# Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 9373568

ITEM 1 - REPORT TYPE								
✓ New report								
Amended report If	amended, pro	ovide filing o	date o	f report	that is being an	nended	(YYYY-MM-DD)	
ITEM 2 - PARTY CERTIFYING	THE REPOR	т						
Indicate the party certifying the repo Instrument 81-106 Investment Fund						nvestment fund, refer	to section 1.1 of National	
Investment fund issue			compa	non poncy	1011101100			
✓ Issuer (other than an investment fund)								
		-,						
ITEM 3 - ISSUER NAME AND								
Provide the following information at	<b></b>	-						
Full legal n	-	d Medical Te						
Previous full legal name Micron Waste Technologies Inc.								
If the issuer's name changed	1 in the last 12 m	onths, provide	most re	ecent previ	ous legal name.			
We	Website (if applicable)							
If the issuer has a legal entity identif	ïer, provide belov	v. Refer to Part	B of th	e Instructio	ons for the definitio	n of "legal entity iden	tifier".	
Legal entity iden	tifier							
If two or more issuers distributed a s	ingle security, pro	ovide the full le	gal nan	ne(s) of th	e co-issuer(s) other	than the issuer named	d above.	
Full legal name(s) of co-issu	er(s)				(if applica	ble)		
ITEM 4 - UNDERWRITER INF								
If an underwriter is completing the re	eport, provide the	e underwriter's	full lege	al name ai	nd firm NRD numbe	er.		
Full legal name			1		1			
Firm NRD number	(if applicable)							
If the underwriter does not have a fir	m NRD number,	provide the he	ad offic	e contact	information of the ι	ınderwriter.		
Street address								
Municipality					Province/State			
Country				Post	tal 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 3 3 3 9 9 0
If the issuer is in the <b>mining industry</b> , 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.
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.
<ul> <li>Mortgages</li> <li>Real estate</li> <li>Commercial/business debt</li> <li>Consumer debt</li> <li>Private companies</li> <li>Cryptoassets</li> </ul>
b) Number of employees
Number of employees: 🗸 0 - 49 🗍 50 - 99 🗌 100 - 499 🗍 500 or more
c) SEDAR profile number
Does the issuer have a SEDAR profile?
No       If yes, provide SEDAR profile number       0       0       2       5       7       0       7
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       YYYY     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
S100M to under \$500M	S500M to under \$1B	S1B or over

If the issue is an investment fund, provide the following information:     a) Investment fund manager information     Full legal name     Furn NRD number      If the investment fund manager does not have a firm NRD number, provide the head office contact information of the investment fund manager. Street address Municipality Province/State Guntry Postal code/Zip code Telephone number D Type of investment fund Tree of investment fund that most accurately identifies the issuer (select only one). Alternative strategies Cryptoasset Other (describe) Indicate whether one or both of the following apply to the investment fund. Investment fund that most accurately identifies the issuer (select only one). Alternative strategies Cryptoasset Other (describe) Indicate whether one or both of the following apply to the investment fund. Investment fund that most accurately identifies the issuer (select only one). Indicate whether one or both of the following apply to the investment fund. Investment fund issuers Is a UCIT's Fund' 'understaining for the Collective Investment fund issuers Is a UCIT's Fund' 'understaining for the Collective Investment of Transferable Securities funds (UCIT's Funds) are investment funds regulated by the European Union (C) Date of formation and financial year-end of the investment fund Suppresent fund a reporting issuer in any jurisdication of Canada? No Yes It he investment fund a reporting issuer in any jurisdication of Canada? No Yes It he investment fund hars a CUSP number, provide below (first 6 digits only) CUSP number On O Public listing status of the investment fund is a reporting issuer. All All All </th
Full legal name
Firm NRD number (if applicable)   If the investment fund manager does not have a firm NRD number, provide the head office contact information of the investment fund manager.   Street address Municipality   Province/State
If the investment fund manager does not have a firm NRD number, provide the head office contact information of the investment fund manager. Street address Municipality County Postal code/Zip code County Telephone number Postal code/Zip code Do Type of investment fund Type of investment fund Type of investment fund that most accurately identifies the issuer (select only one). Do Type of investment fund that most accurately identifies the issuer (select only one). Do Money market De Quity De County De C
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Date of formation Financial year-end   YYYY MM   Financial year-end MM MM DD  MM DD MM Pes MB
d) Reporting issuer status of the investment fund     Is the investment fund a reporting issuer in any jurisdication of Canada?     No   Yes     If yes, select the jurisdictions of Canada in which the investment fund is a reporting issuer.     All   AB   BC   MB   NB   NL   NS   NU   ON   PE   QC   SK   YT      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
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CUSIP number
name of an exchange and not a trading facility such as, for example, an automated trading system
Exchange name
f) Net asset value (NAV) of the investment fund
Select the NAV range of the investment fund as of the date of the most recent NAV calculation (Canadian \$).
L L \$\the under \$\mathbf{S}M \qquad L \qquad \mathbf{S}M \text{ to under \$\mathbf{S}M \qquad \text{ to under \$\mathbf{S}M \qquad \text{to under \$\mathbf{S}M
\$0 to under \$5M       \$5M to under \$25M       \$25M to under \$100M         \$100M to under \$500M       \$500M to under \$1B       \$1B or over       Date of NAV calculation:

