Form 45-106F1 Report of Exempt Distribution

| ITEM 1 - REPORT TYPE | | | | | | |
|---|--|---------------------|------------------|-------------------------------|---------------------|--|
| ✓ New report | | | | | | |
| ☐ Amended report If amer | nded, provide filing date | of report that i | s being ame | ended | (YYYY-MM-DD) | |
| ITEM 2 - PARTY CERTIFYING THE | REPORT | | | | | |
| Indicate the party certifying the report (seld Instrument 81-106 Investment Fund Conti | | | | restment fund, refer to sect | ion 1.1 of National | |
| Investment fund issuer | idous Disclosure and the comp | amon policy to TVI | 01 100. | | | |
| ✓ Issuer (other than an inves | tment fund) | | | | | |
| Underwriter | anoni rana) | | | | | |
| | | | | | | |
| ITEM 3 - ISSUER NAME AND OT | | | | | | |
| Provide the following information about th | | | out the fund. | | | |
| Full legal name | Transcanna Holdings I | nc. | | | | |
| Previous full legal name | | | | | | |
| If the issuer's name changed in the | ed in the last 12 months, provide most recent previous legal name. | | | | | |
| Website | www.transcanna.com | | (if applicabl | e) | | |
| If the issuer has a legal entity identifier, pro | ovide below. Refer to Part B of t | he Instructions for | the definition (| of "legal entity identifier". | | |
| Legal entity identifier | | | | | | |
| If two or more issuers distributed a single s | ecurity, provide the full legal no | ame(s) of the co-is | suer(s) other th | an the issuer named above | 2. | |
| Full legal name(s) of co-issuer(s) | (if applicable) | | | | | |
| I | | | J | | | |
| ITEM 4 - UNDERWRITER INFORM | | | | | | |
| If an underwriter is completing the report, | provide the underwriter's full le | gal name and firn | n NRD number. | | ٦ | |
| Full legal name | | | | | | |
| Firm NRD number | (if applicable) | | | | | |
| If the underwriter does not have a firm NR. | firm NRD number, provide the head office contact information of the underwriter. | | | | | |
| Street address | | | | | | |
| Municipality | | Pro | ovince/State | |] | |
| Country | | Postal co | de/Zip code | | Ī | |
| Telephone number | | | Website | | (if applicable) | |

| Primary industry | Item 5 - Issuer Information |
|--|--|
| Provide the issuer's North American Industry Classification Standard (NAICS) code (6 digits only) that in your reasonable judgment most closely carreagonds to the issuer is primary business activity. NAICS industry code 4 1 3 4 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 stoge of operations. Exploration Development Production | If the issuer is an investment fund, do not complete Item 5. Proceed to Item 6. |
| The issuer is in the mining industry code | a) Primary industry |
| 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 Development Development | |
| mining industry. Select the category that best describes the issuer's stage of operations. Exploration Development Production | NAICS industry code 4 1 3 4 1 0 |
| Step | mining industry. Select the category that best describes the issuer's stage of operations. |
| Mortgages | |
| 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 0 4 5 4 6 6 If the issuer does not have SEDAR profile complete item 5(d) - (h). d) Head office address Street address Municipality Country Telephone number e) Date of formation and financial year-end Date of formation 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. All AB BC MB NB 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 Gustoms of variety is an outomated trading system. Exchange name | b) Number of employees |
| Does the issuer have a SEDAR profile? No Yes If yes, provide SEDAR profile number 0 0 0 4 5 4 6 6 If the issuer does not have SEDAR profile complete item 5(d) - (h). d) Head office address Street address Municipality Postal code/Zip code Country Telephone number e) Date of formation and financial year-end Date of formation 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. All AB BC MB NB 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 Survey and onto a trading facility such as, for example, an outomated trading system. Exchange name | Number of employees: ✓ 0 - 49 ☐ 50 - 99 ☐ 100 - 499 ☐ 500 or more |
| No Yes If yes, provide SEDAR profile number 0 0 0 4 5 4 6 6 | c) SEDAR profile number |
| If the issuer does not have SEDAR profile complete item 5(d) - (h). d) Head office address Street address Municipality Country Telephone number e) Date of formation and financial year-end Date of formation Tyryy MM DD Financial year-end 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. All AB BC MB NB NI NI NS NU ON PE QC SK YT J Hubic listing status If the issuer is publicly listed, 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 | Does the issuer have a SEDAR profile? |
| d) Head office address Street address Municipality Country Postal code/Zip code Telephone number e) Date of formation and financial year-end Date of formation Financial year-end 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. All AB BC MB NB 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 As for example, an automated trading system. Exchange name | No ✓ Yes If yes, provide SEDAR profile number 0 0 0 4 5 4 6 6 |
| Street address Province/State Postal code/Zip code Telephone number e) Date of formation and financial year-end Date of formation Financial year-end Date of formation Industrial year-end Postal code/Zip code Telephone number 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. All AB BC MB NB 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 Date 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 | |
| Municipality Country Telephone number Date of formation and financial year-end Date of formation No Yes If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer. All AB BC MB NB NL NT NS NU ON PE QC SK YT g) Public listing status If the issuer has a CUSIP number CUSIP number 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 | d) Head office address |
| Country Telephone number | Street address Province/State |
| e) Date of formation and financial year-end Date of formation | Municipality Postal code/Zip code |
| Date of formation | Country Telephone number |
| 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. All AB BC MB NB NL NT NS NU ON PE QC SK YT g) Public listing status If the issuer has a CUSIP number GUSIP number CUSIP number Gustafus 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 | e) Date of formation and financial year-end |
| 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. All 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 Suchange and not a trading facility such as, for example, an automated trading system. Exchange name | |
| If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer. All 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 Distribution on 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 | f) Reporting issuer status |
| All 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 | Is the issuer a reporting issuer in any jurisdication of Canada? No Yes |
| 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 | If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer. |
| 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 | AII AB BC MB NB NL NT |
| 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 | NS NU ON PE QC SK YT |
| 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 | g) Public listing status |
| exchange and not a trading facility such as, for example, an automated trading system. Exchange name | |
| | |
| h) Size of issuer's assets | 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 | 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) C | urrency |
|------|---------|
|------|---------|

