Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 9449050

ITEM 1 - REPORT TYPE					
☐ New report					
✓ Amended report If amended, provide	de filing date of report that is being amended 2021 04 19 (YYYY-MM-DD)				
ITEM 2 - PARTY CERTIFYING THE REPORT					
Indicate the party certifying the report (select only one). For Instrument 81-106 Investment Fund Continuous Disclosure	or guidance regarding whether an issuer is an investment fund, refer to section 1.1 of National				
Investment fund issuer	re una the companion policy to Ni 61-100.				
✓ Issuer (other than an investment fund)					
Underwriter					
ITEM 3 - ISSUER NAME AND OTHER IDENTIF	IFIERS				
Provide the following information about the issuer, or if the	ne issuer is an investment fund, about the fund.				
Full legal name Banxa Hold	dings Inc.				
Previous full legal name					
If the issuer's name changed in the last 12 months,	ss, provide most recent previous legal name.				
Website	(if applicable)				
If the issuer has a legal entity identifier_ provide below. Refe	efer to Part B of the Instructions for the definition of "legal entity identifier".				
Legal entity identifier					
If two or more issuers distributed a single security, provide t	e the full legal name(s) of the co-issuer(s) other than the issuer named above.				
Full legal name(s) of co-issuer(s)	(if applicable)				
ITEM 4 - UNDERWRITER INFORMATION					
If an underwriter is completing the report, provide the unde	derwriter's full legal name and firm NRD number.				
Full legal name					
Firm NRD number (if applicable)					
If the underwriter does not have a firm NRD number, provide	vide the head office contact information of the underwriter.				
Street address					
Municipality	Province/State				
Country	Postal code/Zip code				
Telephone number	Website (if applicable)				

ITEM 5 - ISSUER INFORMATION				
If the issuer is an investment fund, do not complete Item 5. Proceed to Item 6.				
a) Primary industry				
Provide the issuer's North American Industry Classification Standard (NAICS) code (6 digits only) that in your reasonable judgment most closely corresponds to the issuer's primary business activity.				
NAICS industry code 5 1 8 2 1 0				
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				
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 Province/State				
Municipality Postal code/Zip code				
Country Telephone number				
e) Date of formation and financial year-end				
Date of formation Financial year-end MM DD MM DD				
f) Reporting issuer status				
Is the issuer a reporting issuer in any jurisdication of Canada? No Yes				
If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer.				
AII AB BC MB NB NL NT				
NS NU ON PE QC SK YT				
g) Public listing status				
If the issuer has a CUSIP number, provide below (first 6 digits only) CUSIP number				
If the issuer is publicly listed, provide the name of the exchange on which the issuer's equity securities primarily trade. Provide only the name of an exchange and not a trading facility such as, for example, an automated trading system.				
Exchange 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	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						
¹ Undertaking for the Collec (EU) directives that allow c	tive Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union 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	tion Financial year-end MM DD 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 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						
-	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	s5M to under \$25M s25M 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.

<u> </u>				
Select the currency or cur	rencies in which the dist	tribution was made. A	All dollar amounts provided in t	he report must be in Canadian dollars.
✓ Canadian dollar	US dollar	Euro	Other (describe)	

b) Distribution date(s)

Currency

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		04	08	End date	2021	04	08
	YYYY	MM	DD	_	YYYY	MM	DD

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 Company and one-half of one common share purchase warrant	3,749,552.00	4.0000		14,998,208.00

e) Details of rights and convertible/exchangeable securities

If any rights (e.g. warrants, options) were distributed, provide the exercise price and expiry date for each right. If any convertible/exchangeable securities were distributed, provide the conversion ratio and describe any other terms for each convertible/exchangeable security.

6	Convertible / exchangeable security code Underlying security code		I (Canadian %)		Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other items (if applicable)				
					Lowest	Highest					
١	Ν	Ν	Т	С	М	S	8.5000		2024-10-08		

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 ^{2<u>a</u>} purchasers	Total amount (Canadian \$)
Bermuda	NI 45-106 2.3 [Accredited investor]	1	100,000.00
China	NI 45-106 2.3 [Accredited investor]	2	140,000.00
Germany	NI 45-106 2.3 [Accredited investor]	6	199,000.00
Germany	NI 45-106 2.10 [Minimum amount investment]	1	1,400,000.00
Switzerland	NI 45-106 2.3 [Accredited investor]	4	1,085,000.00
Alberta	NI 45-106 2.3 [Accredited investor]	7	116,000.00
British Columbia	NI 45-106 2.3 [Accredited investor]	12	324,448.00

