Form 45-106F1 Report of Exempt Distribution

ITEM 1 - REPORT TYPE											
✓ New report											
Amended report	lf amer	nded, provide	filing da	te of r	report 1	that is	being ame	ended		(YYYY-MM-DD)	
ITEM 2 - PARTY CERTIFYIN	NG THE	REPORT									
Indicate the party certifying the re Instrument 81-106 Investment Fur								vestment fund, re	fer to sectio	on 1.1 of National	
Investment fund issuer											
✓ Issuer (other than an end of the end o	n inves	tment fund)									
Item 3 - Issuer Name and Other Identifiers											
Provide the following information	about th	e issuer, or if the	issuer is ar	n invest	ment fui	nd, abou	ut the fund.				
Full legal name Algernon Pharmaceuti					s Inc.						
Previous full lega	I name										
If the issuer's name chang	ged in the	e last 12 months,	provide ma	ost rece	ent previo	ous lega	ıl name.				
M N	Vebsite	https://alger m/	nonphari	mace	(if applicable)						
If the issuer has a legal entity iden	ntifier <u>,</u> pro	ovide below. Refer to Part B of the Instructions for the definition of "legal entity identifier".									
Legal entity ide	entifier										
If two or more issuers distributed of	a single s	ecurity, provide t	he full lega	l name	(s) of the	e co-issu	ıer(s) other th	an the issuer nai	ned above.		
Full legal name(s) of co-is	suer(s)						(if applicabl	e)			
ITEM 4 - UNDERWRITER I	ITEM 4 - UNDERWRITER INFORMATION										
If an underwriter is completing the	e report, p	provide the under	rwriter's ful	l legal	name ar	าd firm I	NRD number.				
Full legal name											
Firm NRD number					(if applicable)						
If the underwriter does not have a	firm NRL	D number, provia	le the head	office o	contact i	informat	tion of the un	derwriter.			
Street address											
Municipality					Province/State						
Country					Post	al code	e/Zip code				
Telephone number							Website			(if applicable)	

ITEM 5 - ISSUER INFORMATION							
If the issuer is an investment fund, do not complete Item 5. Proceed to Item 6.							
a) Primary industry							
Provide the issuer's North American Industry Classification Standard (NAICS) code (6 digits only) that in your reasonable judgment most closely corresponds to the issuer's primary business activity.							
NAICS industry code 3 2 5 4 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.							
Is the issuer's primary business to invest all or substantially all of its assets in any of the following? If yes, select all that apply.							
Mortgages Real estate Commercial/business debt Consumer debt Private companies							
b) Number of employees							
Number of employees: 🗹 0 - 49 🗌 50 - 99 🗌 100 - 499 🗌 500 or more							
c) SEDAR profile number							
Does the issuer have a SEDAR profile?							
No ✓ Yes If yes, provide SEDAR profile number 0 0 0 3 7 7 2 2							
If the issuer does not have SEDAR profile complete item 5(d) - (h).							
d) Head office address							
Street address Province/State							
Municipality Postal code/Zip code							
Country Telephone number							
e) Date of formation and financial year-end							
Date of formation Financial year-end YYYY MM DD							
f) Reporting issuer status							
Is the issuer a reporting issuer in any jurisdication of Canada? No Yes							
If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer.							
AII AB BC MB NB 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
S100M to under \$500M	S500M to under \$1B	S1B or over

