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 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 (in Québec, Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement Fund Continuous Disclosure).

Investment fund issuer

✓ Issuer (other than an investment fund)

Underwriter

ITEM 3 - ISSUER NAME AND OTHER IDENTIFIERS

Provide the following information about the issuer, or if the issuer is an investment fund, about the fund.

Full legal name	Alpha Cognition Inc. / Alpha Cognition Inc.					
Previous full legal name	ALPHA COGNITION INC. (FORMERLY CRYSTAL BRIDGE ENTERPRISES INC.)					
If the issuer's name changed in the last 12 months, provide most recent previous legal name.						
Website	www.alphacognition.com (if applicable)					
If the issuer has a legal entity identifier, p	rovide below. Refer to Part B of the Instructions for the definition of "legal entity identifier".					
Legal entity identifier						
lf two or more issuers distributed a single above.	e security, provide the full legal name(s) of the co-issuer(s) other than the issuer named					
Full legal name(s) of co-issuer(s)	(if applicable)					

ITEM 4 - UNDERWRITER INFORMATION If an underwriter is completing the report, provide the underwriter's full legal name, firm NRD number, and SEDAR+ profile number. Full legal name Firm NRD number (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 325410
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
Provide the issuer's SEDAR+ profile number

ITEM 6 - INVESTMENT FUND ISSUER INFORMATION If the issuer is an investment fund, provide the following information. a) Investment fund manager information a) Investment fund manager information Full legal name Full legal name Firm NRD number Gift applicable) SEDAR+ profile number D) Type of investment fund Type of investment fund Fired income Balanced

Alternative strategies	Cryptoasset	Other (describe)		
Indicate whether one or both of th	ne following apply to the i	nvestment fund.		
Invest primarily in other inve		,		
☐ Is a UCITs Fund ¹ ¹ Undertaking for the Collective Investme that allow collective investment schemes	ent of Transferable Securities fu			
c) Net asset value (NAV	') of the investment f	und		
Select the NAV range of the investi	ment fund as of the date (of the most recent NAV calc	ulation (Canad	lian \$).
🗌 Under \$5M	S5M to under \$	\$25M 🗌 \$25M to und	er \$100M	Date of NAV calculation:
☐ \$100M to under \$500M	🔲 \$500M to unde	er \$1B 🗌 \$1B or over		YYYY MM DD
ITEM 7 - INFORMATION	ABOUT THE DIST	RIBUTION		
<i>If an issuer located outside of Can information about purchasers res commissions or finder's fees, in co Item 7 must reconcile with the info</i>	ident in that jurisdiction of onnection with the distribution of the second stribution with the second stribution with the second stribution with the second stribution of	of Canada only. Do not incl ution, which must be disclo	ude in Item 7 s	ecurities issued as payment of
a) Currency				
Select the currency or currencies i dollars.	n which the distribution w	vas made. All dollar amour	nts provided in a	the report must be in Canadian
🗌 Canadian dollar 🛛 🗹 US	dollar 🗌 Euro C)ther (describe)		
b) Distribution dates				
State the distribution start and en the distribution date as both the s include the start and end dates fo	start and end dates. If the	report is being filed for sec		•
Start date 20	23 12 22	End date	2023	12 22
YY	YY MM DD		YYYY	MM DD
c) Detailed purchaser i	nformation			
Complete Schedule 1 of this for	m for each purchaser a	nd attach the schedule to	the complete	ed report.
d) Types of securities d	listributed			
Provide the following information to indicate the security code. If pro distributed.				

				Canadian S	5	
Security code	CUSIP number (if applicable)	Description of security	Number of securities	Single or lowest price	Highest price	Total amount
UBS		Units comprised of one common share and one common share pu rchase warrant	9,141,534.0000	0.2900		2,651,044.8600

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	Exercise price (Canadian \$)		Expiry date (YYYY-MM- DD)	Conversion ratio	Describe other terms (if applicable)
security code	security code	Lowest	Highest	(00)		applicable)
WNT	CMS	0.4100		2026-12-22	1:1	Each warrant is exercisable i nto a share at US\$0.31 per s hare until Dec 22, 2026.

