# Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 9160624

ITEM 1 - REPORT TYPE	ITEM 1 - REPORT TYPE										
✓ New report											
Amended report	lf amer	ded, pro	vide fi	iling date	e of r	eport	that is	being ame	ended		) (YYYY-MM-DD)
ITEM 2 - PARTY CERTIF	YING THE	REPORT	Г								
Indicate the party certifying the Instrument 81-106 Investment									restment fund	d, refer to sect	ion 1.1 of National
Investment fund i	ssuer										
✓ 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 le	Full legal name New Wave Holdings Corp.										
Previous full le	Previous full legal name New Wave Esports Corp.										
If the issuer's name ch	If the issuer's name changed in the last 12 months, provide most recent previous legal name.										
	Website	https://n	ewwa	vecorp.	com/			(if applicabl	e)		
If the issuer has a legal entity i	dentifier, pro	vide below.	Refer t	to Part B o	f the Ir	nstructio	ons for i	the definition	of "legal enti	ty identifier".	
Legal entity	identifier										
If two or more issuers distribut	ed a single s	curity, pro	vide the	e full legal	name(	(s) of th	e co-iss	uer(s) other th	an the issuer	named above	2.
Full legal name(s) of co	o-issuer(s)							(if applicabl	e)		
ITEM 4 - UNDERWRITE	R INFORM	ATION									
If an underwriter is completing	the report, p	orovide the	underw	riter's full	legal r	name al	nd firm	NRD number.			_
Full legal name											
Firm NRD number							(if ap	plicable)			
If the underwriter does not hav	re a firm NRL	) number, p	orovide	the head o	office c	ontact	informa	ition of the un	derwriter.		
Street address											]
Municipality							Prov	/ince/State			-
Country					Ť	Post	tal cod	e/Zip code			1
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 in your reasonable judgment most closely corresponds to the issuer's primary business activity.									
NAICS industry code 5 2 3 9 9 0									
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 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									
Does the issuer have a SEDAR profile?									
No       ✓       Yes       If yes, provide SEDAR profile number       0       0       0       2       4       7       1       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									
YYYY 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									
If the issuer has a CUSIP number, provide below (first 6 digits only)									
CUSIP number									
If the issuer is publicly listed, provide the name of the exchange on which the issuer's equity securities primarily trade. Provide only the name of an exchange and not a trading facility such as, for example, an automated trading system.									
Exchange name									
h) Size of issuer's assets									
Select the size of the issuer's assets based on its most recently available annual financial statements (Canadian \$). If the issuer has not prepared annual financial statements for its first 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
S100M to under \$500M	S500M to under \$1B	S1B or over

ib close is an investment fund, provide the following information:         iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii								
Full legal name								
Firm NRD number								
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   Municipality   Country   Postal code/Zjp code   Telephone number   Website (if applicable)   D Type of investment fund   Type of investment fund fund that most accurately identifies the issuer (select only one).   Money market   Country   Postal code/Zjp code   Indicate whether one or both of the following apply to the investment fund.   Invests primarily in other investment fund issuers   Country   Indicate whether one or both of the following apply to the investment fund.   Invests primarily in other investment fund issuers   Indicate whether one or both of the following apply to the investment fund.   Invests primarily in other investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) directives that allow collective investment fund   Date of formation and financial year-end of the investment fund   YYYY   MM   DD   MM    DD								
Street address   Municipality   Province/State   Country   Postal code/Zip code   Telephone number   Website (if applicable) <b>b</b> Type of investment fund <b>b</b> Type of investment fund <b>b</b> Type of investment fund that most accurately identifies the issuer (select only one). Alternative strategies Cryptoasset 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 <b>b</b> Type of formation and financial year-end of the investment funds is on authorization from one member state. <b>c</b> Date of formation and financial year-end of the investment fund is a reporting issuer. <b>c</b> All All All All All All All All All Al								
Municipality Province/State   Country Postal code/Zip code   Telephone number Website (if applicable)   b) Type of investment fund Website (if applicable)   The of investment fund that most accurately identifies the issuer (select only one).   Municipality Fixed income   Alternative strategies Cryptoasset   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 Undicate whether one collective investment fund issuers Is a UCITs Fund Undersking for the Collective investment of Transforable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) directives that allow collective investment schemes to operate throughout the EU on a passport basis on authorization from one member state. O bate of formation and financial year-end of the investment fund is a reporting issuer status of the investment fund a reporting issuer status of the investment fund is a reporting issuer. MM DD								
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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   Alternative strategies Cryptoasset   Indicate whether one or both of the following apply to the investment fund.   Invests primarily in other investment fund issuers   Is a UCITs Fund   'Undertaking for the Collective investment fund issuers to pate of formation and financial year-end of the investment fund YYYY MM DD Tele of formation and financial year-end of the investment fund Select the jurisdictions of Canada in which the investment fund is a reporting issuer in any jurisdication of Canada? No Yes If yes, select the jurisdictions of Canada in which the investment fund is a reporting issuer. All								
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CUSIP number								
If the investment fund is publicly listed, provide the name of the exchange on which the investment fund's securities primarily trade. Provide only the								
name of an exchange and not a trading facility such as, for example, an automated trading system.								
Exchange name								
f) Net asset value (NAV) of the investment fund								
Select the NAV range of the investment 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       \$1B or over       Date of NAV calculation:								

## ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION

If an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include in Item 7 and Schedule 1 information about purchasers resident in that jurisdiction of Canada only. Do not include in Item 7 securities issued as payment of commissions or finder's fees in connection with the distribution, which must be disclosed in Item 8. The information provided in Item 7 must reconcile with the information provided in Schedule 1 of the report.											
a) Cur	rency	,									
Select the	curren	cy or d	currei	ncies	in which the disti	ribution was made. A	ll dollar amounts prov	rided ir	n the report n	nust be in Canadi	ian dollars.
Cana	dian d	dollar			US dollar	Euro	Other (descr	ibe)			
b) Dist	tributi	on da	te(s)	)							
	e start	and e	nd do ered	ates. I	If the report is be e report.	ing filed for securitie	r securities distributed s distributed on a cont End c	inuous		06 17	e the distribution date ad dates for the
c) Deta	ailad	nurch	2501	· info	rmation	MM DD				MM DD	
						h nurchaser and	attach the schedul	e to t	the comple	ted report	
-											
d) Types of securities distributed Provide the following information for all distributions reported on a per security basis. Refer to Part A(12) of the Instructions for how to indicate the security code. If providing the CUSIP number, indicate the full 9-digit CUSIP number assigned to the security being distributed.											
					Canadian \$	5					
Security code		IP num pplicat			Descriptior	n of security	Number of securities		Single or lowest price	Highest price	Total amount
UBS		Each Unit is comprised of one common share and one common share purchase warrant.6,188,627.000.33000.3300				2,042,246.91					
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.									
<b>^</b>						a describe any other	terms for each convert	, -	<i>J</i>	,	
Convertib exchangea security c	able		erlyin rity co		Exerci	se price adian \$) Highest	Expiry date (YYYY- MM-DD)		nversion ratio	-	items (if applicable)
exchangea	able	secu	erlyin		Exerci (Cana	se price adian \$)	Expiry date		nversion ratio E H C	Describe other	entitles the to purchase one re at an exercise
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Germany	/	NI 45-106 2.3 [Accred	dited investor]			1		99,999.90		
British Colur	nbia	NI 45-106 2.5 [Family associates]	r, friends and busir	ness		2		16,500.00		
			Total dollar amo	unt of se	curities di	istributed		2,042,246.91		
		Total nu	umber of unique purc	hasers <sup>2b</sup>		16				
<sup>2a</sup> In calculating the n	umber of u	nique purchasers per row, co	ount each purchaser on	y once. Joi	int purchas	sers may be	counted as one pu	rchaser.		
<sup>2b</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										
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 \$)				
	Total ne	t proceeds to the investme	ent fund							
		s proceeds realized in the ju g the distribution period cov		ributions f	for which ti	he report is	being filed, less the	e gross		
h) Offering mater	rials - This	s section applies only in S	Saskatchewan, Onta	rio, Quél	bec, New	Brunswic	k and Nova Scot	ia.		
materials that are req those jurisdictions. In Ontario, if the offer	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									
		Description	Date of document or other material (YYYY-MM-DD)	with or de regula	ously filed slivered to ator? /N)	c	eviously filed or delivered YY-MM-DD)			

