Form 45-106F1 Report of Exempt Distribution

ITEM 1 - REPORT TYPE					
✓ New report					
☐ Amended report If ame	ended, provide filing date	of report that is being am	ended	(YYYY-MM-DD)	
ITEM 2 - PARTY CERTIFYING TH	IE REPORT				
Indicate the party certifying the report (se Instrument 81-106 Investment Fund Cont			vestment fund, refer to secti	on 1.1 of National	
☐ Investment fund issuer					
✓ Issuer (other than an inve	estment fund)				
☐ Underwriter					
ITEM 3 - ISSUER NAME AND O	THER IDENTIFIERS				
Provide the following information about		vestment fund, about the fund.			
Full legal name					
Previous full legal name					
If the issuer's name changed in t		recent previous leaal name.			
Website					
If the issuer has a legal entity identifier, p Legal entity identifier		The instructions for the definition	oj legal entity laemijier .		
If two or more issuers distributed a single		ama(s) of the co-issuar(s) other t	han the issuer named above		
Full legal name(s) of co-issuer(s	_				
T dir logal flamo(s) of so locatife	/	(if applicable)			
ITEM 4 - UNDERWRITER INFOR	MATION				
If an underwriter is completing the report	, provide the underwriter's full le	gal name and firm NRD numbe	r.		
Full legal name					
Firm NRD number	(if applicable)				
If the underwriter does not have a firm N	number, provide 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 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.
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:
c) SEDAR profile number
Does the issuer have a SEDAR profile?
No ✓ Yes If yes, provide SEDAR profile number 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 MM DD MM DD
f) Reporting issuer status
Is the issuer a reporting issuer in any jurisdication of Canada? No Yes
If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer.
AII AB BC MB NB NL NT
NS NU ON PE QC SK YT
g) Public listing status
If the issuer has a CUSIP number, provide below (first 6 digits only)
CUSIP number
If the issuer is publicly listed, provide the name of the exchange on which the issuer's equity securities primarily trade. Provide only the name of an exchange and not a trading facility such as, for example, an automated trading system.
Exchange name
h) Size of issuer's assets

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

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

ITEM 6 - INVESTMENT	FUND ISSUER INFORMATION
If the issuer is an inves	tment fund, provide the following information.
a) Investment fund ma	anager information
Full legal name	
Firm NRD number	(if applicable)
If the investment fund mand	ager does not have a firm NRD number, provide the head office contact information of the investment fund manager.
Street address	
Municipality	Province/State
Country	Postal code/Zip code
Telephone number	Website (if applicable)
b) Type of investment	fund
Type of investment fund tha	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

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.

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a)	J	u		ᆫ		C\	_

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

b) Distribution date(s)

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

End date 2020 01 30

c) Detailed purchaser information

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

d) Types of securities distributed

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

					Canadian \$	
Security code	CUSIP number (if applicable)	Description of security	Number of securities	Single or lowest price	Highest price	Total amount
UBS		Units. Each unit consists of one common share and one-half of one common share purchase warrant.	3,002,977.00	0.1800	0.1800	540,535.86

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.

exch	nvertib nangea urity c	able		derlyii urity c			se price adian \$)	Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other items (if applicable)	
						Lowest	Highest				
W	N	Т	С	М	S	0.2500	0.2500	2022-01-30		Each whole warrant is exercisable into a common share at \$0.25 for 24 months.	

f) Summary of the distribution by jurisdiction and exemption

State the total dollar amount of securities distributed and the number of purchasers for each jurisdiction of Canada and foreign jurisdiction where a purchaser resides and for each exemption relied on in Canada for that distribution. However, if an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include distributions to purchasers resident in that jurisdiction of Canada only.

This table requires a separate line item for: (i) each jurisdiction where a purchaser resides, (ii) each exemption relied on in the jurisdiction where a purchaser resides, if a purchaser resides in a jurisdiction of Canada, and (iii) each exemption relied on in Canada, if a purchaser resides in a foreign jurisdiction.