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 purchasers ^{2a}	Total amount (Canadian \$)
British Columbia	NI 45-106 2.3 [Accredited investor]	1	196,461.9500
Ontario	NI 45-106 2.3 [Accredited investor]	1	131,818.0500
	Distributions to purchasers outside of local jurisdiction (BC, AB, NB)	30	2,322,764.8600
	\$2,651,044.8600		

^{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		
,	s the gross proceeds realized in the jurisdiction from the distributions for stributions for the distributions for the stribution period covered by the report.	or which the report is being filed, le	ss the gross redemptions that

ITEM 8 - COMPENSATION INFORMATION

whom the issuer directly		5-106) (in Québec, Regulation 45- ompensation in connection with t will be, compensated.		
Indicate whether any co □ No ☑ Yes		paid, in connection with the dist ber of persons compensated.	ribution. 1	
a) Name of per	rson compensated and reg	gistration status		
🗌 No 🗹 Yes	rson compensated is a registran ted is an individual, provide the			
Full legal name of	-			
-	Family name ted is not an individual, provide	6	ne Secondary	given names
Full legal name of	f non-individual Spartan Capi	tal Securities LLC		
Firi	m NRD number	(if app	licable)	
Indicate whether the ne	rson compensated facilitated th	e distribution through a funding	portal or an internet-base	d nortal
✓ No ☐ Yes	· · · · · · · · · · · · · · · · · · ·			
b) Business col	ntact information			
lf a firm NRD number is	not provided in Item 8(a), provi	de the business contact informati	ion of the person being co	mpensated.
Street address	45 Broadway, 19th Floor			
Municipality	New York	Province/State	New York	
Country	United States of America	Postal code/Zip code	10006	
Email address	Info@spartancapital.com] Telephone number	+1 (212) 293-0121	
c) Relationshin	to issuer or investment fu	ind manager		
Indicate the person's rel 'connected' in Part B(2) respecting Prospectus E Connected with th Insider of the issue Director or officer	lationship with the issuer or inve of the Instructions and the mean exemptions) for the purposes of c e issuer or investment fund m er (other than an investment fu of the investment fund or inve	estment fund manager (select all t ning of 'control' in section 1.4 of N completing this section. anager und) estment fund manager		
d) Compensati	on 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 paid	316668.8800		
Value of all securities distributed as compensation ⁴			
Security codes	Security code 1	Security code 2	Security code 3
Security codes	WNT		
Describe terms of warrants, options or other rights		sation warrants. Ea one common shar nber 22, 2026.	
Other compensation ⁵			
Describe			
Total compensation paid	316668.88		7
Check box if the person will or may receive any def		on (describe the te	erms below)
⁴ Provide the aggregate value of all securities distributed as compensate securities of the issuer. Indicate the security codes for all securities dis acquire additional securities of the issuer.			
5Do not include deferred compensation			

⁵Do not include deferred compensation.

ITEM 9 – DIRECTORS, EXECUTIVE OFFICERS AND PROMOTERS OF THE ISSUER

If the issuer is an investment fund, do not complete Item 9. Proceed 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).

Foreign public issuer

Wholly owned subsidiary of a reporting issuer in any jurisdiction of Canada ⁶

Provide name of reporting issuer

Wholly owned subsidiary of a foreign public issuer ⁶

Provide name of foreign public issuer

□ 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 complete Item 9(a) - (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 officers and promoters of the issuer

Provide the following information for each director, executive officer and promoter of the issuer. For locations within Canada, state the province or territory, otherwise state the country. For "Relationship to issuer", "D" – Director, "O" – Executive Officer, "P" – Promoter.

Organization or company name	Family name	First given	Secondary given names	Business location of non-individual or residential jurisdiction of individual	Relationship to issuer (select all that apply)		
		name		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	Family	First given	, , ,	Residential jurisdiction of individual	Relationship to one or both	promoter (select if applicable)
company name name name names	Province or country	D	0			

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 to that of a director of 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 exempt 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/ investment fund	Alpha Cognition Inc.							
manager/agent	r							
Full legal name	MCFADDEN	Michael						
	Family name	First given name			Secondary given names			
Title	CEO							
Telephone number	+1 (858) 344-4375	Email address	mmcfadden@	@alpha	alphacognition.com			
Signature	Michael McFadden	Date	2023	12	28			
			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	KRENTZ	Leigh	
	Family name	First given name	Secondary given names
Title	Paralegal		
Name of company	MORTON LAW LLP		
Telephone number		Email address lak@	mortonlaw.ca

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.

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 Schedule 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.