.1 of National
☐ Investment fund issuer	sare and the companion policy to 141 or 100.
✓ Issuer (other than an investment fund)	d)
Underwriter	<del>-</del> ,
<del>-</del>	
ITEM 3 - ISSUER NAME AND OTHER IDENTI	
Provide the following information about the issuer, or if the	
	Living Trust
Previous full legal name	
If the issuer's name changed in the last 12 month	nths, provide most recent previous legal name.
Website	(if applicable)
If the issuer has a legal entity identifier_provide below. Re	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	ide 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)
A . U U	
ITEM 4 - UNDERWRITER INFORMATION	
If an underwriter is completing the report, provide the und	underwriter's full legal name and firm NRD number.
Full legal name	
Firm NRD number	(if applicable)
If the underwriter does not have a firm NRD number, prov	rovide 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 6 2 3 3 1 0
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 ☐ 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 4 4 8 0 2
If the issuer does not have SEDAR profile complete item 5(d) - (h).
d) Head office address
Street address Province/State
Municipality Postal code/Zip code
Country Telephone number
e) Date of formation and financial year-end
Date of formation Financial year-end 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 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	If the issuer is an investment 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	nt 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							
	blicly listed, provide the name of the exchange on which the investment fund's securities primarily trade. Provide only the oot 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. US dollar ✓ Canadian 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 2020 01 13 2020 01 13 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	
UNT			109,346.00	10.0000		1,093,460.00	

#### 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.

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

#### f) Summary of the distribution by jurisdiction and exemption

State the total dollar amount of securities distributed and the number of purchasers for each jurisdiction of Canada and foreign jurisdiction where a purchaser resides and for each exemption relied on in Canada for that distribution. However, if an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include distributions to purchasers resident in that jurisdiction of Canada only.

This table requires a separate line item for: (i) each jurisdiction where a purchaser resides, (ii) each exemption relied on in the jurisdiction where a purchaser resides, if a purchaser resides in a jurisdiction of Canada, and (iii) each exemption relied on in Canada, if a purchaser resides in a foreign jurisdiction.

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

Province or country	Exemption relied on	Number of unique <sup>2</sup> purchasers	Total amount (Canadian \$)
Alberta	NI 45-106 2.3 [Accredited investor]	2	36,000.00
Alberta	Alberta NI 45-106 2.9(2.1) [Offering memorandum] (AB, SK, ON, QC, NB, NS)		10,000.00
British Columbia	NI 45-106 2.3 [Accredited investor]	4	609,800.00
British Columbia	British Columbia NI 45-106 2.9(1) [Offering memorandum] (BC, NL)		130,600.00
Manitoba	NI 45-106 2.3 [Accredited investor]	2	78,780.00
Manitoba NI 45-106 2.9(2) [Offering memorandum] (MB, PE, YT, NT, NU)		2	30,000.00
Ontario	NI 45-106 2.3 [Accredited investor]	2	94,500.00

Ontario	NI 45-106 2.9(2.1) [Offering memorandum] (AB, SK, ON, QC, NB, NS)	2	30,000.00			
Québec	NI 45-106 2.3 [Accredited investor]	2	32,780.00			
Québec	NI 45-106 2.9(2.1) [Offering memorandum] (AB, SK, ON, QC, NB, NS)	2	30,000.00			
Saskatchewan	NI 45-106 2.9(2.1) [Offering memorandum] (AB, SK, ON, QC, NB, NS)	1	11,000.00			
	Total dollar amount of securities distributed					
	Total number of unique purchasers <sup>2b</sup>	27				

<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.

#### 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)

<sup>&</sup>lt;sup>2b</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.

