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

ITEM 1 – REPORT TYPE
✓ New report
Amended report If amended, provide Submission ID of report that is being amended: (Example: EDR1234567890-123)
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. 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
Delta CleanTech Inc.
Previous full legal name If the issuer's name changed in the last 12 months, provide most recent previous legal name.
Website (if applicable)
https://deltacleantech.ca/
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
Did two or more co-issuers distribute a single security? VNO Ves
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)

ITEM 4 – UNDERWRITER INFORMATION

If an underwriter is completing the report, Full legal name	provide the underw	vriter's full leg	gal name and firm NRD number	
Does the Underwriter's Firm have an NRD No Yes If the underwriter does not have a firm NF		Firm NRD n		ndanuritar
Street address	Municipality	e ine neau on	Province/State	Postal/ZIP code
Country	Telephone numb	ber	Website (if applicable)	

ITEM 5 – ISSUER INFORMATION							
a) Primary industry							
Provide the issuer's North American Indus corresponds to the issuer's primary busin		NCS) code (6 digits only) that in	your reasonable judgment most closely				
NAICS industry code							
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.							
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 N/A							
b) Number of employees							
√ 0 - 49 50 - 99 100 - 499 500	or more						
c) SEDAR profile number							
Does the issuer have a <u>SEDAR</u> profile ? ☑No □ Yes	If yes, provide SEDAR profile	screenshot of the	DAR profile is a "private" profile, please provide a e issuer's profile by e-mail to ngs@osc.gov.on.ca				
d) Head office address		If the issuer does not h	ave a SEDAR profile, complete Item 5(d) – (h).				
Street address	Municipality	Province/State	Postal/ZIP code				
#002 2305 Victoria Ave.	Regina	Saskatchewan	S4P 0S7				
Country	Telephone number						
Canada	(306) 352-6132						
e) Date of formation and financial yea	r-end						
Date of formation	Financial year-end						
2020-12-22	12-31						
f) Reporting issuer status							
Is the issuer a reporting issuer in any juris ☑No □ Yes	diction of Canada?						
If yes, select the jurisdictions of Canada in	n which the issuer is a reporting	g issuer.					
NS NU ON PE	QC SK YT						
g) Public listing status							
Does the issuer have a CUSIP number?	CUSIP number (provide first	t 6 digits only)					
	name of the exchange on which	the issuer's equity securities pr	rimarily trade. Provide only the name of an				
exchange and not a trading facility such a Exchange name:	s, for example, an automated tr	rading system.					
✓ Not Applicable	onto Stock Exchange	TSX Venture Exchange	Canadian Securities Exchange				
Aequitas Neo Exchange	tralian Securities Exchange	Deutsche Boerse	Euronext				
London Stock Exchange	daq	New York Stock Exchange	Shanghai Stock Exchange				
Shenzhen Stock Exchange Sto	ck Exchange Of Hong Kong]Tokyo Stock Exchange	OTHER				
If other, describe:							
h) Size of issuer's assets							
Select the size of the issuer's assets base	ed on its most recently available	e annual financial statements (C	Canadian \$). If the issuer has not prepared annual				
financial statements for its first financial y			,				
	0M to under \$1B	\$1B or over					

