Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 9373249

ITEM 1 - REPORT TYPE								
✓ New report								
☐ Amended report If amended, provide f	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.							
Investment fund issuer								
✓ Issuer (other than an investment fund)								
Underwriter								
ITEM 3 - ISSUER NAME AND OTHER IDENTIFIE								
Provide the following information about the issuer, or if the is								
Full legal name BioHarvest S	Sciences Inc.							
Previous full legal name								
If the issuer's name changed in the last 12 months, p	provide most recent previous legal name.							
Website	(if applicable)							
If the issuer has a legal entity identifier, provide below. Refer	r 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	he 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 underw	writer's full legal name and firm NRD number.							
Full legal name								
Firm NRD number	(if applicable)							
If the underwriter does not have a firm NRD number, provide	e the head office contact information of the underwriter.							
Street address								
Municipality	Province/State							
Country	Postal code/Zip code							
Telephone number	Website (if applicable)							

Item 5 - Issuer Information
If the issuer is an investment fund, do not complete Item 5. Proceed to Item 6.
a) Primary industry
Provide the issuer's North American Industry Classification Standard (NAICS) code (6 digits only) that in your reasonable judgment most closely corresponds to the issuer's primary business activity.
NAICS industry code 5 4 1 7 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 ✓ Yes If yes, provide SEDAR profile number 0 0 0 3 6 9 0 0
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 Financial year-end
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	If the issuer is an investment fund, provide the following information.						
a) Investment fund manager 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	nt most accurately identifies the issuer (select only one) .						
Money market	☐ Equity ☐ Fixed income ☐ Balanced						
Alternative strateg	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							
¹ Undertaking for the Collec (EU) directives that allow c	tive Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union collective investment schemes to operate throughout the EU on a passport basis on authorization from one member state.						
c) Date of formation a	and financial year-end of the investment fund						
Date of forma	tion Financial year-end MM DD MM DD						
d) Reporting issuer st	atus of the investment fund						
Is the investment fund a rep	orting 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 YT						
e) Public listing status	s of the investment fund						
If the investment fund has a	CUSIP number, provide below (first 6 digits only)						
	CUSIP number						
	blicly listed, provide the name of the exchange on which the investment fund's securities primarily trade. Provide only the not a trading facility such as, for example, an automated trading system.						
Exchange on an exchange and h							
-	AV) of the investment fund						
	investment fund as of the date of the most recent NAV calculation (Canadian \$).						
\$0 to under \$5M	s5M to under \$25M s25M to under \$100M						
\$100M to under \$500	DM \$500M to under \$1B \$1B or over Date of NAV calculation: YYYY MM DD						

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)

✓ Canadian dollar

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.

Other (describe)

Start date 2021 02 02

YYYYY MM DD

US dollar

End date 2021 02 02

c) Detailed purchaser information

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

Euro

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
WNT			15,449,829.00	0.4000		6,179,931.60

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 security code			Underlying 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	0.4500		2022-02-02		

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 iurisdiction.

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

Province or country	Exemption relied on	Number of unique ² purchasers	Total amount (Canadian \$)
Israel	Distributions to purchasers outside of local jurisdiction (BC, AB, NB)	9	675,212.80
Australia	NI 45-106 2.3 [Accredited investor]	1	15,000.00
Alberta	NI 45-106 2.3 [Accredited investor]	2	48,000.00
British Columbia	NI 45-106 2.3 [Accredited investor]	2	20,000.00
Ontario	NI 45-106 2.3 [Accredited investor]	9	224,814.40
Québec	NI 45-106 2.3 [Accredited investor]	2	7,000.00
France NI 45-106 2.3 [Accredited investor]		3	37,975.20
Israel	NI 45-106 2.3 [Accredited investor]	44	4,115,452.80

South Africa	NI 45-106 2.3 [Accredited investor]	2	100,000.00
Switzerland	NI 45-106 2.3 [Accredited investor]	2	90,000.00
United Kingdom	NI 45-106 2.3 [Accredited investor]	4	317,345.20
United States	NI 45-106 2.3 [Accredited investor]	9	355,931.20
British Columbia	NI 45-106 2.5 [Family, friends and business associates]	7	173,200.00
	6,179,931.60		
	Total number of unique purchasers ^{2b}	96	

^{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.

