# Form 45-106F1 Report of Exempt Distribution

IT IS AN OFFENCE TO MAKE A MISREPRESENTATION IN THIS REPORT

ITEM 1 - REPORT TYPE							
New report     Amended report If amended, provide filing date of report that is being amended     (YYYY-MM-DD)							
ITEM 2 - PARTY CERTIFYING THE REPORT							
Indicate the party certifying the report (select only one). For guidance regarding whether an issuer is an investment fund, refer to section 1.1 of National Instrument 81-106 Investment Fund Continuous Disclosure and the companion policy to NI 81-106.							
Investment fund issuer							
✓ Issuer (other than an investme	ent fund)						
	To a version of						
	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 Neutrisci International 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)						
If the issuer has a legal entity identifier_ provide t Legal entity identifier	below. Refer to Part B of t	he Instructions for the definition	of "legal entity identifier".				
ITEM 4 - UNDERWRITER INFORMATIO	ON						
If an underwriter is completing the report, provid	le the underwriter's full le	gal name and firm National Reg	istration Database (NRD) กเ	ımber.			
Full legal name							
Firm NRD number		(if applicable)		]			
If the underwriter does not have a firm NRD nun			nderwriter				
Street address				I			
			[]				
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 <b>Statistics Canada's NAICS industry search tool</b> .					
NAICS industry code 3 2 5 4 1 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.					
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.           Image:					
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       1       5       9       3       8         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					
S100M to under \$500M S500M to under \$1B \$1B or over					

ITEM 6 - INVESTMENT FUND ISSUER INFORMATION						
If the issuer is an investment fund, provide the following information.						
a) Investment fund m	anager informaiton					
Full legal name						
Firm NRD number	(if applicable)					
If the investment fund ma	nager 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 investmen	t fund					
Type of investment fund the	at most accurately identifies the issuer (select only one) .					
Money market	Equity Fixed income					
Balanced	Alternative strategies Other (describe)					
Indicate whether one or bot	h of the following apply to the investment fund .					
Invests primarily in other investment fund issuers						
Is a UCITs Fund <sup>1</sup>						
directives that allow collecti	ive Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) ve investment schemes to operate throughout the EU on a passport basis on authorization from one member state.					
c) Date of formation a	and financial year-end of the investment fund					
Date of formation						
d) Reporting issuer status of the investment fund						
Is the investment fund a rep	porting issuer in any jurisdication of Canada? 🔲 No 🗌 Yes					
	of Canada in which the investment fund is a reporting issuer.					
e) Public listing statu	NU   ON   PE   QC   SK   YT     s of the investment fund					
If the investment fund has a	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.						
Exchage name	·\$					
f) Net asset value (NA	AV) of the investment fund					
-	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 \$50						
	YYYY MM DD					