ITEM 7 – INFORMATION A	BOUT THE D	DISTRIBUTIO	DN .				
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 Canadian dollar US dollar			le. All dollar amour	nts provided in the rep	ort must be in Can	adian dollars.	
b) Distribution date(s)							
State the distribution start and end date as both the start and end date the distribution period covered by the Start DateStart DateEnd I2021-01-272021	es. If the report i he report.						
c) Detailed purchaser information	on						
Complete Schedule 1 of this form	n for each purcl	haser and attac	h the schedule to	the completed repo	rt.		
Attach the completed Excel file	here	I		-			
d) Types of securities distribute	d						
Provide the following information fo code. If providing the CUSIP numb						or how to indicate the security	
					Canadian \$		
Security code		CUSIP number	Number of securities	Single or lowest price	Highest price	Total amount	
UBS			38,350,000.0000	0.2000	0.2000	7,670,000.0000	
Description of security: Unit, each	n consisting of o	ne common sha	re and one-half co	mmon share purchase	warrant		
e) Details of rights and converting If any rights (e.g. warrants, options) securities were distributed, provide) were distribute	d, provide the e.					
	Evereice p	rico					
Convertible / Underlying exchangeable security	Exercise p (Canadian		Expiry date (YYYY-MM-DD)		Conversion ra	tio	
security code L	.owest	Highest					
WNT CMS	0.5000	0.5000	2025-01-27	1 to 1			
Describe other terms: Expiry date (if applicable)	subject to acce	eleration.					
WNT CMS	0.2000	0.2000	2025-01-27	1 to 1			
Describe other terms: Expiry date (if applicable)	subject to acce	eleration.					
f) Summary of the distribution k	••				-		
State the total dollar amount of sec purchaser resides and for each exe distribution in a jurisdiction of Cana This table requires a separate line i resides, if a purchaser resides in a For jurisdictions within of Canada, s	emption relied or ada, include disti item for (i) each jurisdiction of C	n in Canada for ributions to purc jurisdiction whe anada, and (iii)	that distribution. He hasers resident in re a purchaser resi each exemption re	owever, if an issuer loo that jurisdiction of Car ides (ii) each exemptio lied on in Canada, if a	cated outside of Č nada only. n relied on in the j purchaser resides	anada completes a urisdiction where a purchaser	
Province or country		Exer	nption relied on		No. of unique purchasers ^{2a}	Total amount (Canadian \$)	
Alberta	NI 45-106 2.3 [Accredited inve	stor]		11	530,000.0000	
British Columbia	NI 45-106 2.3 [Accredited inve	stor]		22	995,000.0000	
Ontario	NI 45-106 2.3 [Accredited inve	stor]		45	4,840,000.0000	

Saskatchewan

NI 45-106 2.3 [Accredited investor]

4

600,000.0000

Saskatchewan	INI 45-106 2.3 [Accredited investor]		4	600,000.0000				
United Arab Emirates	NI 45-106 2.3 [Accredited investor]	NI 45-106 2.3 [Accredited investor]						
Bahamas	NI 45-106 2.3 [Accredited investor]		1	125,000.0000				
Thailand	NI 45-106 2.3 [Accredited investor]		1	100,000.0000				
Cayman Islands	NI 45-106 2.3 [Accredited investor]		2	100,000.0000				
Hong Kong	NI 45-106 2.3 [Accredited investor]		4	110,000.0000				
Panama	NI 45-106 2.3 [Accredited investor]		1	20,000.0000				
	Total dollar amount of securities distributed							
	Total number of unique purchasers ^{2b} 92							
² aln calculating the number of unique nurchasers per row, count each nurchaser only once. Joint nurchasers may be counted as one nurchaser								

^{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	document or other material	filed with or delivered to regulator?	Previously filed Submission ID	Filename
		Y N		
		•	other material delivered to regulator?	other material delivered to regulator?

