Form 45-106F1 Report of Exempt Distribution (Non-investment fund issuer)

ITEM 1 – REPOR	T TYPE						
TIEW I - KEPOK							
✓ New report							
Amended report	If amended, provide	Submission ID of report that is	being amended:	(Example:	EDR1234567890-123)		
ITEM 2 - PARTY	CERTIFYING TH	E REPORT					
			garding whether an issuer is an inve the companion policy to NI 81-106		ction 1.1 of		
✓ Issuer (Other than a		a commucac bicolocare and	and demparison pelloy to the or too				
Underwriter	<i>,</i>						
Onderwriter							
ITEM 3 – ISSUER	NAME AND OT	HER IDENTIFIERS					
Provide the following	information about the	issuer, or if the issuer is an i	nvestment fund, about the fund.				
Full legal name							
Nutritional High Interna	ational Inc.						
Previous full legal nam	ne If the issuer's nam	e changed in the last 12 mon	ths, provide most recent previous I	egal name.			
Website (if applicable))						
If the issuer has a lega	al entity identifier, pro	vide below. Refer to Part B or	f the Instructions for the definition o	of "legal entity identifier".			
Legal entity identifier							
Did two or more on inc	overe distribute e siss	le security? V No Yes					
Did two or more co-iss		, – –					
	_	ecurity, provide the full legal n	ame(s) of the co-issuer(s) other the	an the issuer named abou	ve.		
Full legal name(s) of co	o-issuer(s)						
ITEM 4 – UNDER	WRITER INFOR	MATION					
If an underwriter is con	mnleting the report in	rovide the underwriter's full lea	gal name and firm NRD number.				
Full legal name	impleting the report, pr	ovide the anderwhen 3 fall leg	gai name and ilim NND namber.				
1 dii logal fiamo							
Does the Underwriter's	s Firm have an NRD N	lumber? Firm NRD n	umber				
□ No □ Yes							
If the underwriter does	s not have a firm NDF	number provide the head of		erwriter			
Street address	s not have a lilli INNL	Municipality	Province/State	Postal/ZIP code			
		a.norpanty					
Country		Telephone number	Website (if applicable)	_			
Country		rotopriorie number	Trobbite (II applicable)				

ITEM 5 – ISSUER INFORMATION						
a) Primary industry						
Provide the issuer's North American Indus corresponds to the issuer's primary busine	stry Classification Standard (NAICS) code (6 digits only) that in ess activity.	n your reasonable judgment most closely				
NAICS industry code						
325411						
	dicate the stage of operations. This does not apply to issuers and best describes the issuer's stage of operations.	that provide services to issuers operating in				
	all or substantially all of its assets in any of the following? If y rcial/business debt Consumer debt Private companies	* * *				
b) Number of employees						
√ 0 - 49	or more					
c) SEDAR profile number						
Does the issuer have a <u>SEDAR</u> profile? ☐ No ☑ Yes	screenshot of th	EDAR profile is a "private" profile, please provide a le issuer's profile by e-mail to ings@osc.gov.on.ca				
d) Head office address	If the issuer does not	have a SEDAR profile, complete Item 5(d) – (h).				
Street address	Municipality Province/State	Postal/ZIP code				
Country	Telephone number					
e) Date of formation and financial year	r-end					
Date of formation	Financial year-end					
f) Reporting issuer status						
Is the issuer a reporting issuer in any juriso ☐ No ☐ Yes	diction of Canada?					
If yes, select the jurisdictions of Canada in						
AII AB BC MB	NB NL NT					
NS NU ON PE	∐QC ∐SK ∐YT					
g) Public listing status						
Does the issuer have a CUSIP number?	CUSIP number (provide first 6 digits only)					
· · · · · · · · · · · · · · · · · · ·	name of the exchange on which the issuer's equity securities ps, for example, an automated trading system.	orimarily trade. Provide only the name of an				
Exchange name: Not Applicable Toro	onto Stock Exchange TSX Venture Exchange	Canadian Securities Exchange				
Aequitas Neo Exchange	stralian Securities Exchange Deutsche Boerse	Euronext				
London Stock Exchange	daq New York Stock Exchange	Shanghai Stock Exchange				
Shenzhen Stock Exchange Stoc	ck Exchange Of Hong Kong 🗌 Tokyo Stock Exchange	OTHER				
If other, describe:						
h) Size of issuer's assets						
financial statements for its first financial ye	ed on its most recently available annual financial statements (the ear, provide the size of the issuer's assets at the distribution of the under \$25M.					
	7 to under \$25M\$25M to under \$100M OM to under \$1B\$1B or over					

