# Form 45-106F1 Report of Exempt Distribution

### **ITEM 1 - REPORT TYPE**

✓ New report

Amended report

If amended, provide filing date of report that is being amended.

(YYYY-MM-DD)

## ITEM 2 - PARTY CERTIFYING THE REPORT

Indicate the party certifying the report (select only one). For guidance regarding whether an issuer is an investment fund, refer to section 1.1 of National Instrument 81-106 Investment Fund Continuous Disclosure and the companion policy to NI 81-106 (in Québec, Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement Fund Continuous Disclosure).

Investment fund issuer

✓ Issuer (other than an investment fund)

Underwriter

# **ITEM 3 - ISSUER NAME AND OTHER IDENTIFIERS**

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

| Full legal name                                       | Greenway Greenhouse Cannabis Corporation / Greenway<br>Greenhouse Cannabis Corporation             |
|---|--|
| Previous full legal name                              |  |
| If the issuer's name changed in                       | the last 12 months, provide most recent previous legal name.                                       |
| Website   | www.greenway.ca (if applicable)  |
| If the issuer has a legal entity identifier, p        | rovide below. Refer to Part B of the Instructions for the definition of "legal entity identifier". |
| Legal entity identifier                               |  |
| lf two or more issuers distributed a single<br>above. | security, provide the full legal name(s) of the co-issuer(s) other than the issuer named           |
| Full legal name(s) of co-issuer(s)                    | (if applicable)  |

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

| ITEM 5 - ISSUER INFORMATION  |
|--|
| If the issuer is an investment fund, do not complete Item 5. Proceed to Item 6.  |
| a) Primary industry  |
| Provide the issuer's North American Industry Classification Standard (NAICS) code (6 digits only) that in your reasonable judgment<br>most closely corresponds to the issuer's primary business activity.  |
| NAICS industry code 111412   |
| If the issuer is in the <b>mining industry</b> , 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<br>Is the issuer's primary business to invest all or substantially all of its assets in any of the following? If yes, select all that apply.  |
| Mortgages Real estate Commercial/business debt Consumer debt Private companies   |
| b) Number of employees   |
| Number of employees: 🗹 0 - 49 🗌 50 - 99 🗌 100 - 499 🔲 500 or more  |
| c) SEDAR+ profile number   |
| Provide the issuer's SEDAR+ profile number 000046137   |

# ITEM 6 - INVESTMENT FUND ISSUER INFORMATION

| If the issuer is an investment fund, provide the following informa       | ition.                                   |
|--|--|
| a) Investment fund manager information                                   |  |
| Full legal name  | (if applicable)                          |
| SEDAR+ profile number  |  |
| b) Type of investment fund   |  |
| Type of investment fund that most accurately identifies the issuer (sele | ect only one).<br>ed income 🛛 🗌 Balanced |