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)

^{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 - COMPENSATIO	N INFORMATION							
Provide information for each petthe distribution. Complete ad				•		in connection with		
Indicate whether any compen	sation was paid, or will be p	aid, in connecti	on with the distribution.					
No ✓ Yes	If yes, indicate nur	mber of perso	ons compensated.	5				
a) Name of person comp	pensated and registration	status						
Indicate whether the person co	mpensated is a registrant.		✓ No	Yes				
If the person compensated is ar	n individual, provide the nan	ne of the individ	lual.					
Full legal name of indiv	/idual Chait		Roberto					
	Family name First given name Secondary given names							
If the person compensated is no	ot an individual, provide the	following infori	mation.					
Full legal name	of non-individual							
F	irm NRD number			(if ap	plicable)			
Indicate whether the person co	mpensated facilitated the dis	stribution throu	gh a funding portal or c	ın internet-based	I portal. ✓	No Yes		
b) Business contact infor	rmation							
If a firm NRD number is not pro	ovided in Item 8 (a), provide	the business co	ntact information of the	e person being co	mpensated.			
Street address	8 Michaelson St							
Municipality				Province/State	Jerusalem			
Country	Israel		Postal	code/Zip code	93707			
Email address	r_chait@netvision.net.il		Tele	phone number	97250725252	25		
c) Relationship to issuer	or investment fund man	ager						
Indicate the person's relationsh the Instructions and the meanin						ed" in Part B(2) of		
Connect with the issu	uer or investment fund mana	ager	Inside	r of the issuer (c	ther than an invest	tment fund)		
Director or officer of t	the investment fund or inves	stment fund ma	nager Emplo	yee of the issue	r or investment fun	d manager		
✓ None of the above								
d) Compensation details								
Provide details of all compensate Canadian dollars. Include cash control incidental to the distribution, sure allocation arrangements with the	commissions, securities-base och as clerical, printing, legal	d compensation or accounting	n, gifts, discounts or oth services. An issuer is not	er compensation t required to ask	. Do not report pay	ments for services		
Cash commissions pa	aid 137,763.96			Security code 1	Security code 2	Security code 3		
Value of all securities distributed as compensation		S	Security codes	W N T				
Describe t	terms of warrants, options o	r other rights	170,622 finders wa	rrants				
Other compensatio	n ⁵	Describe						
Total compensation pa	137,763.96							
Check box if the pe	erson will or may receive an	y deferred com	pensation (describe the	e terms below)				
^⁴ Provide the aggregate value of	of all securities distributed a	s compensatio	n, <u>excluding</u> options, w	varrants or other	rights exercisable	to acquire		
additional securities of the issurights exercisable to acquire a	uer. Indicate the security co	des for all secu	ırities distributed as cor	mpensation, <u>incl</u>	uding options, warr	ants or other		

⁵Do not include deferred compensation.

a) Name of person comp	pensated and regis	stration status								
Indicate whether the person co	mpensated is a regist	rant.	✓ No		Yes					
If the person compensated is a	n individual, provide	the name of the indivi	dual.							
Full legal name of indiv	vidual									
		Family name	Fi	rst given	name		Seco	ondary (jiven names	
If the person compensated is no	ot an individual, prov	ide the following info	rmation.							
Full legal name	of non-individual	SMTM Trading Lt	d.]
F	Firm NRD number					(if ap	plicable)			
Indicate whether the person co	mpensated facilitated	the distribution thro	ugh a funding po	rtal or a	n intern	⊐ et-based	l portal.	\checkmark	No Ye	es
b) Business contact info	rmation									
If a firm NRD number is not pr	ovided in Item 8 (a), p	provide the business c	ontact informatio	on of the	person	being co	ompensated.			
Street address	Zelig Bas 7A									
Municipality	Petach Tikva			ı	Provinc	e/State	;			Ī
Country	Israel			Postal	code/Z	ip code	595507	'5		Ī
Email address	spini@zahav.net.	I		Tele	phone	numbei	972543	327613	34	
c) Relationship to issuer	or investment fun	d manager								
Indicate the person's relationsh the Instructions and the meani								onnecte	ed" in Part B(2) o	of
Connect with the issu	-			•	-		ther than an	invest	ment fund)	
☐ Director or officer of	the investment fund (or investment fund m	anager \square	Emplo	vee of t	he issue	r or investm	ent fun	d manager	
_					,					
✓ None of the above										
d) Compensation details										
Provide details of all compensate Canadian dollars. Include cash incidental to the distribution, su	commissions, securiti Ich as clerical, printin	es-based compensation g, legal or accounting	on, gifts, discount services. An issu	s or othe er is not	er comp require	ensation d to ask	. Do not repo	ort payı	nents for service	
allocation arrangements with the			-individual comp	ensated	by the i	ssuer.				
Cash commissions pa	53,1	09.24			Securit	y code 1	Security co	ode 2	Security code 3	
Value of all securition distributed as compensation			Security codes		W	N T				
Describe	terms of warrants, op	otions or other rights	23,680 finder	rs warra	ants					
Other compensation	on ⁵	Describe								٦
Total compensation pa	53,10	09.24								
Check box if the pe	erson will or may rec	eive any deferred cor	npensation (des	cribe the	eterms	below)				
⁴ Provide the aggregate value additional securities of the iss rights exercisable to acquire a ⁵ Do not include deferred comp	uer. Indicate the secondditional securities o	urity codes for all sec								

