Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 9280433

ITEM 1 - REPORT TYPE										
✓ New report										
☐ Amended report If amen	nded, provide filing date	of report that is	being ame	ended	(YYYY-MM-DD)					
TTEM 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										
	1									
ITEM 3 - ISSUER NAME AND OTI										
Provide the following information about the		vestment fund, aboι	ıt the fund.							
Full legal name	Izotropic Corporation									
Previous full legal name										
If the issuer's name changed in the	last 12 months, provide most	recent previous lega	l name.							
Website		(if applicable)								
If the issuer has a legal entity identifier₄ pro	ovide below. Refer to Part B of t	he Instructions for t	he definition o	of "legal entity identifier".						
Legal entity identifier										
If two or more issuers distributed a single so	ecurity, provide the full legal no	ame(s) of the co-issu	uer(s) other the	an the issuer named above	?.					
Full legal name(s) of co-issuer(s)		(if applicable)								
ITEM A LINDEDWEITED INCOME	IATION.									
ITEM 4 - UNDERWRITER INFORM										
If an underwriter is completing the report, p	provide the underwriter's full le	gal name and firm I	NRD number.		1					
Full legal name]					
Firm NRD number		(if app	olicable)							
If the underwriter does not have a firm NRD number, provide the head office contact information of the underwriter.										
Street address										
Municipality		Prov	ince/State							
Country		Postal code	e/Zip code							
Telephone number			Website		(if applicable)					

TEM 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 3 4 5 1 0
If the issuer is in the mining industry , indicate the stage of operations. This does not apply to issuers that provide services to issuers operating in the mining industry. Select the category that best describes the issuer's stage of operations.
Exploration Development Production
Is the issuer's primary business to invest all or substantially all of its assets in any of the following? If yes, select all that apply.
☐ Mortgages ☐ Real estate ☐ Commercial/business debt ☐ Consumer debt ☐ Private companies
☐ Cryptoassets
b) Number of employees
Number of employees: ✓ 0 - 49 ☐ 50 - 99 ☐ 100 - 499 ☐ 500 or more
c) SEDAR profile number
Does the issuer have a SEDAR profile?
No
If the issuer does not have SEDAR profile complete item 5(d) - (h).
d) Head office address
Street address Province/State
Municipality Postal code/Zip code
Country Telephone number
e) Date of formation and financial year-end
Date of formation Financial year-end MM DD 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 investment fund, provide the following information.							
a) Investment fund ma	anager information						
Full legal name							
Firm NRD number	(if applicable)						
If the investment fund mand	ager does not have a firm NRD number, provide the head office contact information of the investment fund manager.						
Street address							
Municipality	Province/State						
Country	Postal code/Zip code						
Telephone number	Website (if applicable)						
b) Type of investment	fund						
Type of investment fund tha	it most accurately identifies the issuer (select only one) .						
Money market	☐ Equity ☐ Fixed income ☐ Balanced						
Alternative strate	gies Cryptoasset Other (describe)						
Indicate whether one or bot	h of the following apply to the investment fund .						
Invests primarily in	n other investment fund issuers						
☐ Is a UCITs Fund¹							
	tive Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union of ollective investment schemes to operate throughout the EU on a passport basis on authorization from one member state.						
c) Date of formation a	nd financial year-end of the investment fund						
Date of forma	tion Financial year-end MM DD						
d) Reporting issuer st	atus of the investment fund						
Is the investment fund a 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 T						
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 oot a trading facility such as, for example, an automated trading system.						
Exchange on							
-	AV) of the investment fund						
	investment fund as of the date of the most recent NAV calculation (Canadian \$).						
\$0 to under \$5M	\$5M to under \$25M \$25M to under \$100M						
\$100M to under \$500	DM S500M to under \$1B S1B or over Date of NAV calculation:						
	YYYY MM DD						

ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION

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

a)	Currency
a)	Currency

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

b) Distribution date(s)

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

Start date 2020 10 30

End date 2020 10 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)		CUSIP number (if applicable)	Description of security	Number of securities	Single or lowest price	Highest price	Total amount		
U	В	S		Each unit consisted of one share and one share purchaser warrant exercisable at a price of \$0.75 per warrant share for two years following the closing date.	2,866,334.00	0.5500		1,576,483.70	

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			ise price adian \$)	Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other items (if applicable)			
					Lowest	Highest							
W	N	Т	С	М	S	0.7500							

