Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 9067023

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 I	Report						
Indicate the party certifying the report (select Instrument 81-106 Investment Fund Continu				estment fund, refer to section	on 1.1 of National		
☐ Investment fund issuer	ous disclosure and the comp	union policy to tvi or	700.				
✓ Issuer (other than an investrement of the state of	ment fund)						
Underwriter	noncrana)						
	!						
ITEM 3 - ISSUER NAME AND OTH							
Provide the following information about the Full legal name			the fund.				
<u></u>	Revive Therapeutics Lt	.u.					
Previous full legal name							
If the issuer's name changed in the l	ast 12 months, provide most	recent previous legal r	name.				
Website		(i	if applicable	e)			
If the issuer has a legal entity identifier, prov	ide below. Refer to Part B of t	he Instructions for the	e definition o	of "legal entity identifier".			
Legal entity identifier							
If two or more issuers distributed a single sec	curity, provide the full legal no	ame(s) of the co-issuer	r(s) other the	an the issuer named above.			
Full legal name(s) of co-issuer(s)		(i	if applicable	2)			
ITEM 4 - UNDERWRITER INFORMA	ATION						
If an underwriter is completing the report, pro		aal name and firm NE	2D number				
Full legal name	ovide trie driderwriter's full le	gai name ana jim NK	ND Humber.				
If the underwriter does not have a firm NRD number, provide the head office contact information of the underwriter.							
Street address			/a [
Municipality			ce/State		 		
Country		Postal code/2	Zip code		I		
Telephone number			Website		(if applicable)		

ITEM 5 - ISSUER INFORMATION				
If the issuer is an investment fund, do not complete Item 5. Proceed to Item 6.				
a) Primary industry				
Provide the issuer's North American Industry Classification Standard (NAICS) code (6 digits only) that in your reasonable judgment most closely corresponds to the issuer's primary business activity.				
NAICS industry code 3 1 2 3 1 0				
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				
Does the issuer have a SEDAR profile?				
No				
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 MM DD				
f) Reporting issuer status				
Is the issuer a reporting issuer in any jurisdication of Canada? No Yes				
If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer.				
AII AB BC MB NB NL NT				
□ NS □ NU □ ON □ PE □ QC □ SK □ YT				
g) Public listing status				
If the issuer has a CUSIP number, provide below (first 6 digits only) CUSIP number				
If the issuer is publicly listed, provide the name of the exchange on which the issuer's equity securities primarily trade. Provide only the name of an exchange and not a trading facility such as, for example, an automated trading system.				
Exchange name				
h) Size of issuer's assets				

Select the size of the issuer's assets based on its most recently available annual financial statements (Canadian \$). If the issuer has not prepared annual financial statements for its first financial year, provide the size of the issuer's assets at the distribution end date.

☐ \$0 to under \$5M	☐ \$5M to under \$25M	☐ \$25M to under \$100M
\$100M to under \$500M	☐ \$500M to under \$1B	\$1B or over

ITEM 6 - INVESTMENT	FUND ISSUER INFORMATION						
If the issuer is an inves	tment fund, provide the following information.						
a) Investment fund ma	anager information						
Full legal name							
Firm NRD number	(if applicable)						
If the investment fund mand	ager does not have a firm NRD number, provide the head office contact information of the investment fund manager.						
Street address							
Municipality	Province/State						
Country	Postal code/Zip code						
Telephone number	Website (if applicable)						
b) Type of investment	fund						
Type of investment fund tha	it most accurately identifies the issuer (select only one) .						
Money market	☐ Equity ☐ Fixed income ☐ Balanced						
Alternative strate	gies Cryptoasset Other (describe)						
Indicate whether one or bot	h of the following apply to the investment fund .						
Invests primarily in	n other investment fund issuers						
☐ Is a UCITs Fund¹							
	tive Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union of ollective investment schemes to operate throughout the EU on a passport basis on authorization from one member state.						
c) Date of formation a	nd financial year-end of the investment fund						
Date of forma	tion Financial year-end MM DD						
d) Reporting issuer st	atus of the investment fund						
Is the investment fund a reporting issuer in any jurisdication of Canada? No Yes							
If yes, select the jurisdictions	s of Canada in which the investment fund is a reporting issuer.						
AII	AB BC MB NB NL NT						
☐ NS ☐	NU ON PE QC SK T						
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 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 \$).							
\$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:							
	YYYY MM DD						

ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION

If an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include in Item 7 and Schedule 1 information about purchasers resident in that jurisdiction of Canada only. Do not include in Item 7 securities issued as payment of commissions or finder's fees in connection with the distribution, which must be disclosed in Item 8. The information provided in Item 7 must reconcile with the information provided in Schedule 1 of the report.

a)) Currency	

Select the currency or currencies in which the distribution was made. All dollar amounts provided in the report must be in Canadian dollars.

b) Distribution date(s)

State the distribution start and end dates. If the report is being filed for securities distributed on only one distribution date, provide the distribution date as both the start and end dates. If the report is being filed for securities distributed on a continuous basis, include the start and end dates for the distribution period covered by the report.

Start date 2020 03 18

YYYY MM DD

End date	2020	03	18
	YYYY	MM	DD

c) Detailed purchaser information

Complete Schedule 1 of this form for each purchaser and attach the schedule to the completed report.

d) Types of securities distributed

Provide the following information for all distributions reported on a per security basis. Refer to Part A(12) of the Instructions for how to indicate the security code. If providing the CUSIP number, indicate the full 9-digit CUSIP number assigned to the security being distributed.

					Canadian \$	
Security code	CUSIP number (if applicable)	Description of security	Number of securities	Single or lowest price	Highest price	Total amount
UBS	761516509		33,535,000.00	0.0500	0.0500	1,676,750.00

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 security code		Exercise price (Canadian \$)		Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other items (if applicable)				
						Lowest	Highest			
W	N	Т	С	М	S	0.0700		2023-03-18	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 ²⁸ purchasers	Total amount (Canadian \$)
Alberta	NI 45-106 2.3 [Accredited investor]	17	320,000.00
British Columbia	NI 45-106 2.3 [Accredited investor]	19	497,000.00
Ontario	NI 45-106 2.3 [Accredited investor]	27	797,250.00
Québec	NI 45-106 2.3 [Accredited investor]	1	12,500.00
Germany	1	50,000.00	
	1,676,750.00		

^{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. 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.

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.

Description	Date of document or other material (YYYY-MM-DD)	Previously filed with or delivered to regulator? (Y/N)	Date previously filed or delivered (YYYY-MM-DD)

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.	ITEM 8 - COMPENSATION INFORMATION								
□ No ✓ Yes If yes indicate number of persons compensated o	Indicate whether any compensation was paid, or will be paid, in connection with the distribution.								
The Figure 1 Action of the second compensation.	No ✓ Yes If yes, indicate number of persons compensated. 8								

a) Name of person comp	ensated and reg	istration status							
Indicate whether the person cor	mpensated is a regi	strant.	☐ No	✓ Yes					
If the person compensated is an	ı individual, provide	the name of the indiv	vidual.						
Full legal name of indiv	ridual								
		Family name	Fir	st given name	Secondary (given names			
If the person compensated is no	•	_							
Full legal name	of non-individua	Hampton Securit	ies Limited						
Fi	irm NRD number	2 8 9	0	(if ap	plicable)				
Indicate whether the person cor	mpensated facilitate	ed the distribution thro	ough a funding po	rtal or an internet-based	d portal. ✓	No Yes			
b) Business contact infor	mation								
If a firm NRD number is not pro	ovided in Item 8 (a),	provide the business	contact informatio	n of the person being co	ompensated.				
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 for the purposes of completing this section. Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund)									
Director or officer of the investment fund or investment fund manager									
None of the above									
d) Compensation details									
Provide details of all compensate Canadian dollars. Include cash c incidental to the distribution, suc allocation arrangements with th	commissions, securi ch as clerical, printi	ties-based compensati ng, legal or accounting	ion, gifts, discounts g services. An issue	s or other compensation er is not required to ask	. Do not report pay	ments for services			
Cash commissions pa	aid 45,	732.50		Security code 1	Security code 2	Security code 3			
Value of all securitie	15	732.50	Security codes	C M S	U B S	WNT			
distributed as compensatio	""								
Describe terms of warrants, options or other rights 914,650 compensation warrants were issued. Each compensation warrant entitles the holder thereof to acquire one unit of the issuer at a price of \$0.05 per unit at any time until March 18, 2022. Each unit is comprised of one common share and one warrant.									
Other compensation	n ⁵	Describe							
Total compensation paid 45,732.50									
Check box if the person will or may receive any deferred compensation (describe the terms below)									
⁴ Provide the aggregate value of additional securities of the issu- rights exercisable to acquire ac ⁵ Do not include deferred comp	uer. Indicate the se dditional securities	curity codes for all sed							

