# Form 45-106F1 Report of Exempt Distribution

# IT IS AN OFFENCE TO MAKE A MISREPRESENTATION IN THIS REPORT

ITEM 1 - REPORT TYPE							
<ul><li>New report</li><li>Amended report</li><li>If amended,</li></ul>	provide filing date of report that i	is being amended (YYYY-MM-DD)					
ITEM 2 - PARTY CERTIFYING THE REPORT							
Indicate the party certifying the report (select only National Instrument 81-106 Investment Fund Con		n issuer is an investment fund, refer to section 1.1 of volicy to NI 81-106.					
Investment fund issuer							
✓ Issuer (other than an investmen	t fund)						
Item 3 - Issuer Name and Other I	DENITIFIERS						
Provide the following information about the issuer		bout the fund.					
Full legal name Radi							
Previous full legal name	e						
	e changed in the last 12 months, provide most recent previous legal name.						
	www.radientinc.com (if applicable)						
If the issuer has a legal entity identifier, provide be	low. Refer to Part B of the Instructions for						
Legal entity identifier							
ITEM 4 - UNDERWRITER INFORMATIO	N						
If an underwriter is completing the report, provide	the underwriter's full legal name and firn	m National Registration Database (NRD) number.					
Full legal name							
Firm NRD number	(if a	applicable)					
If the underwriter does not have a firm NRD numb	per, provide the head office contact inform	nation of the underwriter.					
Street address							
Municipality	Pro	ovince/State					
Country	Postal coo	ode/Zip code					
Telephone number		Website (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 corresponds to the issuer's primary business activity. For more information on finding the NAICS industry code go to <b>Statistics Canada's NAICS industry search tool</b> .
NAICS industry code325410
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
Is the issuer's primary business is to invest all or substantially all of its assets in any of the following? If yes, select all that apply.           Mortgages         Real estate         Commerial/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
Does the issuer have a SEDAR profile?
NoYesIf yes, provide SEDAR profile number00035928
If the issuer does not have SEDAR profile complete item 5(d) - (h).
d) Head office address
Street address Province/State
Municipality Postal code/Zip code
Country Telephone number
e) Date of formation and financial year-end
Date of formation
f) Reporting issuer status
Is the issuer a reporting issuer in any jurisdication of Canada? 🔲 No 🗌 Yes
If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer.
g) Public listing status
If the issuer has a CUSIP number, provide below (first 6 digits only)
CUSIP number
If the issuer is publicly listed, provide the names of all exchanges on which its securities are listed. Include only the names of exchanges for which the issuer has applied for and received a listing, which excludes, for example, automated trading systems.
Exchange name(s):
h) Size of issuer's assets
Select the size of the issuer's assets for its most recent financial year-end (Canadian \$). If the issuer has not existed for a full financial year, provide the size of the issuer's assets at the distribution end date.
□ \$0 to under \$5M □ \$5M to under \$25M □ \$25M to under \$100M
□ \$100M to under \$500M □ \$500M to under \$1B □ \$1B or over

ITEM 6 - INVESTMENT	Fund Issuer Information							
If the issuer is an investr	nent fund, provide the following information.							
a) Investment fund ma	nager informaiton							
Full legal name								
Firm NRD number	(if applicable)							
If the investment fund manager does not have a firm NRD number, provide the head office contact information of the investment fund manager.								
Street address	Street address							
Municipality	Province/State							
Country	Postal code/Zip code							
Telephone number	Website (if applicable)							
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 Other (describe)							
Indicate whether one or both	of the following apply to the investment fund .							
Invests primarily in	other investment fund issuers							
Is a UCITs Fund <sup>1</sup>								
<sup>1</sup> Undertaking for the Collective directives that allow collective	e Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) e investment schemes to operate throughout the EU on a passport basis on authorization from one member state.							
	nd financial year-end of the investment fund							
Date of formati								
YYYY MM DD MM DD								
d) Reporting issuer sta	atus of the investment fund							
Is the investment fund a reporting issuer in any jurisdication of Canada? No Yes								
If yes, select the jurisdictions of All	of Canada in which the investment fund is a reporting issuer.							
e) Public listing status	NU         ON         PE         QC         SK         YT           of the investment fund							
	CUSIP number, provide below (first 6 digits only)							
.,	CUSIP number							
If the investment fund is public	licly listed, provide the names of all exchanges on which its securities are listed. Include only the names of exchanges for							
	for and received a listing, which excludes, for example, automated trading systems.							
Exchage names								
f) Net asset value (NA	V) of the investment fund							
	nvestment fund as of the date of the most recent NAV calculation (Canadian \$).							
\$0 to under \$5M	\$5M to under \$25M \$25M to under \$100M							
\$100M to under \$500								
	YYYY MM DD							