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) Currency 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 **End Date** 2019-08-23 2019-08-23 c) Detailed purchaser information Complete Schedule 1 of this form for each purchaser and attach the schedule to the completed report. NHII - F45-106F1 Sch 1 August 23 2019.xlsx - 96 KB 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 of Single or lowest Highest price Total amount number securities price 1,000.0000 UBS 1,807.0000 1,807,000.0000 Description of security: Each UBS consists of \$1,000 principal amount of convertible debentures and 5,000 warrants 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.

Not Applicable

Convertible / exchangeable	Underlying security	Exercis (Canad	•	Expiry date (YYYY-MM-DD)	Conversion ratio	
security code	code	Lowest	Highest	(TTTT-WIWI-DD)		
CVD	CMS	0.2000	0.2000	2022-08-23		
Describe other						
WNT	CMS	0.2400	0.2400	2022-08-23		
	Describe other terms: (if applicable)					

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 of Canada, state the province or territory, otherwise state country.

Province or country	Exemption relied on	No. of unique purchasers ^{2a}	Total amount (Canadian \$)
Ontario	NI 45-106 2.3 [Accredited investor]	26	1,317,000.0000
Nova Scotia	NI 45-106 2.3 [Accredited investor]	2	40,000.0000
Quebec	NI 45-106 2.3 [Accredited investor]	5	200,000.0000
Uruguay	NI 45-106 2.3 [Accredited investor]	1	200,000.0000
Chile	NI 45-106 2.3 [Accredited investor]	2	50,000.0000
	1,807,000.0000		

Total dollar amount of securities di	1,807,000.0000	
Total number of unique purchasers ^{2b}	36	

^{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.

ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION

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.

√ Not Applicable

	Description	Date of document or other material	Previously filed with or delivered to regulator?	,	Filename
1.			\square Y \square N		

ITEM 8 – COMPENSATION INFORMATION							
Provide information for each person (as defined in NI 45-106) to whom the issuer directly provides, or will provide, any compensation in connection with the distribution. 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 ✓ Yes							
PERSON 1							
a) Name of person compensa	ted and registratio	n status					
Indicate whether the person com ☐ No ☑ Yes	pensated is a regist	rant.					
If the person compensated is an Family name	If the person compensated is an individual, provide the full legal name of the individual. Family name First given name Secondary given names						
If the person compensated is not Full legal name of non-individual	an individual, provi	de the following inforn	nation.	Firm NRD number (if	annlicable)		
Canaccord Genuity Corp.				900			
Indicate whether the person com ✓ No ☐ Yes	pensated facilitated	the distribution throu	gh a funding	portal or an internet-ba	ased portal.		
b) Business contact information	on						
If a firm NRD number is not prov	ided in Item 8(a), pr	ovide the business co	ontact inform	ation of the person bei	ing compensated.		
Street address	Municipa	ality	Province/Sta	ite	Postal/ZIP code		
						I	
Country	Telephoi	ne number	Email addre	SS			
c) Relationship to issuer or in	vestment fund ma	nager					
Indicate the person's relationship Part B(2) of the Instructions and Connected with the issuer or in	the meaning of "cor	ntrol" in section 1.4 of	NI 45-106 fo		pleting this section	n.	
Insider of the issuer (other tha	n an investment fun	d)	✓ None	e of the above			
Director or officer of the invest	ment fund or investr	ment fund manager					
d) Compensation details							
Provide details of all compensati in Canadian dollars. Include cast for services incidental to the dist about, or report on, internal alloc	h commissions, sec ribution, such as cle	urities-based compen erical, printing, legal c	nsation, gifts, or accounting	discounts or other con services. An issuer is	mpensation. Do no not required to as	ot report payments sk for details	
Cash commissions paid	80,700.0000						
Value of all securities ✓ distributed as	0.0000	Security code1 UBS	Se Se	curity code2 CMS	Security code	e3 WNT	
compensation 4		Describe terms of wa	•		tada di laka da arata	1 000 00	
		Unit. Each Unit is co	omprised of c	ions to purchase one fi one Common Share an chase one Common SI	nd one Unit Warran	nt. Each Unit	
Other compensation ⁵		Describe					
Total compensation Paid	80,700.0000						
Check box if the person will o	or may receive any o	deferred compensation	n (describe th	ne terms below)			

