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, provide filing date of report that is being amended (YYYY-MM-DD) 							
TEM 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)						
ITEM 3 - ISSUER NAME AND OTH	JED IDENITIETEDS						
		vestment fund, about the fund					
Full legal name	Provide the following information about the issuer, or if the issuer is an investment fund, about the fund. Full legal name A-JMI-15-Fund, a series of Survival Economics Companies Investments, LLC						
Previous full legal name							
	r's name changed in the last 12 months, provide most recent previous legal name.						
Website	(if applicable)						
If the issuer has a legal entity identifier, prov	vide below Pefer to Part B of t	he Instructions for the definition					
Legal entity identifier							
ITEM 4 - UNDERWRITER INFORM	ATION						
If an underwriter is completing the report, p	rovide the underwriter's full le	gal name and firm National Reg	istration Database (NRD) number.				
Full legal name							
Firm NRD number	(if applicable)						
If the underwriter does not have a firm NRD	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)				
		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 code526989
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 V 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? Image: No If yes, provide SEDAR profile number If the issuer does not have SEDAR profile complete item 5(d) - (h).
d) Head office address
Street address 2150 South 1300 East Ste. 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 03 19 YYYY MM DD Financial year-end 12 31 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
\$100M to under \$500M \$500M to under \$1B \$1B or over

ITEM 6 - INVESTMEN	ITEM 6 - INVESTMENT FUND ISSUER INFORMATION							
If the issuer is an investment 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	TEM 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, which should be disclosed in Item 8. The information provided in Item 7 must reconcile with the information provided in Schedule 1 of the report.										
a) Currency	, ,				,			,	,	
Select the currency or currencies in	Select the currency or currencies in which the distribution was made. All dollar amounts provided in the report must be in Canadian dollars.									
🗌 Canadian dollar 🗸	US dollar 🛛 🗌 Eur	0	Other (describe	e)					
b) Distribution date(s)										
as both the start and end dates. If distribution period covered by the	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 d	ate 2018 04 10 YYYY MM DE			End date	20 YYY	018 YY	04 мм	10 DD		
c) Detailed purchaser inform	mation									
Complete Schedule 1 of this f	orm for each purchaser a	nd attac	h the sche	dule to t	the con	npleted	l repor	t.		
d) Types of securities distri	buted									
Provide the following information Instructions for how to indicate t distributed. The information inclu <u>Asked Questions.</u>	he security code. If providing th	e CUSIP r	umber, indic	ate the ful	ll 9-digit	t CUSIP i	number	[.] assigned	l to the security	
							(Canadian \$	5	
Security code CUSIP number (if applicable)	Description of security		Numbe securi		low	gle or vest rice	High	est price	Total amo	unt
U N T LL	C Membership Units		16	,384.00	6,309	9.0000			20,6	73.33
	vertible/exchangeable secu									
If any rights (e.g. warrants, option were distributed, provide the con								vertible/e	exchangeable s	ecurities
Security Underlying security code	Exercise price (Canadian \$)	Expi	ry date - MM-DD)	Convers	sion	-		be 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	n relied on			Numbe purcha		-	Total amou	unt (Canadian \$)	
British Columbia	NI 45-106 2.3 [Accredi	ted inve	estor]			1			20,673	3.33
	·	Total dol	lar amount	of securit	ties dis	tributed			20,67	3.33
	Total num	ber of un	ique purcha	asers ²		1				
	² 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 distributed multiple types of securities to, and relied on multiple exemptions for, that purchaser.						aser or	nly once, r	regardless of w	

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 - COMPENSATION I	NFORMATION		
		he issuer directly provides, or will provide e than one person was, or will be, com	
Indicate whether any compensation	n was paid, or will be paid, in connection	on with the distribution.	
🗌 No 🗹 Yes	If yes, indicate number of perso	ons compensated. 2	
a) Name of person compens	sated and registration status		
Indicate whether the person cor	mpensated is a registrant.	□ No 🗸 Yes	
If the person compensated is an in	ndividual, provide the name of the indi	vidual.	
Full legal name of individua	al		
	Family name	First given name Sec	condary given names
If the person compensated is not	t an individual, provide the following ir	formation.	
Full legal name of n	non-individual AngelList Advisors	s, LLC	
Firm I	NRD number 5 7 1	1 0 (if ap	plicable)
Indicate whether the person com	pensated facilitated the distribution th	rough a funding portal or an internet-ba	sed portal. 🗌 No 🗸 Yes
b) Business contact informat			
If a firm NRD number is not provid	ded in Item 8 (a), provide the business	contact information of the person being	compensated.
Street address			
Municipality		Province/State	
Country		Postal code/Zip code	
Email address		Telephone number	
c) Relationship to issuer or ir	nvestment fund manager		
		nager (select all that apply). Refer to the 1 45-106 for the purposes of completing th	
	r investment fund manager		ther than an investment fund)
	nvestment fund or investment fund ma		r or investment fund manager
None of the above			
d) Compensation details			
Canadian dollars. Include cash con services incidental to the distribution	mmissions, securities-based compensation, such as clerical, printing, legal or a	ntified in Item 8(a) in connection with the ion, gifts, discounts or other compensatic ccounting services. An issuer is not requi yees of a non-individual compensated by	n. Do not report payments for ed to ask for details about, or report
Cash commissions paid		Security codes Security code 1	Security code 2 Security code 3
Value of all securities distributed as compensation ⁴			
Describe terms	s of warrants, options or other rights		
Other compensation ⁵	Describe		
Total compensation paid			
Check box if the person	will or may receive any deferred con	pensation (describe the terms below)	
Carried interest equal	I to 5% of any return above the to	tal investment amount.	
	r. Indicate the security codes for all se	tion, <u>excluding</u> options, warrants or othe curities distributed as compensation, <u>in</u>	

