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).									
☐ 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 Defence Therapeutics Inc. / Défense Therapeutique Inc.									
Previous full legal name									
If the issuer's name changed in the last 12 months, provide most recent previous legal name.									
Website www.defencetherapeutics.com (if applicable)									
If the issuer has a legal entity identifier, provide below. Refer to Part B of the Instructions for the definition of "legal entity identifier".									
Legal entity identifier 549300U5U2MATUHDMW57									
If two or more issuers distributed a single security, provide the full legal name(s) of the co-issuer(s) other than the issuer named above.									
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)									
SEDAR+ profile number									

ITEM 5 - ISSUER INFORMATION
If the issuer is an investment fund, do not complete Item 5. Proceed to Item 6.
a) Primary industry
Provide the issuer's North American Industry Classification Standard (NAICS) code (6 digits only) that in your reasonable judgment most closely corresponds to the issuer's primary business activity.
NAICS industry code 000000
If the issuer is in the mining industry , indicate the stage of operations. This does not apply to issuers that provide services to issuers operating in the mining industry. Select the category that best describes the issuer's stage of operations.
☐ Exploration ☐ Development ☐ Production
Is the issuer's primary business to invest all or substantially all of its assets in any of the following? If yes, select all that apply.
☐ Mortgages ☐ Real estate ☐ Commercial/business debt ☐ Consumer debt ☐ Private companies
☐ Cryptoassets
b) Number of employees
Number of employees: ☑ 0 - 49 ☐ 50 - 99 ☐ 100 - 499 ☐ 500 or more
c) SEDAR+ profile number
Provide the issuer's SEDAR+ profile number
000050612
ITEM 6 - INVESTMENT FUND ISSUER INFORMATION
If the issuer is an investment fund, provide the following information.
a) Investment fund manager information
Full legal name
Firm NRD number (if applicable)
SEDAR+ profile number
b) Type of investment fund
Type of investment fund that most accurately identifies the issuer (select only one).
☐ Money market ☐ Equity ☐ Fixed income ☐ Balanced
☐ Alternative strategies ☐ Cryptoasset ☐ Other (describe)

Indicate whether one or k	Indicate whether one or both of the following apply to the investment fund.								
☐ Invest primarily in o	ther investment fund iss	suers							
☐ Is a UCITs Fund ¹									
	re Investment of Transferable S	-				ean Ur	าion (El	IJ) directives	
that allow collective investmer	nt schemes to operate througho	out the EU on a pa	ssport basis on authoriz	ation from one men	nber state.				
c) Net asset valu	ue (NAV) of the invest	ment fund							
Select the NAV range of th	he investment fund as of t	he date of the r	most recent NAV calc	ulation (Canadio	an \$).				
Under \$5M	☐ \$5M tc	under \$25M	☐ \$25M to und	er \$100M	Date of l	NAV c	:alcula	ation:	
□ +400M; I +50			□ * 45						
\$100M to under \$50	J0M ☐ \$500M	1 to under \$1B	☐ \$1B or over		YYYY		MM	DD	
ITEM 7 INCORM	ATION ABOUT THE	- DICTRIBI	ITION						
ITEM 7 - INFORM	VIION AROUT THI	E DISTRIBU	JIION						
	de of Canada completes a								
,	asers resident in that juris	•	•				, ,	,	
	fees, in connection with th th the information provide			sea m nem 8. m	ie injormo	itiori p	orovia	ea m	
a) Currency	, ,		, ,						
u) currency									
Select the currency or curdollars.	rrencies in which the distr	ibution was ma	ade. All dollar amour	its provided in th	ne report i	nust l	be in (Canadian	
Canadian dollar	☐ US dollar ☐ Eu	uro Other (d	describe)						
b) Distribution (dates								
	rt and end dates. If the repoth the start and end dat								
	l dates for the distribution	•	• • •	urities distribue	a on a cor	itiiiuo	่นร มน	313,	
Start date	2024 01 3	30	End date	2024	01 3	30			
Start date		DD	Liid date	YYYY		DD			
c) Detailed purc	haser information								
Complete Schedule 1 of	f this form for each purc	haser and att	ach the schedule to	the completed	report.				
d) Types of secu	urities distributed								
				5.6.1.5.11	(40) (41				
	ormation for all distribution ode. If providing the CUSIF	•	•	•	-			-	
distributed.	raci ij promama are econ		are the juin of alight ex		.6.700.00				
					Canadia	n \$			
Security CUSIP			Number of	Single or	Highe	st			
code number (if	Description of se	curity	securities	lowest price	price		Total	amount	

567,000.0000

1.5000

850,500.0000

applicable)

Units, each is consisted of one co

UBS

mmon share of the Issuer and on		
e common share purchase warra		
nt.		

e) Details of rights and convertible/exchangeable securities

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

Convertible / exchangeable	Underlying security code	Exercise price (Canadian \$)		Expiry date (YYYY-MM-DD)	Conversion ratio	Describe other terms (if applicable)
security code	security code	Lowest	owest Highest	,		аррисаые)
WNT	CMS	2.0000		2026-01-30	1:1	

f) Summary of the distribution by jurisdiction and exemption

State the total dollar amount of securities distributed and the number of purchasers for each jurisdiction of Canada and foreign jurisdiction where a purchaser resides and for each exemption relied on in Canada for that distribution. However, if an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include distributions to purchasers resident in that jurisdiction of Canada only.

This table requires a separate line item for: (i) each jurisdiction where a purchaser resides, (ii) each exemption relied on in the jurisdiction where a purchaser resides, if a purchaser resides in a jurisdiction of Canada, and (iii) each exemption relied on in Canada, if a purchaser resides in a foreign jurisdiction.

