Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 9700039

ITEM 1 - REPORT TYPE						
☐ New report						
Amended report If amended, provide filing date of report that is being amended 2021 12 20 (YYYY-MM-DD)						
ITEM 2 - PARTY CERTIFYING THI	E 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	nadas Bisciosare and the comp	amon policy to 141 01 100.				
✓ Issuer (other than an investment of the sum of th	stment fund)					
Underwriter	· · · · · · · · · · · · · · · · · · ·					
ITEM 3 - ISSUER NAME AND OT	HED IDENTIFIEDS					
Provide the following information about the		vestment fund, about the fund				
Full legal name		vestment junu, about the junu.				
Previous full legal name						
If the issuer's name changed in the last 12 months, provide most recent previous legal name.						
Website	tust 12 months, provide most		la)			
		(if applicab				
If the issuer has a legal entity identifier, pr Legal entity identifier	ovide below. Refer to Part B of t	ne instructions for the definition	of "legal entity laentifier".			
	escurity provide the full legal pe	ama(c) of the so issuer(c) other t	agn the issuer named above			
If two or more issuers distributed a single s Full legal name(s) of co-issuer(s)		(if applicab				
Tull legal flame(s) of co-issue(s)		(п аррпсар	le <i>)</i>			
ITEM 4 - UNDERWRITER INFORM	MATION					
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 NRD number, provide the head office contact information of the underwriter.						
Street address	Street address					
Municipality		Province/State				
Country		Postal code/Zip code				
Telephone number		Website	(if app	licable)		

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 2 1 2 2 9 9				
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.				
✓ 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 5 7 1 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 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 □ 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 inves	tment 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 strateg	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	☐ Is a UCITs Fund¹					
¹ Undertaking for the Collective Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) directives that allow collective 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	Date of formation Financial year-end MM DD Financial year-end					
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 of Canada in which the investment fund is a reporting issuer.						
☐ AII ☐	AB BC MB NB NL NT					
□ NS □	NU ON PE QC SK YT					
e) Public listing status 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 (NAV) 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 \$500M to under \$1B \$1B 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.

a) C	urrency
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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 □ Euro □ Other (describe)

b) 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 2021 12 08

End date 2021 12 08

c) Detailed purchaser information

Complete Schedule 1 of this form for each purchaser and attach the schedule to the completed report.

d) 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
U B S		Each Unit consists of one common share of the Issuer and one common share purchase warrant.	7,686,821.00	0.3100		2,382,914.50

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.

							,	'	, ,	,
exch	ange	ertible / ingeable Underlying rity code security code		y v I (Canadian %)			Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other items (if applicable)	
						Lowest	Highest			
W	N	T	С	М	S	0.3400		2023-12-08	1:1	

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 ²⁸ purchasers	Total amount (Canadian \$)
Alberta	NI 45-106 2.3 [Accredited investor]	1	31,000.00
British Columbia	NI 45-106 2.3 [Accredited investor]	8	502,975.00
Ontario	NI 45-106 2.3 [Accredited investor]	12	565,000.00
Québec	NI 45-106 2.3 [Accredited investor]	1	15,500.00
Mexico	NI 45-106 2.3 [Accredited investor]	1	100,750.00
Panama	NI 45-106 2.3 [Accredited investor]	2	83,700.00

United States	Other	6	1,083,989.50	
	Total dollar amount of securities distributed			
	Total number of unique purchasers ^{2b}	31		

^{2a} 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	

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)

^{2b} 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.

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. Complete additional copies of this page if more than one person was, or will be, compensated. Indicate whether any compensation was paid, or will be paid, in connection with the distribution. No V Yes If yes, indicate number of persons compensated.	ITEM 8 - COMPENSATION INFORMATION					
No ✓ Yes If yes, indicate number of persons compensated.	Indicate whether any compensation was paid, or will be paid, in connection with the distribution.					
	No ✓ Yes If yes, indicate number of persons compensated. 6					