## **ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION**

purchasers resident in that juriso										
a) Currency										
Select the currency or currencies	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 (describ	be)							
b) Distribution date(s)										
as both the start and end dates. distribution period covered by th		distributed on a contir	nuous basis, include	the start and en						
Start d	2021 02 03	End da	2021	02 05						
	YYYY MM DD		YYYY I	MM DD						
c) Detailed purchaser info				-						
-	is form for each purchaser and o	attach the schedule	e to the complet	ed report.						
d) Types of securities dis	tributed									
	on for all distributions reported on a pe USIP number, indicate the full 9-digit C				ow to indicate the					
		_		Canadian \$						
Security CUSIP number (if applicable)	Description of security	Number of securities	Single or lowest price	Highest price	Total amount					
U B S 31808G Uni	its	10,580,000.0	0.1250	0.1250	1,322,500.00					
e) Details of rights and co	onvertible/exchangeable securities	S	· · ·							
	ons) were distributed, provide the exerci nversion ratio and describe any other t				xchangeable securities					
Convertible / exchangeable security code Underlying security code	Exercise price (Canadian \$) Lowest Highest	Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other it	ems (if applicable)					
W N T C M S	Lowest         Highest           0.2000         0.2000									
		n								
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 <sup>2</sup> purchasers	<sup>29</sup> Total ar	nount (Canadian \$)					
British Columbia	NI 45-106 2.3 [Accredited inv	vestor]		1	1,000,000.00					
Alberta	NI 45-106 2.19 [Additional in investment funds]	vestment in		1	12,500.00					
Ontario	NI 45-106 2.3 [Accredited inv	vestor]		1	185,000.00					
Germany	NI 45-106 2.3 [Accredited inv	vestor]		1	15,000.00					
Paraguay	NI 45-106 2.3 [Accredited inv	vestor]		2	110,000.00					
	Tota	al dollar amount of se	ecurities distribut	ed	1,322,500.00					
	Total number of	unique purchasers <sup>2</sup>	,	6						

<sup>2a</sup> In calculating the number of unique purchasers per row, count each purchaser only once. Joint purchasers may be counted as one purchaser.

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.<sup>3</sup> 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	

<sup>3</sup>"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.

|--|

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

If yes, indicate number of persons compensated.