a) Name of person comp	ensated and regis	stration status						
Indicate whether the person co	mpensated is a regist	trant.	☐ No	✓	Yes			
If the person compensated is an individual, provide the name of the individual.								
Full legal name of indiv	ridual							
		Family name	•	First given	name	Secondary	given names	
If the person compensated is no	•		•					
Full legal name	of non-individual	Canaccord Ger	nuity Corp.					
F	irm NRD number	9 0	0		(if ap	plicable)		
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. Ves								
b) Business contact info	mation							
If a firm NRD number is not pro	ovided in Item 8 (a), _I	provide the busines	s contact info	rmation of th	e person being co	ompensated.		
Street address								
Municipality					Province/State	•		
Country				Postal	l code/Zip code)		
Email address Telephone number								
c) Relationship to issuer or investment fund manager								
Indicate the person's relationsh the Instructions and the meani	ng of "control" in sec	tion 1.4 of NI 45-10		poses of comp	oleting this sectio	n.		
Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund)								
Director or officer of t	he investment fund	or investment fund	manager	Emplo	oyee of the issue	er or investment fur	nd manager	
✓ None of the above								
d) Compensation details								
Provide details of all compensate Canadian dollars. Include cash of incidental to the distribution, su allocation arrangements with the	commissions, securiti ch as clerical, printin	es-based compenso g, legal or account	ation, gifts, di ing services. A	scounts or oth An issuer is no	ner compensation It required to ask	. Do not report pay	ments for services	
Cash commissions pa	aid 2,8	00.00			Security code 1	Security code 2	Security code 3	
Value of all securities	es		Security c	ndes	C M S	U B S	W N T	
distributed as compensation	n⁴		Security C	oues				
Describe terms of warrants, options or other rights 56,000 compensation warrants were issued. Each compensation warrant entitles the holder thereof to acquire one unit of the issuer at a price of \$0.05 per unit at any time until March 18, 2022. Each unit is comprised of one common share and one warrant.								
Other compensation	n ⁵	Describ	ре					
Total compensation pa	2,8	00.00						
Check box if the pe	rson will or may rec	eive any deferred	compensation	n (describe th	e terms below)			
⁴ Provide the aggregate value of additional securities of the issurights exercisable to acquire a ⁵ Do not include deferred comp	uer. Indicate the sec dditional securities d	urity codes for all s						

