# Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 9216507

| ITEM 1 - REPORT TYPE  |               |             |         |              |         |                 |            |                 |                |                  |                      |  |
|---|---------------|-------------|---------|--------------|---------|-----------------|------------|-----------------|----------------|------------------|----------------------|--|
| ✓ New report  |               |             |         |              |         |                 |            |                 |                |                  |                      |  |
| Amended report  | If amer       | nded, pro   | vide fi | iling date   | e of r  | eport           | that is    | being ame       | ended          |                  | (YYYY-MM-DD)         |  |
| ITEM 2 - PARTY CERTIFY  | ING THE       | REPOR       | Г       |              |         |                 |            |                 |                |                  |                      |  |
| Indicate the party certifying the<br>Instrument 81-106 Investment   |               |             |         |              |         |                 |            |                 | restment fun   | d, refer to sec  | tion 1.1 of National |  |
| Investment fund is  |               |             |         |              |         |                 |            |                 |                |                  |                      |  |
| ✓ Issuer (other than  | an inves      | tment fui   | nd)     |              |         |                 |            |                 |                |                  |                      |  |
|   |               |             | ,       |              |         |                 |            |                 |                |                  |                      |  |
| Item 3 - Issuer Name and Other Identifiers  |               |             |         |              |         |                 |            |                 |                |                  |                      |  |
|   |               |             |         |              |         |                 |            |                 |                |                  |                      |  |
| Provide the following information about the issuer, or if the issuer is an investment fund, about the fund.         |               |             |         |              |         |                 |            |                 |                |                  |                      |  |
| Full legal name Sixth Wave Innovation   |               |             |         |              |         | IC.             |            |                 |                |                  |                      |  |
| Previous full legal name  |               |             |         |              |         |                 |            |                 |                |                  |                      |  |
| If the issuer's name changed in the last 12 months, provide most recent previous legal name.                        |               |             |         |              |         |                 |            |                 |                |                  |                      |  |
| Website         https://sixthwave.com/         (if applicable)  |               |             |         |              |         |                 |            |                 |                |                  |                      |  |
| If the issuer has a legal entity identifier, provide below. Refer to Part B of                                      |               |             |         |              |         | nstructi        | ons for th | he definition o | of "legal enti | ity identifier". |                      |  |
| Legal entity identifier   |               |             |         |              |         |                 |            |                 |                |                  |                      |  |
| If two or more issuers distributed a single security, provide the full legal na                                     |               |             |         |              |         | (s) of th       | e co-issu  | ıer(s) other th | an the issue   | r named abov     | е.                   |  |
| Full legal name(s) of co-issuer(s)  |               |             |         |              |         |                 |            | (if applicable  | e)             |                  |                      |  |
|   |               |             |         |              |         |                 |            |                 |                |                  |                      |  |
| ITEM 4 - UNDERWRITER  | INFORM        | IATION      |         |              |         |                 |            |                 |                |                  |                      |  |
| If an underwriter is completing   | the report, p | provide the | underw  | riter's full | legal i | name a          | nd firm N  | NRD number.     |                |                  | _                    |  |
| Full legal name   |               |             |         |              |         |                 |            |                 |                |                  |                      |  |
| Firm NRD number   |               |             |         |              |         | (if applicable) |            |                 |                |                  |                      |  |
| If the underwriter does not have a firm NRD number, provide the head office contact information of the underwriter. |               |             |         |              |         |                 |            |                 |                |                  |                      |  |
| Street address  |               |             |         |              |         |                 |            |                 |                |                  |                      |  |
| Municipality  |               |             |         |              | ]       | Province/State  |            |                 |                |                  |                      |  |