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 2019 04 04

YYYY MM DD

End date 2019 04 04

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 \$ | |
|---|-----------------|------------------------------|---|----------------------|------------------------------|---------------|---------------|
| 5 | ecurity code | CUSIP number (if applicable) | Description of security | Number of securities | Single or lowest price | Highest price | Total amount |
| U | В | 89356V | Unit comprised of one common shares and one half of one warrant | 8,000,000.00 | 2.0000 | | 16,000,000.00 |

e) Details of rights and convertible/exchangeable securities

If any rights (e.g. warrants, options) were distributed, provide the exercise price and expiry date for each right. If any convertible/exchangeable securities were distributed, provide the conversion ratio and describe any other terms for each convertible/exchangeable security.

| exch | nvertib nangea urity c | able | | (Canadian \$) | | | | Conversion ratio | Describe other items (if applicable) | |
|------|------------------------------|------|---|---------------|---|--------|---------|------------------|--------------------------------------|--|
| | | | | | | Lowest | Highest | | | |
| W | Ν | Т | С | М | S | 3.0000 | | 2022-04-04 | | |

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 2.5 [Family, friends and business associates] | 1 | 20,000.00 |
| British Columbia | NI 45-106 2.3 [Accredited investor] | 225 | 6,983,500.00 |
| Alberta | NI 45-106 2.3 [Accredited investor] | 88 | 3,472,000.00 |
| Manitoba | NI 45-106 2.3 [Accredited investor] | 5 | 172,000.00 |
| Ontario | NI 45-106 2.3 [Accredited investor] | 102 | 3,722,000.00 |
| Saskatchewan | NI 45-106 2.3 [Accredited investor] | 3 | 60,000.00 |
| Québec | NI 45-106 2.3 [Accredited investor] | 5 | 102,000.00 |

| Anguilla | NI 45-106 2.3 [Accredited investor] | 1 | 20,000.00 |
|-----------------------|---|----------------------|---------------|
| Australia | NI 45-106 2.3 [Accredited investor] | 5 | 66,000.00 |
| Belize | NI 45-106 2.3 [Accredited investor] | 1 | 8,000.00 |
| Cayman Islands | NI 45-106 2.3 [Accredited investor] | 1 | 10,000.00 |
| China | NI 45-106 2.3 [Accredited investor] | 2 | 60,000.00 |
| Cyprus | NI 45-106 2.3 [Accredited investor] | 1 | 8,500.00 |
| France | NI 45-106 2.3 [Accredited investor] | 1 | 10,000.00 |
| Germany | NI 45-106 2.3 [Accredited investor] | 2 | 25,000.00 |
| Ireland | NI 45-106 2.3 [Accredited investor] | 1 | 10,000.00 |
| Netherlands | NI 45-106 2.3 [Accredited investor] | 1 | 40,000.00 |
| Panama | NI 45-106 2.3 [Accredited investor] | 3 | 54,000.00 |
| Singapore | NI 45-106 2.3 [Accredited investor] | 2 | 50,000.00 |
| South Africa | NI 45-106 2.3 [Accredited investor] | 1 | 10,000.00 |
| Saint Kitts And Nevis | NI 45-106 2.3 [Accredited investor] | 1 | 8,000.00 |
| Switzerland | NI 45-106 2.3 [Accredited investor] | 1 | 2,000.00 |
| United Kingdom | NI 45-106 2.3 [Accredited investor] | 4 | 182,000.00 |
| United States | NI 45-106 2.3 [Accredited investor] | 33 | 905,000.00 |
| | Total dollar amount of se | curities distributed | 16,000,000.00 |
| | Total number of unique purchasers ^{2b} | 490 | |

^{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. 11 |

| a) Name of person comp | ensated and regis | stration stat | us | | | | | | | | | |
|---|-----------------------------------|----------------|------------|---------------|----------|--------------|-----------|----------------------|---|-------------|------------|----------|
| Indicate whether the person con | npensated is a regist | trant. | | ☐ No | | \checkmark | Yes | | | | | |
| If the person compensated is an | individual, provide | the name of | the indivi | idual. | | | | | | | | |
| Full legal name of indivi | dual | | | | | | | | | | | |
| | | Family name | | | Firs | st given na | ame | | Seco | ndary give | n names | |
| If the person compensated is no | t an individual, prov | ide the follov | ving info | rmation. | | | | | | | | |
| Full legal name | of non-individual | Haywood | Securiti | es Inc | | | | | | | | |
| Fi | m NRD number | 1 6 | 3 | 0 | | | | (if app | licable) | | | |
| Indicate whether the person con | npensated facilitated | d the distribu | tion thro | ugh a fund | ing por | tal or an | interne | t-based _l | oortal. | √ | ا | Yes |
| b) Business contact inform | mation | | | | | | | | | | | |
| If a firm NRD number is not pro | vided in Item 8 (a), _I | provide the b | usiness c | ontact info | rmatior | n of the p | erson b | eing con | npensated. | | | |
| Street address | | | | | | | | | | | | |
| Municipality | | | | | | Pı | rovince | /State | | | | |
| Country | | | | | F | Postal c | ode/Zip | code | | | | |
| Email address | | | | | | Telepl | hone n | umber | | | | |
| c) Relationship to issuer | or investment fun | d manager | | | | | | | | | | |
| Indicate the person's relationship | | | | | | | | | | nnected" | in Part B | 3(2) of |
| the Instructions and the meanin | | | 45-106 | for the pur | | • | - | | | | | |
| Connect with the issue | er or investment für | nd manager | | | Ш | Insider | of the is | suer (oth | ner than an | investme | nt fund) | |
| Director or officer of the | e investment fund | or investmen | t fund m | anager | | Employe | ee of the | e issuer | or investme | ent fund m | anager | |
| ✓ None of the above | | | | | | | | | | | | |
| d) Compensation details | | | | | | | | | | | | |
| Provide details of all compensati Canadian dollars. Include cash c incidental to the distribution, suc | ommissions, securiti | es-based con | npensatio | on, gifts, di | scounts | or other | compe | nsation. I | Do not repo | rt paymer | its for se | ervices |
| allocation arrangements with the | | | | | | | | | n details ab | out, or rep | ort ori, t | unternat |
| Cash commissions pa | d 121,9 | 42.40 | | | | : | Security | code 1 | Security co | ode 2 S | ecurity co | ode 3 |
| Value of all securitie | 572.0 | 92.00 | | Security c | odes | | U B | | WN | Т | | |
| distributed as compensation | | | ar riabta | 200 404 | 2 | | alaa d | | ab au a 0 | 1/0 of o | | |
| Describe te | erms of warrants, o | JUDIS OF OUR | er rigrits | Each w | hole w | arrant e | entitles | the hol | on share & der to acq pril 4, 202 | uire a fu | | |
| | | | | April 4, | 202 | | | | ole at \$2.0 | | | |
| Other compensation | 5 62,5 | 00.00 | escribe | | | | | | of which luded in the | | | aid |
| Total compensation pa | d 737,4 | 34.40 | | | | | | | | | | |
| Check box if the per | son will or may rec | eive any defe | erred cor | npensatio | n (desci | ribe the t | erms b | elow) | | | | |
| | | | | | | | | | | | | |
| ⁴ Provide the aggregate value of additional securities of the issurights exercisable to acquire ad | | | | | | | | | | | | ar |