Ontario	NI 45-106 2.3 [Accredited investor]	23	2,092,000.00		
Ontario	NI 45-106 2.10 [Minimum amount investment]	2	480,000.00		
United States	NI 45-106 2.10 [Minimum amount investment]	3	3,065,000.00		
United States	NI 45-106 2.3 [Accredited investor]	5	305,000.00		
United States	NI 45-106 2.5 [Family, friends and business associates]	2	30,000.00		
Cayman Islands	NI 45-106 2.3 [Accredited investor]	2	600,000.00		
Québec	NI 45-106 2.3 [Accredited investor]	2	117,000.00		
Singapore	NI 45-106 2.3 [Accredited investor]	1	25,000.00		
Australia	NI 45-106 2.10 [Minimum amount investment]	4	2,450,000.00		
Australia	Other	3	24,600.00		
Australia	NI 45-106 2.3 [Accredited investor]	18	1,557,000.00		
Australia	NI 45-106 2.5 [Family, friends and business associates]	15	411,000.00		
Hungary	NI 45-106 2.5 [Family, friends and business associates]	1	2,000.00		
Netherlands	NI 45-106 2.5 [Family, friends and business associates]	5	35,160.00		
New Zealand	New Zealand NI 45-106 2.5 [Family, friends and business associates]		40,000.00		
Norway	NI 45-106 2.3 [Accredited investor]	1	400,000.00		
	Total dollar amount of securities distributed				
	Total number of unique purchasers ^{2b}	121			

^{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. 5

a) Name of person comp	pensated and regis	stration status							
Indicate whether the person co	mpensated is a regist	rant.	☐ No	✓ Yes					
If the person compensated is a	n individual, provide	the name of the indivi	dual.						
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	e of non-individual	Stifel Nicolaus Ca	nada Inc.						
Firm NRD number 3 3 7 0 (if applicable)									
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. V No Yes									
b) Business contact info	rmation								
If a firm NRD number is not pr	ovided in Item 8 (a), p	provide the business co	ontact information o	f the person being com	pensated.				
Street address	300-145 King St \	V							
Municipality	Toronto			Province/State	Ontario				
Country	Canada		Pos	stal code/Zip code	M5H 1J8				
Email address			Т	elephone number					
c) Relationship to issuer or investment fund manager									
Indicate the person's relationsh the Instructions and the meani	•		-	• •	ning of "connected" in Part B(2) of				
Connect with the iss	uer or investment fun	d manager	Ins	sider of the issuer (oth	er than an investment fund)				
Director or officer of	the investment fund	or investment fund ma	anager	nployee of the issuer of	or investment fund manager				
✓ None of the above									
d) Compensation details									
Provide details of all compensa Canadian dollars. Include cash	tion paid, or to be pa commissions, securiti uch as clerical, printin	es-based compensatic g, legal or accounting	n, gifts, discounts or services. An issuer is	other compensation. E not required to ask for	tribution. Provide all amounts in Do not report payments for services r details about, or report on, internal				
Cash commissions p	aid 438,1	78.44		Security code 1	Security code 2 Security code 3				
Value of all securiti distributed as compensation	269 1	04.00	Security codes	C M S	W N T				
Describe terms of warrants, options or other rights 33,513 Warrants exercisable into one common share on the terms above									
Other compensation	on ⁵	Describe							
Total compensation pa	706,28	82.44							
Check box if the po	erson will or may rec	eive any deferred con	npensation (describe	e the terms below)					
⁴ Provide the aggregate value additional securities of the iss rights exercisable to acquire a ⁵ Do not include deferred com	uer. Indicate the second additional securities o	urity codes for all secu							