If the issue is an investment fund, provide the following information: a) Investment fund manager information Full legal name Furn NRD number If the investment fund manager does not have a firm NRD number, provide the head office contact information of the investment fund manager. Street address Municipality Province/State Guntry Postal code/Zip code Telephone number D Type of investment fund Tree of investment fund that most accurately identifies the issuer (select only one). Alternative strategies Cryptoasset Other (describe) Indicate whether one or both of the following apply to the investment fund. Investment fund that most accurately identifies the issuer (select only one). Alternative strategies Cryptoasset Other (describe) Indicate whether one or both of the following apply to the investment fund. Investment fund that most accurately identifies the issuer (select only one). Indicate whether one or both of the following apply to the investment fund. Investment fund issuers Is a UCIT's Fund' 'understaining for the Collective Investment fund issuers Is a UCIT's Fund' 'understaining for the Collective Investment of Transferable Securities funds (UCIT's Funds) are investment funds regulated by the European Union (C) Date of formation and financial year-end of the investment fund Suppresent fund a reporting issuer in any jurisdication of Canada? No Yes It he investment fund a reporting issuer in any jurisdication of Canada? No Yes It he investment fund hars a CUSP number, provide below (first 6 digits only) CUSP number On O Public listing status of the investment fund is a reporting issuer. All All All </th
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Firm NRD number (if applicable) If the investment fund manager does not have a firm NRD number, provide the head office contact information of the investment fund manager. Street address Municipality Province/State
If the investment fund manager does not have a firm NRD number, provide the head office contact information of the investment fund manager. Street address Municipality County Postal code/Zip code County Telephone number Postal code/Zip code Do Type of investment fund Type of investment fund Type of investment fund that most accurately identifies the issuer (select only one). Do Type of investment fund that most accurately identifies the issuer (select only one). Do Money market De Quity De County De C
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CUSIP number
name of an exchange and not a trading facility such as, for example, an automated trading system
Exchange name
f) Net asset value (NAV) of the investment fund
Select the NAV range of the investment fund as of the date of the most recent NAV calculation (Canadian \$).
L L \$\the under \$\mathbf{S}M \qquad L \qquad \mathbf{S}M \text{ to under \$\mathbf{S}M \qquad \text{ to under \$\mathbf{S}M \qquad \text{to under \$\mathbf{S}M \qquad \\text{to under \$\mathbf{S}M \qquad \text{to under \$\mathbf{S}
\$0 to under \$5M \$5M to under \$25M \$25M to under \$100M \$100M to under \$500M \$500M to under \$1B \$1B or over Date of NAV calculation:

ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION

If an issuer	If an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include in Item 7 and Schedule 1 information about												
connection	purchasers resident in that jurisdiction of Canada only. Do not include in Item 7 securities issued as payment of commissions or finder's fees in connection with the distribution, which must be disclosed in Item 8. The information provided in Item 7 must reconcile with the information provided in Schedule 1 of the report.												
a) Cur	renc	ý											
Select the o	currei	ncy or	curre	ncies	in which the dist	ribution was made. A	All dollar amounts prov	ided i	in the report i	nust be i	n Canadia	an dollars.	
🖌 Cana	dian	dolla	r		US dollar	Euro	Other (descri	be)					
b) Dist	ribut	ion d	ate(s	.)									
							r securities distributed o						
as both the distribution						ing filed for securitie	s distributed on a conti	пиои	s basis, incluc	le the sta	rt and en	d dates for the	
			S	tart da	^{te} 2020	02 20	End d	late	2020	02	20		
					YYYY	MM DD		L	YYYY	MM	DD		
c) Deta	ailed	purc	hase	r info	rmation								
Complet	e Scl	hedu	le 1 d	of thi	s form for eac	h purchaser and	attach the schedul	e to	the comple	ted rep	ort.		
d) Typ	es of	secu	uritie	s dist	ributed								
							er security basis. Refer t					ow to indicate the	
security co	ode. If	provi	dıng t	he CU	SIP number, ındı	cate the full 9-digit	CUSIP number assigned	to ti	he security be	ıng distri	buted.		
										C	anadian \$		
Security code		SIP nu applica					Number of securities		Single or lowest price	Highe	est price	Total amount	
						is comprised of	18,304,939.0	00	0.0850)	0.0850	1,555,919.82	
UBS					Class A com Class A com	nmon share and Imon share							
					chase warran								
e) Deta	ails c	of righ	nts ar	nd co	nvertible/excha	angeable securitie	S						
were distri	buted						cise price and expiry da terms for each converti				vertible/e	xchangeable securities	
Convertib exchangea	able		derlyir			ise price adian \$)	Expiry date	Co	onversion	Deer	Describe other items (if applicable)		
security c	ode	sec	urity c	bae	Lowest	Highest	(YYYY- MM-DD)		ratio	Desci	Describe other items (if applicable)		
					0.1200	0.1200		1:1			/arrants are exercisable into		
UB	s	w	Ν	т			2022-08-20		common shares at \$0.12 per share for a period of 30 months				
									f	rom the	e date c	of issuance,	
									5	subject	to acce	leration.	
						tion and exemption							
							of purchasers for each distribution. However,						
distributio	n in a	juriso	dictior	n of Ca	anada, include di	stributions to purche	isers resident in that jui	risdic	tion of Canad	a only.			
							a purchaser resides, (ii) nd (iii) each exemption (
jurisdictior	п.									a, q a p a		stace at a pereign	
For jurisdie				nada, s	itate the province	e or territory, otherw	ise state the country.	.					
		ince oi untry	r			Exemption relied	lon	N	umber of unique purchasers	e ^{2ª}	Total amount (Canadian \$)		
	Alb	erta			NI 45-106 2	.3 [Accredited ir	ivestor]			2		102,000.00	
Brit	ish (Colui	mbia	1	NI 45-106 2	.3 [Accredited ir	ivestor]			21		807,569.87	
	Mar	itoba	a		NI 45-106 2	.3 [Accredited ir	ivestor]			1		51,000.00	
	On	tario	NI 45-106 2.3 [Accredited investor]						2		26,799.99		

