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 and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement 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	Railtown Al Technologies Inc. / Railtown Al Technologies Inc.
Previous full legal name	RAILTOWN AI TECHNOLOGIES INC. (FORMERLY RAILTOWN CAPITAL CORP.)
If the issuer's name changed in	the last 12 months, provide most recent previous legal name.
Website	(if applicable)
lf the issuer has a legal entity identifier, p	rovide below. Refer to Part B of the Instructions for the definition of "legal entity identifier".
Legal entity identifier	984500AUE8BA5CB9C805
lf two or more issuers distributed a single above.	e security, provide the full legal name(s) of the co-issuer(s) other than the issuer named
Full legal name(s) of co-issuer(s)	(if applicable)

ITEM 4 - UNDERWRITE	R INFORMATION		
lf an underwriter is completing	the report, provide the underwriter's ful	l legal name, firm NRD number, and	SEDAR+ profile number.
Full legal name			
Firm NRD number		(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 541514
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
000032472
000032472

ITEM 6 - INVESTMENT FUND ISSUER INFORMATION If the issuer is an investment fund, provide the following information. a) Investment fund manager information a) Investment fund manager information Full legal name Full legal name Firm NRD number SEDAR+ profile number b) Type of investment fund Type of investment fund Type of investment fund that most accurately identifies the issuer (select only one). Money market Equity

Alternative strategies	Cryptoasset	🗌 Other (describe)		
Indicate whether one or both of th	e following apply to the in	vestment fund.		
Invest primarily in other inve		,		
☐ Is a UCITs Fund ¹ ¹ Undertaking for the Collective Investment that allow collective investment schemes	nt of Transferable Securities fur			
c) Net asset value (NAV) of the investment fu	Ind		
Select the NAV range of the investn	nent fund as of the date o	f the most recent NAV calc	ulation (Canad	lian \$).
🗌 Under \$5M	S5M to under \$	25M 🗌 \$25M to und	er \$100M	Date of NAV calculation:
☐ \$100M to under \$500M	S500M to under \$500M to under	r \$1B 🗌 \$1B or over		YYYY MM DD
ITEM 7 - INFORMATION	ABOUT THE DIST	RIBUTION		
If an issuer located outside of Can information about purchasers resu commissions or finder's fees, in co Item 7 must reconcile with the info	ident in that jurisdiction o nnection with the distribu	f Canada only. Do not incl tion, which must be disclo	ude in Item 7 s	ecurities issued as payment of
a) Currency				
Select the currency or currencies in dollars.	n which the distribution w	as made. All dollar amoun	nts provided in	the report must be in Canadian
🗹 Canadian dollar 🛛 US d	dollar 🗌 Euro Ot	ther (describe)		
b) Distribution dates				
State the distribution start and end the distribution date as both the si include the start and end dates for	tart and end dates. If the r	report is being filed for sec		
Start date 202	23 06 20	End date	2023	06 27
YYY	Y MM DD		YYYY	MM DD
c) Detailed purchaser ir	nformation			
Complete Schedule 1 of this form	n for each purchaser an	d attach the schedule to	the complete	ed report.
d) Types of securities d	istributed			
Provide the following information to indicate the security code. If pro distributed.				

					Canadian	5
Security code	CUSIP number (if applicable)	Description of security	Number of securities	Single or lowest price	Highest price	Total amount
UBS	750763104	Units composed of one common share and half a common share p urchase warrant.	13,766,332.0000	0.1500	0.1500	2,064,949.8000

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 security code		se price dian \$)	Expiry date (YYYY-MM- DD)	Conversion ratio	Describe other terms (if applicable)
security code	security code	Lowest	Highest			applicable)
WNT	CMS	0.2500	0.2500	2026-06-20	1:1	
WNT	CMS	0.2500	0.2500	2026-06-27	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 \$)
British Columbia	NI 45-106 5A.2 [Listed issuer financing exemption]	32	943,949.7000
Alberta	NI 45-106 5A.2 [Listed issuer financing exemption]	5	167,500.0500
Ontario	NI 45-106 5A.2 [Listed issuer financing exemption]	31	510,750.0000
Québec	NI 45-106 5A.2 [Listed issuer financing exemption]	10	422,500.0500
Bahamas Distributions to purchasers outside of local jurisdiction (BC, AB, NB)		1	20,250.0000
	Total dollar amou	nt of securities distributed	\$2,064,949.8000
	Total number of unique purchasers ^{2b}	79	

^{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.