For jurisdictions within Canada, state the province or territory, otherwise state the country.

Province or country	Exemption relied on	Number of unique purchasers ^{2a}	Total amount (Canadian \$)				
British Columbia	NI 45-106 2.3 [Accredited investor]	2	850,500.0000				
	Total dollar amount of securities distributed						
	Total number of unique purchasers ^{2b}	2					

^{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.

^{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) (in Québec, Regulation 45-106 respecting Prospectus Exemptions) 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 If yes, indicate number of persons compensated. | 1 ✓ Yes 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 names If the person compensated is not an individual, provide the following information. Full legal name of non-individual Canaccord Genuity Corp./Corporation Canaccord Genuity Firm NRD number 900 (if applicable) Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal **V** No Yes 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 compensated. Street address | 609 Granville St., Suite 2200 Municipality Vancouver Province/State British Columbia Country Canada Postal code/Zip code V7Y1H2 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 'connected' in Part B(2) of the Instructions and the meaning of 'control' in section 1.4 of NI 45-106 (in Québec, Regulation 45-106 respecting Prospectus Exemptions) for the purposes of completing this section. 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 Provide all amounts in Canadian dollars. Include cash concompensation. Do not report payments for services incides services. An issuer is not required to ask for details about, or employees of a non-individual compensated by the issu	nmissions, securitie ntal to the distribut or report on, intern	s-based compensat ion, such as clerical	ion, gifts, discounts , printing, legal or a	or other accounting
Cash commissions paid	68040		7	
Value of all securities distributed as compensation ⁴	0			
	Security code 1	Security code 2	Security code 3	
Security codes	WNT			
Describe terms of warrants, options or other rights ${\it Other compensation}\ ^{5}$	I	varrants exercisabl years from the dat		
Describe				
			_	
Total compensation paid	68040			
☐ Check box if the person will or may receive any def	ferred compensati	on (describe the te	erms below)	
⁴ Provide the aggregate value of all securities distributed as compensa securities of the issuer. Indicate the security codes for all securities dis acquire additional securities of the issuer. ⁵ Do not include deferred compensation.				
ITEM O DIDECTORS EVECUTIVE OFFICE	DC AND DDA	AOTERS OF T	UE ICCUED	
ITEM 9 – DIRECTORS, EXECUTIVE OFFICE If the issuer is an investment fund, do not complete It			HE ISSUEK	
Indicate whether the issuer is any of the following (select t	he one that applies	– if more than one	applies, select only	one).
✓ Reporting issuer in a jurisdiction of Canada				
Foreign public issuer				
☐ Wholly owned subsidiary of a reporting issuer in a	ny jurisdiction of C	anada ⁶		1
Provide name of reporting issuer				
☐ Wholly owned subsidiary of a foreign public issuer	6			
Provide name of foreign public issuer				
☐ Issuer distributing only eligible foreign securities a	nd the distribution	is to permitted cli	ents only ⁷ .	
If the issuer is at least one of the above, do not compl	ete Item 9(a) – (c).	Proceed to Item 1	0.	
⁶ An issuer is a wholly owned subsidiary of a reporting issues a character than securities that are required by law to		• •		-

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

,			•	issuer made previous distributions of ot security" and "permitted client" in Part B	3,
☐ If the issuer is n	one of the	above, che	eck this box and	complete Item 9(a) – (c).	
a) Directors, e	xecutive (officers an	d promoters o	f the issuer	
, ,	,		,,	icer and promoter of the issuer. For loca nship to issuer", "D" – Director, "O" – Exe	
Organization or	Family	First	Secondary	Business location of non-individual or residential jurisdiction of	Relationship to issuer

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

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		Secondary given	Residential jurisdiction of individual	Relationship to pone or both	promoter (select if applicable)
company name	name	name	Province or country	D	О	

c) Residential address of each individual

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

ITEM 10 - CERTIFICATION

Provide the following certification and business contact information of an officer, director or agent of the issuer or underwriter. If the issuer or underwriter is not a company, an individual who performs functions similar to that of a director or officer may certify the report. For example, if the issuer is a trust, the report may be certified by the issuer's trustee. If the issuer is an investment fund, a director or officer of the investment fund manager (or, if the investment fund manager is not a company, an individual who performs similar 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 exercised reasonable dil	of exempt distribution. nation below, I certify, on beh hority or regulator, as applica igence, the information provi	able, that I have r	eviewed this	report	and to	my knowledge, having	7	
Name of Issuer/ investment fund Defence Therapeutics Inc.								
manager/agent								
Full legal name	PLOUFFE	Seba	Sebastien					
	Family name	First give	en name	•	Seconda	ary given names		
Title	CEO							
Telephone number	+1 (514) 947-2272	Email address	sebas.plouff	e@gma	ail.com			
Signature	Sebastien Plouffe	Date	2024	02	08			
	,		YYYY	MM	DD			

ITEM 11 - C (DNT	ACT P	PERSON
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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	CHARACHIAN	Jessica				
	Family name	First given name	Secondary given names			
Title	Paralegal					
Name of company	MCMILLAN LLP/MCMILLAN SENCRL					
Telephone number		Email address jessica.charachian@mcmillan.ca				

NOTICE - COLLECTION AND USE OF PERSONAL INFORMATION

The personal information required under this form is collected on behalf of and used by the securities regulatory authority or regulator under the authority granted in securities legislation for the purposes of the administration and enforcement of the securities legislation. If you have any questions about the collection and use of this information, contact the securities regulatory authority or regulator in the local jurisdiction(s) where the report is filed, at the address(es) listed at the end of this form.

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

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

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