| a) Name of person compensated and registration status | | | | | | | | | | | | | |
|--|---|------------------------|---------------------|---------------------|-----------------------------|---------------------|------------------------|----------------------|-----------------------|---|--|--|--|
| Indicate whether the person compensated is a registrant. No Yes | | | | | | | | | | | | | |
| If the person compensated is an | individual, provide | the nam | e of the | indivia | lual. | | | | | | | | |
| Full legal name of indiv | dual | | | | | | | | | | | | |
| | | Family n | ame | | | Firs | t given n | ame | | Secondary given names | | | |
| If the person compensated is no | t an individual, pro | vide the j | following | j inforr | nation. | | | | | | | | |
| Full legal name | of non-individual | Canad | ccord G | enuity | y Corp. | | | | | | | | |
| Fi | rm NRD number | 9 | 0 | 0 | | | | | (if app | licable) | | | |
| Indicate whether the person con | | | | | _ gh a funa | l ling port | tal or an | interne | l | | | | |
| b) Business contact infor | nation | | | | | | | | | | | | |
| If a firm NRD number is not pro | vided in Item 8 (a), | provide i | the busir | ness co | ntact info | rmatior | of the | person b | eing con | npensated. | | | |
| Street address | | | | | | | | | | | | | |
| Municipality | | | | | | | Р | rovince | e/State | | | | |
| Country | | | | | | F | ostal c | ode/Zi _l | o code | | | | |
| Email address | | | | | | | Telep | hone n | umber | | | | |
| c) Relationship to issuer | or investment fur | id mana | ager | | | | | | | | | | |
| · · · · · · · · · · · · · · · · · · · | 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 | er or investment fu | nd mana | ıger | | | | Insider | of the is | suer (otl | ner than an investment fund) | | | |
| Director or officer of the | e investment fund | or inves | tment fu | nd ma | nager | | Employ | ee of th | e issuer | or investment fund manager | | | |
| | | | | | ago. | ш | po, | 00 01 | 0 10000. | or modernom rand manager | | | |
| ✓ None of the above | | | | | | | | | | | | | |
| d) Compensation details | | | | | | | | | | | | | |
| Canadian dollars. Include cash c | ommissions, securit h as clerical, printir | ies-basei 1g, legal | d compe or accou | nsatioi ınting s | n, gifts, di services. A | scounts An issue | or othei r is not i | r compei required | nsation. to ask fo | stribution. Provide all amounts in Do not report payments for services or details about, or report on, internal | | | |
| Cash commissions pa | d 153,5 | 36.00 | | | | | | Security | codo 1 | Security code 2 Security code 3 | | | |
| Value of all securitie | 1 1 1 | 00.00 | | S | Security c | odes | | U B | | W N T | | | |
| distributed as compensation | ' | | | | =00.11 | | | | | 0.4/0.7 | | | |
| Describe to | erms of warrants, o | ptions o | r otner ri | gnts | Each w | hole w | arrant | entitles | the hol | hare & 1/2 of one warrant. der to acquire a further share pril 4, 2022. | | | |
| | | | | | 94,353 April 4, | | s warra | ants ex | ercisabl | e at \$2.00 per share until | | | |
| Other compensation | 5 | | Des | cribe | | | | | | | | | |
| Total compensation pa | d 154,5 | 36.00 | | | | | | | | | | | |
| Check box if the per | son will or may red | eive any | / deferre | ed com | pensatio | n (desci | ribe the | terms b | elow) | | | | |
| | | | | | | | | | | | | | |
| ⁴ Provide the aggregate value of additional securities of the issurights exercisable to acquire ac ⁵ Do not include deferred compa | er. Indicate the sed Iditional securities | curity cod | des for a | | | | | | | | | | |

| a) Name of person compensated and registration status | | | | | | | | | | | | |
|---|---|------------------------|---------------------|---------------------|------------------------------|-------------------|------------------------|----------------------|-------------------------|--|--|--|
| Indicate whether the person compensated is a registrant. No Yes | | | | | | | | | | | | |
| If the person compensated is an | individual, provide | the nam | e of the | individ | lual. | | | | | | | |
| Full legal name of indiv | dual | | | | | | | | | | | |
| | | Family n | ame | | | Firs | t given n | ame | | Secondary given names | | |
| If the person compensated is no | t an individual, pro | vide the p | following | g inforr | mation. | | | | | | | |
| Full legal name | of non-individual | Gravit | as Sec | urities | Inc. | | | | | | | |
| Fi | rm NRD number | 2 | 6 | 2 | 6 | 0 | | | (if app | licable) | | |
| Indicate whether the person con | npensated facilitate | | | | | | tal or an | interne | l | | | |
| b) Business contact infor | | | | | | | | | • | | | |
| If a firm NRD number is not pro | vided in Item 8 (a), | provide | the busir | ness co | ntact info | rmatior | of the | person b | eing con | npensated. | | |
| Street address | | | | | | | | | | | | |
| Municipality | | | | | | | P | rovince | e/State | | | |
| Country | | | | | | F | ostal c | ode/Zip | o code | | | |
| Email address | | | | | | | Telep | hone n | umber | | | |
| c) Relationship to issuer | or investment fur | ıd mana | ager | | | | | | | | | |
| 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 | er or investment fu | nd mana | ger | | | | Insider | of the is | suer (oth | ner than an investment fund) | | |
| Director or officer of the | ne investment fund | or inves | tment fu | ınd ma | nager | П | Employ | ee of th | e issuer | or investment fund manager | | |
| ✓ None of the above | | | | | | | | | | • | | |
| | | | | | | | | | | | | |
| d) Compensation details | | | | | C 11 1 | | | | | | | |
| Canadian dollars. Include cash c | ommissions, securit h as clerical, printir | ies-basei 1g, legal | d compe or accou | nsatior Inting s | n, gifts, dis services. A | counts n issue | or othei r is not i | r compei required | nsation. I to ask fo | tribution. Provide all amounts in Do not report payments for services or details about, or report on, internal | | |
| Cash commissions pa | id 88,2 | 40.00 | | | | | | Security | codo 1 | Security code 2 Security code 3 | | |
| Value of all securitie | · 20 | 00.00 | | S | Security co | odes | | U B | | W N T | | |
| distributed as compensation | ' | | | | | | | | | | | |
| Describe to | erms of warrants, o | ptions o | r other r | ights | Each wl | nole w | arrant | entitles | the hole | share & 1/2 of one warrant. der to acquire a further share pril 4, 2022. | | |
| | | | | | 60,895 April 4, | | s warra | ants exe | ercisabl | e at \$2.00 per share until | | |
| Other compensation | n ⁵ | | Desc | cribe | | | | | | | | |
| Total compensation pa | 90,2 | 40.00 | | | | | | | | | | |
| Check box if the per | son will or may red | eive any | / deferre | ed com | pensation | (desc | ribe the | terms b | elow) | | | |
| | | | | | | | | | | | | |
| ⁴ Provide the aggregate value of additional securities of the issu- rights exercisable to acquire ac ⁵ Do not include deferred comp | er. Indicate the sed Iditional securities | curity cod | des for a | | | | | | | | | |