a) Name of person compensated and registration status										
Indicate whether the person cor	mpensated is a re	egistrant.	□ N	0	\checkmark	Yes				
If the person compensated is an	n individual, prov	ide the name of the ind	lividual.							
Full legal name of indiv	ridual									
		Family name		Fire	st given n	name		Secondary (jiven names	
If the person compensated is no	ot an individual, p	provide the following in	formation.							
Full legal name	of non-individu	ual HAYWOOD SE	CURITIES	S INC. /	VALE	JRS MO	BILIE	RES HAYWOOI) Inc.	
F	irm NRD numb	per 1 6	3 0				(if app	licable)		
Indicate whether the person cor	mpensated facilit	rated the distribution th	rough a fur	nding por	tal or ar	n internet	-based	portal. 🗸	No [Yes
b) Business contact infor	mation									
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					F	Province	'State			
Country				F	ostal o	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 Employee of the issuer or investment fund manager										
✓ None of the above										
d) Compensation details										
Provide details of all compensat Canadian dollars. Include cash of incidental to the distribution, sur allocation arrangements with the Cash commissions pa	commissions, sec ch as clerical, pri ne directors, office	urities-based compenso nting, legal or accounti	tion, gifts, on ng services.	discounts An issue	or othe	r compen required t	sation. o ask fo	Do not report payı	ments for se	ervices
·		3,037.00				Security of		Security code 2	Security co	ode 3
Value of all securitie distributed as compensatio	-		Security	codes		W N	Т			
Describe t	erms of warrants	s, options or other right	comm		e at an	exercis		tling the holder te of 0.34 with an		
Other compensation	n ⁵	Describ	е							
Total compensation pa	id 1	3,857.00								
Check box if the pe	rson will or may	receive any deferred of	ompensati	on (desc	ribe the	terms be	low)			
⁴ Provide the aggregate value of additional securities of the issurights exercisable to acquire as ⁵ Do not include deferred comp	uer. Indicate the diditional securiti	security codes for all s	ation, <u>exclu</u> ecurities di	u <u>ding</u> opti stributed	ions, wa as com	arrants or pensation	other ri	ights exercisable t ding options, warr	o acquire ants or oth	er

a) Name of person comp	ensated and regis	stration	status										
Indicate whether the person co	mpensated is a regist	rant.			☐ No		√	Yes					
If the person compensated is an	n individual, provide	the name	e of the i	ndivid	dual.								
Full legal name of indiv	vidual												
		Family na	ame			Firs	t given	name			Secondar	/ given nam	es
If the person compensated is no	ot an individual, prov	ide the f	ollowing	infor	mation.								
Full legal name	of non-individual	PI Fina	ancial C	orp.	/Corporat	ion Fi	nanciè	re PI					
F	irm NRD number	5	2	9	0				(if a	oplical	ole)		
Indicate whether the person co.	Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.												
b) Business contact info	mation												
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							ı	Provin	ce/Stat	e			
Country						F	ostal	code/	Zip cod	e [
Email address							Tele	ohone	numbe	r			
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 compensations of all compensations and compensations. Include cash concidental to the distribution, sure allocation arrangements with the Cash commissions pages.	commissions, securiti ch as clerical, printin ne directors, officers o	es-basea g, legal (l compen or accour	nsatio nting	n, gifts, dis services. A	counts n issuei	or othe r is not	er comp require by the	oensatioi ed to ask	n. Do r for de	not report po	yments for	services n, internal
Value of all securitie	26						-	W	N T	36	curity code 2	Security	code 3
distributed as compensation				5	Security co	des	L	**					
Describe to	erms of warrants, op	otions or	other rig	ghts		n shar	e at ar	n exer			the holde 0.34 with a		
Other compensation	n ⁵		Desc	ribe									
Total compensation pa	3,72	20.00											
Check box if the person will or may receive any deferred compensation (describe the terms below)													
⁴ Provide the aggregate value additional securities of the issinghts exercisable to acquire a ⁵ Do not include deferred comp	uer. Indicate the secu dditional securities o	ırity cod	les for all	nsatio I secu	on, <u>excludi</u> ırities distr	<u>ng</u> option ibuted	ons, wa as con	arrants npensa	or other tion, <u>inc</u>	rights <u>luding</u>	s exercisable options, wa	e to acquire rrants or o	e ther

a) Name of person comp	ensated and reg	istration status							
Indicate whether the person co	mpensated is a regi	strant.	☐ No	\checkmark	Yes				
If the person compensated is ar	n individual, provide	e the name of the indiv	idual.						
Full legal name of indiv	vidual								
		Family name	· ·	First given n	ame	Secondary (given names		
If the person compensated is no	ot an individual, pro	ovide the following info	rmation.						
Full legal name	of non-individua	LEEDE JONES (SABLE INC.						
F	irm NRD numbe	r 5 7 7	0		(if apı	plicable)			
Indicate whether the person co	mpensated facilitate	ed the distribution thro	ugh a funding p	portal or an	internet-based	portal.	No Yes		
b) Business contact infor	rmation								
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				Р	rovince/State				
Country			Ī	Postal c	ode/Zip code				
Email address				Telep	hone 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 Director or officer of the investment fund or investment fund manager Employee of the issuer or investment fund manager									
✓ None of the above	ne investment func	o invesiment fund if	lanagei		ee or the issue	or investment turi	u managei		
d) Compensation details									
Provide details of all compensate Canadian dollars. Include cash a incidental to the distribution, su allocation arrangements with the	commissions, securi ch as clerical, printi ne directors, officers	ities-based compensati ing, legal or accounting or employees of a non	on, gifts, discou g services. An is:	nts or other suer is not r	r compensation. required to ask f	Do not report payı	ments for services		
Cash commissions pa	, O,	975.00			Security code 1	Security code 2	Security code 3		
Value of all securitie distributed as compensation			Security codes	;	WNT				
Describe t	terms of warrants, of	options or other rights		nare at an	exercise price	itling the holder t e of 0.34 with an			
Other compensatio	n ⁵	Describe							
Total compensation pa	6,9	975.00							
Check box if the pe	erson will or may re	ceive any deferred co	mpensation (de	escribe the	terms below)				
⁴ Provide the aggregate value of additional securities of the issurights exercisable to acquire a ⁵ Do not include deferred comp	uer. Indicate the se dditional securities	curity codes for all sec	ion, <u>excluding</u> c curities distribut	options, wa ed as com	rrants or other inclu	rights exercisable t u <u>ding</u> options, warr	o acquire ants or other		