a) Name of person comp	ensated and regi	stration status							
Indicate whether the person con	npensated is a regis	trant.	☐ No	[-	✓ Yes				
If the person compensated is an	individual, provide	the name of the indiv	idual.						
Full legal name of indiv	idual								
		Family name	I	First give	en name	Secondary (given names		
If the person compensated is no	t an individual, pro	vide the following info	rmation.						
Full legal name	of non-individual	Richardson GMP	Limited						
Fi	rm NRD number	2 1 9	7	0	(if ap	plicable)			
Indicate whether the person con	npensated facilitate	d the distribution thro	ugh a fundin	g portal or	an internet-based	I portal. ✓	No] Yes	
b) Business contact inform	mation								
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			Ī	Posta	al 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 for the purposes of completing this section. Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund)									
Director or officer of the 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 compensati Canadian dollars. Include cash c incidental to the distribution, suc allocation arrangements with the	ommissions, securit ch as clerical, printir	ies-based compensations, legal or accounting	on, gifts, disco services. An	ounts or ot issuer is n	ther compensation ot required to ask	. Do not report pay	ments for se	ervices	
Cash commissions pa	id 2,6	625.00			Security code 1	Security code 2	Security co	de 3	
Value of all securitie	s		Security cod	les	C M S	U B S	WN	Т	
distributed as compensation			,						
Describe terms of warrants, options or other rights 52,500 compensation warrants were issued. Each compensation warrant entitles the holder thereof to acquire one unit of the issuer at a price of \$0.05 per unit at any time until March 18, 2022. Each unit is comprised of one common share and one warrant.									
Other compensation	1 ⁵	Describe							
Total compensation paid 2,625.00									
Check box if the per	rson will or may red	ceive any deferred cor	mpensation ((describe t	he terms below)				
⁴ Provide the aggregate value of additional securities of the issu- rights exercisable to acquire ac ⁵ Do not include deferred compo	er. Indicate the sec Iditional securities	curity codes for all sec						er:	

a) Name of person comp	ensated and regi	istration status							
Indicate whether the person con	npensated is a regis	strant.	☐ No	✓ Yes					
If the person compensated is an	individual, provide	the name of the indiv	idual.						
Full legal name of indivi	idual								
		Family name	Fir	st given name	Secondary (given names			
If the person compensated is no	-	_							
Full legal name	of non-individual	StephenAvenue S	Securities Inc.						
Fi	rm NRD number	8 0 8	0	(if ap	plicable)				
Indicate whether the person con	npensated facilitate	ed the distribution thro	ugh a funding poi	rtal or an internet-based	d portal. ✓	No Yes			
b) Business contact inform	mation								
If a firm NRD number is not pro	vided in Item 8 (a),	provide the business o	contact informatio	n of the person being co	ompensated.				
Street address									
Municipality				Province/State	•				
Country			ا	Postal code/Zip code	•				
Email address			Ī	Telephone numbe	r				
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 for the purposes of completing this section.									
Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund)									
Director or officer of the 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 compensati Canadian dollars. Include cash co incidental to the distribution, suc allocation arrangements with the	ommissions, securit h as clerical, printii	ties-based compensations, legal or accounting	on, gifts, discounts g services. An issue	s or other compensation er is not required to ask	. Do not report pay	ments for services			
Cash commissions pa	id 7,3	350.00		Security code 1	Security code 2	Security code 3			
Value of all securitie	-		Security codes	C M S	U B S	WNT			
distributed as compensation			,						
Describe terms of warrants, options or other rights 147,000 compensation warrants were issued. Each compensation warrant entitles the holder thereof to acquire one unit of the issuer at a price of \$0.05 per unit at any time until March 18, 2022. Each unit is comprised of one common share and one warrant.									
Other compensation	n ⁵	Describe							
Total compensation paid 7,350.00									
Check box if the per	rson will or may red	ceive any deferred cor	mpensation (desc	cribe the terms below)					
⁴ Provide the aggregate value of additional securities of the issurights exercisable to acquire action of the include deferred compared to acquire action of the include action o	er. Indicate the sed Iditional securities	curity codes for all sec							