| a) Name of person comper | nsated and regis | tration sta | tus | | | | | | | | | | | |
|--|---|-------------------------------|------------------------|------------------------------|----------------------|-----------------|------------------|-----------------|----------------------|------------|----------|----------|---------|---------|
| Indicate whether the person compensated is a registrant. No Ves | | | | | | | | | | | | | | |
| If the person compensated is an in | dividual, provide ti | he name of | the indivi | dual. | | | | | | | | | | |
| Full legal name of individ | ual | | | | | | | | | | | | | |
| | F | amily name | | | First | t given | name | | l | Sed | condary | given na | ames | |
| If the person compensated is not o | ın individual, provi | de the follo | wing infor | mation. | | | | | | | | | | |
| Full legal name of | non-individual | Acumen (| Capital F | inance P | artners | Ltd. | | | | | | | | |
| Firm | n NRD number | 6 (| 0 7 | 0 | | | | (| if appli | cable) | | | | |
| Indicate whether the person comp | ensated facilitated | the distribu | ıtion throu | ıgh a fund | ing port | tal or a | n inte | rnet-b | ased po | ortal. | v | No | | Yes |
| b) Business contact information | ation | | | | | | | | | | | | | |
| If a firm NRD number is not provid | ded in Item 8 (a), p | rovide the b | ousiness co | ontact info | rmation | of the | perso | n beir | ng comp | pensated | | | | |
| Street address | | | | | | | | | | | | | | |
| Municipality | | | | | | I | Provir | nce/S | state | | | | | |
| Country | | | | | Р | ostal | code | /Zip c | ode | | | | | |
| Email address | | | | | | Tele | phone | e nun | nber | | | | | |
| c) Relationship to issuer or | investment fund | l manager | | | | | | | | | | | | |
| Indicate the person's relationship the Instructions and the meaning | | | | | | | | | | ning of "o | connect | ed" in I | Part I | 3(2) of |
| Connect with the issuer | | | 5 .667 | or are par | | - | _ | | | er than a | n inves | tment f | fund) | |
| Director or officer of the | investment fund o | r investmer | nt fund ma | anager | | Emplo | vee of | f the is | ssuer o | r investn | nent fui | nd man | ager | |
| ✓ None of the above | | | | J | | • | | | | | | | J | |
| d) Compensation details | | | | | | | | | | | | | | |
| Provide details of all compensation Canadian dollars. Include cash con incidental to the distribution, such allocation arrangements with the o | nmissions, securitie as clerical, printing | rs-based con 1, legal or a | mpensatio ccounting | n, gifts, dis services. A | scounts In issuer | or other is not | er com requir | pensa red to | ition. De ask for | o not rep | ort pay | ments | for se | ervices |
| Cash commissions paid | 6,50 | 00.00 | | | | [| Secu | rity cod | de 1 | Security | code 2 | Secu | rity co | ode 3 |
| Value of all securities distributed as compensation ⁴ | | | 5 | Security co | odes | | W | N | Т | | | | | |
| Describe terr | ns of warrants, op | tions or oth | er rights | 3,250 A 4, 2022 | | warra | ints e | xerci | sable a | at \$2.00 | per s | hare u | ntil A | April |
| Other compensation ⁵ | | | Describe | 1, 2022 | | | | | | | | | | |
| Total compensation paid | 6,50 | 0.00 | | | | | | | | | | | | |
| Check box if the person | on will or may rece | ive any def | erred con | npensatior | ı (descr | ibe the | e term: | s belo | w) | | | | | |
| | | | | | | | | | | | | | | |
| ⁴ Provide the aggregate value of a additional securities of the issuer rights exercisable to acquire addi ⁵ Do not include deferred compen | . Indicate the secu itional securities of | rity codes f | for all secu | | | | | | | | | | | er |

