# Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 8703338

ITEM 1 - REPORT TYPE									
✓ New report									
Amended report If amended, provide 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									
✓ Issuer (other than an inves	tment fund)								
☐ Underwriter	, <b>,</b>								
ITEM 3 - ISSUER NAME AND OT	LIED IDENTIFIEDS								
Provide the following information about the		vestment fund, about the fund							
Full legal name		es of AX-RN-Funds, LLC							
Previous full legal name									
If the issuer's name changed in the	e last 12 months, provide most	recent previous leaal name.							
Website		(if applicab	la)						
If the issuer has a legal entity identifier. pn	ovida halow. Pafar to Part P. of t								
Legal entity identifier	ovide below. Refer to Furt B of t	The instructions for the definition	of legal entity taemifier.						
If two or more issuers distributed a single s	ecurity, provide the full legal no	ame(s) of the co-issuer(s) other th	han the issuer named above						
Full legal name(s) of co-issuer(s)	ecurry, provide the fact tegat his	(if applicab							
, , , , , , , , , , , , , , , , , , ,									
ITEM 4 - UNDERWRITER INFORM	IATION								
If an underwriter is completing the report,	provide the underwriter's full le	gal name and firm NRD number	:						
Full legal name									
Firm NRD number		(if applicable)							
If the underwriter does not have a firm NR	D number, provide the head off	ice contact information of the ur	nderwriter.						
Street address									
Municipality		Province/State							
Country		Postal code/Zip code							
Telephone number	ne 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							
If the issuer does not have SEDAR profile complete item 5(d) - (h).							
d) Head office address							
Street address 2150 S. 1300 E, Suite 360 Province/State Utah							
Municipality Salt Lake City Postal code/Zip code 84106							
Country United States Telephone number 8014190677							
e) Date of formation and financial year-end							
Date of formation 2018 11 01 Financial year-end 01 11  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 investment fund, provide the following information.								
a) Investment fund manager 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 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 strateg	gies Cryptoasset Other (describe)							
	h of the following apply to the investment fund .							
	n other investment fund issuers							
☐ Is a UCITs Fund¹								
<sup>1</sup> Undertaking for the Collec (EU) directives that allow co	tive Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union 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 format	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 name								
f) Net asset value (NA	AV) of the investment fund							
Select the NAV range of the	investment fund as of the date of the most recent NAV calculation (Canadian \$).							
\$0 to under \$5M	\$5M to under \$25M \$25M to under \$100M							
\$100M to under \$500	DM 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 2019 01 80 2019 01 80 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 \$ Single or CUSIP number Security Number of Description of security Highest price Total amount lowest

### Details of rights and convertible/exchangeable securities

LLC Membership Units

(if applicable)

code

Ν

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.

securities

10,000.00

price

1.3300

13,293.71

Conver	Convertible / exchangeable security code Underlying security code		ng	Exerc	ise price adian \$)	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>2</sup> purchasers	Total amount (Canadian \$)
British Columbia	NI 45-106 2.3 [Accredited investor]	1	13,293.71
	13,293.71		
	Total number of unique purchasers <sup>2b</sup>	1	

<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)		

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 ✓ Yes If yes, indicate number of persons compensated.									
a) Name of person compe	nsated and registration	n status							
Indicate whether the person com	pensated is a registrant.		☐ No	$\checkmark$	Yes				
If the person compensated is an i	individual, provide the na	me of the indivi	dual.						
Full legal name of individ	dual								
	Family	name		First given	name		Secondary	given names	
If the person compensated is not	an individual, provide th	e following infor	mation.						
Full legal name o	of non-individual Ang	elList Advisors	s, LLC						
Fire	m NRD number 5	7 1	1 (	0		(if appli	cable)		
Indicate whether the person com	pensated facilitated the c	listribution throu	ıgh a funding	portal or a	ın internet-	based po	ortal.	] No ✓	Yes
b) Business contact inform	nation								
If a firm NRD number is not prov	ided in Item 8 (a), provid	e the business co	ontact informa	ation of the	person be	ing com <sub>l</sub>	pensated.		
Street address									
Municipality					Province/	State			
Country				Postal	code/Zip	code			
Email address				Tele	phone nu	mber			
c) Relationship to issuer o	r investment fund ma	nager							
Indicate the person's relationship the Instructions and the meaning							ning of "connect	ed" in Part I	3(2) of
✓ Connect with the issue	r or investment fund ma	nager		Inside	r of the iss	uer (othe	er than an inves	tment fund)	
Director or officer of the	e investment fund or inve	estment fund ma	anager	Emplo	yee of the	issuer o	r investment fu	nd manager	
None of the above									
d) Compensation details									
Provide details of all compensation Canadian dollars. Include cash coincidental to the distribution, such allocation arrangements with the	mmissions, securities-bas n as clerical, printing, lego	sed compensatio al or accounting	n, gifts, discou services. An is	unts or othe ssuer is not	er compens required to	sation. D o ask for	o not report pay	ments for so	ervices
Cash commissions paid	d				Security o	ode 1	Security code 2	Security co	ode 3
Value of all securities distributed as compensation	1		Security code	s [					
Describe te	rms of warrants, options	or other rights							
Other compensation	5	Describe							
Total compensation paid	1								
✓ Check box if the person will or may receive any deferred compensation (describe the terms below)									
Carried interest equ	ual to 5% of any return	n above the to	tal investme	ent amour	nt.				
<sup>4</sup> Provide the aggregate value of additional securities of the issue rights exercisable to acquire add	er. Indicate the security o	odes for all secu							er