	Total number of unique purchasers ^{2b} 35			
	1,555,919.82			
Isle of Man	NI 45-106 2.3 [Accredited investor]	1	63,750.00	
Germany	NI 45-106 2.3 [Accredited investor]	1	42,500.00	
United Kingdom	NI 45-106 2.3 [Accredited investor]	1	39,999.98	
China	NI 45-106 2.3 [Accredited investor]	1	19,550.00	
Australia	NI 45-106 2.3 [Accredited investor]	2	236,999.98	
Québec	NI 45-106 2.3 [Accredited investor]	3	165,750.00	

^{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.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.

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)

ITEM 8 -	COMPENSATION INFORMATION	
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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	on was paid, or will be paid, in connection with the distribution.						
🗌 No 🗹 Yes	If yes, indicate number of persons compensated.	4					

a) Name of person compensated and registration status												
Indicate whether the person compe	ensated is a registr	ant.		🗌 No		\checkmark	Yes					
If the person compensated is an in	dividual, provide th	he name	of the individ	lual.								
Full legal name of individu	Jal											
	F	amily na	me		First	given na	ame		Secor	idary giver	names	
If the person compensated is not a	n individual, provid	de the fo	ollowing infor	mation.								
Full legal name of	non-individual	Leede	Jones Gabl	e Inc.								
Firm	7 7	0				(if app	icable)					
Indicate whether the person compe	ensated facilitated	the distr	ribution throu	gh a fundi	ng porta	al or an	interne	t-based µ	oortal.	V 1	No 🗌] Yes
b) Business contact informa	ation											
If a firm NRD number is not provid	ded in Item 8 (a), pi	rovide th	ne business co	ntact infor	mation	of the p	person b	eing con	npensated.			
Street address												
Municipality						Ρ	rovince	e/State				
Country					Po	ostal c	ode/Zij	o code				
Email address				Telepl	hone n	umber						
c) Relationship to issuer or	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				F - F			-		ner than an i	nvestme	nt fund)	
Director or officer of the	investment fund o	r investr	nent fund ma	inager		Employ	ee of th	e issuer	or investme	nt fund m	anager	
✓ None of the above				C							Ū	
d) Compensation details												
Provide details of all compensation Canadian dollars. Include cash com incidental to the distribution, such allocation arrangements with the a	nmissions, securitie as clerical, printing	rs-based 1, legal o	compensatio r accounting	n, gifts, dis services. A	counts o n issuer	or other is not r	· compe equired	nsation. I to ask fo	Do not repor	t paymen	ts for se	ervices
Cash commissions paid	38,18	8.80					Security	code 1	Security coo	de 2 Se	ecurity co	de 3
Value of all securities distributed as compensation ⁴			S	Security co	des		W N	Т				
Describe tern	ns of warrants, opt	tions or	other rights						le into Uni the date o			r
Other compensation ⁵			Describe		•							
Total compensation paid	38,18	8.80]
Check box if the person will or may receive any deferred compensation (describe the terms below)												
⁴ <i>Provide the aggregate value of a</i> additional securities of the issuer. rights exercisable to acquire addi ⁵ Do not include deferred compen-	Indicate the secu itional securities of	rity code	es for all secu									