connection with the distributi	person (as defined in NI 45-106) to whor ion. Complete additional copies of thi		on was, or will be, compensated.	
	nsation was paid, or will be paid, in conn			
PERSON 1				
a) Name of person compe	ensated and registration status			
Indicate whether the person ☐ No ☑ Yes	compensated is a registrant.			
If the person compensated is	s an individual, provide the full legal nam	e of the individual.		
Family name	First given name	Secondary given nan	nes	
If the person compensated is	s not an individual, provide the following	information.		
Full legal name of non-individ	dual	Firm NRD nu		
			mber <i>(if applicable)</i>	
Liberty North Capital Corp.		46570	mber (ir applicable)	
	compensated facilitated the distribution	46570		
Indicate whether the person	compensated facilitated the distribution	46570		
Indicate whether the person √No Yes b) Business contact inform	compensated facilitated the distribution	46570 through a funding portal or an ini	ternet-based portal.	
Indicate whether the person √No Yes b) Business contact inform If a firm NRD number is not	compensated facilitated the distribution	46570 through a funding portal or an ini	ternet-based portal.	
Indicate whether the person √No Yes b) Business contact inform If a firm NRD number is not	compensated facilitated the distribution mation provided in Item 8(a), provide the busine	46570 through a funding portal or an int ess contact information of the pe	ternet-based portal. rson being compensated.	
Indicate whether the person √No Yes b) Business contact inform If a firm NRD number is not Street address	compensated facilitated the distribution mation provided in Item 8(a), provide the busine	46570 through a funding portal or an int ess contact information of the pe	ternet-based portal. rson being compensated.	
Indicate whether the person √No Yes b) Business contact inform If a firm NRD number is not Street address	compensated facilitated the distribution mation provided in Item 8(a), provide the busine Municipality	46570 through a funding portal or an int ess contact information of the pe Province/State	ternet-based portal. rson being compensated.	
Indicate whether the person ✓ No Yes b) Business contact inform If a firm NRD number is not Street address Country	compensated facilitated the distribution mation provided in Item 8(a), provide the busine Municipality	46570 through a funding portal or an int ess contact information of the pe Province/State	ternet-based portal. rson being compensated.	
Indicate whether the person ✓ No Yes b) Business contact inform If a firm NRD number is not Street address Country c) Relationship to issuer of	compensated facilitated the distribution mation provided in Item 8(a), provide the busine Municipality Telephone number	46570 through a funding portal or an int ess contact information of the pe Province/State Email address	ternet-based portal. rson being compensated. Postal/ZIP code	
Indicate whether the person ✓ No Yes b) Business contact inform If a firm NRD number is not Street address Country c) Relationship to issuer of Indicate the person's relation	compensated facilitated the distribution mation provided in Item 8(a), provide the busine Municipality Telephone number	46570 through a funding portal or an int ess contact information of the pe Province/State Email address Email address	ternet-based portal. rson being compensated. Postal/ZIP code	
Indicate whether the person Indicate whether the person Indicate whether the person If a firm NRD number is not Street address Country C) Relationship to issuer Indicate the person's relation Part B(2) of the Instructions	compensated facilitated the distribution mation provided in Item 8(a), provide the busine Municipality Telephone number or investment fund manager	46570 through a funding portal or an int ess contact information of the pe Province/State Email address Email address manager (select all that apply). F 1.4 of NI 45-106 for the purposes	ternet-based portal. rson being compensated. Postal/ZIP code	
Indicate whether the person Indicate whether the person Indicate whether the person If a firm NRD number is not Street address Country C) Relationship to issuer Indicate the person's relation Part B(2) of the Instructions	compensated facilitated the distribution a mation provided in Item 8(a), provide the busine Municipality Telephone number or investment fund manager nship with the issuer or investment fund is and the meaning of "control" in section of ror investment fund manager	46570 through a funding portal or an int ess contact information of the pe Province/State Email address Email address manager (select all that apply). F 1.4 of NI 45-106 for the purposes	ternet-based portal. rson being compensated. Postal/ZIP code Refer to the meaning of "connected" in s of completing this section.	
Indicate whether the person ✓ No Yes b) Business contact inform If a firm NRD number is not Street address Country c) Relationship to issuer Indicate the person's relation Part B(2) of the Instructions Connected with the issuer Insider of the issuer (othe	compensated facilitated the distribution a mation provided in Item 8(a), provide the busine Municipality Telephone number or investment fund manager nship with the issuer or investment fund is and the meaning of "control" in section of ror investment fund manager	46570 through a funding portal or an integration of the performation of the performation of the performation of the performant address Email address Email address Integration of the performant address Email address Email address Integration of the performant address Integration of the performant address Integration of the performant address Integration of the performant address Integration of the address	ternet-based portal. rson being compensated. Postal/ZIP code Refer to the meaning of "connected" in s of completing this section.	

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.

