# 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)							
ITEM 2 - PARTY CERTIFYING THE	REPORT						
Indicate the party certifying the report (sele National Instrument 81-106 Investment Fur							
☐ Investment fund issuer							
✓ Issuer (other than an inves	tment fund)						
Underwriter							
ITEM 3 - ISSUER NAME AND OTH	HER IDENTIFIERS						
Provide the following information about the		vestment fund, about the fund.					
Full legal name	Advanced Proteome T	herapeutics Corporation					
Previous full legal name	N/A						
If the issuer's name changed in a	the last 12 months, provide mo	ost recent previous legal name.					
Website	www.advancedproteon	ne.com	(if applicable)				
If the issuer has a legal entity identifier. pro	vide below. Refer to Part B of t	he Instructions for the definition	of "legal entity identifier".				
Legal entity identifier	NA						
ITEM 4 - UNDERWRITER INFORM	ATION						
		45 45 42	· · · · · · · · · · · · · · · · · · ·				
If an underwriter is completing the report, p	rovide the underwriter's full leg	gal name and firm National Reg	ustration Database (NRD) number.				
Full legal name							
Firm NRD number		(if applicable)					
If the underwriter does not have a firm NRD number, provide the head office contact information of the underwriter.							
Street address							
Municipality		Province/State					
Country		Postal code/Zip code					
Telephone number		Website	(if applicable)				

ITEM 5 - ISSUER INFORMATION
If the issuer is an investment fund, do not complete Item 5. Proceed to Item 6.
a) Primary industry
Provide the issuer's North American Industry Classification Standard (NAICS) code (6 digits only) that corresponds to the issuer's primary business activity.  For more information on finding the NAICS industry code go to <b>Statistics Canada's NAICS industry search tool.</b> NAICS industry code 5 4 1 7 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
b) Number of employees
Number of employees:
c) SEDAR profile number
Does the issuer have a SEDAR profile?
No Yes If yes, provide SEDAR profile number 0 0 0 2 4 4 8 5
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 Financial year-end
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 T
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.
S0 to under \$5M S5M to under \$25M S25M 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 investm	ent fund, provide the following information.					
a) Investment fund man	nager information					
Full legal name						
Firm NRD number	(if applicable)					
If the investment fund mana	ger 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 for	und					
Type of investment fund that r	most accurately identifies the issuer (select only one) .					
Money market	Equity Fixed income					
Balanced	Alternative strategies Other (describe)					
Indicate whether one or both o	of the following apply to the investment fund .					
☐ Invests primarily in o	other investment fund issuers					
☐ Is a UCITs Fund¹						
	Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) investment schemes to operate throughout the EU on a passport basis on authorization from one member state.					
	d financial year-end of the investment fund					
•						
Date of formatio	n Financial year-end MM DD					
d) Reporting issuer stat	us of the investment fund					
Is the investment fund a repor	ting issuer in any jurisdication of Canada? No Yes					
· · · <u></u> · · · · <u></u> ·	Canada in which the investment fund is a reporting issuer.					
☐ All ☐	AB BC MB NB NL NT					
	NU ON PE QC SK T					
e) Public listing status c	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 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 names						
f) Net asset value (NAV) 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 \$500M	\$500M to under \$1B \$1B or over Date of NAV calculation:					
	YYYY MM DD					

ITEM 7 - INFORMATION ABO	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, 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 w	hich the distribution was mad	de. All dol	lar amounts	provided in	the report mus	t be in Canadiar	dollars.	
✓ Canadian dollar US dollar Euro Other (describe)								
b) Distribution date(s)								
State the distribution start and end a as both the start and end dates. If th distribution period covered by the re Start date	ne report is being filed for seco	urities dist			2018			date
c) Detailed purchaser informa	ation							
Complete Schedule 1 of this for	m for each purchaser a	nd attac	h the sche	dule to th	e completed	report.		
d) Types of securities distribu	ted							
Provide the following information f Instructions for how to indicate the distributed. The information include Asked Questions.	security code. If providing the	e CUSIP n	umber, indic	ate the full	9-digit CUSIP r	number assigned	to the security be se our <u>Frequenti</u>	-
Security code CUSIP number (if applicable)	Description of security		Numbe securi		Single or lowest price	Highest price	Total amour	nt
U B S 007628100 Units	3		200	,000.00	0.0500	0.0500	10,00	0.00
e) Details of rights and conve	rtible/exchangeable secu	ırities						
If any rights (e.g. warrants, options) were distributed, provide the conve							xchangeable sec	urities
Security Underlying security code	Exercise price (Canadian \$)		ry date MM-DD)	Conversion ratio		ibe other items (if a	applicable)	
	owest Highest			4.4	200.000	) 4 ma m o f o mo h l o		
W N T C M S 0.0750 0.0750 2020-09-11 1:1 200,000 transferable warrants exercisable at \$0.075 per share for 2 years from closing.								
f) Summary of the distribution by jurisdiction and exemption								
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.								