a) Name of person compensated and registration status							
Indicate whether the person compensated is a registrant. No Yes							
If the person compensated is an individual, provide the name of the individual.							
Full legal name of individual							
Family name First given name Secondary given names] ;						
If the person compensated is not an individual, provide the following information.							
Full legal name of non-individual Industrial Alliance Securities Inc.							
Firm NRD number15400(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 "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)						
Director or officer of the investment fund or investment fund manager Employee of the issuer or investment fund manage	r						
✓ None of the above							
d) Compensation details							
Provide details of all compensation paid, or to be paid, to the person identified in Item 8(a) in connection with the distribution. Provide all amoun Canadian dollars. Include cash commissions, securities-based compensation, gifts, discounts or other compensation. Do not report payments for s							
incidental to the distribution, such as clerical, printing, legal or accounting services. An issuer is not required to ask for details about, or report on,							
allocation arrangements with the directors, officers or employees of a non-individual compensated by the issuer.							
Cash commissions paid 22,084.00 Security code 1 Security code 2 Security c	ode 3						
Value of all securities Security codes distributed as compensation ⁴ W							
Describe terms of warrants, options or other rights 259,811 finder's warrants exercisable into Units at \$0.085 pu Unit for a period of 30 months from the date of issuance.	er						
Other compensation ⁵ Describe							
Total compensation paid 22,084.00							
Total compensation paid 22,084.00							
Total compensation paid 22,084.00 Check box if the person will or may receive any deferred compensation (describe the terms below)							
Total compensation paid 22,084.00	er						

a) Name of person compe	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									
	F	amily name	ı Fir	st given na	ame	Seconda	ary given names]	
If the person compensated is not an individual, provide the following information.									
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. Ves									
b) Business contact inforr	nation								
If a firm NRD number is not prov	vided in Item 8 (a), pi	rovide the business	contact informatic	on of the p	person being co	ompensated.			
Street address									
Municipality				Pr	rovince/State	•			
Country				Postal co	ode/Zip code	e			
Email address				Teleph	none numbe	r			
c) Relationship to issuer c	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 th	e investment fund o	r investment fund r	nanager	Employe	ee of the issue	er or investment	fund manager		
None of the above							-		
d) Compensation details									
Provide details of all compensation Canadian dollars. Include cash co incidental to the distribution, such allocation arrangements with the	ommissions, securitie h as clerical, printing	s-based compensat , legal or accountin	ion, gifts, discount. g services. An issue	s or other er is not re	compensatior equired to ask	. Do not report p	payments for ser	rvices	
Cash commissions pai	d 5,14	0.80		S	Security code 1	Security code	2 Security cod	de 3	
Value of all securities distributed as compensation			Security codes	1	W N T				
Describe terms of warrants, options or other rights Describe terms of warrants, options or other rights Unit for a period of 30 months from the date of issuance.									
Other compensation	5	Describe					ssuance.		
Total compensation paid	d 5,14	0.80							
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 issue rights exercisable to acquire ad ⁵ Do not include deferred compe-	er. Indicate the secu ditional securities of	rity codes for all se						, r	