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

Province or country	Exemption relied on	Number of unique ²⁸ purchasers	Total amount (Canadian \$)
British Columbia	NI 45-106 2.3 [Accredited investor]	14	351,036.00
Manitoba	NI 45-106 2.3 [Accredited investor]	1	18,000.00
Panama	NI 45-106 2.3 [Accredited investor]	1	36,000.00
Germany	NI 45-106 2.3 [Accredited investor]	1	36,000.00
Luxembourg	NI 45-106 2.3 [Accredited investor]	1	49,999.86

Australia	Australia NI 45-106 2.3 [Accredited investor]			
	Total dollar amount of securities distributed			
	Total number of unique purchasers ^{2b}	19		

^{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 - COMPENSATION INFORMATION
Provide information for each person (as defined in NI 45-106) to whom the issuer directly provides, or will provide, any compensation in connection with the distribution. Complete additional copies of this page if more than one person was, or will be, compensated.
Indicate whether any compensation was paid, or will be paid, in connection with the distribution.
No ✓ Yes If yes, indicate number of persons compensated. 3

a) Name of person compens	sated and regis	tration status												
Indicate whether the person compe	nsated is a regist	rant.		☐ No		√	Yes	3						
If the person compensated is an individual, provide the name of the individual.														
Full legal name of individu	al													
	l	Family name			First	given	name		I	Sec	condary	given n	ames	
If the person compensated is not an individual, provide the following information.														
Full legal name of	non-individual	Canaccord Ge	enuit	y 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 information														
If a firm NRD number is not provide	ed in Item 8 (a), p	provide the busine	ess co	ntact info	rmation	of the	perso	n bei	ng com	pensated	•			
Street address														
Municipality						ı	Provii	nce/S	State					
Country					Р	ostal	code	/Zip o	code					
Email address						Tele	ohone	e nur	nber					
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 i		-	d ma	nager					,	or investn			ŕ	
✓ None of the above							,						3	
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 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 a allocation arrangements with the di										r details a	bout, o	r repor	t on,	internal
Cash commissions paid		74.72	11011	matriadat	compen	isatea T								
·							Т	rity co		Security	code 2	Secu	rity co	ode 3
Value of all securities distributed as compensation ⁴			S	Security co	des	L	W	N	Т					
Describe terms of warrants, options or other rights 129,304 finder's warrants exercisable into common shares at \$0.25 per share for two years.														
Other compensation ⁵		Descr	ibe											
Total compensation paid 23,274.72														
Check box if the person will or may receive any deferred compensation (describe the terms below)														
4 Dravida the aggregate value of the	l coourition distant	hutad an anmr	nati-	n avalus	'na ont'	.na	orror 1	·	tho: =:-	ahta ava=	nion ble	to cos	uiro	
⁴ Provide the aggregate value of all additional securities of the issuer.	Indicate the secu	ırity codes for all												er
rights exercisable to acquire addition of the series of th		ı uıt issütl.												

a) Name of person comp	ensated and regis	stration status										
Indicate whether the person con	npensated is a regist	rant.	✓ No		Yes	3						
If the person compensated is an	individual, provide	the name of the indiv	idual.									
Full legal name of indiv	idual											
		Family name		First given	name			Seco	ondary gi	ven na	mes	
If the person compensated is no	t an individual, prov	ide the following info	rmation.									
Full legal name	of non-individual	Momer, S.A.										
Fi	Firm NRD number (if applicable)											
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. Ves												
b) Business contact information												
If a firm NRD number is not pro	ovided in Item 8 (a), p	provide the business o	ontact infor	mation of the	e persoi	n being	g comp	pensated.				
Street address	Street address Edifico Trescalini Calle 52, Banking District											
Municipality	Panama City				Provin	nce/St	ate					
Country	Panama		Ī	Postal	code/	Zip cc	ode					
Email address	momerinv@gmail	.com	Ī	Tele	phone	e numl	ber	507622	01409			
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			anager				,	r investm			,	
None of the above					,							
d) Compensation details												
Provide details of all compensations and compensations and compensations are incidental to the distribution, such allocation arrangements with the	ommissions, securiti ch as clerical, printin	es-based compensati g, legal or accounting	on, gifts, disc services. Ar	counts or oth	ner com _l t requir	pensat ed to a	ion. Do isk for	o not repo	ort paym	nents f	or ser	rvices
Cash commissions pa	id 2,5	20.00			Secur	rity code	e 1	Security c	ode 2	Secur	ity cod	de 3
Value of all securitie distributed as compensation			Security co	des	W	N	Т					
Describe terms of warrants, options or other rights 14,000 finder's warrants exercisable into common shares at \$0.25 per share for two years.												
Other compensation	n ⁵	Describe	φυ.25 pe	si share for	two ye	ears.						
Total compensation pa	id 2,5	20.00										
Check box if the per	rson will or may rec	eive any deferred co	mpensation	(describe th	e terms	s below	v)					
⁴ Provide the aggregate value of additional securities of the issu- rights exercisable to acquire ac ⁵ Do not include deferred comp	ier. Indicate the secu Idditional securities d	urity codes for all sed										r