⁴ Provide the aggregate value of all securities distributed as compensation, excluding options, warrants or other rights exercisable to acquire additional securities of the issuer. Indicate the security codes for all securities distributed as compensation, including options, warrants or other rights exercisable to acquire additional securities of the issuer.

 $^{5}\,\mathrm{Do}$ not include deferred compensation.

ITEM 9 – D	IRECTORS, EXECUTIVE OFFICERS	S AND PROMOTERS OF	THE ISSUER					
Indicate whet	Indicate whether the issuer is any of the following (select the one that applies - if more than one applies, select only one).							
Reporting	Reporting issuer in any jurisdiction of Canada							
☐ Foreign p	Foreign public issuer							
•	Wholly owned subsidiary of a reporting issuer in any jurisdiction of Canada ⁶ Provide name of reporting issuer							
Wholly ow	ned subsidiary of a foreign public issuer ⁶							
-	ame of foreign public issuer							
	tributing only eligible foreign securities and the	·	•					
⁶ An issue securities ⁷ Check th	uer is at least one of the above, do not com r is a wholly owned subsidiary of a reporting is that are required by law to be owned by its dire his box if it applies to the current distribution eve efer to the definitions of "eligible foreign securit	suer or a foreign public issuer if al ectors, are beneficially owned by t ren if the issuer made previous dis	ll of the issuer's outstanding voting se the reporting issuer or the foreign pub stributions of other types of securities	olic issuer, respectively.				
☐ If the iss	uer is none of the above, check this box an	d complete Item 9(a) – (c).						
a) Directors	, executive officers and promoters of the iss	suer						
	ollowing information for each director, executive rwise state the country. For "Relationship to iss			he province or				
Individual?	Organization or company name	Family name First given name Secondary given name	Business location of non-individual or residential jurisdiction of individual	Relationship to issuer (select all that apply)				
□Y □N				□D □O □P				
b) Promoter	information							
	er listed above is not an individual, provide the f a, state the province or territory, otherwise state							
	Organization or company name	Family name First given name Secondary given name	Residential jurisdiction of individual	Relationship to promoter (select one or both if applicable)				
				□ D □ O				
c) Resident	al address of each individual							
Complete <u>Schedule 2</u> 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 exempt distribution.

By completing the information below, I certify, on behalf of the issuer/underwriter, 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/agent Nutritional High	Nutritional High International Inc.						
Full legal name - Family name	First given name		Secondary given names				
Matanovic	Anna						
Title	Tel	ephone number	Email address				
Law Clerk - Fogler, Rubinoff LLP	41	63653701	amatanovic@foglers.com				
Signature (signed) "Anna Matanovic"		te 2019-09-03					

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 th	✓ Same as individual certifying the report						
Full legal name - Family name	First given name	Secondary given names	Title				
Name of company		Telephone number En	mail address				

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 Schedule 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.

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