тем 8 - Со	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. <b>Complete additional copies of this page if more than one person was, or will be, compensated.</b>										
Indicate whet	her any comper	nsation was paid, or will be paid, in connection with the distribution.								
🗌 No	✓ Yes	If yes, indicate number of persons compensated.								

a) Name of person compe	a) Name of person compensated and registration status											
Indicate whether the person con	pensated is a registi	rant.			🗌 No		$\checkmark$	Yes				
If the person compensated is an	individual, provide t	he nam	e of the	indivi	dual.							
Full legal name of indivi	dual											
	F	amily n	ame			Firs	t given	name		Secondar	/ given names	
If the person compensated is not	t an individual, provi	de the j	following	g infor	mation.							
Full legal name	of non-individual	Eight	Capital									
Fi	m NRD number	5	5	1	8	0			(if app	licable)		
Indicate whether the person con	ppensated facilitated	the dis	l tributior	ן h throi	igh a fundi	ng por	tal or a	n interne	] et-based	portal. [	✓ No 🗌	] Yes
b) Business contact inform	nation											
If a firm NRD number is not pro	vided in Item 8 (a), p	rovide	the busii	ness co	ontact info	matior	n of the	person l	oeing cor	npensated.		
Street address	Street address											
Municipality	Municipality Province/State											
Country	Country Postal code/Zip code											
Email address							Tele	ohone r	number			
c) Relationship to issuer of	or investment fund	l mana	ager		]							
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 "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 issue	Connect with the issuer or investment fund manager											
Director or officer of th	e investment fund c	r inves	tment fu	ind ma	anager		Emplo	yee of th	e issuer	or investment f	und manager	
$\checkmark$ None of the above					-						-	
d) Compensation details												
Provide details of all compensation Canadian dollars. Include cash ca incidental to the distribution, suc allocation arrangements with the	ommissions, securitie h as clerical, printing	es-based 1, legal	d compe or accoเ	ensatio Inting	n, gifts, dis services. A	counts n issue	or othe r is not	er compe required	nsation. ' to ask fo	Do not report po	yments for se	ervices
Cash commissions pai	d 87,30	02.08					Г	Security	code 1	Security code 2	Security co	ode 3
Value of all securitie	s			ć		doo		W N				
distributed as compensatior	1 <sup>4</sup>			i	Security co	ues	L					
Describe te	erms of warrants, op	tions o	r other r	ights	exercisa Each U	ible in hit is c same	to Uni ompri: e term	ts at \$0 sed of a	.33 per share	660 Advisory N Unit until June and a warrant. Is as the warra	17, 2022. The warrar	nts
Other compensation	5 7,20	0.00	Des	cribe	\$7,200	adviso	ry fee					
Total compensation pai	d 94,50	2.08										
Check box if the per	son will or may rece	ive any	/ deferre	ed con	npensatior	(desci	ribe the	terms b	elow)			
<sup>4</sup> Provide the aggregate value o additional securities of the issue rights exercisable to acquire an <sup>5</sup> Do not include deferred competi- security of the security of the se	er. Indicate the secu Iditional securities of	rity cod	des for a									er