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.*³*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.

Provide information for each person (a whom the issuer directly provides, or w copies of this page if more than one	ill provide, any co	mpensation in connect		- ·	
Indicate whether any compensation wa		<i>paid, in connection with</i> er of persons compen]	
a) Name of person compen	isated and reg	istration status			
Indicate whether the person compensat	ted is a registrant.				
🗌 No 🗹 Yes					
If the person compensated is an individ	lual, provide the n	name of the individual.			
Full legal name of individual					
If the person compensated is not an inc	Family name dividual, provide ta		t given name D n.	Secondary given r	iames
Full legal name of non-individua		PITAL CORPORATION	/ CORPORATION	N RECHERCHE	
Firm NRD numbe	r 3070		(if applicable)		
Indicate whether the person compensation	ted facilitated the	distribution through a	 funding portal o	r an internet-based por	tal
b) Business contact informa	ation				
<i>If a firm NRD number is not provided in</i> Street address	n Item 8(a), provid	le the business contact i	information of th	e person being comper	nsated.
		Drovin			7
Municipality		Provinc	ce/State		
Country		Postal code/Z	Zip code		
Email address		Telephone I	number		
c) Relationship to issuer or	investment fui	nd manager			
Indicate the person's relationship with t 'connected' in Part B(2) of the Instructio respecting Prospectus Exemptions) for t	ns and the meani	ing of 'control' in sectior			
Connected with the issuer or inve	estment fund ma	inager			
🗌 Insider of the issuer (other than a	an investment fu	nd)			
Director or officer of the investm	ent fund or inves	stment fund manager			
Employee of the issuer or investr	ment fund manaរ្	ger			
✓ None of the above					

d) Compensation details

Cash commissions paid	4020			
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	26,800 Finder's W exercisable into o period of 36 mon	ne common share		
Other compensation ⁵				
Describe				
	[7	
Total compensation paid	4020			
Check box if the person will or may receive any def	erred compensatio	on (describe the te	erms below)	
⁴ Provide the aggregate value of all securities distributed as compensative securities of the issuer. Indicate the security codes for all securities dist acquire additional securities of the issuer. ⁵ Do not include deferred compensation.				

Provide information for each person (as defined in NI 45-106) (in Québec, Regulation 45-106 respecting Prospectus Exemption whom the issuer directly provides, or will provide, any compensation in connection with the distribution. Complete additiona 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.	
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. Secondary given names	
Full legal name of non-individual INTEGRAL WEALTH SECURITIES LIMITED	
Firm NRD number 310 (if applicable)	
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal	
🗸 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	
Email address 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 45-10 respecting Prospectus Exemptions) for the purposes of completing this section.)6
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	

Cash commissions paid	4008			
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	26,720 Finder's Warrants. Each warrant is exercisable into one common share at \$0.15 for 36 months.			
Other compensation ⁵				
Describe				
Total compensation paid	4008			
Check box if the person will or may receive any def	ferred compensation	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.				

