Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 9323007

ITEM 1 - REPORT TYPE									
✓ New report									
☐ Amended report If a	amended, provide filing date	e of report that is being ame	ended (YYYY-MM-DD)						
ITEM 2 - PARTY CERTIFYING	TEM 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		ратоп рошсу to NI 81-106.							
✓ Issuer (other than an ir☐ Underwriter	investment fund)								
Oriderwriter									
ITEM 3 - ISSUER NAME AND	OTHER IDENTIFIERS								
Provide the following information abo	oout the issuer, or if the issuer is an i	investment fund, about the fund.							
Full legal na	name Izotropic Corporation								
Previous full legal name									
If the issuer's name changed	d in the last 12 months, provide mos	t recent previous legal name.							
Web	bsite	(if applicab	e)						
If the issuer has a legal entity identific	ïer_ provide below. Refer to Part B o¡	f the Instructions for the definition	of "legal entity identifier".						
Legal entity ident	tifier								
If two or more issuers distributed a sin	ingle security, provide the full legal	name(s) of the co-issuer(s) other th	an the issuer named above.						
Full legal name(s) of co-issue	ier(s)	(if applicabl	e)						
ITEM 4 - UNDERWRITER INF	ORMATION								
If an underwriter is completing the re	eport, provide the underwriter's full	legal name and firm NRD number.							
Full legal name									
Firm NRD number		(if applicable)							
If the underwriter does not have a firm	m NRD number, provide the head c	ffice contact information of the un	derwriter.						
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 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 ✓ Yes If yes, provide SEDAR profile number 0 0 0 4 4 7 6 1									
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 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	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.

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.								
✓ Canadian dollar US dollar □ Euro □ Other (describe)								
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 12 09 End date 2020 12 09								
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 CUSIP number (if applicable)		Description of security	Number of securities	Single or lowest price	Highest price	Total amount
U B S		Each unit consisted of one share and one share purchaser warrant exercisable at a price of \$1.50 per warrant share for two years following the closing date.	1,896,679.00	0.9000		1,707,011.10

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		Canadian Si			Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other items (if applicable)			
				Lowest	Highest						
	W	Ν	Т	С	М	S	1.5000				

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 \$)
Alberta	NI 45-106 2.3 [Accredited investor]	7	113,400.00
British Columbia	NI 45-106 2.3 [Accredited investor]	38	857,536.20
British Columbia	NI 45-106 2.5 [Family, friends and business associates]	2	36,000.00
New Brunswick	NI 45-106 2.3 [Accredited investor]	1	25,200.00
Ontario	NI 45-106 2.3 [Accredited investor]	35	526,374.90
Saskatchewan	NI 45-106 2.3 [Accredited investor]	1	36,000.00

United Kingdom	NI 45-106 2.3 [Accredited investor]	2	67,500.00
United States	NI 45-106 2.3 [Accredited investor]	1	45,000.00
	curities distributed	1,707,011.10	
	Total number of unique purchasers ² b	87	

^{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.

TEM 8 - COMPENSATION	INFORMATIO	N							
Provide information for each perso the distribution. Complete additi							ation in c	connectio	on with
Indicate whether any compensati	on was paid, or wi	ll be paid, in connect	on with the distribution.						
☐ No ✓ Yes	If yes, indicat	te number of perso	ons compensated.	5					
a) Name of person compen	sated and regist	tration status							
Indicate whether the person compe	ensated is a registr	ant.	☐ No ✓] Yes					
If the person compensated is an inc	dividual, provide th	ne name of the indivi	dual.						
Full legal name of individu	ıal								
	F	amily name	First given	name		Secon	dary give	n names	
If the person compensated is not a	n individual, provid	de the following infor	mation.						
Full legal name of	non-individual	Aligned Capital Pa	artners Inc.						
Firm	NRD number	2 3 4	0		(if appl	icable)			
Indicate whether the person compe	ensated facilitated	the distribution throu	igh a funding portal or c	ın internet-l	based p	oortal.	√ !	No [] Yes
b) Business contact informa	ation								
If a firm NRD number is not provid	led in Item 8 (a), pi	rovide the business co	ontact information of the	person bei	ng com	pensated.			
Street address									
Municipality				Province/S	State				
Country			Postal	code/Zip	code				
Email address			Tele	phone nur	nber				
c) Relationship to issuer or	investment fund	manager							
Indicate the person's relationship w the Instructions and the meaning o						ining of "con	nected"	in Part E	(2) of
Connect with the issuer	or investment fund	l manager	Inside	r of the issu	er (oth	er than an i	nvestme	nt fund)	
Director or officer of the	investment fund o	r investment fund ma	anager	yee of the i	ssuer (or investmer	nt fund m	nanager	
None of the above									
d) Compensation details									
Provide details of all compensation Canadian dollars. Include cash com- incidental to the distribution, such a allocation arrangements with the d	missions, securitie as clerical, printing	s-based compensation, legal or accounting	n, gifts, discounts or oth services. An issuer is not	er compenso required to	ation. E ask fo	Do not report	t paymer	nts for se	rvices
Cash commissions paid	17,07	9.30	[Security co	de 1	Security cod	de 2 S	ecurity co	de 3
Value of all securities distributed as compensation ⁴		;	Security codes	WN	Т				
Describe term	ns of warrants, opt	tions or other rights	18,977 Brokers' Wa	rrants					
Other compensation ⁵		Describe							
Total compensation paid									
Check box if the perso	n will or may rece	ive any deferred con	npensation (describe the	e terms belo	ow)				
⁴ Provide the aggregate value of a additional securities of the issuer.									ar.
rights exercisable to acquire addit			mues นเรแมนเซน as CON	препоаноп,	<u>ii iciuu</u>	<u>шу</u> орион <i></i> ,	waiidill	o UI UIIIE	7

