Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 9052339

ITEM 1 - REPORT TYPE								
✓ New report								
☐ Amended report If ame	nded, provide filing date	of report that is	s being ame	ended	(YYYY-MM-DD)			
ITEM 2 - PARTY CERTIFYING TH	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								
✓ Issuer (other than an investment fund)								
Underwriter	ourione raina,							
ITEM 3 - ISSUER NAME AND OT								
Provide the following information about the		vestment fund, abo	out the fund.					
Full legal name	AMPD Ventures Inc.							
Previous full legal name								
If the issuer's name changed in th	e last 12 months, provide most	recent previous leg	ial name.					
Website	https://www.ampd.tech	/	(if applicabl	e)				
If the issuer has a legal entity identifier, pr	ovide below. Refer to Part B of t	he Instructions for	the definition	of "legal entity identifier".				
Legal entity identifier								
If two or more issuers distributed a single s	security, provide the full legal no	ame(s) of the co-iss	suer(s) other th	an the issuer named above	2.			
Full legal name(s) of co-issuer(s)			(if applicable	e)				
ITEM A. HANDEDWOITED INCOM	AATION.							
ITEM 4 - UNDERWRITER INFORM								
If an underwriter is completing the report,	provide the underwriter's full le	gal name and firm	NRD number.		٦			
Full legal name								
Firm NRD number		(if ap	plicable)					
If the underwriter does not have a firm NR	D number, provide the head off	ice contact inform	ation of the un	derwriter.				
Street address								
Municipality		Pro	vince/State					
Country		Postal cod	de/Zip code					
Telephone number	Website (if applicable							

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							
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NAICS industry code 5 2 6 9 8 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							
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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							
Mortgages							
Cryptoassets Downword 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 4 7 6 5 8 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							
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d) Head office address Street address Municipality Postal code/Zip code Country Telephone number Date of formation and financial year-end Financial year-end MM DD MM DD							
Street address Province/State Postal code/Zip code Country Telephone number e) Date of formation and financial year-end Tinancial year-end MM DD Financial year-end MM DD							
Municipality Country Telephone number e) Date of formation and financial year-end Date of formation Financial year-end MM DD MM DD							
Country Telephone number e) Date of formation and financial year-end Date of formation Financial year-end MM DD MM DD							
e) Date of formation and financial year-end Date of formation Financial year-end MM DD YYYY MM DD MM DD							
Date of formation Financial year-end MM DD MM DD							
YYYY MM DD MM DD							
f) Reporting issuer status							
Is the issuer a reporting issuer in any jurisdication of Canada? No Yes							
If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer.							
AII AB BC MB NB NL NT							
□ NS □ NU □ ON □ PE □ QC □ SK □ YT							
g) Public listing status							
If the issuer has a CUSIP number, provide below (first 6 digits only) CUSIP number							
If the issuer is publicly listed, provide the name of the exchange on which the issuer's equity securities primarily trade. Provide only the name of an exchange and not a trading facility such as, for example, an automated trading system.							
Exchange name							
h) Size of issuer's assets							

Select the size of the issuer's assets based on its most recently available annual financial statements (Canadian \$). If the issuer has not prepared annual financial statements for its first financial year, provide the size of the issuer's assets at the distribution end date.

☐ \$0 to under \$5M	☐ \$5M to under \$25M	☐ \$25M to under \$100M
\$100M to under \$500M	☐ \$500M to under \$1B	\$1B or over

TEM 6 - INVESTMENT FUND ISSUER INFORMATION							
If the issuer is an investment 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 on an exchange and h							
-	AV) of the investment fund						
	investment fund as of the date of the most recent NAV calculation (Canadian \$).						
\$0 to under \$5M	\$5M to under \$25M \$25M to under \$100M						
\$100M to under \$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.

_ 1	.	
a) Curr	ency

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.

 End date 2020 02 07

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
UBS		Each Unit consists of one Common share and one-half Common share purchase warrant.	4,119,000.00	0.2375	0.2375	978,262.50

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.

е	Convertible / exchangeable security code		able Underlying		Exercise price (Canadian \$)		Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other items (if applicable)		
							Lowest	Highest			
ι	J	В	S	W	Ν	Т	0.5000	0.5000	2021-02-07	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 \$)
British Columbia	NI 45-106 2.5 [Family, friends and business associates]	13	978,262.50
	978,262.50		
	Total number of unique purchasers ^{2b}	13	

^{2a} In calculating the number of unique purchasers per row, count each purchaser only once. Joint purchasers may be counted as one purchaser.