| Alternative strategies  | Cryptoasset  | 🗌 Other (describe)  |                 |                                 |
|---|--|---|-----------------|---------------------------------|
| Indicate whether one or both of th  | e following apply to the ir                                | nvestment fund.   |                 |                                 |
| Invest primarily in other inve  |  | ,   |                 |                                 |
| ☐ Is a UCITs Fund <sup>1</sup><br><sup>1</sup> Undertaking for the Collective Investment<br>that allow collective investment schemes                            | nt of Transferable Securities fu                           |   |                 |                                 |
| c) Net asset value (NAV   | ) of the investment fu                                     | und   |                 |                                 |
| Select the NAV range of the investr   | nent fund as of the date o                                 | f the most recent NAV calc                                | ulation (Canad  | lian \$).                       |
| 🗌 Under \$5M  | S5M to under \$  | 25M 🗌 \$25M to und  | er \$100M       | Date of NAV calculation:        |
| ☐ \$100M to under \$500M  | 🗌 \$500M to unde   | r \$1B 🗌 \$1B or over                                     |                 | YYYY MM DD                      |
| <b>ITEM 7 - INFORMATION</b>   | ABOUT THE DIST   | RIBUTION  |                 |                                 |
| <i>If an issuer located outside of Can<br/>information about purchasers res<br/>commissions or finder's fees, in co<br/>Item 7 must reconcile with the info</i> | ident in that jurisdiction o<br>nnection with the distribu | f Canada only. Do not incl<br>ition, which must be disclo | ude in Item 7 s | securities issued as payment of |
| a) Currency   |  |   |                 |                                 |
| Select the currency or currencies in dollars.   | ז which the distribution w                                 | vas made. All dollar amoun                                | nts provided in | the report must be in Canadian  |
| 🗹 Canadian dollar 🛛 US d  | dollar 🗌 Euro O  | ther (describe)   |                 |                                 |
| b) Distribution dates   |  |   |                 |                                 |
| State the distribution start and en<br>the distribution date as both the s<br>include the start and end dates for   | tart and end dates. If the                                 | report is being filed for sec                             |                 |                                 |
| Start date 202  | 23 07 24   | End date  | 2023            | 07 24                           |
| YYY   | YY MM DD   |   | YYYY            | MM DD                           |
| c) Detailed purchaser ir  | nformation   |   |                 |                                 |
| Complete Schedule 1 of this for   | n for each purchaser an                                    | nd attach the schedule to                                 | the complete    | ed report.                      |
| d) Types of securities d  | istributed   |   |                 |                                 |
| Provide the following information<br>to indicate the security code. If pro<br>distributed.  |  |   |                 |                                 |

|   |  |   |   |   |   |  |   |   |   | Cana   | Canadian \$  |  |  |  |
|---|--|---|---|---|---|--|---|---|---|--|--|--|--|--|
| Security<br>code  | CUS<br>numb<br>applica   | er (if  | D   | escription  | of secu   | rity   | Number o<br>securitie   |   | Single or<br>lowest price   |  | ighest<br>price  | Total amount   |  |  |
| CMS   | 000396   | 679F  | Commo   | n Shares  |   |  | 964,285   | .0000   | 0.28  | 00   |  | 270,000.000  |  |  |
|   |  |   |   |   |   |  |   |   |   |  |  |  |  |  |
| e) D  | etails o   | of rigl   | hts and   | convertib   | ole/exc   | hangeable  | e securities  |   |   |  |  |  |  |  |
|   | e/exchan   | ngeabl  | e securitie   |   |   |  |   |   | piry date for e<br>l describe any   |  |  |  |  |  |
| Converti<br>exchange  | ible /<br>eable  | Und   | erlying<br>ity code   | Exercise<br>(Canadia  | -   |  | e (YYYY-MM-<br>DD)  | /M-<br>Conversion rati  |   | Desc   | cribe oth<br>applic  | ier terms (if<br>able)   |  |  |
| security  | code   |   | ,   | Lowest H  | lighest   |  | •   |   |   |  |  | •  |  |  |
|   |  |   |   |   |   |  |   |   |   |  |  |  |  |  |
|   |  |   |   |   |   |  |   |   |   |  |  |  |  |  |
| f) Su   | ummar  | y of t  | the distr   | ibution by  | y juriso  | diction and  | d exemptio  | n   |   |  |  |  |  |  |
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# **ITEM 8 - COMPENSATION INFORMATION**