ITEM 8 - COMPENSATION	INFORMATION							
Provide information for each perso the distribution. <b>Complete addition</b>				•	ny compensation in connection with <b>ted.</b>			
Indicate whether any compensation	on was paid, or will be paid, i	in connecti	on with the distribut	ion.				
No ✓ Yes	If yes, indicate numbe	r of perso	ons compensated.	4				
a) Name of person compens	sated and registration sta	atus						
Indicate whether the person compe	ensated is a registrant.		☐ No	✓ Yes				
If the person compensated is an inc	If the person compensated is an individual, provide the name of the individual.							
Full legal name of individu	ıal							
Family name First given name Secondary given names								
If the person compensated is not a								
Full legal name of	non-individual RETHIN	K AND DI	VERSIFY SECUR	RITIES INC				
Firm	NRD number 4	7 2	5 0	(if app	licable)			
Indicate whether the person compe		ution throu	igh a funding portal	or an internet-based p	portal.  No Yes			
b) Business contact informa								
If a firm NRD number is not provid	led in Item 8 (a), provide the l	business co	ontact information of	f the person being con	npensated.			
Street address			1					
Municipality				Province/State				
Country			Pos	stal code/Zip code				
Email address			Т	elephone number				
c) Relationship to issuer or	investment fund manage	r						
Indicate the person's relationship w the Instructions and the meaning o					aning of "connected" in Part B(2) of			
Connect with the issuer of	or investment fund manager		Ins	sider of the issuer (oth	ner than an investment fund)			
Director or officer of the i	nvestment fund or investme	nt fund ma	anager	nployee of the issuer	or investment fund 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-based co as clerical, printing, legal or a	mpensatio ccounting	n, gifts, discounts or services. An issuer is	other compensation. I not required to ask fo				
Cash commissions paid	30,000.00			Security code 1	Security code 2 Security code 3			
Value of all securities distributed as compensation <sup>4</sup>		\$	Security codes					
Describe term	ns of warrants, options or oth	ner rights						
Other compensation <sup>5</sup>		Describe						
Total compensation paid	30,000.00							
✓ Check box if the perso	n will or may receive any de	ferred com	npensation (describe	e the terms below)				
1/4LY TRAILER FEE	S							
<sup>4</sup> Provide the aggregate value of a					ghts exercisable to acquire ding options, warrants or other			

<sup>&</sup>lt;sup>5</sup>Do not include deferred compensation.

a) Name of person comper	nsated and registra	ation status									
Indicate whether the person comp	ensated is a registrar	nt.	N	lo	$\checkmark$	Yes					
If the person compensated is an ir	ndividual, provide the	name of the ir	ndividual.								
Full legal name of individ	ual										
	Far	mily name		Firs	t given n	ame	I	Second	ary give	n names	
If the person compensated is not o	an individual, provide	the following	information								
Full legal name of	non-individual L	IAHONA CAI	PITAL INC								
Firm	n NRD number	4 7	6 2	0			(if app	olicable)			
Indicate whether the person comp	ensated facilitated th	e distribution t	through a fu	nding port	tal or an	interne	t-based	portal.	$\checkmark$	No 🗌	Yes
b) Business contact inform	ation										
If a firm NRD number is not provi	ded in Item 8 (a), pro	vide the busine	ess contact i	nformation	of the	person b	eing cor	mpensated.			
Street address											
Municipality					Р	rovince	e/State				
Country				F	ostal c	ode/Zip	p code				
Email address					Telep	hone n	umber				
c) Relationship to issuer or	investment fund r	nanager									
Indicate the person's relationship the Instructions and the meaning									nected"	in Part B(2	?) of
Connect with the issuer			. 00 10 p	·	-	-		her than an in	vestme	ent fund)	
Director or officer of the	investment fund or i	nvestment fun	d manager		Employ	ee of th	e issuer	or investmen	fund n	nanager	
None of the above			-	_						-	
d) Compensation details											
Provide details of all compensation	n naid, or to he naid.	to the person ic	dentified in	tem 8(a) ii	n conne	ction wit	th the di	stribution Pro	vide all	amounts i	'n
Canadian dollars. Include cash cor	nmissions, securities-	based compen	sation, gifts,	discounts	or othe	r compei	nsation.	Do not report	рауте	nts for serv	rices
incidental to the distribution, such allocation arrangements with the								or details abou	t, or re	port on, int	:ernal
Cash commissions paid	4,900	.00				Security	code 1	Security code	2   9	ecurity code	3
Value of all securities			0			Jecurity		Security cour	, 2 0		, 3
distributed as compensation <sup>4</sup>			Security	codes							
Describe ter	ms of warrants, option	ns or other rig	hts								
Other compensation <sup>5</sup>		Descr	ibe								
Total compensation paid	4,900	.00									
Check box if the person	on will or may receive	e any deferred	l compensa	ion (descr	ibe the	terms b	elow)				
<sup>4</sup> Provide the aggregate value of a											
additional securities of the issuer rights exercisable to acquire add	litional securities of th		securities d	istributed	as com <sub>l</sub>	pensatio	on, <u>inclui</u>	<u>ding</u> options,	varrant	's or other	
<sup>5</sup> Do not include deferred comper	เรสเเปที.										