a) Name of person comp	ensated and regi	stration status										
Indicate whether the person cor	mpensated is a regis	trant.	☐ No	√	Yes	;						
If the person compensated is an	individual, provide	the name of the indiv	idual.									
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	Glenegale Securi	ties (Aust) Pty	y Ltd.								
Firm NRD number (if applicable)												
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. V No Yes												
b) Business contact infor	mation											
If a firm NRD number is not pro	ovided in Item 8 (a),	provide the business o	ontact informat	tion of the	e persoi	n beir	ng com	pensated	<i>1</i> .			
Street address	Level 27-25 Bligh	Street, NSW										
Municipality					Provin	nce/S	tate	Sydne	y			
Country	Australia			Postal	code/	Zip c	ode	2000				
Email address				Tele	phone	num	nber					
c) Relationship to issuer or investment fund manager												
Indicate the person's relationship the Instructions and the meaning	•		-					ning of "	conne	cted" in	Part	B(2) of
Connect with the issu	-		, o	_ `	_			er than a	an inve	estment	fund))
Director or officer of the		•	anager [_			,	or investr				
None of the above]p.o	,,00 0.		J0401 0	,, ,,,,,		una ma	lago	
d) Compensation details												
Provide details of all compensat Canadian dollars. Include cash c incidental to the distribution, su	commissions, securit ch as clerical, printir	ies-based compensati ng, legal or accounting	on, gifts, discoui services. An iss	nts or othe uer is not	er com _i trequir	pensa ed to	ition. D ask for	o not rep	oort po	yments	for se	ervices
allocation arrangements with th			-individual com	pensated	by the	issue	r.					
Cash commissions pa	337,4	44.20			Secur	rity cod	de 1	Security	code 2	Secu	urity co	ode 3
Value of all securitie distributed as compensatio	1 1	21.85	Security codes	Į	С	М	S	W	I T			
Describe t	erms of warrants, o	ptions or other rights	121,854 Wa	arrants e	exercis	sable	into c	ommor	shar	es on t	he te	erms
Other compensation	n ⁵	Describe										
Total compensation pa	id 337,5	66.05										
Check box if the pe	rson will or may rec	eive any deferred co	mpensation (de	scribe the	e terms	s belo	w)					
⁴ Provide the aggregate value of	of all securities distr	ihuted as compensat	ion excludina c	ontions w	arrante	s or o	ther ria	hts ever	cisabl	e to aco	uire	
additional securities of the issurights exercisable to acquire a	ier. Indicate the sec	urity codes for all sec										er
5Do not include deferred comp		n alo issaci.										

a) Name of person comp	pensated and registration	n status									
Indicate whether the person co	mpensated is a registrant.		☐ No	\checkmark	Yes						
If the person compensated is an individual, provide the name of the individual.											
Full legal name of indi	vidual										
	Family	name	Fi	rst given n	ame		Seco	ondary gi	ven na	ames	
If the person compensated is not an individual, provide the following information.											
Full legal name of non-individual Eight Capital											
Firm NRD number 5 5 1 8 0 (if applicable)											
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. V No Yes											
b) Business contact info	rmation										
If a firm NRD number is not pr	ovided in Item 8 (a), provide	the business co	ontact informatio	on of the p	person b	eing com	pensated.				
Street address											
Municipality	Toronto			Р	rovince	e/State	Ontario				
Country	Canada			Postal c	ode/Zip	o code	M5H 18	33			
Email address				Telep	hone n	umber					
c) Relationship to issuer or investment fund manager											
Indicate the person's relationsh the Instructions and the meani							ning of "co	onnected	l" in F	Part B	(2) of
Connect with the issu	uer or investment fund man	ager		Insider	of the is	suer (oth	er than an	investn	nent f	und)	
Director or officer of	the investment fund or inve	stment fund ma	anager	Employ	ee of th	e issuer o	or investm	ent fund	man	ager	
✓ None of the above											
d) Compensation details	•										
Provide details of all compensa Canadian dollars. Include cash incidental to the distribution, su allocation arrangements with the	commissions, securities-base uch as clerical, printing, lega	ed compensation	n, gifts, discount services. An issu	s or other er is not r	r compei required	nsation. D to ask for	o not repo	rt paym	ents ;	for ser	vices
Cash commissions pa	aid 239,006.42				Security	code 1	Security co	ode 2	Secu	rity cod	de 3
Value of all securition distributed as compensation	1/6 2/0 00	S	Security codes		СМ	S	W N	Т			
Describe terms of warrants, options or other rights 18,280.00 Warrants exercisable into one common share on the terms above											
Other compensation	on ⁵	Describe									
Total compensation pa	385,246.42										
Check box if the pe	erson will or may receive ar	ny deferred com	pensation (des	cribe the	terms b	elow)					
⁴ Provide the aggregate value additional securities of the iss rights exercisable to acquire a ⁵ Do not include deferred comp	uer. Indicate the security conditional securities of the is	des for all secu	on, <u>excluding</u> op urities distributed	tions, wa d as comp	rrants ol pensatio	r other rig on, <u>includ</u>	nhts exerci ling options	sable to s, warra	acqu nts oi	iire r othei	r