Province or country	Exemption relied on	Number of purchasers	Total amount (Canadian \$)
British Columbia	NI 45-106 2.3 [Accredited investor]	2	10,000.00
	Total dollar amount of sec	urities distributed	10,000.00
	Total number of unique purchasers <sup>2</sup>	2	

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

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

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

If the issuer is an investment fund, provide the net proceeds to the investment fund for each jurisdiction of Canada and foreign jurisdiction where a purchaser resides. 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)

TEM 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.  1						
a) Name of person compensated and registration status						
Indicate whether the person compensated is a registrant.    No 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 PI Financial Corp.						
Firm NRD number 5 2 9 0 (if applicable)						
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. Ves						
b) Business contact information						
If a firm NRD number is not provided in Item 8 (a), provide the business contact information of the person being compensated.						
Street address						
Municipality Province/State						
Country Postal code/Zip code						
Email address Telephone number						
c) Relationship to issuer or investment fund manager						
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.						
Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund)						
Director or officer of the investment fund or investment fund manager						
✓ None of the above						
d) Compensation details						
Provide details of all compensation paid, or to be paid, to the person identified in Item 8(a) in connection with the distribution. Provide all amounts in Canadian dollars. Include cash commissions, securities-based compensation, gifts, discounts or other compensation. Do not report payments for services incidental to the distribution, such as clerical, printing, legal or accounting services. An issuer is not required to ask for details about, or report on, internal allocation arrangements with the directors, officers or employees of a non-individual compensated by the issuer.						
Cash commissions paid 800.00 Security codes Security code 1 Security code 2 Security code 3						
Value of all securities distributed as compensation <sup>4</sup>						
Describe terms of warrants, options or other rights						
Other compensation <sup>5</sup> Describe						
Total compensation paid 800.00						
Check box if the person will or may receive any deferred compensation (describe the terms below)						
<sup>4</sup> Provide the aggregate value of all securities distributed as compensation, <u>excluding</u> options, warrants or other rights exercisable to acquire additional securities of the issuer. Indicate the security codes for all securities distributed as compensation, <u>including</u> options, warrants or other						

TEM 9 - DIRECTORS, EXECUTIN	/E Officers A	AND PROMO	TERS OF THE <b>I</b> S	SSUER				
If the issuer is an investment fund, d	lo not complete It	em 9. Procced to	o Item 10.					
Indicate whether the issuer is any of the	e following (select o	all that apply).						
Reporting issuer in any jurisdiction of Canada								
Foreign public issuer								
Wholly owned subsidiary of a re	eporting issuer in a	any jurisdiction of	Canada <sup>6</sup>					
Provide name of reporting issuer								
☐ Wholly owned subsidiary of a fo	oreign public issue	r <sup>6</sup>						
Provide name of fore	eign public issuer							
Issuer distributing eligible foreig	gn securities only t	o permitted clien	ts <sup>7</sup>					
If the issuer is at least one of the abo	ove, do not comp	lete Item 9(a) –	(c). Proceed to Ite	m 10.				
<sup>6</sup> An issuer is a wholly owned subsidiary securities that are required by law to be <sup>7</sup> Check this box if it applies to the curren clients. Refer to the definitions of "eligib	e owned by its direct ont distribution ever	ctors, are benefic n if the issuer mad	cially owned by the de previous distrib	reporting issuer utions of other ty	or the foreig	n publi	ic issue	er, respectively.
If the issuer is none of the abo	ove, check this bo	x and complete	Item 9(a) - (c).					
a) Directors, executive officers a	nd promoters of	the issuer						
Provide the following information for e territory; otherwise state the country. I						da, stai	te the p	rovince or
Organization or company name	Family name	First given name	Secondary give	Business lo non-indivi residei jurisdicti individ	dual or ntail ion of		ationsh issuer ect all apply)	that
				Province o	r country	D	0	Р
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	Relatio (select one			
				Province or country	D		C	<b>)</b>
c) Residential address of each in	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	Dickie	William John (E	Bill)				
	Family name	First given name	_	Secondary given names			
Title	President						
Name of issuer/underwriter/ investment fund manager	Advanced Proteome Therapeutics Corporation						
Telephone number	6128523217 Email address bill.dickie@advancedproteome.						
Signature	"William John (Bill) Dickie"	Date	2018	09	17		
		_	YYYY	MM	DD		

_	_	_	
	CONTA		
<b>ITEM</b>	CUNIF		

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.

questions regulating the	desitions regulating the contents of this report, if different than the that data certifying the report of them 10.							
Same as indiv	vidual certifying the repor	rt						
Full legal name	Hamelin	Lindsay		Titl	e Consultant			
	Family name	First given nam	e Secondary names	given				
Name of company Advanced Proteome Therapeutics Corporation								
Telephone number	6046822928		Email address	lindsay@takeitpubl	icservices.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.