ITEM 7 - INFORMATION A	BOUT THE DISTRIBUTIO	N						
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, which should 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	Select the currency or currencies in which the distribution was made. All dollar amounts provided in the report must be in Canadian dollars.							
✓ Canadian dollar	Canadian dollar US dollar Euro Other (describe)							
b) Distribution date(s)								
State the distribution start and end dates. If the report is being filed for securities distributed on only one distribution date, provide the distribution date as both the start and end dates. If the report is being filed for securities distributed on a continuous basis, include the start and end dates for the distribution period covered by the report.  Start date 2016 11 18 YYYY MM DD End date 2016 11 18 YYYY MM DD								
c) Detailed purchaser inform	nation							
Complete Schedule 1 of this fo	orm for each purchaser an	d attac	h the schee	dule to t	the con	npleted	report.	
d) Types of securities distrib								
Provide the following information Instructions for how to indicate th			-		-	-		
distributed.	rescently code. If providing the	00511		ate the fa			uniber ussigned	
						. 1	Canadian \$	
Security CUSIP number (if applicable)	Description of security		Numbe securit		low	gle or vest rice	Highest price	Total amount
U B S 64129Y107 1 c per	s. Each Unit is comprised of mmon share and 1 warrant. h warrant is exercisable into mmon share at \$0.18 for a od of 18 months from ance.			,000.00	) (	0.1000	0.1000	1,500,000.00
e) Details of rights and convertible/exchangeable securities								
If any rights (e.g. warrants, option								changeable securities
were distributed, provide the com	Exercise price					geable se	curity.	
Security Underlying code security code	(Canadian \$)		ry date - MM-DD)	Convers ratio		Descri	be other items (if a	pplicable)
	Lowest Highest	0040	05.40		1.00			
W N T C M S	0.1800 0.1800		8-05-18		1.00			
	on by jurisdiction and exemp							
State the total dollar amount of securities distributed and the number of purchasers for each jurisdiction of Canada and foreign jurisdiction where a purchaser resides and for each exemption relied on in Canada for that distribution. However, if an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include distributions to purchasers resident in that jurisdiction of Canada only. This table requires a separate line item for: (i) each jurisdiction where a purchaser resides, (ii) each exemption relied on in the jurisdiction where a purchaser resides, if a purchaser resides in a jurisdiction of Canada, and (iii) each exemption relied on in Canada, if a purchaser resides in a foreign jurisdiction. For jurisdictions within Canada, state the province or territory, otherwise state the country.								
Province or country	Exemption r	relied on			Numbe		Total amour	nt (Canadian \$)
Alberta	NI 45-106 2.3 [Accredite	ed inve	estor]			5		28,100.00
British Columbia	NI 45-106 2.3 [Accredite	ed inve	estor]			27		348,000.00
Ontario	NI 45-106 2.3 [Accredite	ed inve	estor]			42		1,113,900.00
Saudi Arabia	NI 45-106 2.3 [Accredite	ed inve	estor]			1		10,000.00
	Te	otal dol	lar amount o	of securi	ties dist	tributed		1,500,000.00
	Total numb	er of un	ique purcha	asers <sup>2</sup>		75		

<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

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 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.

(Y/N)	Description	material (YYYY-MM-DD)	regulator? (Y/N)	(YYYY-MM-DD)

ITEM 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 whether any compensation was paid, or will be paid, in connection with the distribution.					
No       ✓ Yes       If yes, indicate number of persons compensated.       9					
a) Name of person compensated and registration status					
Indicate whether the person compensated is a registrant. No Ves					
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 Mackie Research Capital Corporation					
Firm NRD number 3 0 7 0 (if applicable)					
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-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 person being compensated.					
Street address					
Municipality Province/State					
Country Postal code/Zip code					
Email address Telephone number					
<ul> <li>c) Relationship to issuer or investment fund manager</li> <li>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.</li> </ul>					
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     4,200.00       Security codes     Security code 1       Security code 2     Security code 3					
Value of all securities distributed as compensation <sup>4</sup> 4,200.00					
Describe terms of warrants, options or other rights 42,000 Broker Warrants. Each warrant is exercisable into 1 common share at \$0.18 for a period of 18 months from issuance.					
Other compensation <sup>5</sup> Describe					
Total compensation paid 4,200.00					
Check box if the person will or may receive any deferred compensation (describe the terms below)					
<sup>4</sup> 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.					