ITEM 7 - INFORMATION A	BOUT THE DISTRIBUTIO	DN						
If an issuer located outside of Cana purchasers resident in that jurisdict should be disclosed in Item 8. The in	ion of Canada only. Do not inc	clude in Ite	em 7 securitie	es issued as	payment of cor	mmissions or find	ler's fees, which	
a) Currency	. ,				,	· ·	,	
Select the currency or currencies in	which the distribution was ma	de. All dol	lar amounts	provided in	the report mus	t be in Canadian	dollars.	
✓ Canadian dollar	US dollar Euro	0	Other (	(describe)				
b) Distribution date(s)								
State the distribution start and end as both the start and end dates. If distribution period covered by the	the report is being filed for sec							te
Start da	ate 2016 10 14 YYYY MM DD			End date	2016 YYYY	10 14 MM DD		
c) Detailed purchaser inform	nation							
Complete Schedule 1 of this f	orm for each purchaser a	nd attac	h the sche	dule to th	e completed	report.		
d) Types of securities distrik	outed					-		
Provide the following informatior Instructions for how to indicate th distributed.								ıg
						Canadian \$		
Security code CUSIP number (if applicable)								
UBS cor wa cor exp	its comprised of 1 comm are, one-half of 1 commo are purchase warrant, ea ole warrant exercisable nmon share. Each whol rrant exercisable into 1 nmon share of Issuer, w biry date that is 42 mont m date of issuance.	on ach into 1 le vith	6,520	,158.00	0.1000	0.1000	652,015.8	30
e) Details of rights and conv	vertible/exchangeable secu	urities						
If any rights (e.g. warrants, option were distributed, provide the con	version ratio and describe any		-	-	-	•	changeable securit	ties
Security Underlying code security code	Exercise price (Canadian \$) Lowest Highest		ry date - MM-DD)	Conversio ratio		ibe other items (if a	applicable)	
U B S W N T	0.2500 0.2500	2020	-04-14		Conver	sion ratio 1:1		
f) Summary of the distribution	on by jurisdiction and exem	nption						
State the total dollar amount of se purchaser resides and for each ex distribution in a jurisdiction of Ca This table requires a separate line purchaser resides, if a purchaser r jurisdiction. For jurisdictions within Canada, se	emption relied on in Canada fo nada, include distributions to p item for: (i) each jurisdiction w esides in a jurisdiction of Cana	or that disc ourchasers where a pu ada, and (ii	tribution. Ho s resident in t ırchaser resid ii) each exem	wever, if an hat jurisdict les, (ii) each aption reliea	issuer located of tion of Canada exemption reli	outside of Canad only. ed on in the juris	a completes a diction where a	
Province or country	Exemption	n relied on			Number of purchasers	Total amou	nt (Canadian \$)	
Alberta	NI 45-106 2.3 [Accredi	ted inve	estor]		6		415,000.00	1
Saskatchewan	NI 45-106 2.5 [Family, associates]	friends	and busin	ess	1		17,250.00	)
United Kingdom	NI 45-106 2.3 [Accredi	ted inve	estor]		3		219,765.80	<u>'</u>
		Total dol	lar amount	of securitie	es distributed		652,015.80	)
	Total num	ber of un	ique purcha	asers <sup>2</sup>	10			

<sup>2</sup>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.

#### g) Net proceeds to the investment fund by jurisdiction

Т

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.<sup>3</sup> 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 \$)
Fotal net proceeds to the investment fund	

<sup>3</sup>"Net proceeds" means the gross proceeds realized in the jurisdiction from the distributions for which the report is being filed, less the gross redemptions that occurred during the distribution period covered by the report.

#### h) Offering materials - This section applies only in Saskatchewan, Ontario, Québec, New Brunswick and Nova Scotia.

If a distribution has occurred in Saskatchewan, Ontario, Québec, New Brunswick or Nova Scotia, complete the table below by listing the offering materials that are required under the prospectus exemption relied on to be filed with or delivered to the securities regulatory authority or regulator in those jurisdictions.

In Ontario, if the offering materials listed in the table are required to be filed with or delivered to the Ontario Securities Commission (OSC), attach an electronic version of the offering materials that have not been previously filed with or delivered to the OSC.

