Form 45-106F1 Report of Exempt Distribution

ITEM 1 - REPORT TYPE									
✓ New report									
Amended report If amended, provide filing date of report that is being amended (YYYY-MM-DD)									
ITEM 2 - PARTY CERTIFYING TH	IE REPORT								
Indicate the party certifying the report (se		÷	investment fund, refer to sect	ion 1.1 of National					
Investment fund issuer	Instrument 81-106 Investment Fund Continuous Disclosure and the companion policy to NI 81-106.								
 ✓ Issuer (other than an inve 	stment fund)								
Underwriter	,								
Item 3 - Issuer Name and O	THER IDENTIEIERS								
		vestment fund, about the fund							
Provide the following information about the issuer, or if the issuer is an investment fund, about the fund. Full legal name Cognetivity Neurosciences Ltd.									
Previous full legal name	Previous full legal name Utor Capital Corp.								
If the issuer's name changed in t	he last 12 months, provide most	recent previous legal name.]					
Website	Website www.cognetivity.com (if applicable)								
If the issuer has a legal entity identifier, p	If the issuer has a legal entity identifier, provide below. Refer to Part B of the Instructions for the definition of "legal entity identifier".								
Legal entity identifier									
If two or more issuers distributed a single	security, provide the full legal n	ame(s) of the co-issuer(s) othe	than the issuer named above	2					
Full legal name(s) of co-issuer(s)	(if applic	able)						
ITEM 4 - UNDERWRITER INFOR									
If an underwriter is completing the report		aal name and firm NRD num	nor						
Full legal name	, provide the underwriter's fut to			1					
Firm NRD number		(if applicable)							
If the underwriter does not have a firm NRD number, provide the head office contact information of the underwriter.									
Street address	.,]					
Municipality		Province/Stat	e	Ī					
Country		Postal code/Zip cod	e						
Telephone number		Websi	e	(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 9 9 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 Ves If yes, provide SEDAR profile number 0 0 0 3 9 0 3 4
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
Full legal name
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
\$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 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.								
✓ Canadian dollar US dollar Euro Other (describe)								
b) Distribution date(s)								
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 2019 03 19 End date 2019 03 19								
YYYY MM DD 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 codeCUSIP number (if applicable)Description of securityNumber of securitiesSingle or lowest priceHighest priceTotal amount								
UBS19243C100Each Unit of security consists of one common share and one-half of one common share purchase warrant. Each whole Warrant will entitle the holder to purchase one common share at an intended exercise price of C\$0.55 per share for a period of 18 months.3,084,500.000.38000.38001,172,110.00								
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 (Canadian \$) (YYYY- MM-DD) ratio Describe other items (if applicable)								
Lowest Highest								
WNTCMS0.55000.55001:1Each whole Warrant will entitle the holder to purchase one common share at an intended exercise price of C\$0.55 per share for a period of 18 months from closing of the Offering, subject to acceleration.								
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 ^{2®} purchasers	Total amount (Canadian \$)
British Columbia	NI 45-106 2.3 [Accredited investor]	12	528,960.00

Ontario	NI 45-106 2.3 [Accredited investor]	1	275,500.00	
Manitoba	NI 45-106 2.3 [Accredited investor]	15,200.00		
Luxembourg	NI 45-106 2.3 [Accredited investor]	95,000.00		
Germany	NI 45-106 2.3 [Accredited investor]	143,450.00		
Monaco	NI 45-106 2.3 [Accredited investor]	95,000.00		
British Columbia	NI 45-106 2.5 [Family, friends and business associates]	1	19,000.00	
	1,172,110.00			
	Total number of unique purchasers ^{2b} 18			

^{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)
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Ітем 8 - Со	MPENSATION	INFORMATION	
		on (as defined in NI 45-106) to whom the issuer directly provides, o tional copies of this page if more than one person was, or will	
Indicate whet	her any compensa	tion was paid, or will be paid, in connection with the distribution.	
🗌 No	✓ Yes	If yes, indicate number of persons compensated.	2