a) Name of person comp	ensated and regi	stration status						
Indicate whether the person con	npensated is a regis	trant.	☐ No	✓ Yes				
If the person compensated is an	individual, provide	the name of the indivi	idual.					
Full legal name of indiv	idual							
		Family name	Fi	st given name	Secondary (given names		
If the person compensated is no	t an individual, pro	vide the following info	rmation.					
Full legal name	of non-individual	EMD Financial Inc	c.					
Fi	rm NRD number	3 6 4	8 0	(if ap	plicable)			
Indicate whether the person con	npensated facilitate	d the distribution thro	ugh a funding po	rtal or an internet-based	I portal. ✓	No 🗌	Yes	
b) Business contact inform	mation							
If a firm NRD number is not pro	vided in Item 8 (a),	provide the business c	ontact informatio	n of the person being co	mpensated.			
Street address								
Municipality				Province/State				
Country			Ī	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 for the purposes of completing this section. Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund)								
Director or officer of the investment fund or investment fund manager Employee of the issuer or investment fund manager								
✓ None of the above								
d) Compensation details			10. 11. 11. 24.					
Provide details of all compensations of all compensations and compensation can be incidental to the distribution, such allocation arrangements with the	ommissions, securit h as clerical, printir	ies-based compensationg, legal or accounting	on, gifts, discount services. An issu	s or other compensation. er is not required to ask	. Do not report pay	ments for serv	vices	
Cash commissions pa	id 8,4	100.00		Security code 1	Security code 2	Security code	e 3	
Value of all securitie	s		Security codes	C M S	U B S	WN	Т	
distributed as compensation			,					
Describe terms of warrants, options or other rights 168,000 compensation warrants were issued. Each compensation warrant entitles the holder thereof to acquire one unit of the issuer at a price of \$0.05 per unit at any time until March 18, 2022. Each unit is comprised of one common share and one warrant.								
Other compensation	n ⁵	Describe						
Total compensation paid 8,400.00								
Check box if the per	son will or may red	ceive any deferred cor	mpensation (des	cribe the terms below)				
⁴ Provide the aggregate value of additional securities of the issu- rights exercisable to acquire ac ⁵ Do not include deferred compo	er. Indicate the sec Iditional securities	curity codes for all sec						

a) Name of person comp	ensated and reg	istration status							
Indicate whether the person cor	npensated is a regi	strant.	☐ No	✓ Yes					
If the person compensated is an	individual, provide	the name of the indivi	idual.						
Full legal name of indiv	ridual								
		Family name	Fi	st given name	Secondary (given names			
If the person compensated is no	-	_							
Full legal name	of non-individua	Industrial Alliance	Securities Inc.						
Fi	irm NRD number	1 5 4	0 0	(if ap	oplicable)				
Indicate whether the person cor	mpensated facilitate	ed the distribution thro	ugh a funding po	rtal or an internet-based	d portal. ✓	No Yes			
b) Business contact infor	mation								
If a firm NRD number is not pro	ovided in Item 8 (a),	provide the business c	ontact informatio	on of the person being co	ompensated.				
Street address									
Municipality]	Province/State	e				
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 for the purposes of completing this section.									
Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund)									
Director or officer of the	Director or officer of the investment fund or investment fund manager Employee of the issuer or investment fund manager								
✓ None of the above									
d) Compensation details									
Provide details of all compensate Canadian dollars. Include cash c incidental to the distribution, suc allocation arrangements with th	commissions, securi ch as clerical, printi	ties-based compensations ng, legal or accounting	on, gifts, discount services. An issu	s or other compensation er is not required to ask	a. Do not report pay	ments for services			
Cash commissions pa	67,	410.00		Security code 1	Security code 2	Security code 3			
Value of all securitie	es		Security codes	C M S	U B S	WNT			
distributed as compensatio									
Describe terms of warrants, options or other rights 1,348,200 compensation warrants were issued. Each compensation warrant entitles the holder thereof to acquire one unit of the issuer at a price of \$0.05 per unit at any time until March 18, 2022. Each unit is comprised of one common share and one warrant.									
Other compensation	n ⁵	Describe							
Total compensation paid 67,410.00									
Check box if the person will or may receive any deferred compensation (describe the terms below)									
⁴ Provide the aggregate value of additional securities of the issu- rights exercisable to acquire ac ⁵ Do not include deferred comp	uer. Indicate the se additional securities	curity codes for all sec							