a) Name of person compensated a	a) Name of person compensated and registration status								
Indicate whether the person compensated is	s a registrant.		No No	\checkmark	Yes				
If the person compensated is an individual, provide the name of the individual.									
Full legal name of individual									
	Family name		Fir	rst given n	ame		Secon	ndary given r	names
If the person compensated is not an individual, provide the following information.									
Full legal name of non-individual Mackie Research Capital Corporation									
Firm NRD number 3 0 7 0 (if applicable)									
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.									
b) Business contact information									
If a firm NRD number is not provided in Iter	m 8 (a), provide the bu	ısiness co	ntact informatic	on of the	person b	eing com	pensated.		
Street address									
Municipality				P	rovince	/State			
Country				Postal o	code/Zip	o code			
Email address				Telep	hone n	umber			
c) Relationship to issuer or investm	ent fund manager								
Indicate the person's relationship with the is the Instructions and the meaning of "contro							ning of "cor	nected" in	Part B(2) of
Connect with the issuer or invest		45 100 10		-	•		er than an i	nvestment	fund)
	-	fund mo							
Director or officer of the investme	int fund of investment	. iuna ma		Епрюу	ee or the	e issuer (or investmer	it iuno ma	nager
✓ None of the above									
d) Compensation details									
Provide details of all compensation paid, or Canadian dollars. Include cash commissions									
incidental to the distribution, such as clerica	l, printing, legal or acc	counting s	services. An issu	er is not i	required	to ask foi			
allocation arrangements with the directors,		of a non-i	individual comp	ensated l	by the iss	uer.			
Cash commissions paid	17,000.00			-	Security	code 1	Security coo	de 2 Sec	urity code 3
Value of all securities distributed as compensation ⁴		S	Security codes		W N	Т			
Describe terms of warrants, options or other rights 200,000 finder's warrants exercisable into Units at \$0.085 per Unit for a period of 30 months from the date of issuance.									
Other compensation ⁵	D	escribe							
Total compensation paid	17,000.00								
Check box if the person will or may receive any deferred compensation (describe the terms below)									
⁴ Provide the aggregate value of all securit	ies distributed as com	pensatio	n. excludina on	tions wa	nrrants o	r other ric	ihts exercis	able to acr	nuire
additional securities of the issuer. Indicate the security codes for all securities distributed as compensation, <u>including</u> options, warrants or other rights exercisable to acquire additional securities of the issuer.									
⁵ Do not include deferred compensation.									
۹									

ITEM 9 - DIRECTORS, EXECUTIVE OFFICERS AND PROMOTERS OF THE ISSUER										
If the issuer is an investment fund, do not complete Item 9. Procced to Item 10.										
Indicate whether the issuer is any of the following (select the one that applies - if more than one applies, select only one).										
✓ Reporting issuer in any jurisdiction of Canada										
Foreign public issuer										
Wholly owned subsidiary of a reporting issuer in any jurisdiction of Canada ⁶										
Provide name of reporting issuer										
Wholly owned subsidiary of a foreign public issuer ⁶										
Provide name of	Provide name of foreign public issuer									
Issuer distributing only eligi	ble foreign securitie	s and the distributio	n is to permitted clie	ents only ⁷				_		
If the issuer is at least one of the	above, do not com	plete Item 9(a) – (d	:). 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.										
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	Secondary given Secondary given Relationship to issuer (select all that apply)									
				Province or	country	D	0	Р		
b) Promoter information										
If the promoter listed above is not an individual, provide the following information for each director and executive officer of the promoter. For locations within Canada, state the province or territory; otherwise state the country. For "Relationship to promoter", "D" – Director, "O" – Executive Officer.										
Organization or company name							to promo oth if appl	oter licable)		
				Province or country	D		C)		
c) Residential address of each individual										

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

ITEM 10 - CERTIFICATION

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

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

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

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

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	Algernon Pharmaceuticals Inc.						
Full legal name	Sadhra	Michael					
	Family name First given name		•	Secondary given names			
Title	CFO						
Telephone number	6046461553	Email address	info@alg	fo@algernonpharmaceuticals.c			
Signature	"Michael Sadhra" Date		2020	03	02		
			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				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.