⁵Do not include deferred compensation.

a) Name of person comp	ensated and regis	tration status								
Indicate whether the person con	mpensated is a registi	rant.	☐ No	\checkmark	Yes					
If the person compensated is an	individual, provide t	he name of the indiv	vidual.							
Full legal name of indiv	idual									
	F	amily name	· ·	First given n	name	Se	econdary (given names		
If the person compensated is not an individual, provide the following information.										
Full legal name of non-individual Mackie Research Capital Corporation										
Fi	Firm NRD number 3 0 7 0 (if applicable)									
Indicate whether the person con	mpensated facilitated	the distribution thro	ough a funding	portal or ar	n internet-bo	ased portal.	\checkmark	No Yes		
b) Business contact infor	mation									
If a firm NRD number is not pro	ovided in Item 8 (a), p	rovide the business	contact inform	ation of the	person bein	g compensate	d.			
Street address										
Municipality				F	Province/St	tate				
Country				Postal o	code/Zip co	ode				
Email address				Telep	hone num	ber				
c) Relationship to issuer	or investment fund	l manager								
Indicate the person's relationshi the Instructions and the meanin							"connecte	ed" in Part B(2) of		
Connect with the issue	•				_	er (other than	an invest	ment fund)		
Director or officer of the	he investment fund o	r investment fund n	nanager [Employ	ee of the is	suer or invest	ment fun	d manager		
✓ None of the above			_							
d) Compensation details										
Provide details of all compensati	ion paid, or to be paid	d, to the person iden	tified in Item 8	B(a) in conne	ection with ti	he distribution	. Provide	all amounts in		
Canadian dollars. Include cash c incidental to the distribution, suc										
allocation arrangements with th							about, or	report on, internat		
Cash commissions pa	id 7,43	34.00			Security cod	le 1 Security	code 2	Security code 3		
Value of all securitie	es		Security code	es						
distributed as compensation		Cara and an electric				1 1				
	erms of warrants, op									
Other compensation		Describe								
Total compensation paid										
Check box if the pe	rson will or may rece	ive any deferred co	mpensation (d	describe the	terms belov	w)				
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 dditional securities of	rity codes for all se								