| Provide information for each person (as defined in NI 45-106) (in Québec, Regulation 45-106 respecting Prospectus Exemptions) to whom the issuer directly provides, or will provide, any compensation in connection with the distribution. <b>Complete additional copies of this page if more than one person was, or will be, compensated.</b>      |     |  |  |  |  |  |  |
|--|-----|--|--|--|--|--|--|
| Indicate whether any compensation was paid, or will be paid, in connection with the distribution.  |     |  |  |  |  |  |  |
| ✓ No Yes If yes, indicate number of persons compensated.   |     |  |  |  |  |  |  |
| 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 individual.  |     |  |  |  |  |  |  |
| Full legal name of individual  |     |  |  |  |  |  |  |
| Family name       First given name       Secondary given name         If the person compensated is not an individual, provide the following information.       Secondary given name  |     |  |  |  |  |  |  |
| Full legal name of non-individual  |     |  |  |  |  |  |  |
| Firm NRD number (if applicable)  |     |  |  |  |  |  |  |
| Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal  |     |  |  |  |  |  |  |
|  |     |  |  |  |  |  |  |
|  |     |  |  |  |  |  |  |
| b) Business contact information  |     |  |  |  |  |  |  |
| If a firm NRD number is not provided in Item 8(a), provide the business contact information of the person being compensate   | d.  |  |  |  |  |  |  |
| Street address   |     |  |  |  |  |  |  |
| Municipality Province/State  |     |  |  |  |  |  |  |
| Country Postal code/Zip code   |     |  |  |  |  |  |  |
| Email address Telephone number   |     |  |  |  |  |  |  |
|  |     |  |  |  |  |  |  |
| 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<br>'connected' in Part B(2) of the Instructions and the meaning of 'control' in section 1.4 of NI 45-106 (in Québec, Regulation 45-<br>respecting Prospectus Exemptions) for the purposes of completing this section. | 106 |  |  |  |  |  |  |
| Connected 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  |     |  |  |  |  |  |  |
| Employee of the issuer or investment fund manager  |     |  |  |  |  |  |  |
| None of the above  |     |  |  |  |  |  |  |
| d) Compensation details  |     |  |  |  |  |  |  |

Provide details of all compensation paid, or to be paid, to the person identified in Item 8(a) in connection with the distribution. Provide all amounts in Canadian dollars. Include cash commissions, securities-based compensation, gifts, discounts or other compensation. Do not report payments for services incidental to the distribution, such as clerical, printing, legal or accounting services. An issuer is not required to ask for details about, or report on, internal allocation arrangements with the directors, officers or employees of a non-individual compensated by the issuer.

| Cash commissions paid  |                       |                       |                 |   |
|--|-----------------------|-----------------------|-----------------|---|
| Value of all securities distributed as compensation <sup>4</sup>   |                       |                       |                 |   |
| Security codes   | Security code 1       | Security code 2       | Security code 3 |   |
| Describe terms of warrants, options or other rights  |                       |                       |                 | ] |
| Other compensation <sup>5</sup>  |                       |                       |                 |   |
| Describe   |                       |                       |                 |   |
| Total compensation paid  |                       |                       |                 |   |
| Check box if the person will or may receive any def  | erred compensati      | on (describe the te   | erms below)     |   |
|  |                       |                       |                 |   |
| <sup>4</sup> Provide the aggregate value of all securities distributed as<br>acquire additional securities of the issuer. Indicate the secu<br>options, warrants or other rights exercisable to acquire ad<br><sup>5</sup> Do not include deferred compensation. | urity codes for all s | ecurities distributed |                 |   |

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

Indicate whether the issuer is any of the following (select the one that applies – if more than one applies, select only one).

| $\checkmark$ | Reporting | issuer | in a | jurisdiction | of | Canada |
|--------------|-----------|--------|------|--------------|----|--------|
|--------------|-----------|--------|------|--------------|----|--------|

E Foreign public issuer

Wholly owned subsidiary of a reporting issuer in any jurisdiction of Canada <sup>6</sup>

Provide name of reporting issuer

Wholly owned subsidiary of a foreign public issuer <sup>6</sup>

Provide name of foreign public issuer

Issuer distributing only eligible foreign securities and the distribution is to permitted clients only <sup>7</sup>.

#### If the issuer is at least one of the above, do not complete Item 9(a) - (c). Proceed to Item 10.

<sup>6</sup> An issuer is a wholly owned subsidiary of a reporting issuer or a foreign public issuer if all of the issuer's outstanding voting securities, other than securities that are required by law to be owned by its directors, are beneficially owned by the reporting issuer or the foreign public issuer, respectively.

<sup>7</sup> Check this box if it applies to the current distribution even if the issuer made previous distributions of other types of securities to non-permitted clients. Refer to the definitions of "eligible foreign security" and "permitted client" in Part B(1) of the Instructions.