Description	Date of document or other material (YYYY-MM-DD)	Previously filed with or delivered to regulator? (Y/N)	Date previously filed or delivered (YYYY-MM-DD)

ITEM 8 - COMPENSATIO	ON INFORMATION				
	person (as defined in NI 45-106) to whom ete additional copies of this page if mo				n in connection
Indicate whether any compen	sation was paid, or will be paid, in connect	ion with the distribution.	[]		
🗌 No 🗹 Yes	If yes, indicate number of pers	ons compensated.	3		
a) Name of person com	pensated and registration status				
Indicate whether the perso	on compensated is a registrant.	✓ No	] Yes		
If the person compensated is	an individual, provide the name of the inc	lividual.			
Full legal name of indi	vidual Sobolewski	Michael			
	Family name	First given name	e Seco	ndary given names	
If the person compensated	is not an individual, provide the following i	nformation.			
Full legal name	e of non-individual				
F	Firm NRD number		(if appl	licable)	
Indicate whether the persor	n compensated facilitated the distribution t	hrough a funding portal	or an internet-base	ed portal. 🗸	] No 🔲 Yes
b) Business contact info	ormation	<u> </u>			
If a firm NRD number is not	provided in Item 8 (a), provide the busines	s contact information of a	the person being co	ompensated.	
Street address	#113 - 105 Ambelside Drive S.W.				
Municipality	Edmonton	]	Province/State	Alberta	
Country	Canada	_ Postal	code/Zip code	T6W 0J4	
		1	phone number		
	mjsobolewski@shaw.ca			7802211338	
Indicate the person's relation B(2) of the Instructions and t Connect with the issue	r or investment fund manager aship with the issuer or investment fund ma the meaning of "control" in section 1.4 of N uer or investment fund manager the investment fund or investment fund m	I 45-106 for the purpose.		s section. her than an inves	tment fund)
None of the above					
d) Compensation details	3				
Canadian dollars. Include cas services incidental to the dist	sation paid, or to be paid, to the person ide sh commissions, securities-based compenso ribution, such as clerical, printing, legal or gements with the directors, officers or empl aid 9,000.00	ition, gifts, discounts or o accounting services. An is	other compensation ssuer is not require	. Do not report p d to ask for detai	ayments for
Value of all securiti	es	,	W N T		
distributed compensation					
Describe	terms of warrants, options or other rights	Each whole warran per share until 24 m			
Other compensation	on <sup>5</sup> Describe			, -	
Total compensation pa					
Check box if the pe	erson will or may receive any deferred co	mpensation (describe the	e terms below)		
additional securities of the i	e of all securities distributed as compens ssuer. Indicate the security codes for all s e additional securities of the issuer.				

<sup>5</sup>Do not include deferred compensation.

a) Name of person compensated and registration status	
Indicate whether the person compensated is a registrant. Vo 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 Global Preservation Strategies Limited	
Firm NRD number	(if applicable)
Indicate whether the person compensated facilitated the distribution through a funding portal or an inte	ernet-based portal. 🗹 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 perso	n being compensated.
Street address Painters Hall, 9 Little Trinity Lane	
Municipality London Provinc	e/State England
Country United Kingdom Postal code/Zi	p code EC4V 2AD
Email address dvarma@gpstrategies.co.uk Telephone r	number 02076539881
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	
B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of comp	oleting this section.
Connect with the issuer or investment fund manager Insider of the is	ssuer (other than an investment fund)
Director or officer of the investment fund or investment fund manager Employee of the	ne 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 Canadian dollars. Include cash commissions, securities-based compensation, gifts, discounts or other com services incidental to the distribution, such as clerical, printing, legal or accounting services. An issuer is n on, internal allocation arrangements with the directors, officers or employees of a non-individual compen	pensation. Do not report payments for ot required to ask for details about, or report
Cash commissions paid 13,185.94 Security codes Security	code 1 Security code 2 Security code 3
Value of all securities	
distributed as compensation <sup>4</sup>	
	cisable for 1 common share at \$0.10
	rom date of issuance, as applicable
Other compensation <sup>5</sup> Describe Describe	
Check box if the person will or may receive any deferred compensation (describe the terms b	
<sup>4</sup> Provide the aggregate value of all securities distributed as compensation, <u>excluding</u> options, warrants additional securities of the issuer. Indicate the security codes for all securities distributed as compensa-	
rights exercisable to acquire additional securities of the issuer.	