| a) Name of person compensated and registration status | | | | | | | | | | | | | | |
|--|--|--------------------------|-------------------------|----------------|------------------------------|-----------------------------|---------------------|----------------------|--------------------------|-------------------------------|-------------------|---------|---------|---------|
| Indicate whether the person compensated is a registrant. No Yes | | | | | | | | | | | | | | |
| If the person compensated is an | individual, provide | the name | of the inc | divid | dual. | | | | | | | | | |
| Full legal name of indivi | dual | | | | | | | | | | | | | |
| | | Family na | me | | | Firs | t given | name | | Seco | ondary giv | en nar | nes | |
| If the person compensated is not | t an individual, prov | vide the fo | ollowing ir | fori | mation. | | | | | | | | | |
| Full legal name | of non-individual | Domini | ick Capit | al C | Corporation | on | | | | | | | | |
| Fi | m NRD number | 2 | 2 | 7 | 7 | 0 | | | (if appli | cable) | | | | |
| Indicate whether the person con | npensated facilitate | d the distr | ribution th | irou | gh a fundi | ng por | tal or a | n interne | ı et-based p | ortal. | ✓ | No | | Yes |
| b) Business contact inforr | mation | | | | | | | | | | | | | |
| If a firm NRD number is not pro | vided in Item 8 (a), | provide tł | he busines | s co | ntact info | mation | of the | person l | peing com | pensated. | | | | |
| Street address | | | | | | | | | | | | | | |
| Municipality | | | | | | | ſ | Province | e/State | | | | | |
| Country | | | | | | F | Postal | code/Zi | p code | | | | | |
| Email address | | | | | | | Tele | ohone r | number | | | | | |
| c) Relationship to issuer of | or investment fun | d manag | ger | | | | | | | | | | | |
| c) Relationship to issuer or investment fund manager Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section. Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund) Director or officer of the investment fund or investment fund manager None of the above | | | | | | | | | | | | | | |
| d) Compensation details | | | | | | | | | | | | | | |
| Provide details of all compensations of all compensations and compensations. Include cash continuities incidental to the distribution, such allocation arrangements with the | ommissions, securit h as clerical, printir | ies-based 1g, legal o | compensor or account | atioi ing : | n, gifts, dis services. A | counts n issue | or othe r is not | er compe required | nsation. D to ask for | o not repo | ort payme | ents fo | or serv | vices . |
| Cash commissions pai | d | | | | | | | Security | code 1 | Security co | ode 2 | Securit | ty code | e 3 |
| Value of all securities distributed as compensation | _ 20 C | 00.00 | | S | Security co | des | | UE | S | W N | Т | | | |
| • | rms of warrants, o | ptions or | other righ | ts | Each what a pric | nole w e of \$ Agent' | arrant 3.00 p | entitles er shar | the hold e until Ap | share & der to accoril 4, 202 | quire a fo 22. | urthe | r sha | |
| Other compensation | 5 | | Describ | ре | | | | | | | | | | |
| Total compensation pai | d 29,0 | 00.00 | | | | | | | | | | | | |
| Check box if the per | son will or may rec | eive any | deferred | com | pensation | (desc | ribe the | terms b | elow) | | | | | |
| | | | | | | | | | | | | | | |
| ⁴ Provide the aggregate value o additional securities of the issue rights exercisable to acquire ad ⁵ Do not include deferred compe | er. Indicate the sec Iditional securities (| rurity code | es for all s | | | | | | | | | | | |

| a) Name of person compen | sated and registra | ntion status | | | | | | | | | | |
|--|--|--|--|--------------------------|---------------------------|---------------------|-------------|--------------|-----------|---------|--|--|
| Indicate whether the person compensated is a registrant. No Ves | | | | | | | | | | | | |
| If the person compensated is an in | dividual, provide the | name of the indivi | dual. | | | | | | | | | |
| Full legal name of individu | ıal | | | | | | | | | | | |
| | Far | nily name | F | irst given | name | · | Seco | ondary given | names | | | |
| If the person compensated is not a | n individual, provide | the following infor | mation. | | | | | | | | | |
| Full legal name of | non-individual G | MP Securities L | Р | | | | | | | | | |
| Firm | NRD number | 2 1 9 | 8 0 | | | (if appli | cable) | | | | | |
| Indicate whether the person comp | ensated facilitated th | e distribution thro | ıgh a funding p | ortal or a | n internet- | based po | ortal. | ✓ N | lo [| Yes | | |
| b) Business contact informa | ation | | | | | | | | | | | |
| If a firm NRD number is not provid | ded in Item 8 (a), pro | vide the business co | ontact informati | ion of the | person bei | ing com | pensated. | | | | | |
| Street address | | | | | | | | | | | | |
| Municipality | | | | ſ | Province/S | State | | | | | | |
| Country | | | | Postal | code/Zip | code | | | | | | |
| Email address | | | | Tele | phone nu | mber | | | | | | |
| c) Relationship to issuer or | investment fund n | nanager | , | | | | | | | | | |
| Indicate the person's relationship with the Instructions and the meaning of | | | | | | | ning of "co | onnected" ii | n Part | B(2) of | | |
| Connect with the issuer | | | | _ | | | er than an | investmer | nt fund |) | | |
| Director or officer of the | investment fund or i | nvestment fund ma | anager [|] Emplo | vee of the | issuer o | or investme | ent fund ma | anage | r | | |
| None of the above | | | ў <u>С</u> | | , | | | | Ü | | | |
| d) Compensation details | | | | | | | | | | | | |
| Provide details of all compensation Canadian dollars. Include cash con incidental to the distribution, such allocation arrangements with the o | nmissions, securities- as clerical, printing, l | based compensation based or accounting | n, gifts, discoun services. An issi | ts or othe uer is not | er compens required to | ation. D ask for | o not repo | ort payment | ts for s | ervices | | |
| Cash commissions paid | 116,800 | .00 | | | Security co | ode 1 | Security co | ode 2 Se | curity co | ode 3 | | |
| Value of all securities distributed as compensation ⁴ | | ; | Security codes | | WN | Т | | | | | | |
| Describe terr | ns of warrants, optio | ns or other rights | 58,400 Agei April 4, 2022 | | ants exer | cisable | e at \$2.00 |) per shar | e unti | I | | |
| Other compensation ⁵ | | Describe | , , , | | | | | | | | | |
| Total compensation paid | 116,800. | 00 | | | | | | | | | | |
| Check box if the person | on will or may receive | e any deferred con | npensation (des | scribe the | e terms bel | ow) | | | | | | |
| | | | | | | | | | | | | |
| ⁴ Provide the aggregate value of a additional securities of the issuer rights exercisable to acquire addi ⁵ Do not include deferred compen | Indicate the security tional securities of th | v codes for all sec | | | | | | | | er | | |

