Form 45-106F1 Report of Exempt Distribution (Non-investment fund issuer)

ITEM 1 – REPORT TYPE						
✓ New report						
Amended report If amended, provid	e Submission ID of report that is	being amended:	(Example: EDR1234567890-123)			
ITEM 2 – PARTY CERTIFYING 1	HE 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. Superior (Other than an investment fund)						
Underwriter						
ITEM 3 – ISSUER NAME AND O	THER IDENTIFIERS					
Provide the following information about to Full legal name	ne issuer, or if the issuer is an in	evestment fund, about the fu	nd.			
Element Nutritional Sciences Inc.						
Previous full legal name If the issuer's na	me changed in the last 12 mont	ths, provide most recent pre	vious legal name.			
Website (if applicable)						
If the issuer has a legal entity identifier, p	rovide below. Refer to Part B of	the Instructions for the defir	nition of "legal entity identifier".			
Legal entity identifier	\neg					
Did two or more co-issuers distribute a si	ngle security? ✓ No ☐ Yes					
If two or more issuers distributed a single	security, provide the full legal na	ame(s) of the co-issuer(s) of	her than the issuer named above.			
Full legal name(s) of co-issuer(s)						
ITEM 4 – UNDERWRITER INFO	RMATION					
If an underwriter is completing the report, provide the underwriter's full legal name and firm NRD number. Full legal name						
Does the Underwriter's Firm have an NRD Number? No Yes Firm NRD number						
If the underwriter does not have a firm Ni	RD number, provide the head off	ice contact information of the	e underwriter.			
Street address	Municipality	Province/State	Postal/ZIP code			
Country	Telephone number	Website (if applicable)				

ITEM 5 – ISSUER INFORMATION				
a) Primary industry				
Provide the issuer's North American Industry Classification Standard (NAICS) code (6 digits only) that in your reasonable judgment most closely corresponds to the issuer's primary business activity.				
NAICS industry code				
325410				
	dicate the stage of operations. This does not apply to issuers a nat best describes the issuer's stage of operations. ction	that provide services to issuers operating in		
	all or substantially all of its assets in any of the following? If yestellally business debt Consumer debt Private companies			
b) Number of employees				
√ 0 - 49	or more			
c) SEDAR profile number				
Does the issuer have a <u>SEDAR</u> profile? ☐ No ☑ Yes	screenshot of th	EDAR profile is a "private" profile, please provide a e issuer's profile by e-mail to ings@osc.gov.on.ca		
d) Head office address	If the issuer does not	have a SEDAR profile, complete Item 5(d) – (h).		
Street address	Municipality Province/State	Postal/ZIP code		
Country	Telephone number			
e) Date of formation and financial year	r-end			
Date of formation	Financial year-end			
f) Reporting issuer status				
Is the issuer a reporting issuer in any juriso ☐ No ☐ Yes	diction of Canada?			
If yes, select the jurisdictions of Canada in				
AII AB BC MB	NB NL NT			
NS NU ON PE	∐QC ∐SK ∐YT			
g) Public listing status				
Does the issuer have a CUSIP number?	CUSIP number (provide first 6 digits only)			
· · · · · · · · · · · · · · · · · · ·	name of the exchange on which the issuer's equity securities ps, for example, an automated trading system.	orimarily trade. Provide only the name of an		
Exchange name: Not Applicable Torc	onto Stock Exchange TSX Venture Exchange	Canadian Securities Exchange		
Aequitas Neo Exchange	stralian Securities Exchange Deutsche Boerse	Euronext		
London Stock Exchange	daq New York Stock Exchange	Shanghai Stock Exchange		
Shenzhen Stock Exchange Stoc	ck Exchange Of Hong Kong 🗌 Tokyo Stock Exchange	OTHER		
If other, describe:				
h) Size of issuer's assets				
financial statements for its first financial ye	ed on its most recently available annual financial statements (tear, provide the size of the issuer's assets at the distribution of	· · · · · · · · · · · · · · · · · · ·		
	I to under \$25M\$25M to under \$100M OM to under \$1B\$1B or over			

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 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 **End Date** 2021-06-18 2021-06-18

c) Detailed purchaser information

Complete Schedule 1 of this form for each purchaser and attach the schedule to the completed report.