Indicate whether any compensation was paid, or will be paid, in connection with the distribution. □ No ✓ Yes If yes, indicate number of persons compensated. 6 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
Indicate whether the person compensated is a registrant. No Yes If the person compensated is an individual, provide the name of the individual.
☐ No ✓ Yes If the person compensated is an individual, provide the name of the individual.
Family name First given name Secondary given names If the person compensated is not an individual, provide the following information. Secondary given names
Full legal name of non-individual PI Financial Corp./Corporation Financière PI
Firm NRD number 5290 (if applicable)
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal
✓ 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
Email address 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 efficer of the investment fund or investment fund manager
 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

Cash commissions paid	10399.99			
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		/arrants. Each war ne common share		
Other compensation ⁵				
Describe				
Total compensation paid	10399.99			
Check box if the person will or may receive any def	erred compensatio	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.				

whom the issuer directly		ompensation in connection with	-106 respecting Prospectus Exemptions) to the distribution. Complete additional
Indicate whether any com □ No ☑ Yes		<i>paid, in connection with the dist</i> per of persons compensated.	tribution. 6
a) Name of pers	on compensated and reg	gistration status	
	on compensated is a registran	t.	
No Ves	dic an individual provide the	name of the individual	
	d is an individual, provide the i	name oj the individual.	
Full legal name of ir	Family name	e First given nar	ne Secondary given names
lf the person compensate	d is not an individual, provide	6	
Full legal name of r	non-individual Echelon Wea	lth Partners Inc.	
Firm	NRD number 32420	(if ap	plicable)
Indicate whether the pers	on compensated facilitated the	e distribution through a funding	portal or an internet-based portal
🗹 No 🗌 Yes			
b) Business cont	tact information		
	not provided in Item 8(a), provid	de the business contact informat	tion of the person being compensated.
Street address			
Municipality		Province/State	
Country		Postal code/Zip code	
Email address		 Telephone number	
c) Relationship t	o issuer or investment fu	Ind manager	
Indicate the person's rela 'connected' in Part B(2) of	tionship with the issuer or inve	stment fund manager (select all ing of 'control' in section 1.4 of l	that apply). Refer to the meaning of NI 45-106 (in Québec, Regulation 45-106
	issuer or investment fund m	-	
	f (other than an investment fu		
	f the investment fund or inve uer or investment fund mana	-	
\checkmark None of the above		، ²	
d) Compensatio	nuetalis		

Cash commissions paid	54204			
Value of all securities distributed as compensation ⁴	15000			
Security codes	Security code 1	Security code 2	Security code 3	
Security codes	WNT			
Describe terms of warrants, options or other rights	361,360 Finder's v exercisable into o months			
Other compensation ⁵	15000			
Describe	Corporate Financ	e Fee		
Total compensation paid	84204			
Check box if the person will or may receive any def	erred compensation	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.		0	,	
⁵ Do not include deferred compensation.				

Provide information for eac whom the issuer directly pr copies of this page if mor	ovides, or will pr	ovide, any comp	ensatior	n in connection				
Indicate whether any comp	-	<i>id, or will be pai</i> d dicate number o			Г			
a) Name of perso	n compensate	ed and registi	ration s	status				
Indicate whether the person Indicate whether the person Indicate whether the person If the person compensated		-	ne of the	individual.				
Full legal name of ind	ividual							
If the person compensated	is not an individ	Family name ual, provide the j	following	-	iven name	e	Secondary gi	ven names
Full legal name of no	n-individual H	AYWOOD SECU	IRITIES I	NC. / VALEUR	S MOB	ILIERES H	AYWOOD Inc.]
Firm N	IRD number 1	630			(if appl	licable)		_
Indicate whether the person	n compensated f	acilitated the dis	tributio	n through a fu	nding p	ortal or a	n internet-based	portal
✓ No 🗌 Yes								
b) Business conta	ct informatio	n						
lf a firm NRD number is not	t provided in Iter	n 8(a), provide th	he busin	ess contact inf	formatio	on of the p	erson being com	ipensated.
Street address								
Municipality				Province	/State			
Country			Po	ostal code/Zip	o code			
Email address				Telephone nu	umber			
c) Relationship to	issuer or inve	estment fund	manag	ger				
Indicate the person's relation 'connected' in Part B(2) of the respecting Prospectus Exem	onship with the is he Instructions a	suer or investme nd the meaning	ent fund of 'contr	manager (sel ol' in section 1				
Connected with the is			-					
Insider of the issuer (dmanager				
Director or officer of t				u manager				
✓ None of the above								
d) Compensation	details							

Cash commissions paid	1800		
Value of all securities distributed as compensation ⁴			
Security codes	Security code 1	Security code 2	Security code 3
Security coues	WNT		
Describe terms of warrants, options or other rights		/arrants. Each war ne common share	
Other compensation ⁵			
Describe			
Total compensation paid	1800		
Check box if the person will or may receive any def	erred compensatio	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.			