⁵Do not include deferred compensation.

a) Name of person comp	pensated and registra	tion status					
Indicate whether the perso	n compensated is a regis	trant.	✓ No		Yes		
If the person compensated is	an individual, provide the	e name of the ind	ividual.				
Full legal name of indiv	vidual						
	Family r	name	First g	iven name	Seco	ondary given names	
If the person compensated is	s not an individual, provi	de the following in	nformation.				
Full legal name	of non-individual He	ron Rock GP, I	nc.				
F	irm NRD number				(if app	licable)	
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. 🗌 No 🗹 Yes							
b) Business contact info	rmation						
If a firm NRD number is not p	provided in Item 8 (a), pro	ovide the business	contact inform	nation of th	e person being co	ompensated.	
Street address	100 King Street West	1 First Canadia	an Place				
Municipality	Toronto]	Р	rovince/State	Ontario	
Country Canada Postal code/Zip code M5X1B8							
Email address Telephone number							
c) Relationship to issuer	or investment fund m	anager					
Indicate the person's relations	ship with the issuer or inv	vestment fund ma					cted" in Part
B(2) of the Instructions and th	-		1 45-106 for the				
	ier or investment fund m	-		_		her than an invest	,
Director or officer of t	he investment fund or in	vestment fund ma	anager		ee of the issuer	or investment fun	d manager
d) Compensation details							
Provide details of all compens Canadian dollars. Include cash services incidental to the distr on, internal allocation arrange	ation paid, or to be paid, h commissions, securities ibution, such as clerical, µ ements with the directors	-based compensa printing, legal or c	tion, gifts, disco accounting serv	ounts or oth ices. An iss	ner compensation uer is not require	n. Do not report po d to ask for detail	yments for
Cash commissions pa		:	Security codes	-	Security code 1	Security code 2	Security code 3
Value of all securitie distributed a compensatio	as						
•	erms of warrants, option	s or other rights					
Other compensatio	n ⁵	Describe					
Total compensation pa		-					
Check box if the pe	erson will or may receive	any deferred con	npensation (de	scribe the	terms below)		
Carried interest e	qual to 15% of any ret	turn above the t	total investme	ent amoui	nt.		
⁴ Provide the aggregate value						rights exercisable	e to acquire
additional securities of the is rights exercisable to acquire	suer. Indicate the securi	ity codes for all se					

⁵Do not include deferred compensation.

Item	9 - DIRECTORS, EXECUTI	VE OFFICERS A	ND PROMO	TERS OF THE I	SSUER				
lf t	he issuer is an investment fund, o	lo not complete It	em 9. Procced t	o Item 10.					
Ind	licate whether the issuer is any of th	e following (select a	ll that apply).						
[Reporting issuer in any jurisdic	tion of Canada							
Foreign public issuer									
[Wholly owned subsidiary of a reporting issuer in any jurisdiction of Canada ⁶								
	Provide name of reporting issuer								
	Wholly owned subsidiary of a foreign public issuer ⁶								
	Provide name of for	eign public issuer							
[Issuer distributing eligible forei	gn securities only to	o permitted clien	ts ⁷					
lf t	the issuer is at least one of the ab	ove, do not compl	ete Item 9(a) –	(c). Proceed to Ite	m 10.				
secu ⁷ Chu clier	⁶ 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. ⁷ 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.								
a)	\checkmark If the issuer is none of the ab Directors, executive officers a		-	nem 5(u) (c).					
	rovide the following information for rritory; otherwise state the country.				tive Officer, "P" –	Promoter.	ıda, sta	te the p	rovince or
	Organization or company name	Family name	First given name	Secondary give names	n Business lo non-indivio resider jurisdicti indivio	dual or ntail ion of		ationsh issuer lect all apply)	that
					Province o	Province or country		0	Р
		Assure Fund Management	LLC		United States	S	\checkmark		
		Neilson	Jeremy		United States	S		✓	
		Thoms	Richard		United States	S		✓	
b)	Promoter information								
	the promoter listed above is not an ithin Canada, state the province or t								
	Organization or company nameFamily nameFirst given nameSecondary given nameResidential jurisdiction of individualRelationship to promoter (select one or both if applicable)								
					Province or country	D		C)
c)	Residential address of each in	ndividual							
	nplete Schedule 2 of this form pr npleted report. Schedule 2 also re					m 9(a) and	(b) an	d atta	h to the

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	Thoms						
	Family name	First given name		Secondary g			
Title	Officer of the Issuer's Manage	officer of the Issuer's Manager					
Name of issuer/underwriter/ investment fund manager	A-JMI-15-Fund, a series of Survival Economics Companies Investments, LLC						
Telephone number		Email address					
Signature	Richard Thoms	Date	2018	04	19		

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.