Element_Sched1_June18.xlsx - 98 KB

d) Types of securities distributed

Provide the following information for all distributions reported on a per security basis. Refer to Part A(12) of the Instructions for how to indicate the security code. If providing the CUSIP number, indicate the full 9-digit CUSIP number assigned to the security being distributed.

				Canadian \$	
Security code	CUSIP number	Number of securities	Single or lowest price	Highest price	Total amount
UBS		8,334,000.0000	0.6000		5,000,400.0000
Description of security: Units consisting of one common share and one-half of one common share purchase warrant.					

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.

Not Applicable

Convertible / exchangeable	•	(Canadian \$)		Expiry date (YYYY-MM-DD)	Conversion ratio
security code	code	Lowest	Highest	,	
WNT	CMS	1.0000		2023-06-18	
Describe other terms: (if applicable)					

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 of Canada, state the province or territory, otherwise state country.

Province or country	Exemption relied on	No. of unique purchasers ^{2a}	Total amount (Canadian \$)		
British Columbia	NI 45-106 2.3 [Accredited investor]	60	2,939,400.0000		
Alberta	NI 45-106 2.3 [Accredited investor]	13	301,800.0000		
Saskatchewan	NI 45-106 2.3 [Accredited investor]	2	54,000.0000		
Ontario	NI 45-106 2.3 [Accredited investor]	14	949,200.0000		
United Kingdom NI 45-106 2.3 [Accredited investor]		1	9,000.0000		
Costa Rica NI 45-106 2.3 [Accredited investor]		1	18,000.0000		
Cayman Islands Other – describe 1 60,00					
Other exemption: Distributions to purchasers outside of local jurisdiction (BC, AB, NB)					

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Germany	NI 45-106 2.3 [Accredited investor]	4	327,000.0000			
Netherlands	NI 45-106 2.3 [Accredited investor]	1	30,000.0000			
Austria	NI 45-106 2.3 [Accredited investor]	1	120,000.0000			
Panama	NI 45-106 2.3 [Accredited investor]	2	120,000.0000			
Israel	NI 45-106 2.3 [Accredited investor]	1	60,000.0000			
China	Other – describe	1	12,000.0000			
Other exemption: Distributions to purchasers outside of local jurisdiction (BC, AB, NB)						
	Total dollar amount of securities distributed 5,000,400.0000					
	Total number of unique purchasers ^{2b} 102					

^{2a}In calculating the number of unique purchasers per row, count each purchaser only once. Joint purchasers may be counted as one purchaser.

^{2b}In calculating the total number of unique purchasers to which the issuer distributed securities, count each purchaser only once, regardless of whether the issuer distributed multiple types of securities to, and relied on multiple exemptions for, that purchaser.

ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION

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.

√ Not Applicable

	Description	Date of document or other material	Previously filed with or delivered to regulator?	,	Filename
1.			\square Y \square N		

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 No ✓ Yes	Indicate whether any compensation was paid, or will be paid, in connection with the distribution. ☐ No ☑ Yes					
PERSON 1						
a) Name of person compensation	ted and registratio	n status				
Indicate whether the person compensated is a registrant. ☐ No ☑ Yes						
If the person compensated is an Family name	If the person compensated is an individual, provide the full legal name of the individual. Family name Secondary given names					
If the person compensated is not Full legal name of non-individual	an individual, provi	de the following inforn	nation.	Firm NRD number (if	annlicable)	
Canaccord Genuity Corp.				900		
Indicate whether the person com ✓ No ☐ Yes	pensated facilitated	the distribution throu	gh a funding	portal or an internet-ba	ased portal.	
b) Business contact information	on					
If a firm NRD number is not prov	ided in Item 8(a), pr	ovide the business co	ontact inform	ation of the person bei	ing compensated.	
Street address	Municipa	ality	Province/Sta	te	Postal/ZIP code	
Country	Telephoi	ne number	Email addre	SS		
c) Relationship to issuer or in	vestment fund ma	nager				
Indicate the person's relationship Part B(2) of the Instructions and Connected with the issuer or in	the meaning of "cor	ntrol" in section 1.4 of	NI 45-106 fo		pleting this section	1.
Insider of the issuer (other tha	n an investment fun	d)	✓ None	e of the above		
Director or officer of the invest	ment fund or investr	ment fund manager				
d) Compensation details						
Provide details of all compensation Canadian dollars. Include cast for services incidental to the distabout, or report on, internal allocations.	h commissions, sec tribution, such as cle	urities-based compen erical, printing, legal c	nsation, gifts, or accounting	discounts or other con services. An issuer is	mpensation. Do no not required to as	t report payments k for details
Cash commissions paid	350,028.0000					
Value of all securities distributed as	0.0000	Security code1 WN	T See	curity code2 CMS	Security code	93
compensation ⁴		Describe terms of wa	· ·			
		share at \$0.60 for 24 208,334 Common Sh	1 months.	ach Underwriter Warra	nt is exercisable in	ito one common
Other compensation ⁵		Describe				
Total compensation Paid	350,028.0000					
Check box if the person will o	or may receive any o	deferred compensation	n (describe th	e terms below)		

