Form 45-106F1 Report of Exempt Distribution

IT IS AN OFFENCE TO MAKE A MISREPRESENTATION IN THIS REPORT

ITEM 1 - REPORT TYPE	ITEM 1 - REPORT TYPE					
✓ New report						
Amended report If amer	nded, provide filing date	of report that is being am	ended (YYYY-MM-	-DD)		
ITEM 2 - PARTY CERTIFYING THE	REPORT					
Indicate the party certifying the report (sele National Instrument 81-106 Investment Fu						
☐ Investment fund issuer						
✓ Issuer (other than an inves	stment fund)					
Underwriter						
ITEM 3 - ISSUER NAME AND OTH	HER IDENTIFIERS					
Provide the following information about the	e issuer, or if the issuer is an in	vestment fund, about the fund.				
Full legal name	Pivot Pharmaceuticals	Inc.				
Previous full legal name	Neurokine Pharmaceu	ticals Inc.		一		
If the issuer's name changed in	the last 12 months, provide mo	ost recent previous legal name.				
Website	pivotpharma.com	pivotpharma.com (if applicable)				
If the issuer has a legal entity identifier, pro	ovide below. Refer to Part B of t	the Instructions for the definition	of "legal entity identifier".			
Legal entity identifier						
ITEM 4 - UNDERWRITER INFORM	IATION					
			(400)			
If an underwriter is completing the report, p	orovide the underwriter's full le	gal name and firm Nationai кед	istration Database (NRD) number.			
Full legal name						
Firm NRD number	(if applicable)					
If the underwriter does not have a firm NRD number, provide the head office contact information of the underwriter.						
Street address						
Municipality		Province/State				
Country		Postal code/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 Statistics Canada's NAICS industry search tool . NAICS industry code 3 2 5 4 1 0
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 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? No Yes If yes, provide SEDAR profile number 0 0 0 2 9 8 0 1 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 Financial year-end MM DD MM DD
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.
☐ AII ☐ AB ☐ BC ☐ MB ☐ NB ☐ NL ☐ NT
NS NU ON PE QC SK YT
g) Public listing status (fight C digits only)
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 investm	ent fund, provide the following information.			
a) Investment fund man	ager information			
Full legal name				
Firm NRD number	(if applicable)			
If the investment fund mana	ger does not have a firm NRD number, provide the head office contact information of the investment fund manager.			
Street address				
Municipality	Province/State			
Country	Postal code/Zip code			
Telephone number	Website (if applicable)			
b) Type of investment for	und			
Type of investment fund that r	nost accurately identifies the issuer (select only one) .			
Money market	Equity Fixed income			
Balanced	Alternative strategies Other (describe)			
Indicate whether one or both c	of the following apply to the investment fund .			
Invests primarily in o	other investment fund issuers			
☐ Is a UCITs Fund¹				
**Undertaking for the Collective	Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU)			
	investment schemes to operate throughout the EU on a passport basis on authorization from one member state. d financial year-end of the investment fund			
•				
Date of formation YYYY MM DD Financial year-end MM DD				
d) Reporting issuer stat	us of the investment fund			
Is the investment fund a repor	ting issuer in any jurisdication of Canada? No Yes			
· · · <u></u> · · · · <u></u> ·	Canada in which the investment fund is a reporting issuer.			
	AB BC MB NB NL NT			
	NU ON PE QC SK YT			
-	of the investment fund			
If the investment fund has a CUSIP number, provide below (first 6 digits only)				
CUSIP number				
If the investment fund 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 names				
f) Net asset value (NAV	() of the investment fund			
Select the NAV range of the in	vestment 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 \$500M	\$500M to under \$1B S1B or over Date of NAV calculation:			
	YYYY MM DD			

ITEN	л 7 - Informatio	N A BOUT THE	DISTRIBUTION	NC					
pur	n issuer located outside of chasers resident in that ju uld be disclosed in Item 8.	risdiction of Canad	la only. Do not inc	clude in Ite	em 7 securiti	es issued as	payment of o	commissions or fin	der's fees, which
a)	Currency								
Sele	ect the currency or currenc	ies in which the di	stribution was ma	de. All do	llar amounts	provided in	the report m	ust be in Canadia	n dollars.
_	Canadian dollar	US dollar	Eur	0	Other	(describe)			
b)	Distribution date(s)								
as	ate the distribution start a both the start and end da stribution period covered E S	tes. If the report is	being filed for sec	curities dis			s basis, includ		
c)	Detailed purchaser i	nformation							
Con	nplete Schedule 1 of t	his form for ea	ch purchaser a	nd attac	ch the sche	dule to th	e complete	ed report.	
d)	Types of securities	distributed							
Ir d	rovide the following inforr nstructions for how to indic istributed. The informatior sked Questions.	cate the security co	ode. If providing th	ne CUSIP i	number, indi	cate the full	9-digit CUSI	P number assigned	to the security being
								Canadian	T
	Security code CUSIP number (if applicable)	Desc	ription of security		Numb secui		Single or lowest price	Highest price	Total amount
	UBS	Common sha	ares		125	5,000.00	0.200	0	25,000.00
e)	Details of rights and	convertible/exc	hangeable secu	urities					
	any rights (e.g. warrants, e ere distributed, provide th								exchangeable securities
	Security Underlying security code	(Cana	se price adian \$)		iry date '- MM-DD)	Conversio ratio	-	scribe other items (if	applicable)
	UBSWNT	Lowest	Highest	2010	9-06-14	1:1			
				l	9-00-14	1.1			
f)	Summary of the distr			-					
pu di TI pu ju	rate the total dollar amour urchaser resides and for ec stribution in a jurisdiction his table requires a separa urchaser resides, if a purch risdiction. or jurisdictions within Cand	ch exemption relie of Canada, includ te line item for: (i) aser resides in a ju	ed on in Canada f e distributions to p each jurisdiction v urisdiction of Cand	or that dis ourchaser where a po ada, and (stribution. Ho s resident in urchaser resi iii) each exen	owever, if an that jurisdic des, (ii) each nption relied	issuer locate tion of Canad exemption r	d outside of Canada da only. delied on in the juri	da completes a sdiction where a

Province or Number of Exemption relied on Total amount (Canadian \$) country purchasers NI 45-106 2.3 [Accredited investor] 1 10,000.00 Alberta 3 NI 45-106 2.3 [Accredited investor] 15,000.00 British Columbia Total dollar amount of securities distributed 25,000.00 Total number of unique purchasers² 4

²In 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

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.