a) Name of person compensated and reg	gistration status								
Indicate whether the person compensated is a reg	istrant.	☐ 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	J				
If the person compensated is not an individual, provide the following information.									
Full legal name of non-individual Industrial Alliance Securities Inc.									
Firm NRD numbe	r 1 5 4	0 0	(if a	pplicable)					
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 co	ontact information	of the person being o	compensated.					
Street address									
Municipality			Province/Stat	e					
Country]] P(ostal code/Zip cod	e					
Email address			Telephone number	er					
c) Relationship to issuer or investment fu	ınd manager								
Indicate the person's relationship with the issuer of									
the Instructions and the meaning of "control" in s		· · · <u></u>							
Connect with the issuer or investment f	und manager	□ '	nsider of the issuer (other than an investment fund)					
Director or officer of the investment fun	d or investment fund ma	anager 🔲 E	Employee of the issu	er or investment fund manager					
✓ None of the above									
d) Compensation details									
Provide details of all compensation paid, or to be p									
Canadian dollars. Include cash commissions, secur incidental to the distribution, such as clerical, print					,				
allocation arrangements with the directors, officer				r for actuals account or report only antermat					
Cash commissions paid 1	764.00		Security code 1	Security code 2 Security code 3					
Value of all securities		Security codes	W N T						
distributed as compensation ⁴									
Describe terms of warrants, options or other rights 1,960 Brokers' Warrants									
Other compensation ⁵	Describe								
Total compensation paid									
Check box if the person will or may re	eceive any deferred con	npensation (descri	be the terms below)						
⁴ Provide the aggregate value of all securities dis	tributed as compensation	on. excludina optic	ons. warrants or othe	r riahts exercisable to acquire					
additional securities of the issuer. Indicate the se rights exercisable to acquire additional securities	ecurity codes for all secu								
⁵ Do not include deferred compensation.									

a) Name of person compensated	d and registrati	on status								
Indicate whether the person compensate	ed is a registrant.		☐ No	[·	✓ Yes	s				
If the person compensated is an individual, provide the name of the individual.										
Full legal name of individual										
L	Famil	y name		First give	n name			Secondary	given na	ames
If the person compensated is not an individual, provide the following information.										
Full legal name of non-individual Canaccord Genuity Corp.										
Firm NRI	D number 9	0 0				(i	if appli	cable)		
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 provided in	Item 8 (a), provid	de the business c	ontact infor	mation of t	he perso	on bein	ng com	pensated.		
Street address										
Municipality					Provi	nce/S	tate			
Country]	Posta	al code	:/Zip.c	ode			
Email address]		ephon	•				
	atmost fund mo	nogor.		101	Срион	Cildin				
c) Relationship to issuer or inves								• "		D (D(2) (
Indicate the person's relationship with the Instructions and the meaning of "co.								ning of "connect	ea" ın ı	Part <i>B(2)</i> of
Connect with the issuer or inv	restment fund ma	anager		Insid	ler of th	e issue	er (oth	er than an inves	tment f	fund)
Director or officer of the inves	tment fund or inv	estment fund m	anager	☐ Emp	oloyee o	of the is	ssuer c	or investment fu	nd man	nager
None of the above										
d) Compensation details										
Provide details of all compensation paid,	or to be paid to	the nerson ident	rified in Item	8(a) in con	nection	with t	he dist	ribution Provide	e all am	nounts in
Canadian dollars. Include cash commissi	ions, securities-ba	Ised compensatio	on, gifts, disc	counts or ot	her con	npensa	tion. D	o not report pay	ments	for services
incidental to the distribution, such as clearly allocation arrangements with the director								details about, c	r repor	t on, internal
Cash commissions paid	33,714.4			, ,	_			0 " 10		
						urity cod		Security code 2	Secu	rity code 3
Value of all securities distributed as compensation⁴			Security co	des	W	N	Т			
Describe terms of	warrants, options	or other rights	37,460 E	Brokers' W	/arrants	S				
Other compensation ⁵		Describe								
Total compensation paid										
Check box if the person will	or may receive a	_ any deferred coi	npensation	(describe t	he term	ns belov	w)			
⁴ Provide the aggregate value of all sec additional securities of the issuer. Indic	cate the security of	codes for all sec								
rights exercisable to acquire additional 5Do not include deferred compensation	securities of the				-					