#### □ If the issuer is none of the above, check this box and complete Item 9(a) – (c).

#### a) Directors, executive officers and promoters of the issuer

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

| Organization or<br>company name | Family<br>name | First<br>given | Secondary<br>given names | Business location of non-individual<br>or residential jurisdiction of<br>individual | Relationship to issuer<br>(select all that apply) |   |   |  |
|---------------------------------|----------------|----------------|--------------------------|---|---|---|---|--|
|                                 |                | name           |                          | Province or country   | D   | 0 | Р |  |
|                                 |                |                |                          |   |   |   |   |  |

#### b) Promoter information

*If the promoter listed above is not an individual, provide the following information for each director and executive officer of the promoter. For locations within Canada, state the province or territory, otherwise state the country. For "Relationship to promoter", "D" – Director, "O" – Executive Officer.* 

| Organization or  | Family    | First given | , , , | Residential jurisdiction<br>of individual |   | promoter (select<br>if applicable) |
|------------------|-----------|-------------|-------|---|---|------------------------------------|
| company name     | name      | name        | names | Province or country                       | D | 0                                  |
|                  |           |             |       |   |   |                                    |
|                  |           |             |       |   |   |                                    |
| c) Residential a | ddress of | each indivi | dual  |   |   |                                    |

Complete Schedule 2 of this form providing the full residential address for each individual listed in Item 9(a) and (b) and attach to the completed report. Schedule 2 also requires information to be provided about control persons.

# ITEM 10 - CERTIFICATION

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

| securities regulatory aut          | nation below, I certify, on beh<br>hority or regulator, as applica | ible, that I have r | eviewed this r | nvestment fund manager, to th<br>eport and to my knowledge, h<br>o the extent required, complet | aving |
|------------------------------------|--|---------------------|----------------|---|-------|
| Name of Issuer/<br>investment fund | Greenway Greenhouse Can  | nabis Corporatio    | n              |   |       |
| manager/agent                      |  |                     |                |   |       |
| Full legal name                    | PEDDLE   | Dar                 | ren            |   |       |
|                                    | -<br>Family name   | First give          | en name        | Secondary given names   |       |
| Title                              | Chief Financial Officer  |                     |                |   |       |
| Telephone number                   | +1 (519) 712-0311  | Email address       | darrenp@gre    | enway.ca  |       |
| Signature                          | (signed) "Darren Peddle"   | Date                | 2023           | 07 28   |       |
|                                    |  |                     | YYYY           | MM DD   |       |

## ITEM 11 - CONTACT PERSON

*Provide the following business contact information for the individual that the securities regulatory authority or regulator may contact with any questions regarding the contents of this report, if different than the individual certifying the report in Item 10.* 

Same as individual certifying the report

| Full legal name  | MCKEAG            | Alicia             |                       |
|------------------|-------------------|--------------------|-----------------------|
|                  | Family name       | First given name   | Secondary given names |
| Title            | Counsel           |                    |                       |
| Name of company  | Aird & Berlis LLP |                    |                       |
| Telephone number | +1 (416) 865-7732 | Email address amcl | keag@airdberlis.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.

Schedules 1 and 2 may contain personal information of individuals and details of the distribution(s). The information in Schedules 1 and 2 will not be placed on the public file of any securities regulatory authority or regulator. However, freedom of information legislation may require the securities regulatory authority or regulator to make this information available if requested.

By signing this report, the issuer/underwriter confirms that each individual listed in Schedule 1 or 2 of the report who is resident in a jurisdiction of Canada:

- a) has been notified by the issuer/underwriter of the delivery to the securities regulatory authority or regulator of the information pertaining to the individual as set out in Schedule 1 or 2, that this information is being collected by the securities regulatory authority or regulator under the authority granted in securities legislation, that this information is being collected for the purposes of the administration and enforcement of the securities legislation of the local jurisdiction, and of the title, business address and business telephone number of the public official in the local jurisdiction, as set out in this form, who can answer questions about the security regulatory authority's or regulator's indirect collection of the information, and
- b) has authorized the indirect collection of the information by the securities regulatory authority or regulator.