^{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.

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)

TEM 8 - COMPENSATION	INFORMATION							
Provide information for each perso the distribution. Complete additi							sation in co	nnection with
Indicate whether any compensation	on was paid, or will be	paid, in connecti	on with the distri	bution.				
✓ No ☐ Yes	If yes, indicate n	umber of perso	ons compensate	ed.				
a) Name of person compen	sated and registration	on status						
Indicate whether the person compe	ensated is a registrant.		☐ No	Y	'es			
If the person compensated is an inc	dividual, provide the no	ame of the individ	dual.					
Full legal name of individu	ıal							
	Family	/ name	Firs	t given nam	ne	Seco	ndary given	names
If the person compensated is not a	n individual, provide th	e following infor	mation.					
Full legal name of	non-individual							
Firm	NRD number				(if app	olicable)		
Indicate whether the person compe	ensated facilitated the	distribution throu	gh a funding por	tal or an ir	nternet-based	portal.	No	o 🗌 Yes
b) Business contact informa	ation							
If a firm NRD number is not provid	led in Item 8 (a), provid	le the business co	ntact information	of the pe	rson being co	mpensated.		
Street address								
Municipality				Pro	vince/State			
Country			F	Postal cod	de/Zip code			
Email address				Telepho	one number			
c) Relationship to issuer or	investment fund ma	nager						
Indicate the person's relationship w the Instructions and the meaning o							onnected" in	Part B(2) of
Connect with the issuer	or investment fund ma	nager		Insider of	the issuer (ot	her than an	investment	fund)
Director or officer of the	investment fund or inv	estment fund ma	nager	Employee	e of the issuer	or investme	ent fund ma	nager
None of the above								
d) Compensation details								
Provide details of all compensation Canadian dollars. Include cash com- incidental to the distribution, such a allocation arrangements with the d	missions, securities-ba as clerical, printing, leg	sed compensatio al or accounting	n, gifts, discounts services. An issue	or other cor r is not req	ompensation. Juired to ask f	Do not repo	rt payment:	for services
Cash commissions paid				Se	ecurity code 1	Security co	ode 2 Sec	urity code 3
Value of all securities distributed as compensation ⁴			Security codes					
Describe term	ns of warrants, options	or other rights						
Other compensation ⁵		Describe						
Total compensation paid								
Check box if the perso	n will or may receive a	iny deferred com	npensation (desc	ribe the te	rms below)			
⁴ Provide the aggregate value of a additional securities of the issuer. rights exercisable to acquire additi ⁵ Do not include deferred compens	Indicate the security of the	codes for all secu						

TEM 9 - DIRECTORS, EXECU	ITIVE OFFICERS	AND PROMOT	TERS OF THE ISS	SUER					
If the issuer is an investment fun	d, do not complete	Item 9. Procced to	Item 10.						
Indicate whether the issuer is any c	of the following (selec	t the one that appli	es - if more than one	e applies, select onl	y one).				
✓ Reporting issuer in any jurisdiction of Canada									
Foreign public issuer									
Wholly owned subsidiary o	f a reporting issuer in	n any jurisdiction of	Canada ⁶						
Provide nar	me of reporting issue	er]	
Wholly owned subsidiary of	f a foreign public iss	uer ⁶						_	
Provide name o	f foreign public issue	er							
Issuer distributing only eligi	ble foreign securities	s and the distribution	on is to permitted clie	ents only ⁷				_	
If the issuer is at least one of the	above, do not com	plete Item 9(a) – (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 office	rs and promoters	of the issuer							
Provide the following information fo territory; otherwise state the country						tate the	province	or	
Organization or company name	Family name	First given name	Secondary given names	Business loc non-individu resident jurisdictio individu	ual or ail n of			o to issuer hat apply)	
				Province or	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 Relationship to project individual (select one or both if a					
				Province or country	D		C)	
c) Residential address of each	h individual								

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, 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	AMPD Ventures Inc.								
Full legal name	Bustin								
	Family name	First given name	•	Seconda	ıry given n	ames			
Title	Director								
Telephone number	6043323329	Email address	don.bustin@ampd.tech						
Signature	"Donald Bustin"	Date	2020	03	03				
			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 individual certifying the report											
Full legal name	Lowe	Tracy			Title	Paralegal					
	Family name	First given name	Secondary gi	condary given names							
Name of company	Fasken Martineau DuMoulin LLP										
Telephone number	6046314963		mail address tlowe@fask		en.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.