| Country   |               |             |         |              | 1       | Pos             | tal code   | e/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 4 1 7 1 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.   |
| Mortgages Real estate Commercial/business debt Consumer debt Private companies  |
| 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       Yes       If yes, provide SEDAR profile number       0       0       0       2       6       0       7       9   |
| 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 NI 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   |  |  |  |  |  |  |  |  |
|---|--|--|--|--|--|--|--|--|
| 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  |  |  |  |  |  |  |  |  |
| Street address   Municipality   Country   Postal code/Zip code   Telephone number   Website (if applicable) <b>b</b> Type of investment fund Type 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 mestment fund issuers Is a UCITS Fund' Undertaking for the Collective Investment fund issuers Is a UCITS Fund' Undertaking for the Collective Investment of Transferable Securities funds (UCITS Funds) are investment funds regulated by the European Union (EU) directive and objective Investment fund issuers Is a UCITS Fund' Undertaking for the Collective Investment of Transferable Securities funds (UCITS Funds) are investment funds regulated by the European Union (EU) directive and objective Investment fund issuers Is a UCITS Fund' Undertaking for the Collective Investment of Transferable Securities funds (UCITS Funds) are investment funds regulated by the European Union (EU) directive Investment of Transferable Securities funds (UCITS Funds) are investment funds regulated by the European Union (EU) directive Investment fund issuers Is a UCITS Fund' Under the investment fund issuers Is a UCITS Fund' VYYY MM DD 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. NI NI NI ON Pe QC SK YI It the investment fund as a CUSIP number, provide below (first 6 digits only) CUSIP number It the investment fund is seukite the name of the exchange on which the investment fund's  |  |  |  |  |  |  |  |  |
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| b) Type of investment fund         Type of investment fund that most accurately identifies the issuer (select only one).         Money market       Equity         Alternative strategies       Cryptoasset         Indicate whether one or both of the following apply to the investment fund.         Invests primarily in other investment fund issuers         Is a UCITs Fund <sup>1</sup> 'Undertaking for the Collective Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) directives that allow collective investment schemes to operate throughout the EU on a passport basis on authorization from one member state.         c) Date of formation   |  |  |  |  |  |  |  |  |
| Type of investment fund that most accurately identifies the issuer (select only one).   Money market   Equity   Fixed income   Alternative strategies   Cryptoasset   Indicate whether one or both of the following apply to the investment fund.   Invests primarily in other investment fund issuers   Is a UCITs Fund*   ''Undertaking for the Collective Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) directives that allow collective investment schemes to operate throughout the EU on a passport basis on authorization from one member state.   c) Date of formation   Date of formation   YYYY   MM   DD   (Intervention fund a reporting issuer in any jurisdication of Canada? No YYS (If yes, select the jurisdictions of Canada in which the investment fund is a reporting issuer. All All AB BC MB NB NL NT (USIP number, provide below (first 6 digits only) CUSIP number, provide below (first 6 digits only) It weistment fund is publicly listed, provide the name of the exchange on which the investment fund's securities primarily trade. Provide only the   |  |  |  |  |  |  |  |  |
| Money market       Equity       Fixed income       Balanced         Alternative strategies       Cryptoasset       Other (describe)   |  |  |  |  |  |  |  |  |
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| 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  |  |  |  |  |  |  |  |  |
| d) Reporting issuer status of the investment fund   Is the investment fund a reporting issuer in any jurisdication of Canada?   Is the investment fund a reporting issuer in any jurisdication of Canada?   No   If yes, select the jurisdictions of Canada in which the investment fund is a reporting issuer.   If yes, select the jurisdictions of Canada in which the investment fund is a reporting issuer.   All AB   NS NU   ON PE   QC SK   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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| 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   |  |  |  |  |  |  |  |  |
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| CUSIP number  |  |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |  |
| name of an exchange and not a trading facility such as, for example, an automated trading system  |  |  |  |  |  |  |  |  |
| 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  to |  |  |  |  |  |  |  |  |
| \$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**

| purch<br>conn  | 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)   | Cur   | rency  | /            |                |        |  |                     |  |       |               |                             |                       |   |   |
| Selec  | t the o   | currer | ncy or       | curre          | encies | in which the distr   | ibution was made. A | All dollar amounts prov  | vided | in the report | t must be                   | in Canadi             | an dollars.   |   |
| <b>√</b> (   | ana   | dian   | dolla        | r              |        | US dollar  | Euro                | Other (descr   | ibe)  |               |                             |                       |   |   |
| b)   | Dist  | ributi | on d         | ate(s          | 5)     |  |                     |  |       |               |                             |                       |   |   |
