Form 45-106F1 Report of Exempt Distribution

ITEM 1 - REPORT TYPE
 New report ✓ Amended report If amended, provide filing date of report that is being amended. (YYYY-MM-DD)
ITEM 2 - PARTY CERTIFYING THE REPORT
Indicate the party certifying the report (select only one). For guidance regarding whether an issuer is an investment fund, refer to section 1.1 of National Instrument 81-106 Investment Fund Continuous Disclosure and the companion policy to NI 81-106 (in Québec, Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure).
☐ Investment fund issuer
✓ Issuer (other than an investment fund)
☐ Underwriter
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 BetterLife Pharma Inc. / BetterLife Pharma Inc.
Previous full legal name PIVOT PHARMACEUTICALS INC.
If the issuer's name changed in the last 12 months, provide most recent previous legal name.
Website www.abetterlifepharma.com (if applicable)
If the issuer has a legal entity identifier, provide below. Refer to Part B of the Instructions for the definition of "legal entity identifier".
Legal entity identifier
If two or more issuers distributed a single security, provide the full legal name(s) of the co-issuer(s) other than the issuer named above.
Full legal name(s) of co-issuer(s) (if applicable)
ITEM 4 - UNDERWRITER INFORMATION
If an underwriter is completing the report, provide the underwriter's full legal name, firm NRD number, and SEDAR+ profile number.
Full legal name
Firm NRD number (if applicable)
SEDAR+ profile number

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 000000
If the issuer is in the mining industry , indicate the stage of operations. This does not apply to issuers that provide services to issuers operating in the mining industry. Select the category that best describes the issuer's stage of operations.
☐ Exploration ☐ Development ☐ Production
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
☐ Cryptoassets
b) Number of employees
Number of employees: 🗸 0 - 49 🔲 50 - 99 🔲 100 - 499 🔲 500 or more
c) SEDAR+ profile number
Provide the issuer's SEDAR+ profile number
000029801
ITEM 6 - INVESTMENT FUND ISSUER INFORMATION
If the issuer is an investment fund, provide the following information.
a) Investment fund manager information
Full legal name
Tuli legal name
Firm NRD number (if applicable)
SEDAR+ profile number
b) Type of investment fund
Type of investment fund that most accurately identifies the issuer (select only one).
☐ Money market ☐ Equity ☐ Fixed income ☐ Balanced
☐ Alternative strategies ☐ Cryptoasset ☐ Other (describe)

Indicate whethe	er one or b	oth of the following apply to the investm	ent fund.			
☐ Invest prim	narily in o	ther investment fund issuers				
☐ Is a UCITs I	Fund ¹					
		Investment of Transferable Securities funds (UC				nion (EU) directives
that allow collective	e investment	t schemes to operate throughout the EU on a pas	ssport basis on author	ization from one memb	er state.	
c) Net as	sset valu	e (NAV) of the investment fund				
Select the NAV r	range of th	e investment fund as of the date of the n	nost recent NAV ca	lculation (Canadian	\$).	
Under \$5M		☐ \$5M to under \$25M	☐ \$25M to un	г	Date of NAV c	alculation:
		_				
\$100M to ι	under \$50	0M	☐ \$1B or over		YYYY	MM DD
ITEM 7 - INI	FORMA	TION ABOUT THE DISTRIBU	ITION			
If an issuar lose	atad outsia	e of Canada completes a distribution in	a jurisdiction of Co	anada includa in Ita	m 7 and Scho	odulo 1
		e of Canada completes a distribution in asers resident in that jurisdiction of Cana				
		ees, in connection with the distribution, v		losed in Item 8. The	information μ	provided in
Item 7 must rec	concile with	n the information provided in Schedule 1	of the report.			
a) Curre	ency					
Select the curre	ncy or cur	rencies in which the distribution was ma	de. All dollar amou	unts provided in the	report must l	be in Canadian
✓ Canadian of	dollar	US dollar Euro Other (o	describe)			
_			,			
h) Diatri	مان داد داد	ato a				
ם) טוגניו	bution d	ates				
		t and end dates. If the report is being file				
		oth the start and end dates. If the report dates for the distribution period covered		ecurities distribued	on a continuc	us basis,
include the star	t ana ena		r by the report.			
S	tart date	2024 02 29	End dat	e 2024	03 01	
		YYYY MM DD		YYYY	MM DD	
c) Detail	led purcl	naser information				
-	•				_	
<u>-</u>		this form for each purchaser and atto	icn the scheaule i	to tne completea r	eport. 	
d) Types	s of secu	rities distributed				
		rmation for all distributions reported on de. If providing the CUSIP number, indic				
distributed.			,			
				C	anadian \$	
Security	CUSIP mber (if plicable)	Description of security	Number of securities	Single or lowest price	Highest price	Total amount

65.0000

CVD

Convertible Debenture

1,000.0000

65,000.0000

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 / exchangeable	Underlying	Exercise price (Canadian \$)		Expiry date (YYYY-MM-	Conversion ratio	
security code	security code	Lowest	Highest	DD)		applicable)
CVD	UBS	0.1000		2026-02-28	1:100,000	Convertible debentures con vertible at \$0.10 into units. Each unit = 1 common shar es and 1 warrant
UBS	WNT	0.1000	0.1000	2026-08-31	1:1	

f) Summary of the distribution by jurisdiction and exemption

State the total dollar amount of securities distributed and the number of purchasers for each jurisdiction of Canada and foreign jurisdiction where a purchaser resides and for each exemption relied on in Canada for that distribution. However, if an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include distributions to purchasers resident in that jurisdiction of Canada only.