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 \$)
Alberta	NI 45-106 2.3 [Accredited investor]	2	29,425.00
Alberta	NI 45-106 2.5 [Family, friends and business associates]	1	11,000.00
British Columbia	NI 45-106 2.3 [Accredited investor]	20	1,063,313.35
British Columbia	NI 45-106 2.5 [Family, friends and business associates]	2	13,750.00
Nova Scotia	NI 45-106 2.3 [Accredited investor]	1	55,000.00

	Total number of unique purchasers ^{2b} 48							
	Total dollar amount of securities distributed							
Saskatchewan	NI 45-106 2.3 [Accredited investor]	2	38,500.00					
Ontario	NI 45-106 2.5 [Family, friends and business associates]	2	11,000.00					
Ontario	NI 45-106 2.3 [Accredited investor]	18	354,495.35					

^{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	INFORMATIO	N											
Provide information for each per the distribution. Complete addi										ensation	in con	nection v	vith
Indicate whether any compenso	tion was paid, or w	ill be paid	d, in connect	ion with th	e distribi	ution.							
No ✓ Yes	If yes, indica	ite numb	per of perso	ons comp	ensate	d.	3	3					
a) Name of person compe	ensated and regis	tration s	status										
Indicate whether the person com	pensated is a regist	rant.		☐ No		\checkmark	Yes						
If the person compensated is an	individual, provide t	he name	of the indivi	dual.									
Full legal name of individual	dual												
		Family nar	me		First	given na	ame		Se	condary	given n	ames	
If the person compensated is not	an individual, prov	ide the fo	llowing infor	mation.									
Full legal name of	of non-individual	PI Fina	ncial Corp.										
Fir	m NRD number	5	2 9	0				(if app	licable)				
Indicate whether the person com	pensated facilitated	the distr	ibution throu	ıgh a fund	ing porta	ıl or an	interne	i t-based រុ	oortal.	✓	No		Yes
b) Business contact inform	nation												
If a firm NRD number is not prov	rided in Item 8 (a), p	rovide th	ne business co	ontact info	rmation	of the p	erson b	eing con	npensatea	l.			_
Street address													
Municipality						Pr	rovince	e/State					
Country				Postal code/Zip code						\neg			
Email address						Teleph	hone n	umber					
c) Relationship to issuer of	r investment fund	d manag	ger										
Indicate the person's relationship the Instructions and the meaning									ining of "	connecte	ed" in I	Part B(2)	of
Connect with the issue	r or investment fun	d manag	er		☐ li	nsider c	of the is	suer (oth	ner than a	ın invest	tment	fund)	
Director or officer of the	e investment fund o	or investn	nent fund ma	anager		Employe	ee of th	e issuer	or investr	ment fun	nd mar	nager	
✓ None of the above													
d) Compensation details													
Provide details of all compensatic Canadian dollars. Include cash co incidental to the distribution, such allocation arrangements with the	mmissions, securition as clerical, printing directors, officers o	es-based g, legal of r employ	compensation compensation	n, gifts, dis services. A	counts o n issuer	r other is not re	compei equired	nsation. I to ask fo	Do not rep	ort pay	ments	for servi	ces
Cash commissions paid	6,12	21.36				3	Security	code 1	Security	code 2	Secu	rity code	3
Value of all securities distributed as compensation	1112	95.00	;	Security co	odes	\	W N	Т					
Describe te	rms of warrants, op	tions or	other rights										
Other compensation													
Total compensation paid	Total compensation paid 6,121.36												
Check box if the pers													
⁴ Provide the aggregate value of additional securities of the issue rights exercisable to acquire add ⁵ Do not include deferred compe	er. Indicate the secu ditional securities o	ırity code	es for all sect										