a) Name of person compens	ated and registration stat	us				
Indicate whether the person co	mpensated is a registrant.		No	✓ Yes		
If the person compensated is an in	ndividual, provide the name o	f the individu	al.			
Full legal name of individua	al					
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 PI Financial Corp.						
Firm NRD number 5 2 9 0 (if applicable)						
Indicate whether the person com	pensated facilitated the distri	ibution throug	gh a funding p	ortal or an inter	met-based portal.	🖌 No 🔲 Yes
b) Business contact information	tion					
If a firm NRD number is not provi	ded in Item 8 (a), provide the	business con	tact informatio	on of the person	being compensate	d.
Street address						
Municipality				Province	/State	
Country			P	ostal code/Zip	code	
Email address		1		Telephone nu		
	ny actment fund manager	]				
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 m						connected in Part
Connect with the issuer o	r investment fund manager			Insider of the iss	suer (other than an	investment fund)
Director or officer of the ir	vestment fund or investmen	t fund manag	er 🗌 E	Employee of the	e issuer or investm	ent fund manager
✓ None of the above						
d) Compensation details						
Provide details of all compensation Canadian dollars. Include cash cor services incidental to the distributi on, internal allocation arrangemen	nmissions, securities-based co on, such as clerical, printing,	ompensation, legal or accou	gifts, discount Inting services	s or other compo . An issuer is not	ensation. Do not re t required to ask fo	port payments for
Cash commissions paid	15,600.00	Secu	rity codes	Security of	code 1 Security c	ode 2 Security code 3
Value of all securities		Secu	inty codes	W N	T	
distributed as compensation <sup>4</sup>	15,600.00					
Describe terms	s of warrants, options or othe	° [15	6,000 Broke	er Warrants. Ea	ach warrant is ex	cercisable into 1
			mmon snare	e at \$0.18 for a	a period of 18 mo	onths from issuance.
Other compensation <sup>5</sup>	15,600.00	escribe				
· · · [				1		
	will or may receive any defe	errea compen	isation (descri	be the terms be	elow)	
<sup>4</sup> Provide the aggregate value of a additional securities of the issuer						
rights exercisable to acquire add				,	, <u> </u>	

a) Name of person compensated and registration status						
Indicate whether the person compensated is a registrant.	✓ 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 Haywood Securities Inc.						
Firm NRD number 1 6 3 0 (if applicable)						
Indicate whether the person compensated facilitated the distribution through a fun	Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. Ves					
b) Business contact information						
If a firm NRD number is not provided in Item 8 (a), provide the business contact info	rmation of the person being compensated.					
Street address						
Municipality	Province/State					
Country	Postal code/Zip code					
Email address	Telephone number					
c) Relationship to issuer or investment fund manager						
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part						
B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 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 Iter						
Canadian dollars. Include cash commissions, securities-based compensation, gifts, dis services incidental to the distribution, such as clerical, printing, legal or accounting se						
on, internal allocation arrangements with the directors, officers or employees of a no						
Cash commissions paid 1,500.00 Security cod	es Security code 1 Security code 2 Security code 3					
Value of all securities						
distributed as compensation⁴						
Describe terms of warrants, options or other rights 15,000 Bi	roker Warrants. Each warrant is exercisable into 1					
	share at \$0.18 for a period of 18 months from issuance.					
Other compensation <sup>5</sup> Describe						
Total compensation paid 1,500.00						
Check box if the person will or may receive any deferred compensation (	Check box if the person will or may receive any deferred compensation (describe the terms below)					
<sup>4</sup> Provide the aggregate value of all securities distributed as compensation, <u>exclud</u> , additional securities of the issuer. Indicate the security codes for all securities dist.						
rights exercisable to acquire additional securities of the issuer.	nouceu as compensation, <u>incluting</u> options, warrants or other					

a) Name of person compensated and registration status					
Indicate whether the person compensated is a registrant. Vo No					
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 Selective Asset Management Inc.					
Firm NRD number (if applicable)					
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.	res				
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 170 University Avenue, 2nd Floor					
Municipality Toronto Province/State Ontario	٦				
Country Canada Postal code/Zip code M5H3B3	٦ ٦				
Email address Telephone number 4165084237					
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					
✓ 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 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 1,500.00 Security codes Security code 1 Security code 2 Security code 3	3				
Value of all securities distributed as compensation <sup>4</sup>					
Describe terms of warrants, options or other rights [15,000 Broker Warrants. Each warrant is exercisable into 1 common share at \$0.18 for a period of 18 months from issuance	e.				
Other compensation <sup>5</sup> Describe					
Total compensation paid 1,500.00					
Check box if the person will or may receive any deferred compensation (describe the terms below)	7				
<sup>4</sup> 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.	-				