Provide information for each perso whom the issuer directly provides, copies of this page if more than	or will provide, any co	mpensatio	n in connection with t			
Indicate whether any compensatio □ No ☑ Yes	n was paid, or will be p If yes, indicate numb		Г	<i>ribution.</i> 6		
a) Name of person com	pensated and regi	istration	status			
Indicate whether the person comp	ensated is a registrant.					
🗌 No 🗹 Yes						
If the person compensated is an in	dividual, provide the n	ame of the	e individual.			
Full legal name of individual						
If the person compensated is not a	Family name n individual, provide ti	he followin	First given nam og information.	e	Secondary giv	ven names
Full legal name of non-indiv	idual Canaccord Ge	nuity Corp	o./Corporation Canac	cord Gen	uity	
Firm NRD nu	mber 900		(if app	licable)		
Indicate whether the person comp	ensated facilitated the	distributio	n through a funding p	oortal or a	n internet-based (portal
✓ No □ Yes	-					
b) Ducinaça contact info	rmation					
b) Business contact info	mation					
If a firm NRD number is not provia	ed in Item 8(a), provid	e the busir	ness contact information	on of the p	person being com	pensated.
Street address						
Municipality			Province/State			
Country		Р	ostal code/Zip code			
Email address			Telephone number			
			•			
c) Relationship to issue	r or investment fur	nd mana	ger			
Indicate the person's relationship v 'connected' in Part B(2) of the Instr respecting Prospectus Exemptions)	uctions and the meani	ng of 'cont	rol' in section 1.4 of N			
Connected with the issuer or	investment fund ma	nager				
Insider of the issuer (other th		-				
Director or officer of the inve			nd manager			
Employee of the issuer or inv	/estment fund manaរ្	ger				
✓ None of the above						
d) Compensation detail	s					

Cash commissions paid	6804		7
Value of all securities distributed as compensation ⁴			
	Security code 1	Security code 2	Security code 3
Security codes	WNT		
			
Describe terms of warrants, options or other rights	45,360 Finder's W exercisable into c months.		
Describe terms of warrants, options of other rights	montris.		
Other compensation ⁵			
Describe			
Total compensation paid	6804		7
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 9 – DIRECTORS, EXECUTIVE OFFICERS AND PROMOTERS OF THE ISSUER

If the issuer is an investment fund, do not complete Item 9. Proceed 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).

Foreign public issuer

Wholly owned subsidiary of a reporting issuer in any jurisdiction of Canada ⁶

Provide name of reporting issuer

Wholly owned subsidiary of a foreign public issuer ⁶

Provide name of foreign public issuer

Issuer distributing only eligible foreign securities and the distribution is to permitted clients only ⁷.

If the issuer is at least one of the above, do not complete 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	First given	Secondary given names	Business location of non-individual or residential jurisdiction of individual		onship to t all that a	
		name		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	Family	First given	, , ,	Residential jurisdiction of individual	Relationship to one or both	promoter (select if applicable)
company name	name	name	names	Province or country	D	0

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 to that of a director of 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/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/ investment fund	Railtown Al Technologies Inc.							
manager/agent								
Full legal name	WOODWARD Paul John Courtney							
	Family name	First given name			Secondary given names			
Title	Chief Financial Officer							
Telephone number	+1 (604) 690-3797	Email address	paul@railtow	ın.ai				
Signature	Paul Woodward	Date	2023	08	28			
			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			
	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.