⁴ Provide the aggregate value of all securities distributed as compensation, excluding options, warrants or other rights exercisable to acquire additional securities of the issuer. Indicate the security codes for all securities distributed as compensation, including options, warrants or other rights exercisable to acquire additional securities of the issuer.

 $^{5}\,\mathrm{Do}$ not include deferred compensation.

ITEM 9 – D	IRECTORS, EXECUTIVE OFFICERS	S AND PROMOTERS OF 1	THE ISSUER				
Indicate whet	her the issuer is any of the following (select the	one that applies - if more than on	e applies, select only one).				
Reporting	issuer in any jurisdiction of Canada						
Foreign p	ublic issuer						
•	Wholly owned subsidiary of a reporting issuer in any jurisdiction of Canada ⁶ Provide name of reporting issuer						
Wholly ow	Wholly owned subsidiary of a foreign public issuer ⁶						
	ame of foreign public issuer						
	tributing only eligible foreign securities and the	•	•				
⁶ An issue securities ⁷ Check th	uer is at least one of the above, do not com r is a wholly owned subsidiary of a reporting is that are required by law to be owned by its dire his box if it applies to the current distribution eve efer to the definitions of "eligible foreign securit	suer or a foreign public issuer if all ectors, are beneficially owned by t ren if the issuer made previous dis	Il of the issuer's outstanding voting se the reporting issuer or the foreign pub stributions of other types of securities	olic issuer, respectively.			
☐ If the issu	uer is none of the above, check this box an	d complete Item 9(a) – (c).					
a) Directors	executive officers and promoters of the iss	suer					
	llowing information for each director, executive wise state the country. For "Relationship to iss			he province or			
Individual?	Organization or company name	Family name First given name Secondary given name	Business location of non-individual or residential jurisdiction of individual	Relationship to issuer (select all that apply)			
YN				□D □O □P			
b) Promoter	information						
	r listed above is not an individual, provide the f a, state the province or territory, otherwise state						
	Organization or company name	Family name First given name Secondary given name	Residential jurisdiction of individual	Relationship to promoter (select one or both if applicable)			
				□ D □ O			
c) Residenti	al address of each individual						
Complete Schedule 2 of this form providing the full residential address for each individual listed in Item 9(a) and (b) and attach to the completed report. Schedule 2 also requires information to be provided about control persons.							

ITEM 10 - CERTIFICATION

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

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

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

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

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

By completing the information below, I certify, on behalf of the issuer/underwriter, 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/agent Ele	Element Nutritional Sciences Inc.			
Full legal name - Family name	First given na	ame		Secondary given names
Lowther	Stuart			
Title		Telephone n	number	Email address
President, CEO and Chairman		8553481970	0	slowther@elementnutrition.com
Signature "Stuart Lowther"		Date 2021	1-06-28	

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 - Family name	Secondary given names		Title			
Fast	Brian			Partner		
Name of company Telephone number Email address						
Miller Thomson LLP	6046431238	bfast@millerthomson.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 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.

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Submission ID	Date