| a) Name of person compens | ated and registration | on status | | | | | | | | | | |
|---|-------------------------|-----------------------|--------------------------|-------------|-------------|-----------|-------------|---------------|----------|---------|--|--|
| Indicate whether the person compensated is a registrant. No Ves | | | | | | | | | | | | |
| If the person compensated is an indi | vidual, provide the no | ame of the indivi | dual. | | | | | | | | | |
| Full legal name of individua | ıl 💮 | | | | | | | | | | | |
| | Family | / name | Fi | st given na | ame | | Seco | ondary given | names | 3 | | |
| If the person compensated is not an | individual, provide th | e following infor | mation. | | | | | | | | | |
| Full legal name of n | on-individual Indu | ıstrial Alliance | Securities Inc. | | | | | | | | | |
| Firm ! | NRD number 1 | 5 4 | 0 0 | | | (if appli | cable) | | | | | |
| Indicate whether the person compen | sated facilitated the o | distribution throu | ıgh a funding po | rtal or an | internet-l | based po | ortal. | ✓ N | lo [| Yes | | |
| b) Business contact informat | ion | | | | | | | | | | | |
| If a firm NRD number is not provide | d in Item 8 (a), provid | le the business co | ontact informatio | on of the p | person bei | ng com | pensated. | | | | | |
| Street address | | | | | | | | | | | | |
| Municipality | | | | Р | rovince/S | State | | | | | | |
| Country | | | | Postal c | ode/Zip | code | | | | | | |
| Email address | | | | Telep | hone nui | mber | | | | | | |
| c) Relationship to issuer or ir | vestment fund ma | nager | _ | | | | | | | | | |
| Indicate the person's relationship wi the Instructions and the meaning of | | | | | | | ning of "co | onnected" i | n Part | B(2) of | | |
| Connect with the issuer or | | | | · · | _ | | er than an | investmer | nt fund |) | | |
| Director or officer of the in | | | anager \square | | | , | | ent fund m | · | | | |
| ✓ None of the above | | | age: | p.oy | | .000.0 | | oaa | ago. | • | | |
| | | | | | | | | | | | | |
| d) Compensation details | aid auto be paid to | the newson ident | ified in Itam ()(a) | in same | ation with | the dist | wib.ution [| المعانطة علام | | to in | | |
| Provide details of all compensation p Canadian dollars. Include cash comm incidental to the distribution, such as | nissions, securities-ba | sed compensatio | n, gifts, discount | s or other | compens | ation. D | o not repo | ort paymen | ts for s | ervices | | |
| allocation arrangements with the dir | • | ¬ · | individual comp | ensated b | y the issue | er. | | | | | | |
| Cash commissions paid | 5,000.00 | | | | Security co | ode 1 | Security c | ode 2 Se | curity c | ode 3 | | |
| Value of all securities distributed as compensation ⁴ | | | Security codes | | W N | Т | | | | | | |
| Describe terms | of warrants, options | or other rights | 2,500 Agent's 4, 2022 | s warran | nts exerci | isable a | at \$2.00 | per share | until . | April | | |
| Other compensation ⁵ | | Describe | ,, ==== | | | | | | | | | |
| Total compensation paid | 5,000.00 | | | | | | | | | | | |
| Check box if the person | will or may receive a | ⊔ iny deferred con | npensation (des | cribe the | terms belo | ow) | | | | | | |
| | | | | | | | | | | | | |
| ⁴ Provide the aggregate value of all | securities distributed | as compensation | on excluding on | tions wa | rrants or o | other ria | hts exerci | isable to ac | cauire | | | |
| additional securities of the issuer. It rights exercisable to acquire additional securities. | ndicate the security of | codes for all secu | | | | | | | | er | | |
| ⁵ Do not include deferred compensa | | | | | | | | | | | | |

| a) Name of person compe | ensated and regist | tration status | | | | | | | | | | |
|--|--|---|---|--------------------------------|-----------------------|-----------------------------|---------------------------|----------------------|----------------|--------------|-----|--|
| Indicate whether the person compensated is a registrant. No Ves | | | | | | | | | | | | |
| If the person compensated is an | individual, provide th | ne name of the indivi | dual. | | | | | | | | | |
| Full legal name of indivi | dual | | | | | | | | | | | |
| | F | amily name | Fin | st given nam | ne | | Seco | ndary gi | ven na | mes | | |
| If the person compensated is not | an individual, provid | de the following infor | mation. | | | | | | | | | |
| Full legal name | of non-individual [| Hampton Securitie | es Limited | | | | | | | | | |
| Fi | m NRD number | 2 8 9 | 0 | | | (if appli | cable) | | | | | |
| Indicate whether the person com | pensated facilitated | the distribution throu | ıgh a funding poi | rtal or an in | nternet-l | based po | ortal. | \checkmark | No | Y | 'es | |
| b) Business contact inform | nation | | | | | | | | | | | |
| If a firm NRD number is not pro | vided in Item 8 (a), pi | rovide the business co | ontact informatio | n of the pei | rson bei | ng com | pensated. | | | | | |
| Street address | | | | | | | | | | | | |
| Municipality | | | | Pro | vince/S | State | | | | | Ī | |
| Country | | | | Postal cod | de/Zip d | code | | | | | Ī | |
| Email address | | | | Telepho | one nur | mber | | | | | Ī | |
| c) Relationship to issuer of | or investment fund | manager | - | | | | | | | | | |
| Indicate the person's relationship the Instructions and the meaning | | | | | | | ning of "co | nnected | d" in P | art B(2) (| of | |
| Connect with the issue | er or investment fund | l manager | | Insider of | the issu | uer (othe | er than an | investn | nent f | und) | | |
| Director or officer of th | e investment fund o | r investment fund ma | anager | Employee | of the i | issuer o | r investme | ent fund | mana | ager | | |
| ✓ None of the above | | | | | | | | | | | | |
| d) Compensation details | | | | | | | | | | | | |
| Provide details of all compensation Canadian dollars. Include cash continuities incidental to the distribution, such allocation arrangements with the | ommissions, securitie h as clerical, printing | s-based compensation, legal or accounting | n, gifts, discounts services. An issue | s or other co er is not req | ompenso Juired to | ation. D ask for | o not repo | rt paym | ents f | or service | | |
| Cash commissions pai | d 3,50 | 0.00 | | Se | ecurity co | de 1 | Security co | ode 2 | Secur | ity code 3 | 3 | |
| Value of all securities distributed as compensation | | , | Security codes | W | N | Т | | | | | | |
| · | rms of warrants, opt | tions or other rights | 1,750 Agent's 4, 2022 | warrants | exerci | isable a | at \$2.00 | per sha | are ur | ntil April | | |
| Other compensation | 5 | Describe | , | | | | | | | | i | |
| Total compensation pai | d 3,50 | 0.00 | | | | | | | | | _ | |
| Check box if the per | son will or may rece | ive any deferred con | npensation (desc | ribe the te | rms belo | ow) | | | | | | |
| | | | | | | | | | | | | |
| ⁴ Provide the aggregate value on additional securities of the issue rights exercisable to acquire and ⁵ Do not include deferred compe | er. Indicate the secu Iditional securities of | rity codes for all sect | on, <u>excluding</u> opt urities distributed | ions, warra I as compe | ants or o nsation, | other rig <u>includi</u> | hts exerci ing options | sable to s, warra | acqu nts or | ire other | | |