| as bo  | th th   | e star | t and        | end a<br>vered | lates. | If the report is being the report.   |                     | or securities distributed<br>as distributed on a cont<br>End o | inuoı |               |                             |                       |   |   |
|  |   |        |              |                |        | YYYY   | MM DD               |  |       | YYYY          | MM                          | DD                    |   |   |
| C)   | Deta  | ailed  | purc         | hase           | r infc | ormation   |                     |  |       |               |                             |                       |   |   |
| Corr   | Complete Schedule 1 of this form for each purchaser and attach the schedule to the completed report.  |        |              |                |        |  |                     |  |       |               |                             |                       |   |   |
| d)   | Тур   | es of  | secu         | uritie         | s dist | ributed  |                     |  |       |               |                             |                       |   |   |
|  | 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 \$           | 5   |   |
|  | Security code CUSIP number (if applicable) Description of security  |        |              |                |        | Number of securities   |                     | Single or<br>lowest<br>price                                   | Higl  | nest price    | Total amount                |                       |   |   |
| ۲  |   |        |              |                |        |  | entures             | 560.   | 00    | 1,000.000     | 0 1,0                       | 00.000                | 560,000.00  |   |
| W N T         Commitment Warrants  |   |        |              |                |        |  | rrants              | 84,000.  | 00    | 0.000         | 00                          |                       | 0.00  | ) |
| e)   | 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.  |        |              |                |        |  |                     |  |       |               |                             |                       |   |   |
| Convertible /<br>exchangeable         Exercise price<br>(Canadian \$)         Expiry date<br>(XYXY, MM DD)         Conversion  |   |        |              |                |        |  |                     |  |       |               |                             |                       |   |   |
| security code security code (Centedian (*)) (YYYY- MM-   |   |        |              |                |        |  | (YYYY- MM-DD)       |  | ratio | Des           | cribe other i               | items (if applicable) |   |   |
| C       V       D       U       B       S       0.3500       0.3500       Each Unit is com common share a common share p warrant, with each unit ling the hold acquire one com a price of \$0.55 to maturity date of the debentures. |   |        |              |                |        | e and one<br>e purchase<br>each warrant<br>older thereof to<br>ommon share at<br>5 until the<br>of the convertible |                     |  |       |               |                             |                       |   |   |
| f)   | N<br>Sum  | T      | C<br>v of th | M              | S      | 0.5500   | 0.5500              | 2022-08-20   |       |               | to acq<br>at an e<br>per Co | uire one<br>exercise  | entitles its holder<br>Common Share<br>price of \$0.55<br>Share for a<br>onths. |   |
| •)   | Jan   | mary   |              | 10 01          | Stribt | alon by junioulo   | 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>2ª</sup><br>purchasers | Total amount (Canadian \$) |  |  |  |  |
|---------------------|---|--|----------------------------|--|--|--|--|
| Germany             | NI 45-106 2.3 [Accredited investor]               | 1  | 20,000.00                  |  |  |  |  |
| Nova Scotia         | NI 45-106 2.3 [Accredited investor]               | 1  | 10,000.00                  |  |  |  |  |
| Paraguay            | NI 45-106 2.3 [Accredited investor]               | 2  | 510,000.00                 |  |  |  |  |
| Portugal            | Portugal NI 45-106 2.3 [Accredited investor]      |  |                            |  |  |  |  |
|                     | 560,000.00  |  |                            |  |  |  |  |
|                     | Total number of unique purchasers <sup>2b</sup> 5 |  |                            |  |  |  |  |

<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.

<sup>2b</sup> 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<br>(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 compensated and registration status   |   |   |   |  |  |  |  |  |  |
|---|---|---|---|--|--|--|--|--|--|
| Indicate whether the person co  | mpensated is a registr  | ant.  | ✓ 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 Hoegel   |   | Frank   |  |  |  |  |  |  |
|   | F   | amily name  | First given name Secondary given nar            |  |  |  |  |  |  |
| If the person compensated is n  | ot an individual, provid  | le the following infor  | mation.   |  |  |  |  |  |  |
| Full legal name   | of non-individual   |   |   |  |  |  |  |  |  |
| F   | Firm NRD number   |   |   | (if ap   | plicable)  |  |  |  |  |
| Indicate whether the person co  | mpensated facilitated   | the distribution throu  | igh a funding porta                             | l or an internet-based                           | portal. 🖌 No 🗌 Yes   |  |  |  |  |
| b) Business contact info  | rmation   |   |   |  |  |  |  |  |  |
| If a firm NRD number is not pr  | ovided in Item 8 (a), pi  | ovide the business co   | ontact information o                            | of the person being co                           | mpensated.   |  |  |  |  |
| Street address  | Planta Urbana Alm   | acen 50   |   |  |  |  |  |  |  |
| Municipality  | Independencia Gu  | aira  |   | Province/State                                   |  |  |  |  |  |
| Country   | Paraguay  |   | Po  | stal code/Zip code                               | 5350   |  |  |  |  |
| Email address   | f.hoegel@ccm-ag.  | com   | -   | Felephone number                                 | 91742062627  |  |  |  |  |