a) Name of person compensa	ted and registration	n 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	Wigoda		Ari							
	Family r	name		First giv	ven name	9		Secondary	given na	mes
If the person compensated is not an individual, provide the following information.										
Full legal name of non-individual										
Firm NRD number (if applicable)										
Indicate whether the person compens	Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.									
b) Business contact information	on .									
If a firm NRD number is not provided	in Item 8 (a), provide	the business co	ontact info	mation of	the pers	son beir	ng com	pensated.		
Street address 28 Be	entov Street									
Municipality Ra'ar	nana				Prov	/ince/S	State			
Country	l		j	Pos	tal code	e/Zip c	ode	43229		
Email address				Te	elephor	ne num	nber			
c) Relationship to issuer or inv	estment fund man	ager								
Indicate the person's relationship with the Instructions and the meaning of "								ning of "connec	ed" in P	art B(2) of
Connect with the issuer or i			or the purp					er than an inves	tment fi	ınd)
_				_			,			•
Director or officer of the inv	estment fund or inves	stment fund ma	anager	L Em	nployee o	of the is	ssuer c	or investment fu	nd mana	ager
✓ None of the above										
d) Compensation details										
Provide details of all compensation pa										
Canadian dollars. Include cash commit incidental to the distribution, such as a										
allocation arrangements with the dire									•	
Cash commissions paid	2,500.00				Sec	curity cod	de 1	Security code 2	Secur	ity code 3
Value of all securities			Security co	des	W	N	Т			
distributed as compensation ⁴			0405 6:	-1						
Describe terms of warrants, options or other rights 3125 finders warrants										
Other compensation ⁵		Describe								
Total compensation paid 2,500.00										
Check box if the person will or may receive any deferred compensation (describe the terms below)										
⁴ Provide the aggregate value of all s	ecurities distributed a	as compensatio	on, <u>ex</u> cludi	ng options	s, warran	nts or oi	ther ria	nhts exercisable	to acqu	ire
additional securities of the issuer. In rights exercisable to acquire addition	dicate the security co	des for all secu								
⁵ Do not include deferred compensati										

a) Name of person compensated and registration status								
Indicate whether the person compensated is a registrant. No Ves								
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 info	nation.							
Full legal name of non-individual PI Financial Corp.								
Firm NRD number 5 2 9 0 (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 of	ntact information of the person being co	mpensated.						
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 manuthe Instructions and the meaning of "control" in section 1.4 of NI 45-106								
Connect with the issuer or investment fund manager		ther than an investment fund)						
Director or officer of the investment fund or investment fund m	nager Employee of the issue	r or investment fund manager						
✓ None of the above		•						
d) Compensation details								
Provide details of all compensation paid, or to be paid, to the person ident	ied in Item 8(a) in connection with the d	istribution Provide all amounts in						
Canadian dollars. Include cash commissions, securities-based compensation	, gifts, discounts or other compensation.	Do not report payments for services						
incidental to the distribution, such as clerical, printing, legal or accounting allocation arrangements with the directors, officers or employees of a non		for details about, or report on, internal						
Cash commissions paid 2,650.00	Security code 1	Security code 2 Security code 3						
Value of all securities		Security code 2 Security code 3						
distributed as compensation ⁴	ecurity codes							
Describe terms of warrants, options or other rights								
Other compensation ⁵ Describe								
Total compensation paid 2,650.00								
Check box if the person will or may receive any deferred compensation (describe the terms below)								
⁴ Provide the aggregate value of all securities distributed as compensati	n, <u>excluding</u> options, warrants or other	rights exercisable to acquire						
additional securities of the issuer. Indicate the security codes for all sec rights exercisable to acquire additional securities of the issuer.								
⁵ Do not include deferred compensation.								