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

a) Name of person comp	pensated and registration	on status									
Indicate whether the person compensated is a registrant.    No    Yes											
If the person compensated is ar	n individual, provide the no	me of the indiv	idual.								
Full legal name of individual Ness Rob											
Family name First given name Secondary given names											
If the person compensated is no	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										Yes	
b) Business contact info	rmation										
If a firm NRD number is not pro	ovided in Item 8 (a), provid	e the business c	ontact info	mation o	f the p	erson b	eing con	npensated.			
Street address	c/o AngelList, 90 Gold	Street, Floor	3								
Municipality	San Francisco				Pr	rovince	e/State	Californ	nia		
Country	United States		Ī	Pos	stal co	ode/Zi <sub>l</sub>	o code	94133			
Email address	robness@gmail.com			Т	Teleph	none n	umber	415800	2052		
c) Relationship to issuer	or investment fund ma	nager									
Indicate the person's relationsh the Instructions and the meani									onnecte	d" in Part B(	2) of
	uer or investment fund ma		joi trie purp		•	-			invest	ment fund)	
<u> </u>							,			,	
Director or officer of t	the investment fund or inve	estment fund m	anager	L Er	mploye	ee of th	e issuer	or investm	ent fun	d manager	
✓ None of the above											
d) Compensation details											
Provide details of all compensat		•									
Canadian dollars. Include cash of incidental to the distribution, su											
allocation arrangements with th	ne directors, officers or emp	loyees of a non	-individual	compenso	ated by	y the iss	suer.				
Cash commissions pa	aid				3	Security	code 1	Security c	ode 2	Security coo	le 3
Value of all securities			Security co	des							
distributed as compensation	terms of warrants, options	or other rights									_
		7									=
Other compensatio		Describe									
Total compensation pa	aid										
Check box if the person will or may receive any deferred compensation (describe the terms below)											
Carried interest e	qual to 15% of any retu	rn above the	total inves	tment a	moun	ıt.					
<sup>4</sup> Provide the aggregate value of additional securities of the issu- rights exercisable to acquire a <sup>5</sup> Do not include deferred comp	uer. Indicate the security of additional securities of the l	odes for all sec									-

TEM 9 - DIRECTORS, EXECU	TIVE OFFICERS	AND PROMOT	ERS OF THE ISS	UER						
If the issuer is an investment fund, do not complete Item 9. Procced to Item 10.										
Indicate whether the issuer is any o	f the following (select	t the one that appli	es - if more than one	applies, select onl	y 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 name of reporting issuer										
Wholly owned subsidiary of	a foreign public issu	ıer <sup>6</sup>						_		
Provide name of	f foreign public issue	r								
Issuer distributing only eligi	ble foreign securities	and the distribution	n is to permitted clie	nts only <sup>7</sup>				_		
If the issuer is at least one of the	above, do not comp	olete Item 9(a) – (d	c). Proceed to Item 1	10.						
<sup>6</sup> An issuer is a wholly owned subside securities that are required by law to respectively. <sup>7</sup> Check this box if it applies to the conclients. Refer to the definitions of "e	o be owned by its dir urrent distribution evo ligible foreign securi	ectors, are benefice en if the issuer mad ty" and "permitted o	ially owned by the re de previous distributi client" in Part B(1) of	porting issuer or to ons of other types	the foreign	public is:	suer,			
a) Directors, executive officer	s and promoters o	of the issuer								
Provide the following information for territory; otherwise state the country.	r each director, execu	tive officer and pro				tate the p	province	or		
Organization or company name	Family name	First given name	Secondary given names	Business loc non-individu resident jurisdictio individu	ual or ail n of			to issuer at apply)		
				Province or	country	D	0	Р		
	Neilson	Jeremy		United States			✓			
	Johnson	Mateo		United States			✓			
	Assure Fund Management LLC	n/a		United States		✓				
b) Promoter information		•				•				
If the promoter listed above is not an individual, provide the following information for each director and executive officer of the promoter. For locations within Canada, state the province or territory; otherwise state the country. For "Relationship to promoter", "D" – Director, "O" – Executive Officer.										
Organization or company name	Family name	First given name	Secondary given names	Residential jurisdiction of individual		itionship one or bo				
				Province or country	D		C			
c) Residential address of eac	h individual									
Complete Schedule 2 of this form	providing the full r	esidential address	for each individua	l listed in Item 9(	(a) and (b)	and att	ach to t	he		

 $completed\ report.\ Schedule\ 2\ also\ requires\ information\ to\ be\ provided\ about\ control\ persons.$ 

## 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	A-ZFS-14-Fund, a series of AX-RN-Funds, LLC								
Full legal name	Norman Alex								
	Family name	First given name	Secondary given names						
Title	Officer of the Issuer's Manage	r							
Telephone number	4156085632	Email address alex	norman@angel.co						
Signature	"Alex Norman"	Date 20	019 01 14						
		Y	YYY 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 individual certifying the report					
Full legal name	Anderson	Patricia		Title	Securities Paralegal
	Family name	First given name	Secondary given names	_	
Name of company	Dentons Canada LLP				
Telephone number	4032687003	En	nail address patricia.a	nderson@d	lentons.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.