\checkmark	Cash commissions paid	14,000.0000							
\checkmark	Value of all securities distributed as compensation ⁴	0.0000	Security code1 WNT Security code2 Security code3 Describe terms of warrants, options or other rights Each to purchase one common share at an exercise price of \$0.20.						
	Other compensation ⁵		Describe						
	Total compensation Paid	14,000.0000							
	Check box if the person will or may receive any deferred compensation (describe the terms below)								

	the security codes i f the issuer.	•	n, excluding options, warrants or oth ibuted as compensation, including c	-	-
	isalion.				
PERSON 2					
a) Name of person compensa	ted and registratio	on status			
Indicate whether the person com	pensated is a regis	trant.			
If the person compensated is an		-	the individual.		
Family name	First giv	en name	Secondary given names		
If the person compensated is not	an individual provi	ide the following infor	mation		
Full legal name of non-individual			Firm NRD number <i>(if</i>	f applicable)	
PowerOne Capital Markets Limit	ed		17010		
Indicate whether the person com	pensated facilitated	I the distribution throu	igh 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), p	rovide the business c	ontact information of the person be	ing compensated.	
Street address	Municip	ality	Province/State	Postal/ZIP code	
Country	Telepho	ne number	Email address		
-) Deletienskin te inseen en in					
c) Relationship to issuer or in	vestment fund ma	inager			
	the meaning of "co	ntrol" in section 1.4 o	ager (select all that apply). Refer to f NI 45-106 for the purposes of com Employee of the issuer or i	pleting this section.	
Insider of the issuer (other that	n an investment fun	ıd)	\checkmark None of the above		
Director or officer of the invest	ment fund or invest	ment fund manager			
d) Compensation details					
in Canadian dollars. Include cash for services incidental to the dist	h commissions, sec ribution, such as cl	urities-based compe erical, printing, legal	ntified in Item 8(a) in connection with nsation, gifts, discounts or other co or accounting services. An issuer is ficers or employees of a non-indivio	mpensation. Do not not required to ask	report payments for details
Cash commissions paid	35,000.0000				
Value of all securities distributed as	0.0000	Security code1 WN	T Security code2	Security code3	
compensation ⁴			arrants, options or other rights	i	
		Each to purchase of	ne common share at an exercise pr	ice of \$0.20.	
Other compensation ⁵		Describe			
Total compensation Paid	35,000.0000				
Check box if the person will c	or may receive any	deferred compensatio	on (describe the terms below)		
	the security codes	•	n, excluding options, warrants or oth ibuted as compensation, including c	-	-

⁵ Do not include deferred compensation.

⁵ Do not include	deferred	compensation.
-----------------------------	----------	---------------

⁵ Do not include deferred comper	nsation.							
PERSON 3								
a) Name of person compensat	ed and registratio	on status						
Indicate whether the person com ☐ No ✓ Yes	pensated is a regist	trant.						
If the person compensated is an Family name		he full legal name of a en name		<i>dual.</i> condary given name	es			
If the person compensated is not Full legal name of non-individual	an individual, provi	de the following inforr	mation.	Firm NRD num	nber <i>(if ap</i>	olicable)		
Haywood Securities Inc.				1630				
Indicate whether the person com √No Yes	pensated facilitated	the distribution throu	gh a func	ling portal or an inte	ernet-based	d portal.		
b) Business contact information	on							
If a firm NRD number is not prov	ided in Item 8(a), pr	ovide the business c	ontact inf	ormation of the pers	son being	compensated.		
Street address	Municip	ality	Province	e/State	Po	stal/ZIP code		
0								
Country	reiepno	ne number	Email ad	101622				
c) Relationship to issuer or in	vestment fund ma	nager						
Indicate the person's relationship		-						
Connected with the issuer or in Insider of the issuer (other tha Director or officer of the invest	n an investment fun	d)	_	Employee of the issu	uer or inve	stment fund mana	ager	
d) Compensation details								
Provide details of all compensation in Canadian dollars. Include cash for services incidental to the dist about, or report on, internal alloc	n commissions, sec ribution, such as cle	urities-based comper erical, printing, legal o	nsation, g or accour	ifts, discounts or ot ting services. An is	her compe suer is not	ensation. Do not r t required to ask i	eport paymei for details	
Cash commissions paid	10,500.0000							
Value of all securities distributed as	0.0000	Security code1 WN	Т	Security code2		Security code3		
compensation ⁴		Describe terms of wa		-		(\$2.22		
		Each to purchase or	ne commo	on snare at an exer	cise price	51 \$0.20.		
Other compensation ⁵		Describe						
Total compensation Paid	10,500.0000							
Check box if the person will o	r may receive any o	deferred compensatio	n (descril	be the terms below)				
⁴ Provide the aggregate value of securities of the issuer. Indicate to acquire additional securities of	the security codes f							

