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	ged 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	ntity 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.	a 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 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 Description 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)	Currency
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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		derlyi urity c	•	Exercise price (Canadian \$)		Expiry date (YYYY- MM-DD)	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	7,226,500.00
Alberta	NI 45-106 2.3 [Accredited investor]	88	2,028,000.00
Manitoba	NI 45-106 2.3 [Accredited investor]	5	109,000.00
Ontario	NI 45-106 2.3 [Accredited investor]	102	3,701,000.00
Saskatchewan	NI 45-106 2.3 [Accredited investor]	3	160,000.00
Québec	NI 45-106 2.3 [Accredited investor]	5	197,000.00

Anguilla	NI 45-106 2.3 [Accredited investor]	1	8,000.00
Australia	NI 45-106 2.3 [Accredited investor]	5	501,000.00
Belize	NI 45-106 2.3 [Accredited investor]	1	72,000.00
Cayman Islands	NI 45-106 2.3 [Accredited investor]	1	20,000.00
China	NI 45-106 2.3 [Accredited investor]	2	90,000.00
Cyprus	NI 45-106 2.3 [Accredited investor]	1	15,000.00
France	NI 45-106 2.3 [Accredited investor]	1	40,000.00
Germany	NI 45-106 2.3 [Accredited investor]	2	118,000.00
Ireland	NI 45-106 2.3 [Accredited investor]	1	18,000.00
Netherlands	NI 45-106 2.3 [Accredited investor]	1	20,000.00
Panama	NI 45-106 2.3 [Accredited investor]	3	108,000.00
Singapore	NI 45-106 2.3 [Accredited investor]	2	43,500.00
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	50,000.00
Switzerland	NI 45-106 2.3 [Accredited investor]	1	25,000.00
United Kingdom	NI 45-106 2.3 [Accredited investor]	4	515,000.00
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	compei	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 p	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	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	y 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	• • • • •			• 1	C: 1: 1.	0():						
	ommissions, securi h as clerical, printi	ties-base ng, legal	d compe or accou	nsatior Inting s	n, gifts, di: 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 evo	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.