a) Name of person comp	ensated and reg	istration status								
Indicate whether the person con	npensated is a regis	strant.	☐ No	√	Yes					
If the person compensated is an	individual, provide	the name of the indiv	vidual.							
Full legal name of indiv	idual									
		Family name		First given	name	Secondary	given names			
If the person compensated is no	•	_								
Full legal name	of non-individual	Haywood Securit	ties Inc.							
Fi	rm NRD number	1 6 3	0		(if a	applicable)				
Indicate whether the person con	npensated facilitate	ed the distribution thro	ough a funding	portal or a	ın internet-bas	ed portal.	✓ No □] Yes		
b) Business contact inform	,									
If a firm NRD number is not pro	vided in Item 8 (a),	provide the business	contact inform	ation of the	e person being	compensated.				
Street address										
Municipality					Province/Sta	te				
Country				Postal	code/Zip cod	de				
Email address	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 for the purposes of completing this section.										
Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund)										
Director or officer of the 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 Canadian dollars. Include cash concidental to the distribution, such allocation arrangements with the	ommissions, securi ch as clerical, printi	ties-based compensati ng, legal or accountin	ion, gifts, disco g services. An i	unts or oth ssuer is not	er compensation trequired to as	on. Do not report pay	ments for se	ervices		
Cash commissions pa	id 2,	590.00			Security code	1 Security code 2	Security co	ode 3		
Value of all securitie	-		Security code	es	C M	S U B S	WN	Т		
distributed as compensation			,							
Describe terms of warrants, options or other rights 51,800 compensation warrants were issued. Each compensation warrant entitles the holder thereof to acquire one unit of the issuer at a price of \$0.05 per unit at any time until March 18, 2022. Each unit is comprised of one common share and one warrant.										
Other compensation	1 ⁵	Describe								
Total compensation paid 2,590.00										
Check box if the per	rson will or may re	ceive any deferred co	mpensation (c	describe the	e terms below)				
⁴ Provide the aggregate value of additional securities of the issu- rights exercisable to acquire ac ⁵ Do not include deferred compa	er. Indicate the sed Iditional securities	curity codes for all se						er.		

a) Name of person comp	ensated and regis	stration status									
Indicate whether the person co	mpensated is a regist	rant.		☐ No		\checkmark] Yes				
If the person compensated is an individual, provide the name of the individual.											
Full legal name of indiv	ridual										
		Family name			First	t given	name		Secondar	given names	S
If the person compensated is no	ot an individual, prov	ide the following	infor	rmation.							
Full legal name	of non-individual	Gravitas Sec	uritie	s Inc.							
F	irm NRD number	2 6	2	6	0			(if app	licable)		
Indicate whether the person co	mpensated facilitated	the distribution	throu	ugh a fund	ing port	al or a	n interne	t-based _l	portal. [✓ No [Yes
b) Business contact infor	mation										
If a firm NRD number is not pro	ovided in Item 8 (a), p	provide the busin	ess co	ontact info	rmation	of the	person b	eing con	npensated.		
Street address											
Municipality							Province	e/State			
Country				Ī	Р	ostal	code/Zi	p code			
Email address	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 for the purposes of completing this section. Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund)											
Director or officer of t	he investment fund	or investment fu	nd ma	anager		Emplo	yee of th	e issuer	or investment fo	ınd manage	r
✓ None of the above											
d) Compensation details											
Provide details of all compensate Canadian dollars. Include cash of incidental to the distribution, su allocation arrangements with the	commissions, securiti ch as clerical, printin	es-based compei g, legal or accou	nsatio nting	on, gifts, di. services. A	scounts An issuer	or other is not	er compe required	nsation. I to ask fo	Do not report pa	yments for s	ervices
Cash commissions pa	nid 14,0	00.00					Security	code 1	Security code 2	Security of	ode 3
Value of all securities	es			Security co	ndes		C N		U B S	WN	Т
distributed as compensation	n⁴		,		Jues	L					
Describe terms of warrants, options or other rights 280,000 compensation warrants were issued. Each compensation warrant entitles the holder thereof to acquire one unit of the issuer at a price of \$0.05 per unit at any time until March 18, 2022. Each unit is comprised of one common share and one warrant.											
Other compensatio	n ⁵	Desc	cribe								
Total compensation pa	id										
Check box if the pe	rson will or may rec	eive any deferre	d con	npensatio	n (descr	ibe the	e terms b	elow)			
⁴ Provide the aggregate value of additional securities of the issurights exercisable to acquire a ⁵ Do not include deferred comp	ier. Indicate the sec additional securities o	urity codes for a									er