This table requires a separate line item for: (i) each jurisdiction where a purchaser resides, (ii) each exemption relied on in the jurisdiction where a purchaser resides, if a purchaser resides in a jurisdiction of Canada, and (iii) each exemption relied on in Canada, if a purchaser resides in a foreign jurisdiction.

For jurisdictions within Canada, state the province or territory, otherwise state the country.

Province or country	Exemption relied on	Number of unique purchasers ^{2a}	Total amount (Canadian \$)
Ontario	NI 45-106 2.3 [Accredited investor]	2	35,000.0000
Germany	NI 45-106 2.3 [Accredited investor]	2	30,000.0000
	Total dolla	ar amount of securities distributed	\$65,000.0000
	Total number of unique purchasers ^{2b}	4	

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

g) Net proceeds to the investment fund by jurisdiction

If the issuer is an investment fund, provide the net proceeds to the investment fund for each jurisdiction of Canada and foreign jurisdiction where a purchaser resides. If an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include net proceeds for that jurisdiction of Canada only. For jurisdictions within Canada, state the province or territory, otherwise state the country.

Province or country	Net proceeds (Canadian \$)
Total net proceeds to the investment fund	

³"Net proceeds" means the gross proceeds realized in the jurisdiction from the distributions for which the report is being filed, less the gross redemptions that occurred during the distribution period covered by the report.

^{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 8 - COMPENSATION INFORMATION Provide information for each person (as defined in NI 45-106) (in Québec, Regulation 45-106 respecting Prospectus Exemptions) 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 If yes, indicate number of persons compensated. 2 ✓ Yes a) Name of person compensated and registration status Indicate whether the person compensated is a registrant. □ No **✓** Yes If the person compensated is an individual, provide the name of the individual. Full legal name of individual Family name First given name Secondary given names If the person compensated is not an individual, provide the following information. Full legal name of non-individual HAMPTON SECURITIES LIMITED Firm NRD number 2890 (if applicable) Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal **V** No Yes b) Business contact information If a firm NRD number is not provided in Item 8(a), provide the business contact information of the person being compensated. Street address Municipality Province/State Country Postal code/Zip code mfoster@hamptonsecurities +1 (416) 862-8651 Email address .com Telephone number c) Relationship to issuer or investment fund manager Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of 'connected' in Part B(2) of the Instructions and the meaning of 'control' in section 1.4 of NI 45-106 (in Québec, Regulation 45-106 respecting Prospectus Exemptions) for the purposes of completing this section. ☐ Connected with the issuer or investment fund manager Insider of the issuer (other than an investment fund) Director or officer of the investment fund or investment fund manager ☐ Employee of the issuer or investment fund manager ✓ None of the above

d) Compensation details				
Provide details of all compensation paid, or to be paid, to Provide all amounts in Canadian dollars. Include cash con compensation. Do not report payments for services incider services. An issuer is not required to ask for details about, or employees of a non-individual compensated by the issu	nmissions, securitie ntal to the distribut or report on, intern	s-based compensat ion, such as clerica	tion, gifts, discounts l, printing, legal or	or other accounting
Cash commissions paid	5200.0000			
Value of all securities distributed as compensation ⁴				
Security codes	Security code 1	Security code 2	Security code 3	
Security codes	WNT			
Describe terms of warrants, options or other rights Other compensation ⁵ Describe	share, \$0.10 exer 2026	errants, each to acc		
Total compensation paid	5200			
Check box if the person will or may receive any def	erred compensati	on (describe the te	erms below)	
⁴ Provide the aggregate value of all securities distributed as compensa securities of the issuer. Indicate the security codes for all securities dis acquire additional securities of the issuer. ⁵ Do not include deferred compensation.		_	· ·	

ITEM 8 - COMPENSATION INFORMATION Provide information for each person (as defined in NI 45-106) (in Québec, Regulation 45-106 respecting Prospectus Exemptions) 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. 2 a) Name of person compensated and registration status Indicate whether the person compensated is a registrant. **V** No ☐ Yes If the person compensated is an individual, provide the name of the individual. Full legal name of individual Family name First given name Secondary given names If the person compensated is not an individual, provide the following information. Full legal name of non-individual **Hampton Financial Corporation** Firm NRD number (if applicable) Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal **V** No Yes b) Business contact information If a firm NRD number is not provided in Item 8(a), provide the business contact information of the person being compensated. Street address | 141 Adelaide Street West, Suite 1800 Municipality Toronto Province/State Ontario Country Canada Postal code/Zip code | M5H 3L5 mfoster@hamptonsecurities Email address .com Telephone number +1 (416) 862-8651 c) Relationship to issuer or investment fund manager Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of 'connected' in Part B(2) of the Instructions and the meaning of 'control' in section 1.4 of NI 45-106 (in Québec, Regulation 45-106 respecting Prospectus Exemptions) for the purposes of completing this section. ☐ Connected with the issuer or investment fund manager Insider of the issuer (other than an investment fund) $\hfill \square$ Director or officer of the investment fund or investment fund manager ☐ Employee of the issuer or investment fund manager ✓ None of the above