1

a) Name of person comper	nsated and regist	ration status						
Indicate whether the person comp	ensated is a registro	ant.	No No	✓ Ye	es			
If the person compensated is an in	dividual, provide th	ne name of the indiv	idual.					
Full legal name of individ	ual							
	F	amily name	Fire	st given name	e	Secondar	y given names	
If the person compensated is not a	ın individual, provid	le the following info	rmation.					
Full legal name of	non-individual	Canaccord Genui	ty Corp.					
Firm	n NRD number	9 0 0			(if appl	icable)		
Indicate whether the person comp	ensated facilitated	the distribution thro	ugh a funding por	tal or an int	ternet-based p	oortal. [	✓ No □	Yes
b) Business contact information	ation							
If a firm NRD number is not provid	ded in Item 8 (a), pr	ovide the business c	ontact informatio	n of the pers	son being con	pensated.		
Street address								
Municipality				Prov	vince/State			
Country				Postal cod	le/Zip code			
Email address				Telephor	ne number			
c) Relationship to issuer or	investment fund	manager						
Indicate the person's relationship the Instructions and the meaning						ining of "conne	cted" in Part B(a	2) of
	the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.  Connect with the issuer or investment fund manager  Insider of the issuer (other than an investment fund)							
Director or officer of the	Director or officer of the investment fund or investment fund manager							
✓ None of the above								
d) Compensation details								
Provide details of all compensation Canadian dollars. Include cash com incidental to the distribution, such allocation arrangements with the c	nmissions, securities as clerical, printing	s-based compensation , legal or accounting	on, gifts, discounts services. An issue	or other co r is not requ	ompensation. L uired to ask fo	Do not report po	yments for serv	vices
Cash commissions paid	87	5.00		Sec	curity code 1	Security code 2	Security cod	e 3
Value of all securities distributed as compensation⁴			Security codes	W	N T			
Describe terr	ms of warrants, opt	ions or other rights	7,000 finder's shares of the					n
Other compensation <sup>5</sup>		Describe						
Total compensation paid	87	5.00						]
Check box if the perso	on will or may recei	ive any deferred cor	mpensation (desc	ribe the terr	ms below)			
<sup>4</sup> Provide the aggregate value of a additional securities of the issuer rights exercisable to acquire addl <sup>5</sup> Do not include deferred compention <sup>5</sup> Do not include deferred compention	. Indicate the secu itional securities of	rity codes for all sec						

ITEM 9 - DIRECTORS, EXECUTIVE OFFICERS AND PROMOTERS OF THE ISSUER											
If the issuer is an investment fund, do not complete Item 9. Procced to Item 10.											
Indicate whether the issuer is any of the following (select the one that applies - if more than one applies, select only one).											
✓ Reporting issuer in any jurisdiction of Canada											
Foreign public issuer											
Wholly owned subsidiary of a reporting issuer in any jurisdiction of Canada <sup>6</sup>											
Provide name of reporting issuer											
Wholly owned subsidiary of a foreign public issuer <sup>6</sup>											
Provide name of	f foreign public issue	er									
Issuer distributing only eligi	ble foreign securitie	s and the distributio	n is to permitted clie	ents only <sup>7</sup>							
If the issuer is at least one of the	above, do not com	plete Item 9(a) – (	c). Proceed to Item	10.							
<ul> <li><sup>6</sup> 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.</li> <li><sup>7</sup> 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.</li> <li>If the issuer is none of the above, check this box and complete Item 9(a) - (c).</li> </ul>											
a) Directors, executive officer	s and promoters	of the issuer									
Provide the following information for territory; otherwise state the country.						tate the	province	or			
Organization or company name	Family name	First given name	Secondary given names	non-individu resident jurisdictio	Business location of non-individual or residentail jurisdiction of individual						
				Province or	country	D	e issuer, non-permitteo ne province or ationship to is lect all that ap oter. For locat tive Officer.	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 Jurisdiction of (select			ionship to promoter ne or both if applicable)					
				Province or D		0					
				country	ountry D O						
				country							

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	Beyond Medical Technologies Inc.							
Full legal name	Malhi							
	Family name	First given name	·	Seconda	ary given na	ames		
Title	Chief Executive Officer	ief Executive Officer						
Telephone number	6048054602	Email address	kal@bullruncapital.ca					
Signature	"Kal Malhi"	Date	2021	02	12			
			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				Title	
	Family name	First given name	Secondary given names		
Name of company					
Telephone number		Er	nail 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 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.