тем 9 - Directors, Execu	TIVE OFFICERS	AND PROMOT	ERS OF THE ISS	SUER						
If the issuer is an investment fund	d, do not complete l	Item 9. Procced to	Item 10.							
Indicate whether the issuer is any o	f the following (select	t the one that appli	es - if more than one	applies, select onl	y one).					
✓ Reporting issuer in any juris	sdiction of Canada									
Foreign public issuer										
Wholly owned subsidiary of	a reporting issuer in	any jurisdiction of	Canada ⁶							
Provide nan	ne of reporting issue	r						7		
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 comp	olete Item 9(a) – (d	c). Proceed to Item	10.						
⁶ An issuer is a wholly owned subside securities that are required by law to respectively. ⁷ Check this box if it applies to the collients. Refer to the definitions of "e.	o be owned by its dir urrent distribution evo	ectors, are benefic en if the issuer mad	ially owned by the re de previous distribut	eporting issuer or ti tions of other types	the foreign	public is	ssuer,			
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.							province			
Organization or company name	Family name	First given name	Secondary given names	Business loc non-individe resident jurisdictio individu	ual or ail n of		onship to			
				Province or	country	D	0	Р		
b) Promoter information										
If the promoter listed above is not an within Canada, state the province or										
Organization or company name	Family name	First given name	Secondary given names	Residential jurisdiction of individual			to promo			
				Province or country	D		C)		
c) Residential address of eac	h individual									
Complete Schedule 2 of this form completed report. Schedule 2 also					(a) and (b)	and at	tach to t	he		

ITEM 10 - CERTIFICATION

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

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

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

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

Securities legislation requires an issuer or underwriter that makes a distribution of securities under certain prospectus exemptions to file a completed report of exemt distribution.

By completing the information below, I certify, on behalf of the issuer/underwriter/investment fund manager, to the securities regulatory authority or regulator, as applicable, that I have reviewed this report and to my knowledge, having exercised reasonable diligence, the information provided in this report is true and, to the extent required, complete.

Name of issuer/underwriter/ investment fund manager/agent	Revive Therapeutics Ltd.									
Full legal name	Frank	Michael								
	Family name	First given name	'	Seco	ndary given r	names				
Title	Chief Executive Officer									
Telephone number	8889010036	Email address	,frank@	@reviveth	nera.com					
Signature	(signed) Michael Frank	Date	202	0 03	24					
		·	YYYY	Y MM	l DD	_				

ITEM 11- CONTACT P	PERSON				
	ness contact information for this report, if different than t		3 ,	regulator mo	ay contact with any questions
Same as individua	al certifying the report				
Full legal name				Title	
	Family name	First given name	Secondary given names		_
Name of company					
Telephone number		Er	nail address		

Notice - Collection and use of personal information

The personal information required under this form is collected on behalf of and used by the securities regulatory authority or regulator under the authority granted in securities legislation for the purposes of the administration and enforcement of the securities legislation.

If you have any questions about the collection and use of this information, contact the securities regulatory authority or regulator in the local jurisdiction(s) where the report is filed, at the address(es) listed at the end of this form.

The attached Schedules 1 and 2 may contain personal information of individuals and details of the distribution(s). The information in Schedules 1 and 2 will not be placed on the public file of any securities regulatory authority or regulator. However, freedom of information legislation may require the securities regulatory authority or regulator to make this information available if requested.

By signing this report, the issuer/underwriter confirms that each individual listed in Schedule 1 or 2 of the report who is resident in a jurisdiction of Canada:

- a) has been notified by the issuer/underwriter of the delivery to the securities regulatory authority or regulator of the information pertaining to the individual as set out in Schedules 1 or 2, that this information is being collected by the securities regulatory authority or regulator under the authority granted in securities legislation, that this information is being collected for the purposes of the administration and enforcement of the securities legislation of the local jurisdiction, and of the title, business address and business telephone number of the public official in the local jurisdiction, as set out in this form, who can answer questions about the security regulatory authority's or regulator's indirect collection of the information, and
- b) has authorized the indirect collection of the information by the securities regulatory authority or regulator.