a) Name of person compensation	ted and regis	tration statu	JS							
Indicate whether the person compense	ated is a regist	rant.		No No	\checkmark	Yes				
If the person compensated is an individual, provide the name of the individual.										
Full legal name of individual	Full legal name of individual									
		Family name		Fire	st given n	ame		Second	dary given nam	ies
If the person compensated is not an ir	ndividual, prov	ide the follow	ing infor	mation.						
Full legal name of no	n-individual	Canaccord	Genuit	ty Corporation						
Firm NRD number 9 0 0 (if applicable)										
Indicate whether the person compension	ated facilitated	the distribut	ion throu	ıgh a funding por	tal or ar	n internet	-based p	oortal.	✓ No	Yes
b) Business contact information	n									
If a firm NRD number is not provided	in Item 8 (a), p	provide the bu	isiness co	ontact information	n of the	person be	eing com	pensated.		
Street address										
Municipality					Ρ	Province	/State			
Country				F	Postal c	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 compensation pa Canadian dollars. Include cash commi incidental to the distribution, such as c allocation arrangements with the direc Cash commissions paid Value of all securities distributed as compensation ⁴	ssions, securiti clerical, printin ctors, officers o	es-based com g, legal or acc	pensatio counting of a non-	n, gifts, discounts services. An issue	or othei er is not i	r compen required t	sation. L to ask fo uer.	Do not report	payments foi ut, or report o	r services
Describe terms of	of warrants, op	otions or othe	r rights	88,600 Finder holder tp purc months at a p	hase o	ne addit	tional S	hare for a p		
Other compensation ⁵		De	escribe							
Total compensation paid	33,60	68.00								
Check box if the person will or may receive any deferred compensation (describe the terms below)										
⁴ Provide the aggregate value of all searching additional securities of the issuer. Incrights exercisable to acquire addition. ⁵ Do not include deferred compensation.	dicate the secu nal securities o	irity codes fo								

a) Name of person compensated	d and regist	tration s	tatus							
Indicate whether the person compensate	ed is a registr	ant.		No No	\checkmark	Yes				
If the person compensated is an individual, provide the name of the individual.										
Full legal name of individual										
	F	amily nan	ne	Fi	rst given r	name		Second	lary given nam	ies
If the person compensated is not an indi	vidual, provid	de the fol	llowing infor	mation.						
Full legal name of non-	individual [Mackie	Research	Capital Corpo	ration					
Firm NRD number 3 0 7 0 (if applicable)										
Indicate whether the person compensate	ed facilitated	the distri	bution throu	ıgh a funding po	rtal or ai	n internet	-based p	oortal.	🖌 No	Yes
b) Business contact information										
If a firm NRD number is not provided in	ltem 8 (a), p	rovide th	e business co	ontact informatio	on of the	person b	eing cor	pensated.		
Street address										
Municipality					F	Province	/State			
Country					Postal o	code/Zip	code			
Email address	Iress 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 Director or officer of the investment fund or investment fund manager None of the above										
d) Compensation details										
Provide details of all compensation paid, Canadian dollars. Include cash commissi incidental to the distribution, such as cler allocation arrangements with the directo Cash commissions paid Value of all securities distributed as compensation ⁴	ons, securitie rical, printing	s-based o , legal or employe	compensatio accounting ees of a non-	n, gifts, discount services. An issu	s or othe er is not	er compen required	sation. L to ask fo uer.	Do not report	payments foi it, or report o	r services
Describe terms of warrants, options or other rights Describe terms of warrants, options or other rights holder tp purchase one additional Share for a period of 18 months at a price of \$0.55 per share.										
Other compensation ⁵			Describe							
Total compensation paid	14,50	1.00								
Check box if the person will or may receive any deferred compensation (describe the terms below)										
⁴ Provide the aggregate value of all sec additional securities of the issuer. Indic rights exercisable to acquire additional ⁵ Do not include deferred compensation	ate the secu securities of	rity code.	s for all secu							

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 iss	uer ⁶							
Provide name of	foreign public issue	er							
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 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.								or	
Organization or company name	Family name	First given name	Secondary given names	non-individu resident jurisdictio	Business location of non-individual or residentail jurisdiction of individual		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	Family name First given r	First given name	Secondary given names	Residential jurisdiction of individual	iurisdiction of individual (select o		ationship to promoter one or both if applicable)		
				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	Cognetivity Neurosciences Ltd.						
Full legal name	Lok	Denise					
	Family name	First given name		Secondary given names			
Title	Chief Financial Officer						
Telephone number	6046889588	Email address	Denise.lok@barongroupintl.com			tl.com	
Signature	"Denise Lok"	Date	2019	03	27		
			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.