| c) Relationship to issuer or investment fund manager  |   |   |   |  |  |  |  |  |  |
| the Instructions and the meani  |   | on 1.4 of NI 45-106 f<br>manager                                  | or the purposes of c                            | ompleting this section<br>sider of the issuer (o | eaning of "connected" in Part B(2) of<br>n.<br>ther than an investment fund)<br>r or investment fund manager   |  |  |  |  |
| ✓ None of the above   |   |   |   |  |  |  |  |  |  |
| d) Compensation details   | ;   |   |   |  |  |  |  |  |  |
| Canadian dollars. Include cash<br>incidental to the distribution, su<br>allocation arrangements with th<br>Cash commissions p<br>Value of all securiti      | commissions, securitie<br>ich as clerical, printing<br>he directors, officers or<br>aid<br>es | s-based compensatio<br>legal or accounting<br>employees of a non- | n, gifts, discounts of<br>services. An issuer i | r other compensation.<br>s not required to ask ; | istribution. Provide all amounts in<br>Do not report payments for services<br>for details about, or report on, internal<br>Security code 2 Security code 3 |  |  |  |  |
| distributed as compensation   |   |   | -   |  |  |  |  |  |  |
| Describe  | Warrants entitles its holder to<br>e Common Share at an<br>st 20, 2023.                       |   |   |  |  |  |  |  |  |
| Other compensation  | on⁵   | Describe  |   |  |  |  |  |  |  |
| Total compensation pa   | aid   |   |   |  |  |  |  |  |  |
| Check box if the pe   | erson will or may rece  | ve any deferred con   | npensation (describ                             | e the terms below)                               |  |  |  |  |  |
| <sup>4</sup> Provide the aggregate value<br>additional securities of the iss<br>rights exercisable to acquire a<br><sup>5</sup> Do not include deferred com | uer. Indicate the secu<br>additional securities of  | rity codes for all secu   |   |  | rights exercisable to acquire<br><u>uding</u> options, warrants or other   |  |  |  |  |

| ITEM 9 - DIRECTORS, EXECU  | TEM 9 - DIRECTORS, EXECUTIVE OFFICERS AND PROMOTERS OF THE ISSUER |                       |                       |  |                   |                       |   |   |  |  |  |
|--|---|-----------------------|-----------------------|--|-------------------|-----------------------|---|---|--|--|--|
| If the issuer is an investment fund  | d, 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 i  | n any jurisdiction of | Canada <sup>6</sup>   |  |                   |                       |   |   |  |  |  |
| Provide nar  | ne of reporting issue   | ər                    |                       |  |                   |                       |   | ] |  |  |  |
| Wholly owned subsidiary of   | a foreign public iss  | suer <sup>6</sup>     |                       |  |                   |                       |   |   |  |  |  |
| Provide name of  | f foreign public issue  | er                    |                       |  |                   |                       |   |   |  |  |  |
| Issuer distributing only eligible foreign securities and the distribution is to permitted clients only <sup>7</sup>  |   |                       |                       |  |                   |                       |   |   |  |  |  |
| If the issuer is at least one of the above, do not complete 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 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 territory; otherwise state the country. For "Relationship to issuer", "D" – Director, "O" – Executive Officer, "P" – Promoter.   |   |                       |                       |  |                   |                       |   |   |  |  |  |
| Organization or company nameFamily nameFirst given nameSecondary given<br>namesBusiness location of<br>non-individual or<br>residentail<br>jurisdiction of<br>individualRelationship to issuer<br>(select all that 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<br>jurisdiction of<br>individual | Rela<br>(select c | tionship<br>one or bo |   |   |  |  |  |
|  | janization or company name Family name                            |                       |                       | Province or<br>country D                     |                   | 0                     |   |   |  |  |  |
|  |   |                       |                       | country                                      |                   |                       |   |   |  |  |  |
|  |   |                       |                       | 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/<br>investment fund manager/agent | Sixth Wave Innovations Inc. |                  |                     |                       |    |  |  |  |  |
|--|-----------------------------|------------------|---------------------|-----------------------|----|--|--|--|--|
| Full legal name  | Manuel                      | Peter            |                     |                       |    |  |  |  |  |
|  | Family name                 | First given name |                     | Secondary given names |    |  |  |  |  |
| Title  | Director                    |                  |                     |                       |    |  |  |  |  |
| Telephone number   | 9022215217                  | Email address    | peter@sixthwave.com |                       |    |  |  |  |  |
| Signature  | "Peter Manuel"              | Date             | 2020                | 08                    | 25 |  |  |  |  |
|  |                             |                  | 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  | Nitu               | Anca             |                 |                         | Title | Paraprofessional |
|------------------|--------------------|------------------|-----------------|-------------------------|-------|------------------|
|                  | Family name        | First given name | Secondary give  | en names                |       |                  |
| Name of company  | Miller Thomson LLP |                  |                 |                         |       |                  |
| Telephone number | 4165974302         | E                | mail address ar | anitu@millerthomson.com |       | n.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.