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The reader should not assume that the information is accurate and complete.

UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549
FORM D

Notice of Exempt Offering of Securities

OMB APPROVAL

OMB Number: 3235-0076
Estimated average burden hours per response: 4.00

1. Issuer's Identity

CIK (Filer ID Number)	Previous Names	None	Entity Type
0001630113	METASOLUTIONS, INC.		<input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> General Partnership <input type="checkbox"/> Business Trust <input type="checkbox"/> Other (Specify)
Name of Issuer	Meta Solutions		
BIOTRICITY INC.			
Jurisdiction of Incorporation/Organization			
NEVADA			
Year of Incorporation/Organization			
<input checked="" type="checkbox"/> Over Five Years Ago <input type="checkbox"/> Within Last Five Years (Specify Year) <input type="checkbox"/> Yet to Be Formed			

2. Principal Place of Business and Contact Information

Name of Issuer			
BIOTRICITY INC.			
Street Address 1		Street Address 2	
275 SHORELINE DRIVE, SUITE 150			
City	State/Province/Country	ZIP/PostalCode	Phone Number of Issuer
REDWOOD CITY	CALIFORNIA	94065	650 832-1626

3. Related Persons

Last Name	First Name	Middle Name
Al-Siddiq	Waqas	
Street Address 1	Street Address 2	
275 Shoreline Drive, Suite 150		
City	State/Province/Country	ZIP/PostalCode
Redwood City	CALIFORNIA	94065
Relationship: <input checked="" type="checkbox"/> Executive Officer <input checked="" type="checkbox"/> Director <input type="checkbox"/> Promoter		

Clarification of Response (if Necessary):

Last Name	First Name	Middle Name
Betts	Norman	
Street Address 1	Street Address 2	
275 Shoreline Drive, Suite 150		
City	State/Province/Country	ZIP/PostalCode
Redwood City	CALIFORNIA	94065
Relationship: <input type="checkbox"/> Executive Officer <input checked="" type="checkbox"/> Director <input type="checkbox"/> Promoter		

Clarification of Response (if Necessary):

Last Name	First Name	Middle Name
Kennedy	Patricia	
Street Address 1	Street Address 2	
275 Shoreline Drive, Suite 150		
City	State/Province/Country	ZIP/PostalCode
Redwood City	CALIFORNIA	94065
Relationship: <input type="checkbox"/> Executive Officer <input checked="" type="checkbox"/> Director <input type="checkbox"/> Promoter		

Clarification of Response (if Necessary):

Last Name	First Name	Middle Name
Rosa	David	
Street Address 1	Street Address 2	
275 Shoreline Drive, Suite 150		
City	State/Province/Country	ZIP/PostalCode
Redwood City	CALIFORNIA	94065
Relationship: <input type="checkbox"/> Executive Officer <input checked="" type="checkbox"/> Director <input type="checkbox"/> Promoter		

Clarification of Response (if Necessary):

Last Name	First Name	Middle Name
Salmon	Steve	
Street Address 1	Street Address 2	
275 Shoreline Drive, Suite 150		
City	State/Province/Country	ZIP/PostalCode
Redwood City	CALIFORNIA	94065
Relationship: <input type="checkbox"/> Executive Officer <input checked="" type="checkbox"/> Director <input type="checkbox"/> Promoter		

Clarification of Response (if Necessary):

Last Name	First Name	Middle Name
Ayanoglou	John	
Street Address 1	Street Address 2	
275 Shoreline Drive, Suite 150		
City	State/Province/Country	ZIP/PostalCode
Redwood City	CALIFORNIA	94065
Relationship: <input checked="" type="checkbox"/> Executive Officer <input type="checkbox"/> Director <input type="checkbox"/> Promoter		

Clarification of Response (if Necessary):