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)

tem 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 was paid, or will be paid, in connection with the distribution.				
✓ No Yes If yes, indicate number of persons compensated.				
a) Name of person compensated and registration status				
Indicate whether the person compensated is a registrant. No Yes				
If the person compensated is an individual, provide the name of the individual.				
Full legal name of individual				
Family name First given name Secondary given names				
If the person compensated is not an individual, provide the following information.	_			
Full legal name of non-individual				
Firm NRD number (if applicable)				
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.	es			
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]			
Municipality Province/State]			
Country Postal code/Zip code	7			
Email address Telephone number	<u>-</u>			
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 for the purposes of completing this section.				
Connect with the issuer or investment fund manager [Insider of the issuer (other than an investment fund)]				
Director or officer of the investment fund or investment fund manager Employee of the issuer or investment fund manager				
None of the above				
d) Compensation details				
Provide details of all compensation paid, or to be paid, to the person identified in Item 8(a) in connection with the distribution. Provide all amounts in Canadian dollars. Include cash commissions, securities-based compensation, gifts, discounts or other compensation. Do not report payments for services incidental to the distribution, such as clerical, printing, legal or accounting services. An issuer is not required to ask for details about, or report on, internal allocation arrangements with the directors, officers or employees of a non-individual compensated by the issuer.				
Cash commissions paid Security codes Security code 1 Security code 2 Security code 3				
Value of all securities distributed as compensation⁴				
Describe terms of warrants, options or other rights	٦			
Other compensation ⁵ Describe	i			
Total compensation paid	_			
Check box if the person will or may receive any deferred compensation (describe the terms below)				
]			
⁴ Provide the aggregate value of all securities distributed as compensation, <u>excluding</u> options, warrants or other rights exercisable to acquire additional securities of the issuer. Indicate the security codes for all securities distributed as compensation, <u>including</u> options, warrants or other rights exercisable to acquire additional securities of the issuer. ⁵ Do not include deferred compensation.				

TEM 9 - DIRECTORS, EXECUTIVE OFF	ICERS AN	ID PROMOT	TERS OF THE IS	SSUER			
If the issuer is an investment fund, do not co	mplete Iten	n 9. Procced to	Item 10.				
Indicate whether the issuer is any of the followin	g (select all	that apply).					
Reporting issuer in any jurisdiction of Ca	anada						
Foreign public issuer							
Wholly owned subsidiary of a reporting i	ssuer in any	y jurisdiction of	Canada ⁶				
Provide name of reporting	ng issuer						
Wholly owned subsidiary of a foreign pu	blic issuer ⁶						
Provide name of foreign publ	lic issuer						
☐ Issuer distributing eligible foreign securit	ties only to p	permitted client	s ⁷				
If the issuer is at least one of the above, do n	ot complet	e Item 9(a) – (c). Proceed to Ite	m 10.			
⁶ An issuer is a wholly owned subsidiary of a reposecurities that are required by law to be owned be a considerable. The characteristic clients. Refer to the definitions of "eligible foreign"	by its directo ution even if	ors, are benefic the issuer mad	ially owned by the de previous distrib	reporting issuer utions of other ty	or the foreig pes of secur	n public issu	ier, respectively.
If the issuer is none of the above, chec	k this box o	and complete	Item 9(a) - (c).				
a) Directors, executive officers and prom	noters of th	e issuer					
Provide the following information for each directerritory; otherwise state the country. For "Relat						da, state the	province or
Organization or company name Family	Business location of non-individual or residentail First given Secondary given Business location of non-individual or residentail iterisdiction of (select all that						r I that
				Province o	r country	D O	Р
b) Promoter information						·	
If the promoter listed above is not an individual	l, provide the	e following info	rmation for each d	irector and execu	tive officer o	f the promo	ter. 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 First given name Secondary given names Residential jurisdiction of individual Relationship to promoter (select one or both if applicable)							
				Province or country	D		0
c) Residential address of each individua							_
Complete Schedule 2 of this form providing t	he full resid	dential addres	s for each individ	lual listed in Iter	n 9(a) and	(b) and atto	ich 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	Doroudian	Ahmad			
	Family name	First given name		Secondary given names	
Title	Chairman				
Name of issuer/underwriter/ investment fund manager	Pivot Pharmceuticals Inc.				
Telephone number	6048057783	Email address	adoroudia	an@pivotpharr	ma.com
Signature	A. Doroudian	Date	2018	05	23
		_	YYYY	MM	DD

ITEM 11- CONTACT PERSON							
, ,	•	on for the individual that th different than the individual	,	thority or regulator may contact with any Item 10.			
✓ Same as indiv	idual certifying the re	eport					
Full legal name				Title			
	Family name	First given name	Secondary given names				
Name of company							
Telephone number		E	mail address				

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 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
- b) has authorized the indirect collection of the information by the securities regulatory authority or regulator.