a) Name of person comp	pensated and regis	stration status													
Indicate whether the person co	mpensated is a regist	trant.		☐ No		\checkmark	Yes	3							
If the person compensated is an individual, provide the name of the individual.															
Full legal name of indiv	/idual														
		Family name			First	given	name				Sec	condary (given n	ames	
If the person compensated is not an individual, provide the following information.															
Full legal name of non-individual Leede Jones Gable Inc.															
F	irm NRD number	5 7	7	0					(if ap	oplica	able)				
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 pro	ovided in Item 8 (a), _I	provide the busin	ess co	ntact info	rmation	of the	perso	n be	eing c	ompe	ensated	!.			
Street address															
Municipality						ı	Provir	nce	/State	е					
Country					Р	ostal	code	/ Z ip	code	e [
Email address					·	Tele		·		Ļ					
	or investment fun	d managar				1010	5110110	<i>-</i> 110		'' <u> </u>					
c) Relationship to issuer									.,		<i>c "</i>			D . D.	· · ·
Indicate the person's relationsh the Instructions and the meani											ng of "(connecte	ea" in	Part B(2	2) 0[
Connect with the issu	uer or investment fur	nd manager				Inside	of the	e iss	suer (other	than a	ın invest	ment	fund)	
Director or officer of t	the investment fund	or investment fur	nd ma	nager		Emplo	yee o	f the	issue	er or i	investr	nent fun	d mar	nager	
✓ None of the above															
d) Compensation details															
Provide details of all compensation		id to the nerson i	identif	ied in Iten	n 8(a) in	, conni	ection	with	h the i	distril	hution	Provide	all an	nounts i	'n
Canadian dollars. Include cash o	commissions, securiti	ies-based compen	satior	n, gifts, dis	counts	or othe	er com	pen	satior	n. Do	not rep	ort payı	nents	for serv	rices
incidental to the distribution, su allocation arrangements with th										for d	etails a	ibout, or	repor	t on, int	ternal
Cash commissions pa		95.00				Г									
Value of all accumition				Security co			ode 1		Security	code 2	Secu	rity code	e 3		
Value of all securitie distributed as compensation			S	ecurity co	des		W	N	<u> </u>						
Describe t	terms of warrants, o	otions or other rig	ghts												
Other compensatio	n ⁵	Desc	ribe	4,550 B	rokers'	Warr	ants								
Total compensation pa	aid														
Check box if the pe	erson will or may rec	eive any deferred	d com	pensation	(descri	ibe the	e term	s be	low)						
45															
⁴ Provide the aggregate value of additional securities of the issues.	uer. Indicate the sec	urity codes for all													
rights exercisable to acquire a Do not include deferred comp		of the issuer.													
•															

тем 9 - Directors, Execu	TIVE OFFICERS	AND PROMOT	ERS OF THE ISS	SUER					
If the issuer is an investment fund	d, do not complete l	Item 9. Procced to	Item 10.						
Indicate whether the issuer is any o	f the following (select	t the one that appli	es - if more than one	applies, select onl	y one).				
✓ Reporting issuer in any juris	sdiction of Canada								
Foreign public issuer									
Wholly owned subsidiary of	a reporting issuer in	any jurisdiction of	Canada ⁶						
Provide nan	ne of reporting issue	r						7	
Wholly owned subsidiary of	a foreign public issu	uer ⁶						_	
Provide name of	foreign public issue	r						7	
Issuer distributing only eligil	ble foreign securities	and the distribution	n is to permitted clie	ents only ⁷				_	
If the issuer is at least one of the	above, do not comp	olete Item 9(a) – (d	c). Proceed to Item	10.					
⁶ An issuer is a wholly owned subside securities that are required by law to respectively. ⁷ Check this box if it applies to the collients. Refer to the definitions of "e.	o be owned by its dir urrent distribution evo	rectors, are benefic en if the issuer mad	ially owned by the re de previous distribut	eporting issuer or ti tions of other types	the foreign	public is	ssuer,		
If the issuer is none of the	above, check this b	oox and complete	Item 9(a) - (c).						
a) Directors, executive officer	s and promoters of	of the issuer							
Provide the following information for	•		moter of the issuer T	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	Business location of non-individual or residentail jurisdiction of individual					
				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	First given name	Secondary given names	Residential jurisdiction of individual			to promo		
				Province or country	D		C)	
c) Residential address of eac	h individual								
Complete Schedule 2 of this form completed report. Schedule 2 also					(a) and (b)	and at	tach to t	he	

ITEM 10 - CERTIFICATION

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

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

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

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

Securities legislation requires an issuer or underwriter that makes a distribution of securities under certain prospectus exemptions to file a completed report of exemt distribution.

By completing the information below, I certify, on behalf of the issuer/underwriter/investment fund manager, to the securities regulatory authority or regulator, as applicable, that I have reviewed this report and to my knowledge, having exercised reasonable diligence, the information provided in this report is true and, to the extent required, complete.

Name of issuer/underwriter/ investment fund manager/agent	Izotropic Corporation									
Full legal name	Thast									
	Family name	First given name	Secondary given names							
Title	Chief Executive Officer									
Telephone number	18334962677	Email address b	thast@izocorp.com							
Signature	/s/ Robert Thast	Date	2020 12 11							
			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@o	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.