⁵ Do not include deferred compensation.

PERSON 4

Indicate whether the person com	pensated is a regis	trant.					
<i>If the person compensated is an</i> Family name	•	the full legal name of ren name	the individual. Secondary given names				
If the person compensated is not	an individual, provi	ide the following infor	mation.				
Full legal name of non-individual		-	Firm NRD number	(if applicable)			
Gravitas Securities Inc.			26260				
Indicate whether the person com √No ☐ Yes	pensated facilitateo	I the distribution throu	gh a funding portal or an interne	t-based portal.			
b) Business contact information	on						
If a firm NRD number is not prov	ided in Item 8(a), pi	rovide the business c	ontact information of the person	being compensated.			
Street address	Municip	ality	Province/State	Postal/ZIP code			
Country	Telepho	ne number	Email address				
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 i Insider of the issuer (other tha Director or officer of the invest	the meaning of "con nvestment fund man n an investment fun	ntrol" in section 1.4 or nager Id)	f NI 45-106 for the purposes of c				
d) Compensation details							
in Canadian dollars. Include cash for services incidental to the dist about, or report on, internal alloc	h commissions, sec ribution, such as cl ation arrangements	curities-based competerical, printing, legal o	nsation, gifts, discounts or other or accounting services. An issue	with the distribution. Provide all amo compensation. Do not report payme r is not required to ask for details ividual compensated by the issuer.			
\checkmark Cash commissions paid	8,750.0000						
Value of all securities \checkmark distributed as	0.0000	Security code1 WN	T Security code2	Security code3			
✓ distributed as compensation ⁴			arrants, options or other rights ne common share at an exercise	price of \$0.20.			
Other compensation ⁵		Describe					
Total compensation Paid	8,750.0000						
Check box if the person will c	Check box if the person will or may receive any deferred compensation (describe the terms below)						
	the security codes i f the issuer.			other rights exercisable to acquire a g options, warrants or other rights e			
PERSON 5	ted and registration	on status					
a) Name of person compensa	-						
No Ves	-						
If the person compensated is an		-					
Family name	First giv	en name	Secondary given names				

Family name	First giv	en name	Sec	ondary given names			
If the person compensated is not an	individual, provi	de the following info	rmation.				
Full legal name of non-individual	, , , , , , , , , , , , , , , , , , ,	j		Firm NRD number (if a	pplicable)		
Canaccord Genuity Corp.				900			
Indicate whether the person comper	nsated facilitated	the distribution thro	ough a fundi	ng portal or an internet-bas	ed portal.		
b) Business contact information							
If a firm NRD number is not provide	d in Item 8(a) n	ovide the husiness	contact info	rmation of the person being	n compensated		
Street address	Municip		Province		Postal/ZIP code		
Country	Telepho	ne number	Email ad	tross			
				1633			
c) Relationship to issuer or inve	stment fund ma	nager					
Indicate the person's relationship wi Part B(2) of the Instructions and the Connected with the issuer or inve	e meaning of "cor	ntrol" in section 1.4	of NI 45-100		eting this section.		
Insider of the issuer (other than a	in investment fun	d)	√ N	one of the above			
Director or officer of the investme	nt fund or investr	ment fund manager					
d) Compensation details							
Provide details of all compensation in Canadian dollars. Include cash co for services incidental to the distribu- about, or report on, internal allocatio	ommissions, sec ution, such as cle	urities-based compo erical, printing, lega	ensation, gi I or account	ts, discounts or other comp ing services. An issuer is n	pensation. Do not re ot required to ask f	eport payme. or details	
Cash commissions paid	211,800.0000						
Value of all securities	0.0000	Security code1 W	NT	Security code2	Security code3		
✓ distributed as compensation ⁴		Describe terms of v	warrants, op	tions or other rights			
		Each to purchase one common share at an exercise price of \$0.20.					
Other compensation ⁵		Describe					
Total compensation Paid	211,800.0000	L					
Check box if the person will or n	nay receive any o	deferred compensati	ion (describ	e the terms below)			
⁴ Provide the aggregate value of all securities of the issuer. Indicate the to acquire additional securities of th ⁵ Do not include deferred compensa	security codes t ne issuer.						