<sup>5</sup>Do not include deferred compensation.

a) Name of person compens	sated and registration status			
Indicate whether the person cor	mpensated is a registrant.	✓ No	Yes	
If the person compensated is an ir	ndividual, provide the name of the indi	vidual.		
Full legal name of individua	al			
	Family name	First given nam	e Seco	ndary given names
If the person compensated is not	t an individual, provide the following in	formation.		
Full legal name of n	non-individual Endeavor Venture	s Ltd.		
Firm	NRD number		(if appl	licable)
Indicate whether the person com	npensated facilitated the distribution th	rough a funding porta	l or an internet-base	ed portal. 🗸 No 🗌 Yes
b) Business contact informat	•	<u> </u>		
If a firm NRD number is not provi	ided in Item 8 (a), provide the business	contact information of	the person being co	ompensated.
Street address 41 [	Devonshire Street, Marylebone			
Municipality Lon	ndon		Province/State	England
Country Unit	ted Kingdom	Posta	I code/Zip code	W1G 7AJ
Email address brer	ndan@endven.com	Tele	ephone number	4402071996541
c) Relationship to issuer or in	investment fund manager			
	with the issuer or investment fund man beaning of "control" in section 1.4 of NI			
Connect with the issuer of	r investment fund manager	Insid	er of the issuer (oth	ner than an investment fund)
Director or officer of the in	nvestment fund or investment fund ma	anager 🗌 Empl	loyee of the issuer	or investment fund manager
✓ None of the above				
d) Compensation details				
Canadian dollars. Include cash cor services incidental to the distribution	n paid, or to be paid, to the person ider mmissions, securities-based compensat ion, such as clerical, printing, legal or a nts with the directors, officers or emplo	ion, gifts, discounts or ccounting services. An	other compensation issuer is not require	. Do not report payments for d to ask for details about, or report
Cash commissions paid	8,790.63	Security codes	Security code 1	Security code 2 Security code 3
Value of all securities distributed as compensation <sup>4</sup>			W N T	
Describe terms	s of warrants, options or other rights			or 1 common share at \$0.10 of issuance, as applicable
Other compensation <sup>5</sup>	Describe			
Total compensation paid	8,790.69			
Check box if the person	n will or may receive any deferred corr	pensation (describe th	ne terms below)	
	all securities distributed as compensa r. Indicate the security codes for all se litional securities of the issuer.			

<sup>5</sup>Do not include deferred compensation.

Ιτεμ	9 - DIRECTORS, EXECUTIV	VE OFFICERS A	ND PROMO	TERS OF THE I	SSUER				
lf th	If the issuer is an investment fund, do not complete Item 9. Procced to Item 10.								
Indi	icate whether the issuer is any of th	e following (select a	ll that apply).						
✓ Reporting issuer in any jurisdiction of Canada									
Foreign public issuer									
Ľ	Wholly owned subsidiary of a reporting issuer in any jurisdiction of Canada <sup>6</sup>								
	Provide name o	of reporting issuer							
Ľ	Wholly owned subsidiary of a f	oreign public issue	r <sup>6</sup>						
Provide name of foreign public issuer									
Ľ	Issuer distributing eligible forei	gn securities only to	o permitted clien	ts <sup>7</sup>					
lf ti	he issuer is at least one of the ab	ove, do not compl	ete Item 9(a) –	(c). Proceed to Ite	m 10.				
secu <sup>7</sup> Che	<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> Checck 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.								
a) Directors, executive officers and promoters of the issuer									
Pro	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 company nameFamily nameFirst given nameSecondary given nameBusiness location of non-individual or residentail jurisdiction of individualRelationship to 						that		
					Province o	r country	D	0	Р
b)	Promoter information		·	·					
, If t	the promoter listed above is not an thin Canada, state the province or t								
	Organization or company name	Family name	First given name	Secondary given names	Residential jurisdiction of individual	Relatio (select one			
					Province or country	D		C	>
c)	Residential address of each in	ndividual							
Con	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 or director 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 not be delegated to an agent or other individual preparing the report on behalf of the issuer or underwriter. If the individual completing and filing the report is different from the individual certifying the report, provide their name and contact details 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.

#### IT IS AN OFFENCE TO MAKE A MISREPRESENTATION IN THIS REPORT

By completing the information below, I certify to the securities regulatory authority or regulator that:

I have read and understand this report; and

all of the information provided in this report is true.

Full legal name	Taschuk	Denis	
	Family name	First given name	Secondary given names
Title	President and CEO		
Name of issuer/underwriter/ investment fund manager	Radient Technologies Inc.		
Telephone number	7804651318	Email address dtaschu	k@radientinc.com
Signature	"Denis Taschuk"	Date 2016	6 10 21
		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.

Full legal name	vidual certifying the repo Lowe	Tracy		Title Paralegal					
	Family name	First given name	Secondary given names						
Name of company	asken Martineau DuMoulin LLP								
Telephone number	6046314963		Email address tlowe@fa	isken.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:

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