| 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, provide | the nam | e of the | indivia | lual. | | | | | | | |
| Full legal name of indivi | dual | | | | | | | | | | | |
| | | Family n | ame | | | Firs | t given n | ame | | Secondary given names | | |
| If the person compensated is no | t an individual, pro | vide the | following | j inforr | mation. | | | | | | | |
| Full legal name | of non-individua | l Macki | e Rese | arch (| Capital C | Corpora | ation | | | | | |
| Fi | rm NRD numbe | 3 | 0 | 7 | 0 | | | | (if app | licable) | | |
| Indicate whether the person con | | | | | | ina port | l tal or an | interne | l | | | |
| b) Business contact infor | • | | | | | 373 | | | , | | | |
| If a firm NRD number is not pro | | provide | the busir | ness co | ntact info | rmation | of the | person b | eing con | npensated. | | |
| Street address | | | | | | | | | | | | |
| Municipality | | | | | | | P | rovince | e/State | | | |
| Country | | | | | | F | ostal c | ode/Zi _l | o code | | | |
| Email address | | | | | | | Telep | hone n | umber | | | |
| c) Relationship to issuer | or investment fu | nd mana | ager | | | | | | | | | |
| 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 | | | | , | , , | | - | - | | ner than an investment fund) | | |
| Director or officer of the | e investment fund | l or inves | tment fu | nd ma | nager | \Box | Employ | ee of th | e issuer | or investment fund manager | | |
| None of the above | | | | | 3- | | 1 - 7 | | | | | |
| | | | | | | | | | | | | |
| d) Compensation details | • • • • • | | | | C: 1: 1. | 0(): | | | | | | |
| | ommissions, securi h as clerical, printi | ties-base ng, legal | d compe or accou | nsatior Inting s | n, gifts, dis services. A | scounts In issuei | or othei r is not i | r compei required | nsation. I to ask fo | tribution. Provide all amounts in Do not report payments for services or details about, or report on, internal | | |
| Cash commissions pa | | 000.00 | , , - | | | | | | | 0 " +0 0 " +0 | | |
| Value of all securitie | s [| | | s | Security co | odes | | Security U B | | Security code 2 Security code 3 W N T | | |
| distributed as compensation | ' | 100.00 | | | | | | · | | | | |
| Describe te | erms of warrants, o | options o | r other ri | ights | Each w | hole w | arrant | entitles | the hole | share & 1/2 of one warrant. der to acquire a further share pril 4, 2022. | | |
| | | | | | 34,550 April 4, | | s warra | ants ex | ercisabl | e at \$2.00 per share until | | |
| Other compensation | 5 | | Desc | cribe | | | | | | | | |
| Total compensation pa | 69, | 100.00 | | | | | | | | | | |
| Check box if the per | son will or may re | ceive any | deferre | ed com | pensation | n (descr | ribe the | terms b | elow) | | | |
| | | | | | | | | | | | | |
| ⁴ Provide the aggregate value of additional securities of the issurights exercisable to acquire ac ⁵ Do not include deferred compo | er. Indicate the se Iditional securities | curity cod | des for a | | | | | | | | | |

| a) Name of person compensated and registration status | | | | | | | | | | | | | |
|---|---|------------------------|---------------------|---------------------|------------------------------|-------------------|------------------------|-------------------|-------------------------|---|--|--|--|
| Indicate whether the person compensated is a registrant. No Yes | | | | | | | | | | | | | |
| If the person compensated is an | individual, provide | the nam | e of the | individ | lual. | | | | | | | | |
| Full legal name of indiv | dual | | | | | | | | | | | | |
| | | Family n | ame | | | Firs | t given n | ame | | Secondary given names | | | |
| If the person compensated is no | t an individual, pro | vide the p | following | g inforn | nation. | | | | | | | | |
| Full legal name | of non-individual | PI Fin | ancial (| Corp. | | | | | | | | | |
| Fi | rm NRD number | 5 | 2 | 9 | 0 | | | | (if appl | licable) | | | |
| Indicate whether the person con | npensated facilitate | | | | | ing port | l tal or an | interne | l | | | | |
| b) Business contact infor | nation | | | | | | | | | | | | |
| If a firm NRD number is not pro | vided in Item 8 (a), | provide i | the busir | ness co | ntact info | rmatior | of the | person b | eing com | npensated. | | | |
| Street address | | | | | | | | | | | | | |
| Municipality | | | | | | | Р | rovince | e/State | | | | |
| Country | | | | | | F | Postal c | ode/Zip | o code | | | | |
| Email address | | | | | | | Telep | hone n | umber | | | | |
| c) Relationship to issuer | or investment fur | id mana | ager | | | | | | | | | | |
| · · · · · · · · · · · · · · · · · · · | 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 | er or investment fu | nd mana | ger | | | | Insider | of the is | suer (oth | ner than an investment fund) | | | |
| Director or officer of the | e investment fund | or inves | tment fu | ınd ma | nager | П | Employ | ee of th | e issuer | or investment fund manager | | | |
| | | | | | age. | ш | pc) | | 0 1000.01 | or my ooung na na na nago | | | |
| ✓ None of the above | | | | | | | | | | | | | |
| d) Compensation details | | | | | | | | | | | | | |
| Canadian dollars. Include cash c | ommissions, securit h as clerical, printir | ies-basei 1g, legal | d compe or accou | nsatior Inting s | n, gifts, dis services. A | counts n issue | or othei r is not i | comper equired | nsation. L to ask fo | tribution. Provide all amounts in Do not report payments for services r details about, or report on, internal | | | |
| Cash commissions pa | | 00.00 | | | | • | | - | | Security code 2 Security code 3 | | | |
| Value of all securitie | ` 111 ° | 740.00 | | s | ecurity co | odes | | Security U B | | Security code 2 Security code 3 W N T | | | |
| distributed as compensation | ' | | | | | | | • | • | | | | |
| Describe to | erms of warrants, o | ptions o | r other ri | ights | Each w | hole w | arrant | entitles | the hole | share & 1/2 of one warrant. der to acquire a further share pril 4, 2022. | | | |
| | | | | | 62,120 April 4, | | s warra | ants ex | ercisabl | e at \$2.00 per share until | | | |
| Other compensation | 5 | | Desc | cribe | | | | | | | | | |
| Total compensation pa | d 124,2 | 40.00 | | | | | | | | | | | |
| Check box if the per | son will or may red | eive any | / deferre | ed com | pensatior | desci | ribe the | terms b | elow) | | | | |
| | | | | | | | | | | | | | |
| ⁴ Provide the aggregate value of additional securities of the issu- rights exercisable to acquire ac ⁵ Do not include deferred compo | er. Indicate the sed Iditional securities | curity cod | des for a | | | | | | | | | | |