a) Name of person compensated and registration status												
Indicate whether the person co	mpensated is a	registrant.			☐ No		√	Yes				
If the person compensated is ar	n individual, pro	vide the na	me of the	individ	dual.							
Full legal name of indiv	ridual											
		Family	name			First	t given r	name		Secondary	given names	3
If the person compensated is no	ot an individual,	provide the	e followin	g infor	mation.							
Full legal name	of non-individ	dual Can	accord (3enuit	y Corp./C	orpora	ation C	Canaco	ord Ger	nuity		
F	irm NRD num	nber g	0	0					(if app	olicable)		
Indicate whether the person co	mpensated faci	litated the d	istributio	n throu	ıgh a fundi	ng port	al or a	n intern	⊐ et-based	portal.	No [Yes
b) Business contact infor	mation											
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							F	Provinc	e/State			
Country						Р	ostal	code/Z	ip code			
Email address							Telep	hone	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 t	he investment	fund or inve	stment fu	und ma	anager		Employ	yee of t	he issuer	or investment fur	nd manage	r
✓ None of the above												
d) Compensation details												
Provide details of all compensate Canadian dollars. Include cash of incidental to the distribution, surallocation arrangements with the	commissions, se ch as clerical, p ne directors, offi	curities-bas rinting, lega cers or emp	ed compe il or acco loyees of	ensatio unting	n, gifts, dis services. A	counts n issuer	or othe is not	er comp require	ensation. d to ask f	Do not report pay	ments for s	ervices
Cash commissions pa	alu	6,510.00						Securit	y code 1	Security code 2	Security c	ode 3
Value of all securitie distributed as compensation	-			8	Security co	des		W	N T			
Describe t	erms of warrar	its, options	or other i	rights		share	e at ar	exerc		tling the holder e of 0.34 with ar		
Other compensatio	n ⁵		Des	cribe								
Total compensation pa	id	6,510.00										
Check box if the person will or may receive any deferred compensation (describe the terms below)												
⁴ Provide the aggregate value of additional securities of the issurights exercisable to acquire a ⁵ Do not include deferred comp	uer. Indicate the dditional secur	e security co	odes for a	ensatio all secu	on, <u>excludi</u> urities distr	ng optio ibuted a	ons, wa as com	arrants ipensat	or other r ion, <u>inclu</u>	ights exercisable <u>ding</u> options, wan	to acquire rants or oth	ner

a) Name of person compensated and registration status														
Indicate whether the person co	mpensated is a regist	rant.			☐ No		\checkmark	Yes						
If the person compensated is ar	individual, provide	the nam	e of the i	individ	dual.									
Full legal name of indiv	ridual													
		Family na	ame			Firs	t given i	name			Sed	condary o	jiven name	S
If the person compensated is no	ot an individual, prov	ide the f	following	infor	mation.									
Full legal name	of non-individual	iA Priv	/ate We	alth	Inc./iA Ge	stion	privée	de pa	atrimoi	ne				
F	irm NRD number	1	5	4	0	0			(if a	appli	cable)			
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.														
b) Business contact infor	mation													
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						P	ostal	code/	Zip cod	de				
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 t ✓ None of the above	he investment fund	or invest	tment fui	nd ma	anager		Emplo	yee of	the iss	uer o	r investn	nent fun	d manage	r
d) Compensation details														
Provide details of all compensate Canadian dollars. Include cash of incidental to the distribution, surallocation arrangements with the Cash commissions page 1.5 commissions page 2.5 commissions pag	commissions, securiti ch as clerical, printin ne directors, officers c	es-based g, legal (d compei or accou	nsatio nting	n, gifts, dis services. Ai	counts n issuer	or othe r is not	er comp require by the	pensationed to assissuer.	on. D k for	o not rep details a	oort payı ıbout, or	ments for s report on,	services internal
•		00.00					-		ity code		Security	code 2	Security of	code 3
Value of all securitie distributed as compensation				5	Security co	des	L	W	N	Γ				
Describe t	erms of warrants, op	otions or	other ri	ghts		share	e at ar	n exer					o acquire expiry d	
Other compensatio	n ⁵		Desc	ribe										
Total compensation pa	23,6	69.00												
Check box if the person will or may receive any deferred compensation (describe the terms below)														
⁴ Provide the aggregate value of additional securities of the issurights exercisable to acquire a ⁵ Do not include deferred comp	uer. Indicate the sec additional securities o	urity cod	les for al	nsatio Il secu	on, <u>excludii</u> urities distri	n <u>g</u> optio	ons, wa as com	arrants npensa	or othe tion, <u>in</u>	er rigi <u>cludi</u>	hts exerc ing option	cisable t ns, warr	o acquire ants or oth	ner