Do not include deferred compensation.

	issuer in any jurisdiction of Canada			
Foreign pu	ublic issuer			
Wholly ow	ned subsidiary of a reporting issuer in any ju	rrisdiction of Canada ⁶		
Provide na	ame of reporting issuer			
] Wholly ow	med subsidiary of a foreign public issuer ⁶			
Provide na	ame of foreign public issuer			
] Issuer dist	tributing only eligible foreign securities and t	he distribution is to permitted clients	s only ⁷	
If the issu	uer is at least one of the above, do not co	omplete Item 9(a) – (c). Proceed t	o Item 10.	
	r is a wholly owned subsidiary of a reporting			
_	that are required by law to be owned by its o	, , ,	1 0 01	2 1
	nis box if it applies to the current distribution efer to the definitions of "eligible foreign secu			s to non-permitted
If the issues	uer is none of the above, check this box a	and complete Item 9(a) – (c).		
	, executive officers and promoters of the	issuer		
a) Directors,	•			
a) Directors, Provide the fo	llowing information for each director, executi	ve officer and promoter of the issue		the province or
a) Directors, Provide the fo	•	ve officer and promoter of the issue		•
a) Directors, Provide the fo erritory, other	Ilowing information for each director, executi	ive officer and promoter of the issue issuer", "D" – Director, "O" – Execut Family name	ive Officer, "P" – Promoter. Business location of	the province or Relationship to issuer
a) Directors, Provide the fo erritory, other	llowing information for each director, executi	ive officer and promoter of the issue issuer", "D" – Director, "O" – Execut Family name First given name	ive Officer, "P" – Promoter. Business location of non-individual or residential	Relationship to
a) Directors, Provide the fo erritory, other	Ilowing information for each director, executi	ive officer and promoter of the issue issuer", "D" – Director, "O" – Execut Family name	ive Officer, "P" – Promoter. Business location of	Relationship to
a) Directors, rovide the for prritory, other Individual?	Ilowing information for each director, executi	ive officer and promoter of the issue issuer", "D" – Director, "O" – Execut Family name First given name	ive Officer, "P" – Promoter. Business location of non-individual or residential	Relationship to issuer (select all that
a) Directors, Provide the for erritory, other Individual?	Ilowing information for each director, executi	ive officer and promoter of the issue issuer", "D" – Director, "O" – Execut Family name First given name Secondary given name	ive Officer, "P" – Promoter. Business location of non-individual or residential jurisdiction of individual	Relationship to issuer (select all that apply)
a) Directors, Provide the for erritory, other Individual?	Ilowing information for each director, executi	ive officer and promoter of the issue issuer", "D" – Director, "O" – Execut Family name First given name Secondary given name Kambeitz	ive Officer, "P" – Promoter. Business location of non-individual or residential jurisdiction of individual	Relationship to issuer (select all that apply)
a) Directors, Provide the for erritory, other Individual?	Ilowing information for each director, executi	ve officer and promoter of the issue issuer", "D" – Director, "O" – Execut Family name First given name Secondary given name Kambeitz Lionel	ive Officer, "P" – Promoter. Business location of non-individual or residential jurisdiction of individual Saskatchewan	Relationship to issuer (select all that apply) ✓D O P
a) Directors, Provide the for erritory, other Individual?	Ilowing information for each director, executi	ive officer and promoter of the issue issuer", "D" – Director, "O" – Execut Family name First given name Secondary given name Kambeitz Lionel Allison	ive Officer, "P" – Promoter. Business location of non-individual or residential jurisdiction of individual	Relationship to issuer (select all that apply)
a) Directors, Provide the fo erritory, other	Ilowing information for each director, executi	ve officer and promoter of the issue issuer", "D" – Director, "O" – Execut Family name First given name Secondary given name Kambeitz Lionel	ive Officer, "P" – Promoter. Business location of non-individual or residential jurisdiction of individual Saskatchewan	Relationship to issuer (select all that apply) ✓D O P