d) Compensation details	
Provide all amounts in Canadian dollars. Include cash con compensation. Do not report payments for services incide	the person identified in Item 8(a) in connection with the distribution. nmissions, securities-based compensation, gifts, discounts or other ntal to the distribution, such as clerical, printing, legal or accounting or report on, internal allocation arrangements with the directors, officers ier.
Cash commissions paid	
Value of all securities distributed as compensation ⁴	
Security codes	Security code 1 Security code 2 Security code 3 WNT
Describe terms of warrants, options or other rights	39,000 broker warrants, each to acquire 1 common shares, \$0.10 exercise price, expiry February 28, 2026
Other compensation ⁵	
Describe	
Total compensation paid ☐ Check box if the person will or may receive any def	ferred compensation (describe the terms below)
	tion, <u>excluding</u> options, warrants or other rights exercisable to acquire additional tributed as compensation, <u>including</u> options, warrants or other rights exercisable to
ITEM 9 – DIRECTORS, EXECUTIVE OFFICE	RS AND PROMOTERS OF THE ISSUER
If the issuer is an investment fund, do not complete It	
Indicate whether the issuer is any of the following (select t	he one that applies – if more than one applies, select only one).
✓ Reporting issuer in a jurisdiction of Canada☐ Foreign public issuer	
☐ Wholly owned subsidiary of a reporting issuer in ar	ny jurisdiction of Canada ⁶
Provide name of reporting issuer	
☐ Wholly owned subsidiary of a foreign public issuer Provide name of foreign public issuer	6
Issuer distributing only eligible foreign securities ar	and the distribution is to permitted clients only 7 .
If the issuer is at least one of the above, do not comple	ete Item 9(a) – (c). Proceed to Item 10.

⁶ An issuer is a wholly owned subsidiary of a reporting issuer or a foreign public issuer if all of the issuer's outstanding voting securities, other than securities that are required by law to be owned by its directors, are beneficially owned by the reporting issuer or the foreign public issuer, respectively. ⁷ Check this box if it applies to the current distribution even if the issuer made previous distributions of other types of securities to non-permitted clients. Refer to the definitions of "eligible foreign security" and "permitted client" in Part B(1) of the Instructions.	
☐ If the issuer is none of the above, check this box and complete Item 9(a) – (c).	
a) Directors, executive 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 name	Family name	given names or residential jurisdiction of select all		ip to issuer that apply)		
		name	Province or country	D	0	P

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	Family	· ·	Secondary given	Residential jurisdiction of individual		promoter (select if applicable)
company name	name name	name	names	Province or country	D	О

c) Residential address of each individual

Complete Schedule 2 of this form providing the full residential address for each individual listed in Item 9(a) and (b) and attach to the completed report. Schedule 2 also requires information to be provided about control persons.

ITEM 10 - CERTIFICATION

Provide the following certification and business contact information of an officer, director or agent of the issuer or underwriter. If the issuer or underwriter is not a company, an individual who performs functions similar to that of a director or officer may certify the report. For example, if the issuer is a trust, the report may be certified by the issuer's trustee. If the issuer is an investment fund, a director or officer of the investment fund manager (or, if the investment fund manager is not a company, an individual who performs similar functions) may certify the report if the director or officer has been authorized to do so by the investment fund.

The certification may be delegated, but only to an agent that has been authorized by an officer or director of the issuer or underwriter to prepare and certify the report on behalf of the issuer or underwriter. If the report is being certified by an agent on behalf of the issuer or underwriter, provide the applicable information for the agent in the boxes below.

If the individual completing and filing the report is different from the individual certifying the report, provide the name and contact details for the individual completing and filing the report in Item 11.

The signature on the report must be in typed form rather than handwritten form. The report may include an electronic signature provided the name of the signatory is also in typed form.

to file a completed report	of exempt distribution.					
securities regulatory aut	nation below, l certify, on beh hority or regulator, as applica igence, the information provi	able, that I have r	eviewed this	report	and to my knowledg	e, having
Name of Issuer/ investment fund manager/agent	Betterlife Pharma Inc.					
		1		_		
Full legal name	ONG	Mo	Moira			
	Family name	First give	en name	-	Secondary given names	
Title	Chief Financial Officer					
Telephone number	+1 (604) 551-5178	Email address	moira.ong@	blifeph	arma.com	
Signature	M. Ong	Date	2024	03	14	
			YYYY	MM	DD	

Securities legislation requires an issuer or underwriter that makes a distribution of securities under certain prospectus exemptions

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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 certify	ing the report		
Full legal name			
	Family name	First given name	Secondary given names
Title			
Name of company			
Telephone number		Email 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.

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.