4. Industry Group

<input type="checkbox"/> Agriculture	<input type="checkbox"/> Health Care	<input type="checkbox"/> Retailing
<input type="checkbox"/> Banking & Financial Services	<input checked="" type="checkbox"/> X Biotechnology	<input type="checkbox"/> Restaurants
<input type="checkbox"/> Commercial Banking <input type="checkbox"/> Insurance <input type="checkbox"/> Investing <input type="checkbox"/> Investment Banking <input type="checkbox"/> Pooled Investment Fund <input type="checkbox"/> Is the issuer registered as an investment company under the Investment Company Act of 1940? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Other Banking & Financial Services	<input type="checkbox"/> Health Insurance	<input type="checkbox"/> Technology
	<input type="checkbox"/> Hospitals & Physicians	<input type="checkbox"/> Computers
	<input type="checkbox"/> Pharmaceuticals	<input type="checkbox"/> Telecommunications
	<input type="checkbox"/> Other Health Care	<input type="checkbox"/> Other Technology
	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Travel
	<input type="checkbox"/> Real Estate	<input type="checkbox"/> Airlines & Airports
	<input type="checkbox"/> Commercial	<input type="checkbox"/> Lodging & Conventions
	<input type="checkbox"/> Construction	<input type="checkbox"/> Tourism & Travel Services
	<input type="checkbox"/> REITS & Finance	<input type="checkbox"/> Other Travel
	<input type="checkbox"/> Residential	<input type="checkbox"/> Other
	<input type="checkbox"/> Other Real Estate	
<input type="checkbox"/> Business Services		
<input type="checkbox"/> Energy		
<input type="checkbox"/> Coal Mining		
<input type="checkbox"/> Electric Utilities		
<input type="checkbox"/> Energy Conservation		
<input type="checkbox"/> Environmental Services		
<input type="checkbox"/> Oil & Gas		
<input type="checkbox"/> Other Energy		

5. Issuer Size

Revenue Range	OR	Aggregate Net Asset Value Range
<input type="checkbox"/> No Revenues		<input type="checkbox"/> No Aggregate Net Asset Value
<input type="checkbox"/> \$1 - \$1,000,000		<input type="checkbox"/> \$1 - \$5,000,000
<input type="checkbox"/> \$1,000,001 - \$5,000,000		<input type="checkbox"/> \$5,000,001 - \$25,000,000
<input type="checkbox"/> \$5,000,001 - \$25,000,000		<input type="checkbox"/> \$25,000,001 - \$50,000,000
<input type="checkbox"/> \$25,000,001 - \$100,000,000		<input type="checkbox"/> \$50,000,001 - \$100,000,000
<input type="checkbox"/> Over \$100,000,000		<input type="checkbox"/> Over \$100,000,000
<input checked="" type="checkbox"/> X Decline to Disclose		<input type="checkbox"/> Decline to Disclose
<input type="checkbox"/> Not Applicable		<input type="checkbox"/> Not Applicable

6. Federal Exemption(s) and Exclusion(s) Claimed (select all that apply)

Rule 504(b)(1) (not (i), (ii) or (iii)) Rule 504 (b)(1)(i) Rule 504 (b)(1)(ii) Rule 504 (b)(1)(iii) <input checked="" type="checkbox"/> Rule 506(b) Rule 506(c) Securities Act Section 4(a)(5)	Investment Company Act Section 3(c) Section 3(c)(1) Section 3(c)(9) Section 3(c)(2) Section 3(c)(10) Section 3(c)(3) Section 3(c)(11) Section 3(c)(4) Section 3(c)(12) Section 3(c)(5) Section 3(c)(13) Section 3(c)(6) Section 3(c)(14) Section 3(c)(7)
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7. Type of Filing

<input checked="" type="checkbox"/> New Notice	<input type="checkbox"/> Date of First Sale	2020-07-14	<input type="checkbox"/> First Sale Yet to Occur
<input type="checkbox"/> Amendment			

8. Duration of Offering

Does the Issuer intend this offering to last more than one year?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
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9. Type(s) of Securities Offered (select all that apply)

<input checked="" type="checkbox"/> Equity	<input type="checkbox"/> Pooled Investment Fund Interests
<input checked="" type="checkbox"/> Debt	<input type="checkbox"/> Tenant-in-Common Securities
<input checked="" type="checkbox"/> Option, Warrant or Other Right to Acquire Another Security	<input type="checkbox"/> Mineral Property Securities
<input checked="" type="checkbox"/> Security to be Acquired Upon Exercise of Option, Warrant or Other Right to Acquire Security	<input type="checkbox"/> Other (describe)

10. Business Combination Transaction

Is this offering being made in connection with a business combination transaction, such as a merger, acquisition or exchange offer?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
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Clarification of Response (if Necessary):

11. Minimum Investment

Minimum investment accepted from any outside investor	\$100,000	USD
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12. Sales Compensation