a) Directors, Provide the for erritory, other Individual?	Ilowing information for each director, executi	ive officer and promoter of the issue issuer", "D" – Director, "O" – Execut Family name First given name Secondary given name Kambeitz Lionel Allison	ive Officer, "P" – Promoter. Business location of non-individual or residential jurisdiction of individual Saskatchewan	Relationship to issuer (select all that apply) ✓D O P
a) Directors, Provide the forerritory, other Individual?	Ilowing information for each director, executi wise state the country. For "Relationship to	ive officer and promoter of the issue issuer", "D" – Director, "O" – Execut Family name First given name Secondary given name Kambeitz Lionel Allison	ive Officer, "P" – Promoter. Business location of non-individual or residential jurisdiction of individual Saskatchewan	Relationship to issuer (select all that apply) ✓D O P
a) Directors, Provide the fo. erritory, other Individual?	Ilowing information for each director, executi wise state the country. For "Relationship to	ive officer and promoter of the issue issuer", "D" – Director, "O" – Execut Family name First given name Secondary given name Kambeitz Lionel Allison Jeffrey Bernakevitch	ive Officer, "P" – Promoter. Business location of non-individual or residential jurisdiction of individual Saskatchewan Alberta	Relationship to issuer (select all that apply) ✓D O P
a) Directors, Provide the fo. erritory, other Individual?	Ilowing information for each director, executi wise state the country. For "Relationship to	ive officer and promoter of the issue issuer", "D" – Director, "O" – Execut Family name First given name Secondary given name Kambeitz Lionel Allison Jeffrey	ive Officer, "P" – Promoter. Business location of non-individual or residential jurisdiction of individual Saskatchewan Alberta	Relationship to issuer (select all that apply) ✓D O P
a) Directors, rovide the fo erritory, other Individual? Individual? Individual? Individual?	Ilowing information for each director, executi wise state the country. For "Relationship to	ve officer and promoter of the issue issuer", "D" – Director, "O" – Execut Family name First given name Secondary given name Kambeitz Lionel Allison Jeffrey Bernakevitch Wayne	ive Officer, "P" – Promoter. Business location of non-individual or residential jurisdiction of individual Saskatchewan Alberta Saskatchewan	Relationship to issuer (select all that apply) ✓D O P
a) Directors, Provide the fo. erritory, other Individual?	Ilowing information for each director, executi wise state the country. For "Relationship to	ive officer and promoter of the issue issuer", "D" – Director, "O" – Execut Family name First given name Secondary given name Kambeitz Lionel Allison Jeffrey Bernakevitch	ive Officer, "P" – Promoter. Business location of non-individual or residential jurisdiction of individual Saskatchewan Alberta	Relationship to issuer (select all that apply) ✓D O 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 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) Residential address of each individual

Complete <u>Schedule 2</u> 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.

Attach the completed Excel file here

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	Delta CleanTech Inc.					
Full legal name - Family name	First given n	ame		Secondary given names		
Kambeitz	Lionel					
Title		Telephone number Em		mail address		
Director		3065959926 lior		onel@kf1899.com		
Signature Lionel Kambeitz		Date 2021-0	2-19			

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	First given name	Secondary given names		Title
Habibi	Sharagim			Lawyer
Name of company		Telephone number	Ema	l address
Gowling WLG (Canada) LLP		4032981874	sharagim.habibi@gowlingwlg.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 regulatory authority or regulator.

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.

Submission ID

Date