a) Name of person compensated and registration status								
Indicate whether the person con	npensated is a registrar	nt.	🗌 No	$\checkmark$	] Yes			
If the person compensated is an	individual, provide the	name of the indiv	ridual.					
Full legal name of indiv	idual							
	Far	nily name		First given	name	Secondar	y given names	
If the person compensated is no	t an individual, provide	the following info	ormation.					
Full legal name	of non-individual G	ravitas Securitie	es Inc.					]
Fi	rm NRD number	2 6 2	6	0	(if a	pplicable)		
Indicate whether the person con	npensated facilitated th	e distribution thro	ugh a funding	portal or c	in internet-base	ed portal.	✓ No 🗌 Ye	es
b) Business contact infor	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/Stat	e		Ī
Country	Country Postal code/Zip code							Ī
Email address			1	Tele	phone numbe	er		Ī
c) Relationship to issuer	or investment fund n	nanager						
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  None of the above								
d) Compensation details								
Provide details of all compensati Canadian dollars. Include cash c incidental to the distribution, suc allocation arrangements with th	ommissions, securities- ch as clerical, printing, l	based compensati egal or accounting	on, gifts, disco g services. An i	ounts or oth issuer is not	er compensatio required to ask	n. Do not report po	yments for service	
Cash commissions pa	id 9,700	.23		1	Security code 1	Security code 2	Security code 3	5
Value of all securitie	s		Socurity code		W N T			1
distributed as compensation	n <sup>4</sup>		Security codes					
Describe to	erms of warrants, optio	ns or other rights	exercisab Each Unit	le into Uni is compri same term	its at \$0.33 pe sed of a shar	40 Advisory Wa er Unit until June e and a warrant. ons as the warra	17, 2022. The warrants	
Other compensation	ı⁵ 800.	00 Describe	\$800 advi	sory fee.				
Total compensation pa	id 10,500.	23						
Check box if the pe	rson will or may receive	e any deferred co	mpensation (c	describe the	e terms below)			
<sup>4</sup> Provide the aggregate value c additional securities of the issu rights exercisable to acquire ac <sup>5</sup> Do not include deferred comp	er. Indicate the securit Iditional securities of th	y codes for all sec						_

ITEM 9 - DIRECTORS, EXECU	TIVE OFFICERS	AND PROMOT	ERS OF THE ISS	SUER					
If the issuer is an investment fund	l, do not complete	Item 9. Procced to	Item 10.						
Indicate whether the issuer is any o	f the following (seled	t the one that appli	es - if more than one	e applies, select onl	y one).				
Reporting issuer in any juris	diction of Canada								
Foreign public issuer									
Wholly owned subsidiary of	a reporting issuer i	n any jurisdiction of	Canada <sup>6</sup>						
Provide nan	ne of reporting issue	ər							
Wholly owned subsidiary of	a foreign public iss	uer <sup>6</sup>						_	
Provide name of foreign public issuer									
Issuer distributing only eligible foreign securities and the distribution is to permitted clients only <sup>7</sup>									
If the issuer is at least one of the	above, do not com	plete Item 9(a) – (d	c). Proceed to Item	10.					
<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> Check 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 officer	s and promoters	of the issuer							
Provide the following information for territory; otherwise state the country.						tate the	province	or	
Organization or company name	Family name	First given name	Secondary given names	Business loc non-individe resident jurisdictio individu	ual or ail n of			to issuer hat apply)	
				Province or	country	D	0	Р	
b) Promoter information									
If the promoter listed above is not an within Canada, state the province or									
Organization or company name	Family name	First given name	Secondary given names	Residential jurisdiction of individual			to promo oth if appl		
				Province or country	D		C	)	
c) Residential address of eac	h individual								

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

### **ITEM 10 - CERTIFICATION**

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

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

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

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

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

By completing the information below, I certify, on behalf of the issuer/underwriter/investment fund manager, 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/ investment fund manager/agent	lew Wave Holdings Corp.								
Full legal name	Fisher	Trumbull							
	Family name	Family name First given name				ames			
Title	President								
Telephone number	er 4169175847 Email address tfisher@newv			newwave	vaveesports.com				
Signature	"Trumbull Fisher"	Date	2020	06	24				
			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.

Same as individual certifying the report

Full legal name				Title	
·	Family name	First given name	Secondary given names		
Name of company					
Telephone number		Er	nail 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:

- 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 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.