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 individual.					
Full legal name of indi	vidual					
	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 AlphaNorth Asset Management						
F	Firm NRD number 2 6 3 0 3 (if applicable)					
Indicate whether the persor	n compensated facilitated the distribution through a funding portal or an internet-based portal.  Ves					
b) Business contact info						
If a firm NRD number is not	provided in Item 8 (a), provide the business contact information of the person being compensated.					
Street address	333 Bay Street, Suite 630					
Municipality	Toronto Province/State Ontario					
Country	Canada Postal code/Zip code M5H2R2					
Email address	Telephone number 4165060776					
c) Relationship to issue	c) Relationship to issuer or investment fund manager					
Indicate the person's relatior	nship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part he meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.					
Connect with the iss	uer 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	3					
Canadian dollars. Include cas services incidental to the dist	sation paid, or to be paid, to the person identified in Item 8(a) in connection with the distribution. Provide all amounts in th commissions, securities-based compensation, gifts, discounts or other compensation. Do not report payments for ribution, such as clerical, printing, legal or accounting services. An issuer is not required to ask for details about, or report mements with the directors, officers or employees of a non-individual compensated by the issuer.					
Cash commissions p	aid 15,000.00 Security codes Security code 1 Security code 2 Security code 3					
Value of all securiti distributed compensation						
Describe	Describe terms of warrants, options or other rights T50,000 Broker Warrants. Each warrant is exercisable into 1 common share at \$0.18 for a period of 18 months from issuance.					
Other compensation	Describe					
Total compensation pa	aid 15,000.00					
Check box if the p	erson will or may receive any deferred compensation (describe the terms below)					
<sup>4</sup> Provide the accreate well	le of all securities distributed as compensation, <u>excluding</u> options, warrants or other rights exercisable to acquire					
additional securities of the i	suer. Indicate the security codes for all securities distributed as compensation, <u>including</u> options, warrants or other additional securities of the issuer.					

a) Name of person com	pensated and registr	ation status				
Indicate whether the perso	on compensated is a reg	istrant.	No No	✓ Yes		
If the person compensated is	an individual, provide t	the name of the ind	lividual.			
Full legal name of indiv	vidual					
Family name     First given name     Secondary given names						
If the person compensated is not an individual, provide the following information.						
Full legal name of non-individual Canaccord Genuity Corp.						
Firm NRD number 9 0 0 (if applicable)						
Indicate whether the person	Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. Ves					
b) Business contact info	rmation					
If a firm NRD number is not	provided in Item 8 (a), p	provide the busines	s contact informa	tion of the person	being compensated.	
Street address						
Municipality			]	Province/	State	
Country			]	Postal code/Zip	code	
Email address			1	Telephone nu	Imber	
c) Relationship to issuer	or investment fund	manager				
	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 issu	uer or investment fund	manager		Insider of the iss	suer (other than an investment fund)	
Director or officer of t	the investment fund or	investment fund m	anager 🗌	Employee of the	issuer or investment fund manager	
None of the above						
d) Compensation details	3					
					ith the distribution. Provide all amounts in	
		•	0.	•	ensation. Do not report payments for trequired to ask for details about, or report	
on, internal allocation arrang						
Cash commissions pa	aid 8,400	0.00	Security codes	Security c	code 1 Security code 2 Security code 3	
Value of all securitie				W N	Т	
distributed a compensatio						
Describe	terms of warrants, option	 ons or other rights	84,000 Broke	er Warrants. Ead	ch warrant is exercisable into 1	
					a period of 18 months from issuance.	
Other compensation		Describe				
Total compensation pa	aid 8,400	.00				
Check box if the pe	Check box if the person will or may receive any deferred compensation (describe the terms below)					
					or other rights exercisable to acquire ion, including options, warrants or other	
rights exercisable to acquire			ecunices aisinDu	eu as compensali	ion, <u>moluuliny</u> options, waitants of other	

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 Richardson GMP Ltd.					
Firm NRD number 2 1 9 7 0 (if applicable)	-				
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. 📝 No 🔲 Ye	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	7				
Country Postal code/Zip code	- 				
Email address Telephone number	L L				
	1				
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 34,200.00 Security codes Security code 1 Security code 2 Security code 3	1				
Value of all securities distributed as compensation <sup>4</sup> Security codes     Security code 1     Security code 2     Security code 3					
Describe terms of warrants, options or other rights 342,000 Broker Warrants. Each warrant is exercisable into 1 common share at \$0.18 for a period of 18 months from issuance.					
Other compensation <sup>5</sup> Describe					
Total compensation paid     34,200.00					
Check box if the person will or may receive any deferred compensation (describe the terms below)					
<sup>4</sup> 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.	-				