a) Name of person compe	ensated and registr	ation status									
Indicate whether the person com	pensated is a registra	nt.	☐ No	✓ Ye	es						
If the person compensated is an	If the person compensated is an individual, provide the name of the individual.										
Full legal name of indivi	dual										
	Fa	mily name	Firs	st given name	е		Seco	ndary gi	iven na	ımes	
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. Ves											
b) Business contact inform	b) Business contact information										
If a firm NRD number is not pro	vided in Item 8 (a), pro	ovide the business co	ontact information	n of the per	rson bein	ng comp	ensated.				
Street address											
Municipality				Prov	vince/S	tate					
Country			F	Postal cod	le/Zip c	ode					
Email address				Telepho	ne num	nber					
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 issue	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 paid, or to be paid, to the person identified in Item 8(a) in connection with the distribution. 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 services. An issuer is not required to ask for details about, or report on, internal allocation arrangements with the directors, officers or employees of a non-individual compensated by the issuer.											
Cash commissions pai	d 4,762	2.80		Sec	curity cod	de 1	Security co	ode 2	Secur	ity code	∋ 3
Value of all securities distributed as compensation			Security codes	W	N	Т					
Describe terms of warrants, options or other rights 26,460 finder's warrants exercisable into common shares at \$0.25 per share for two years.											
Other compensation	5	Describe	V		,						
Total compensation pai	d 4,762	.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 an ⁵ Do not include deferred compe	er. Indicate the securi Iditional securities of t	ty codes for all sect	on, <u>excluding</u> opti urities distributed	ions, warrai as comper	nts or ot nsation,	ther rigi <u>includii</u>	hts exerciang options	sable to s, warra	o acqu ents or	iire other	

тем 9 - Directors, Execu	TIVE OFFICERS	AND PROMOT	ERS OF THE ISS	SUER						
If the issuer is an investment fund, do not complete 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	Provide name of reporting issuer									
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 box and complete Item 9(a) - (c).										
a) Directors executive officer										
a) Directors, executive officers and promoters of the issuer Provide the following information for each director, executive officer and promoter of the issuer. For locations within Canada, state the province or										
territory; otherwise state the country.							province			
Organization or company name	Family name	First given name	Secondary given names	, a littlediction		al or ail Relationship of (select all t				
				Province or	Province or country			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	Family name First given name		Residential jurisdiction of individual			to promoter oth if applicable)			
				Province or country	D		C)		
c) Residential address of eac	h 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		Seconda	ary given na	ames			
Title	CFO								
Telephone number	6046889588	Email address	info@cog	netivity.	com				
Signature	"Denise Lok"	Date	2020	02	06				
			YYYY	MM	DD				

ITEM 11- CONTACT F	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 individua	al certifying the report							
Full legal name				Title				
•	Family name	First given name	Secondary given names		_			
Name of company								
Telephone number		Er	nail address					

Notice - Collection and use of personal information

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

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

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

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

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