a) Name of person com	pensated and regis	stration status							
Indicate whether the person co	ompensated is a regist	rant.	✓ No	Yes	S				
If the person compensated is a	n individual, provide	the name of the individ	dual.						
Full legal name of indi	vidual								
	L	Family name	Firs	t given name		Secondary (given names		
If the person compensated is n	ot an individual, prov	ide the following infor	mation.						
Full legal name	e of non-individual	Aligned Capital Pa	rtners Inc.						
Firm NRD number (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 info	rmation								
If a firm NRD number is not pr	ovided in Item 8 (a), _I	provide the business co	ntact information	of the perso	on being com	pensated.			
Street address	300 - 1001 Cham	plain Avenue							
Municipality	Burlington			Provi	nce/State	Ontario			
Country	Canada		Р	ostal code	/Zip code	L7L 5Z4			
Email address				Telephon	e number				
c) Relationship to issuer	or investment fun	d manager							
Indicate the person's relationsh the Instructions and the meani						ning of "connecte	ed" in Part B(2) of		
Connect with the iss	uer or investment fur	nd manager		Insider of the	e issuer (oth	er than an invest	ment fund)		
Director or officer of	the investment fund	or investment fund ma	nager	Employee o	f the issuer o	or investment fun	d manager		
✓ None of the above									
d) Compensation details	<u> </u>								
Provide details of all compensa Canadian dollars. Include cash incidental to the distribution, su	tion paid, or to be pa commissions, securiti	es-based compensatio	n, gifts, discounts	or other com	npensation. D	o not report payı	ments for services		
allocation arrangements with t						actuals about, or	report on, arternat		
Cash commissions p	aid 7,6		Secu	ırity code 1	Security code 2	Security code 3			
Value of all securiti	120	99.00	Security codes	W	N T				
•	terms of warrants, o	otions or other rights							
Other compensation		Describe							
Total compensation p		99.69							
Check box if the po		eive any deferred com	pensation (descr	ribe the term	s below)				
	·								
40 11		the trade are a set							
⁴ Provide the aggregate value additional securities of the iss rights exercisable to acquire a	uer. Indicate the sec	urity codes for all secu							
Do not include deferred comp		n uit 1990tl.							

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, p	rovide the name of the indiv	ridual.						
Full legal name of individual								
	Family name	First give	ren name	Secondary giv	ren 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 number 1 5 4 0 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	contact information of	the person being co	mpensated.				
Street address								
Municipality		7	Province/State					
Country		Post	tal code/Zip code					
Email address		_ │	elephone number					
c) Relationship to issuer or investme	ent fund manager		•					
Indicate the person's relationship with the iss	uer or investment fund mar				" in Part B(2) of			
the Instructions and the meaning of "control	" in section 1.4 of NI 45-106	for the purposes of cor	mpleting this section	1.				
Connect with the issuer or investm	ent fund manager	Insi	ider of the issuer (of	ther than an investm	ent fund)			
Director or officer of the investmen	nt fund or investment fund n	nanager Em	ployee of the issuer	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 iden	tified in Item 8(a) in co	nnection with the di	istribution. Provide a	ll amounts in			
Canadian dollars. Include cash commissions, incidental to the distribution, such as clerical,								
allocation arrangements with the directors, o				or details about, or re	eport on, unternat			
Cash commissions paid	paid 1,637.98 Security code 1 Security code 2			Security code 3				
Value of all securities	0.070.00	Security codes	WNT					
distributed as compensation ⁴	2,978.00							
Describe terms of warra	ants, options or other rights							
Other compensation ⁵	Describe							
Total compensation paid	1,637.98							
Check box if the person will or m	nay receive any deferred co	mpensation (describe	the terms below)					
⁴ Provide the aggregate value of all securitie	es distributed as compensar	ion, excludina ontions	. warrants or other i	rights exercisable to	acquire			
additional securities of the issuer. Indicate t rights exercisable to acquire additional secu	the security codes for all se							
Do not include deferred compensation. 5Do								

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	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.						
securities that are required by law to respectively. ⁷ Check this box if it applies to the cu	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,									
If the issuer is none of the	above, check this b	ox and complete	Item 9(a) - (c).							
a) Directors, executive officer	e and promoters of	of the issuer								
Provide the following information for	•		moter of the issuer F	or locations within	Canada s	tate the	nrovince	or		
territory; otherwise state the country.							province			
Organization or company name	Family name	First given name	Secondary given names				hip to issuer Il 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 name	Secondary given names	Residential jurisdiction of individual	jurisdiction of (select o		tionship to promoter ne or both if applicabl			
				Province or country			C)		
c) Residential address of each 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	Izotropic Corporation						
Full legal name	Thast						
	Family name	First given name	'	Seconda	ary given names		
Title	Chief Executive Officer						
Telephone number	18334962677	Email address	bthast@iz	ast@izocorp.com			
Signature	/s/ Robert Thast	Date	2020	11	04		
		_	YYYY	MM	DD		

TEM 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	Mainman	Lauren				Title	Legal Administrative Assistant	
	Family name	First given	name	Secondary	given names			
Name of company	Clark Wilson LLP							
Telephone number	6046875700		Ema	ail address	Imainman@	cwilson.c	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.