a) Name of person compensa	ated and registration status								
Indicate whether the person compens	sated is a registrant.	□ No v	✓ Yes						
If the person compensated is an individual, provide the name of the individual.									
Full legal name of individua	ıl								
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 PINNACLE WEALTH BROKERS INC									
Firm NRD number 3 1 7 4 0 (if applicable)									
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.  V No Yes									
b) Business contact information	on								
If a firm NRD number is not provided	d in Item 8 (a), provide the business (	contact information of th	ne person being cor	npensated.					
Street address									
Municipality			Province/State						
Country		Posta	Il code/Zip code						
Email address		Tel	ephone number						
c) Relationship to issuer or in	vestment fund manager								
Indicate the person's relationship wit the Instructions and the meaning of					ed" in Part B(2) of				
Connect with the issuer or			er of the issuer (ot		tment fund)				
<u> </u>		_							
Director or officer of the inv	vestment fund or investment fund m	nanager Empl	loyee of the issuer	or investment fun	id manager				
None of the above									
d) Compensation details									
Provide details of all compensation por Canadian dollars. Include cash commincidental to the distribution, such as allocation arrangements with the direction of the compositions and the compositions are compositions.	nissions, securities-based compensati clerical, printing, legal or accounting ectors, officers or employees of a nor	on, gifts, discounts or oth g services. An issuer is no	her compensation. ot required to ask fo	Do not report pay	ments for services				
Cash commissions paid	22,621.80		Security code 1	Security code 2	Security code 3				
Value of all securities distributed as compensation <sup>4</sup>		Security codes							
Describe terms	of warrants, options or other rights								
Other compensation <sup>5</sup>	Describe								
Total compensation paid	22,621.80								
✓ Check box if the person	will or may receive any deferred co	mpensation (describe th	ne terms below)						
1/4LY TRAILER FEES	3								
<sup>4</sup> Provide the aggregate value of all sadditional securities of the issuer. In rights exercisable to acquire additios Do not include deferred compensations.	ndicate the security codes for all sec onal securities of the issuer.								

a) Name of person compensat	ted and registration status								
Indicate whether the person compense	ated is a registrant.		✓ Yes						
If the person compensated is an individual, provide the name of the individual.									
Full legal name of individual									
Family name First given name Secondary given names									
If the person compensated is not an individual, provide the following information.									
Full legal name of non-individual AXCESS CAPITAL ADVISORS INC									
Firm NRD number 3 4 0 4 0 (if applicable)									
Indicate whether the person compensor	Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.  V No Yes								
b) Business contact information	n								
If a firm NRD number is not provided	in Item 8 (a), provide the business of	ontact information of t	the person being co	mpensated.					
Street address									
Municipality			Province/State						
Country		Post	al code/Zip code						
Email address		Te	elephone number						
c) Relationship to issuer or inv	estment fund manager								
Indicate the person's relationship with the Instructions and the meaning of "c									
Connect with the issuer or in				ther than an investment fund)					
Director or officer of the inve	estment fund or investment fund m	anager	ployee of the issue	r or investment fund manager					
✓ None of the above									
d) Compensation details									
Provide details of all compensation par Canadian dollars. Include cash commis incidental to the distribution, such as c allocation arrangements with the direc	ssions, securities-based compensation Clerical, printing, legal or accounting	on, gifts, discounts or o services. An issuer is r	ther compensation. not required to ask f	Do not report payments for services					
Cash commissions paid	5,080.00		Security code 1	Security code 2 Security code 3					
Value of all securities		Security codes							
distributed as compensation <sup>4</sup> Describe terms of warrants, options or other rights									
Other compensation <sup>5</sup>	Describe								
Total compensation paid	5,080.00								
Check box if the person will or may receive any deferred compensation (describe the terms below)									
1/4LY TRAILER FEES									
<sup>4</sup> Provide the aggregate value of all so additional securities of the issuer. Inc rights exercisable to acquire addition <sup>5</sup> Do not include deferred compensati	dicate the security codes for all sec nal securities of the issuer.								