a) Name of person compensated and registration status									
Indicate whether the person co	mpensated is a reg	gistrant.	☐ No	\checkmark	Yes				
If the person compensated is an	n individual, provid	de the name of the indi	vidual.						
Full legal name of indiv	vidual								
		Family name	'	First given i	name	Secondary (given names		
If the person compensated is no	ot an individual, pi	rovide the following inf	ormation.						
Full legal name	of non-individu	al RAYMOND JAM	ES LTD.						
F	irm NRD numbe	er 8 2 4	1 0		(if ap	plicable)			
Indicate whether the person co	mpensated facilita	ited the distribution thr	ough a fundir	ng portal or a	n internet-based	d portal. ✓	No Yes		
b) Business contact info	mation								
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				F	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 Employee of the issuer or investment fund manager									
✓ None of the above									
d) Compensation details									
Provide details of all compensate Canadian dollars. Include cash a incidental to the distribution, sur allocation arrangements with the Cash commissions page.	commissions, secu ch as clerical, prin ne directors, officer	rities-based compensat ting, legal or accountin	ion, gifts, disc g services. Ar	counts or other issuer is not	er compensation required to ask	. Do not report payı	ments for services		
·		,440.00		-	Security code 1	Security code 2	Security code 3		
Value of all securitie distributed as compensation			Security cod	des	WNT				
Describe t	erms of warrants	, options or other rights	common		n exercise prio	titling the holder t ce of 0.34 with an			
Other compensatio	n ⁵	Describe	•						
Total compensation pa	nid 7	,440.00							
Check box if the pe	erson will or may r	eceive any deferred co	mpensation	(describe the	terms below)				
⁴ Provide the aggregate value additional securities of the issurights exercisable to acquire a ⁵ Do not include deferred comp	uer. Indicate the s dditional securitie	ecurity codes for all se	tion, <u>excludin</u> curities distril	og options, wa buted as com	arrants or other opensation, <u>incl</u>	rights exercisable u uding options, warr	to acquire ants or other		

тем 9 - Directors, Execu	TIVE OFFICERS	AND PROMOT	ERS OF THE ISS	SUER						
If the issuer is an investment fund	d, do not complete l	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 jurisdiction 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	foreign public issue	r						7		
Issuer distributing only eligil	ble foreign securities	and the distribution	n is to permitted clie	ents only ⁷				_		
If the issuer is at least one of the	above, do not comp	olete Item 9(a) – (d	c). Proceed to Item	10.						
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.										
If the issuer is none of the above, check this box and complete Item 9(a) - (c).										
a) Directors, executive officers and promoters of the issuer Provide the following information for each director, executive officer and promoter of the issuer. For locations within Canada, state the province or										
territory; otherwise state the country.							province			
Organization or company name	Family name	First given name	Secondary given names	Business loc non-individe resident jurisdictio individu	ual or ail n of		onship to			
				Province or	country	D	0	Р		
b) Promoter information										
If the promoter listed above is not an within Canada, state the province or										
Organization or company name	Family name	First given name	Secondary given names	Residential jurisdiction of individual			p to promoter both if applicable)			
				Province or country	D		C)		
c) Residential address of eac	h individual									
Complete Schedule 2 of this form completed report. Schedule 2 also					(a) and (b)	and at	tach to t	he		

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	FenixOro Gold Corp.									
Full legal name	Carlesso	Carlesso John								
	Family name	First given name		Seconda	ary given na	ames				
Title	President									
Telephone number	4162546530	Email address	jcarlesso@	@fenixor	o.com					
Signature	"John Carlesso"	Date	2022	01	06					
		_	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	Helliwell	Angela		Title	Law Clerk					
	Family name	First given name	Secondary given names	•						
Name of company	Chitiz Pathak LLP									
Telephone number	14166449988	Em	ail address AHELLIWE	LL@CHI	TIZPATHAK.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.