Recipient	Recipient CRD Number None	
Paulson Investment Company	5670	
(Associated) Broker or Dealer X None	(Associated) Broker or Dealer CRD Number X None	
None	None	
Street Address 1	Street Address 2	
40 WALL STREET, 39TH FLOOR		
City	State/Province/Country	ZIP/Postal Code
NEW YORK	NEW YORK	10005
State(s) of Solicitation (select all that apply) Check "All States" or check individual States	Foreign/non-US	
<input type="checkbox"/> CALIFORNIA <input type="checkbox"/> FLORIDA <input type="checkbox"/> MARYLAND <input type="checkbox"/> MICHIGAN <input type="checkbox"/> MINNESOTA <input type="checkbox"/> MONTANA <input type="checkbox"/> NEW YORK <input type="checkbox"/> OREGON <input type="checkbox"/> PENNSYLVANIA <input type="checkbox"/> TENNESSEE <input type="checkbox"/> VIRGINIA <input type="checkbox"/> WASHINGTON	All States	

13. Offering and Sales Amounts

Total Offering Amount	\$10,000,000	USD	or Indefinite
Total Amount Sold	\$1,253,000	USD	
Total Remaining to be Sold	\$8,747,000	USD	or Indefinite

Clarification of Response (if Necessary):

14. Investors

Select if securities in the offering have been or may be sold to persons who do not qualify as accredited investors, and enter the number of such non-accredited investors who already have invested in the offering.	
Regardless of whether securities in the offering have been or may be sold to persons who do not qualify as accredited investors, enter the total number of investors who already have invested in the offering:	24

15. Sales Commissions & Finder's Fees Expenses

Provide separately the amounts of sales commissions and finders fees expenses, if any. If the amount of an expenditure is not known, provide an estimate and check the box next to the amount.

Sales Commissions	\$1,200,000	USD	<input checked="" type="checkbox"/> Estimate
Finders' Fees	\$0	USD	<input type="checkbox"/> Estimate

Clarification of Response (if Necessary):

16. Use of Proceeds

Provide the amount of the gross proceeds of the offering that has been or is proposed to be used for payments to any of the persons required to be named as executive officers, directors or promoters in response to Item 3 above. If the amount is unknown, provide an estimate and check the box next to the amount.

	\$0	USD	<input type="checkbox"/> Estimate
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Clarification of Response (if Necessary):

The Company will pay the placement agent a commission of 12% of the gross proceeds the Company receives in the offering from investors introduced to the Company by the placement agent and of 5% for any other investors.

Signature and Submission

Please verify the information you have entered and review the Terms of Submission below before signing and clicking SUBMIT below to file this notice.

Terms of Submission

In submitting this notice, each issuer named above is:
<ul style="list-style-type: none">• Notifying the SEC and/or each State in which this notice is filed of the offering of securities described and undertaking to furnish them, upon written request, in the accordance with applicable law, the information furnished to offerees.*• Irrevocably appointing each of the Secretary of the SEC and, the Securities Administrator or other legally designated officer of the State in which the issuer maintains its principal place of business and any State in which this notice is filed, as its agents for service of process, and agreeing that these persons may accept service on its behalf, of any notice, process or pleading, and further agreeing that such service may be made by registered or certified mail, in any Federal or state action, administrative proceeding, or arbitration brought against the issuer in any place subject to the jurisdiction of the United States, if the action, proceeding or arbitration (a) arises out of any activity in connection with the offering of securities that is the subject of this notice, and (b) is founded, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these statutes, or (ii) the laws of the State in which the issuer maintains its principal place of business or any State in which this notice is filed.• Certifying that, if the issuer is claiming a Regulation D exemption for the offering, the issuer is not disqualified from relying on Rule 504 or Rule 506 for one of the reasons stated in Rule 504(b)(3) or Rule 506(d).

Each Issuer identified above has read this notice, knows the contents to be true, and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

For signature, type in the signer's name or other letters or characters adopted or authorized as the signer's signature.

Issuer	Signature	Name of Signer	Title	Date
BIOTRICITY INC.	/s/ John Ayanoglou	John Ayanoglou	Chief Financial Officer	2020-08-07

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

* This undertaking does not affect any limits Section 102(a) of the National Securities Markets Improvement Act of 1996 ("NSMIA") [Pub. L. No. 104-290, 110 Stat. 3416 (Oct. 11, 1996)] imposes on the ability of States to require information. As a result, if the securities that are the subject of this Form D are "covered securities" for purposes of NSMIA, whether in all instances or due to the nature of the offering that is the subject of this Form D, States cannot routinely require offering materials under this undertaking or otherwise and can require offering materials only to the extent NSMIA permits them to do so under NSMIA's preservation of their anti-fraud authority.