a) Name of person comper	sated and regis	stration status									
Indicate whether the person compensated is a registrant. No Ves											
If the person compensated is an individual, provide the name of the individual.											
Full legal name of individe	ual										
		Family name			First	given n	ame		Secon	dary give	n names
If the person compensated is not an individual, provide the following information.											
Full legal name of non-individual Canaccord Genuity Corp.											
Firm NRD number 9 0 0 (if applicable)											
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. Ves											
b) Business contact informa	ation										
If a firm NRD number is not provid	ded in Item 8 (a), _I	provide the busi	ness co	ntact info	mation	of the	person b	eing cor	mpensated.		
Street address											
Municipality						 Р	rovince	e/State			
Country					P	ostal d	ode/Zi	n code			
Email address							hone n	-			
	invoctment fun	d managar				ТСІСР					
	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										nected"	in Part B(2) of
Connect with the issuer	or investment fur	nd manager			I	nsider	of the is	suer (ot	her than an ir	vestme	nt fund)
Director or officer of the	investment fund	or investment fu	ınd ma	nager		Employ	ee of th	e issuer	or investmer	t fund n	nanager
✓ None of the above											
d) Compensation details Provide details of all compensation	ngid or to be ng	id to the person	idontit	ind in Itan	2 9/a) in	conno	ction wi	th the di	stribution Pro	vido all	amounts in
Canadian dollars. Include cash con	nmissions, securiti	ies-based compe	ensation	n, gifts, dis	counts c	or other	r compe	nsation.	Do not report	рауте	nts for services
incidental to the distribution, such allocation arrangements with the c									or details abo	ıt, or re _l	oort on, internal
Cash commissions paid		00.00			compen						
·	.,0						Security	code 1	Security cod	e 2 S	ecurity code 3
Value of all securities distributed as compensation ⁴			S	ecurity co	des						
Describe terms of warrants, options or other rights											
Other compensation ⁵		Des	cribe								
Total compensation paid	1,0	00.00									
Check box if the person will or may receive any deferred compensation (describe the terms below)											
_											
⁴ Provide the aggregate value of a additional securities of the issuer.											
rights exercisable to acquire addi 5Do not include deferred compen	itional securities d					,			,		
7											

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 issu	uer ⁶						_
Provide name of	foreign public issue	r						7
Issuer distributing only eligil	ble foreign securities	and the distribution	n is to permitted clie	ents 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 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 b	oox and complete	Item 9(a) - (c).					
a) Directors executive officer	s and promoters of	of the issuer						
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 name	Secondary given names	Business loc non-individe resident jurisdictio individe	ual or ail n of		onship to	
				Province or	country	D	0	Р
b) Promoter information								
If the promoter listed above is not an individual, provide the following information for each director and executive officer of the promoter. For locations within Canada, state the province or territory; otherwise state the country. For "Relationship to promoter", "D" – Director, "O" – Executive Officer.								
Organization or company name	Organization or company name Family name First given name Residential jurisdiction of individual Relationship to promo (select one or both if appli							
				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	BioHarvest Sciences Inc.							
Full legal name	Ryan	David						
	Family name	First given name	'	Seconda	ary given names			
Title	VP Investor Relations							
Telephone number	6046221186	Email address	dave@bio	oharvest	.com			
Signature	David Ryan	Date	2021	02	11			
		•	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	O'Neill	Steve		Title	Attorney			
	Family name	First given name	Secondary given names	•	_			
Name of company	O'Neill Law LLP							
Telephone number	6046875792	Em	ail address son@stocks	slaw.com				

Notice - Collection and use of personal information

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

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

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

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

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