a) Name of person com	pensated and registration status								
Indicate whether the person co	ompensated 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. V No Yes									
b) Business contact info	rmation								
If a firm NRD number is not pr	ovided in Item 8 (a), provide the busine	ess contact information of th	he person being com	pensated.					
Street address	1900-666 Burrard St								
Municipality	Vancouver		Province/State	British Columbia					
Country	Canada	Posta	al code/Zip code	V6C 3N1					
Email address		Tel	ephone number						
c) Relationship to issuer or investment fund manager									
	nip with the issuer or investment fund n ing of "control" in section 1.4 of NI 45-1			ning of "connected" in Part I	3(2) of				
Connect with the issue	uer or investment fund manager	Insid	er of the issuer (oth	er than an investment fund)					
Director or officer of	the investment fund or investment fun	d manager Emp	loyee of the issuer	or investment fund manager					
✓ None of the above									
d) Compensation details	3								
Canadian dollars. Include cash incidental to the distribution, su	tion paid, or to be paid, to the person in commissions, securities-based compens uch as clerical, printing, legal or accoun the directors, officers or employees of a	sation, gifts, discounts or ot ting services. An issuer is no	her compensation.	Do not report payments for se	ervices				
Cash commissions p	aid 119,503.21		Security code 1	Security code 2 Security co	ode 3				
Value of all securiti distributed as compensation	72 120 00	Security codes	C M S	W N T					
Describe terms of warrants, options or other rights 9,140 Warrants exercisable into one common share on the terms above									
Other compensation	on ⁵ Descr	ibe							
Total compensation pa	aid 192,623.21								
Check box if the pe	erson will or may receive any deferred	compensation (describe th	he terms below)						
additional securities of the iss	of all securities distributed as compen suer. Indicate the security codes for all additional securities of the issuer. pensation.	sation, <u>excluding</u> options, s securities distributed as co	warrants or other rig ompensation, <u>includ</u>	nhts exercisable to acquire l <u>ing</u> options, warrants or oth	er				

a) Name of person com	pensated and registration status									
Indicate whether the person co	mpensated is a registrant.	☐ No 🔽	✓ Yes							
If the person compensated is a	If the person compensated is an individual, provide the name of the individual.									
Full legal name of indi	vidual									
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 H.C. Wainwright & Co., LLC										
Firm NRD number 4 8 2 8 0 (if applicable)										
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. V No Yes										
b) Business contact info	rmation									
If a firm NRD number is not pr	ovided in Item 8 (a), provide the busin	ess contact information of th	ne person being con	npensated.						
Street address	430 Park Ave									
Municipality	New York		Province/State	New York						
Country	United States	Posta	Il code/Zip code	10022-3501						
Email address		Tele	ephone number							
c) Relationship to issuer or investment fund manager										
	nip with the issuer or investment fund ing of "control" in section 1.4 of NI 45-				Part B(2) of					
Connect with the iss	uer or investment fund manager	Inside	er of the issuer (oth	ner than an investment	fund)					
Director or officer of	the investment fund or investment fur	nd manager	loyee of the issuer	or investment fund ma	nager					
✓ None of the above										
d) Compensation details	S									
Provide details of all compensa Canadian dollars. Include cash incidental to the distribution, su	tion paid, or to be paid, to the person of commissions, securities-based comper and as clerical, printing, legal or account the directors, officers or employees of a	nsation, gifts, discounts or oth nting services. An issuer is no	her compensation. I ot required to ask fo	Do not report payments	for services					
Cash commissions p	aid 80,000.00		Security code 1	Security code 2 Sec	urity code 3					
Value of all securiti	20.00	Security codes	C M S	W N T						
Describe terms of warrants, options or other rights 20,000 Warrants exercisable into one common share on the terms above										
Other compensation	on ⁵ Desc									
Total compensation pa	80,020.00									
Check box if the po	erson will or may receive any deferre	d compensation (describe th	ne terms below)							
additional securities of the iss	of all securities distributed as comperuer. Indicate the security codes for aladditional securities of the issuer.	nsation, <u>excluding</u> options, v Il securities distributed as co	warrants or other rig Impensation, <u>includ</u>	ghts exercisable to acq ding options, warrants o	ruire 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 juris	sdiction of Canada									
Foreign public issuer										
Wholly owned subsidiary of	a reporting issuer in	any jurisdiction of	Canada ⁶							
Provide nan	ne of reporting issue	r						7		
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										
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. For "Relationship to issuer", "D" – Director, "O" – Executive Officer, "P" – Promoter.										
Organization or company name Family name First given name Secondary given names individual Relationship to issuer (select all that apply)										
				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			to promo			
				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	Banxa Holdings Inc.							
Full legal name	Lichtenwald							
	Family name	First given name	'	Seconda	ıry given names			
Title	Chief Financial Officer							
Telephone number	7788331984	Email address	konstanti	n@banxa	a.com			
Signature	"Konstantin Lichtenwald"	Date	2021	04	19			
			YYYY	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 individua	al certifying the report							
Full legal name	Lee	Garrett			Title	Partner		
	Family name	First given name	Secondary given	names	'			
Name of company	DuMoulin Black LLP							
Telephone number	6046026807	Em	ail address glee	e@dumoul	inblack	.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.