| a) Name of person compens | sated and regis | stration status | | | | | | | | | | |
|--|--|---------------------------------------|----------------------|-------------------------|----------------------|----------------------|---------------------|------------------------|---------------|--------------|-----------|-------------|
| Indicate whether the person compe | nsated is a regist | rant. | | No | | \checkmark | Yes | | | | | |
| If the person compensated is an inc | lividual, provide t | the name of the i | individu | al. | | | | | | | | |
| Full legal name of individu | al | | | | | | | | | | | |
| | | Family name | | 1 | First | given n | ame | | Seco | ndary g | given nar | nes |
| If the person compensated is not ar | n individual, prov | ide the following | inform | ation. | | | | | | | | |
| Full legal name of r | non-individual | Scotia Capita | l Inc. | | | | | | | | | |
| Firm | NRD number | 3 4 | 6 | 0 | | | | (if app | olicable) | | | |
| Indicate whether the person compe | nsated facilitated | the distribution | througl | h a fundi | ng porta | al or an | interne | t-based | portal. | \checkmark | No | Yes |
| b) Business contact informa | tion | | | | | | | | | | | |
| If a firm NRD number is not provide | ed in Item 8 (a), p | provide the busin | ess con | tact infor | mation | of the | person Ł | peing co | mpensated. | | | |
| Street address | | | | | | | | | | | | |
| Municipality | | | | | | Р | rovince | e/State | | | | |
| Country | | | | | Po | ostal c | ode/Zi | p code | | | | |
| Email address | | | | | | Telep | hone n | number | | | | |
| c) Relationship to issuer or i | nvestment fund | d manager | | | | | | | | | | |
| Indicate the person's relationship w the Instructions and the meaning o | | | | | | | | | | onnecte | ed" in Po | art B(2) of |
| Connect with the issuer of | | | 100 101 | the purp | | - | - | | ther than an | invest | ment fu | nd) |
| Director or officer of the in | | | nd man: | aner | | | | | r or investme | | | |
| <u>_</u> | iivesiiieiit iulia t | or investment for | ia man | agei | ш. | шрюу | CC OI III | 0 133001 | or investme | ont run | a mana | gei |
| ✓ None of the above | | | | | | | | | | | | |
| d) Compensation details | | | | | | | | | | | | |
| Provide details of all compensation Canadian dollars. Include cash com- incidental to the distribution, such a | missions, securitions clerical, printing | es-based comper g, legal or accoui | nsation, nting se | gifts, dis rvices. A | counts c n issuer | or othei is not i | r compe required | nsation. ' to ask f | Do not repo | rt payı | ments fo | or services |
| allocation arrangements with the di | | | non-in | dividual | compen. | sated b | y the is: | suer. | | | | |
| Cash commissions paid | 49,40 | 00.00 | | | | | Security | code 1 | Security co | ode 2 | Securit | ty code 3 |
| Value of all securities distributed as compensation ⁴ | | | Se | curity co | des | | | | | | | |
| · | s of warrants, op | otions or other rig | ghts | | | | | | | | | |
| Other compensation ⁵ | | Desc | ribe | | | | | | | | | |
| Total compensation paid | 49,40 | 00.00 | L | | | | | | | | | |
| Check box if the persor | n will or may rece | eive any deferre | d comp | ensation | (descril | be the | terms b | elow) | | | | |
| | | | | | | | | | | | | |
| ⁴ Provide the aggregate value of al | ll securities distri | huted as compo | nsation | excludi | na ontio | מון פתו | rrante o | r other ' | rights eversi | sahla t | n acqui | re |
| additional securities of the issuer. rights exercisable to acquire addit 5Do not include deferred compens | Indicate the sectional securities o | urity codes for all | | | | | | | | | | |

| 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 | ıer 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 "ed." | o be owned by its dir urrent distribution eve | ectors, 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 | ox and complete | Item 9(a) - (c). | | | | | |
| a) Directors, executive officer | e and promotors of | of the issuer | | | | | | |
| a) Directors, executive officer Provide the following information for | • | | motor of the issuer F | or locations within | Canada s | tato the | province | or |
| territory; otherwise state the country. | | | | | | tate the | province | |
| Organization or company name | Family name | First given name | Secondary given names | Business loc non-individi resident jurisdictio individu | ual or ail n of | | onship to | |
| | | | | Province or | country | D | 0 | Р |
| | | | | | | | | |
| b) Promoter information | | | | | | | | |
| If the promoter listed above is not an within Canada, state the province or | | | | | | | | |
| 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 | Transcanna Holdings Inc. | | | | | | | |
|--|--------------------------|------------------|---------|-------------------|--------------|------|--|--|
| Full legal name | Ball | Greg | | | | | | |
| | Family name | First given name | • | Seconda | ary given na | ames | | |
| Title | CFO | | | | | | | |
| Telephone number | 6046480516 | Email address | greg@da | g@dacostacorp.com | | | | |
| Signature | Greg Ball | Date | 2019 | 04 | 15 | | | |
| | | · | 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 | Hartman | Shauna | | Title | counsel | | | | | |
| | Family name | First given name | Secondary given names | _ | | | | | | |
| Name of company | S. Paul Simpson Law Corporation | | | | | | | | | |
| Telephone number | 6046334289 Email address shartman@armlaw.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.