TEM 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 juris	sdiction of Canada								
Foreign public issuer									
Wholly owned subsidiary of	Wholly owned subsidiary of a reporting issuer in any jurisdiction of Canada <sup>6</sup>								
Provide nar	me of reporting issue	r							
Wholly owned subsidiary of	a foreign public issu	Jer <sup>6</sup>							
	f foreign public issue							7	
Issuer distributing only eligi			n is to permitted clien	ts only <sup>7</sup>					
If the issuer is at least one of the	-		•	•					
<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.   [V] If the issuer is none of the above, check this box and complete Item 9(a) - (c).									
a) Directors, executive officer	rs and promoters of	of the issuer							
Provide the following information for territory; otherwise state the country.						tate the p	orovince	or	
Organization or company name	Organization or company name  Family name  First given name  Secondary given names  Secondary given names  Business location of non-individual or residentail jurisdiction of individual  Relationship to issuer (select all that apply)								
				Province or co	ountry	D	0	Р	
	Peterson	Michael		Ontario		✓	✓		
	MacDonald	James		Ontario		✓	✓		
	Bryan	Glenn		United States		✓			
	MAXWELL	MARK		Alberta		✓			
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.									
				Residential	Rela	tionship t	to promo	nter	

Organization or company name	Family name Fi	First given name	Secondary given   Jurisdiction of   (select one	jurisdiction of	Relationship to promoter (select one or both if applicable)		
		_		D	0		

## c) Residential address of each individual

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

### **ITEM 10 - CERTIFICATION**

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

The certification may be delegated, but only to an agent that has been authorized by an officer or director of the issuer or underwriter to prepare and certify the report on behalf of the issuer or underwriter. If the report is being certified by an agent on behalf of the issuer or underwriter, provide the applicable information for the agent in the boxes below.

If the individual completing and filing the report is different from the individual certifying the report, provide the name and contact details for the individual completing and filing the report in Item 11.

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

Securities legislation requires an issuer or underwriter that makes a distribution of securities under certain prospectus exemptions to file a completed report of exemt distribution.

By completing the information below, I certify, on behalf of the issuer/underwriter/investment fund manager, to the securities regulatory authority or regulator, as applicable, that I have reviewed this report and to my knowledge, having exercised reasonable diligence, the information provided in this report is true and, to the extent required, complete.

Name of issuer/underwriter/ investment fund manager/agent	LEVANTE LIVING TRUST					
Full legal name	MACDONALD	MACDONALD JAMES				
	Family name	First given name		Seconda	ıry given n	ames
Title	TRUSTEE					
Telephone number	4165607491	Email address	JIM@LE\	/ANTELI	VING.C	ОМ
Signature	JAMES MACDONALD	2020	01	22		
			YYYY	MM	DD	

TEM 11- CONTACT PERSON								
Provide the following business contact information for the individual that the securities regulatory authority or regulator may contact with any questions regarding the contents of this report, if different than the individual certifying the report in Item 10.								
Same as individua	al certifying the report							
Full legal name	MACDONALD	KATHLEEN				Title	MANAGER, CLIENT SERVICES	
	Family name	First given	name	Secondary	given names			
Name of company	LEVANTE LIVING TRU	ST						
Telephone number	9053370259		Ema	ail address	KATHY@LE	VANTEL	LIVING.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.