a) Name of person compensated and registration status						
Indicate whether the person	compensated is a registrant.		No No	✓ Yes		
If the person compensated is an individual, provide the name of the individual.						
Full legal name of indivi	dual					
Family name         First given name         Secondary given names					names	
If the person compensated is	not an individual, provide th	e following in	formation.			
Full legal name	of non-individual Stratig	is Capital Ac	dvisors Inc.			
Fi	rm NRD number 4	2 0	8 0		(if applicable)	
Indicate whether the person	compensated facilitated the c	distribution th	rough a funding	portal or an inter	rnet-based portal.	✓ No 🗌 Yes
b) Business contact infor	mation				· · ·	
If a firm NRD number is not p	rovided in Item 8 (a), provide	the business	contact informat	ion of the person	being compensated	!.
Street address						
 Municipality				Province	/State	
Country			ſ	Postal code/Zip	code	
Email address			·	Telephone nu		
L						
	or investment fund mana					
Indicate the person's relations B(2) of the Instructions and th	•	-	0		<b>U</b> .	connected" in Part
Connect with the issue	er or investment fund manag	ger		Insider of the iss	suer (other than an	investment fund)
Director or officer of th	e investment fund or investr	ment fund ma	nager	Employee of the	e issuer or investme	ent 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 pai	d 3,000.00		• • · · · · · • • • • • • •	Security	code 1 Security co	de 2 Security code 3
Value of all securities		2	Security codes	W N		
distributed as compensation						
Describe terms of warrants, options or other rights 30,000 Broker Warrants. Each warrants is exercisable into 1 common share at \$0.18 for a period of 18 months from issuance.						
Other compensation	5	Describe			•	
Total compensation pai	d 3,000.00					
Check box if the person will or may receive any deferred compensation (describe the terms below)						
<sup>4</sup> Provide the aggregate value	of all securities distributed a	as compensat	tion, <u>excluding</u> o	ptions, warrants	or other rights exerc	cisable to acquire
additional securities of the iss rights exercisable to acquire	suer. Indicate the security co	des for all se				

a) Name of person compensated and registration status					
Indicate whether the persor	compensated is a registrant. 🔲 No 📝 Yes				
If the person compensated is an individual, provide the name of the individual.					
Full legal name of indiv	ual				
	Family name     First given name     Secondary given names				
If the person compensated is	ot an individual, provide the following information.				
Full legal name	f non-individual GMG Private Counsel Inc.				
Fi	n NRD number 3 2 1 4 0 (if applicable)				
Indicate whether the person	ompensated facilitated the distribution through a funding portal or an internet-based portal.	🖌 No 🗌 Yes			
b) Business contact infor	nation				
If a firm NRD number is not p	ovided in Item 8 (a), provide the business contact information of the person being compensated.				
Street address					
Municipality	Province/State				
Country	Postal code/Zip code				
Email address	Telephone number				
c) Relationship to issuer	r investment fund manager				
	ip with the issuer or investment fund manager (select all that apply). Refer to the meaning of "c	onnected" in Part			
	meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.				
Connect with the issue	or investment fund manager Insider of the issuer (other than an i	nvestment fund)			
Director or officer of the	investment fund or investment fund manager Employee of the issuer or investment	nt 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 pa	1,200.00 Security codes Security code 1 Security code	de 2 Security code 3			
Value of all securitie	W N T				
distributed a compensation					
Describe terms of warrants, options or other rights 12,000 Broker Warrants. Each warrant is exercisable into 1 common share at \$.18 for a period of 18 months from issuance.					
Other compensatior	Describe				
Total compensation pa	1,200.00				
Check box if the person will or may receive any deferred compensation (describe the terms below)					
<sup>4</sup> Provide the aggregate value	of all securities distributed as compensation, <u>excluding</u> options, warrants or other rights exerc	isable to acquire			
	ier. Indicate the security codes for all securities distributed as compensation, <u>including</u> option dditional securities of the issuer.	s, warrants or other			

ITEM 9 - DIRECTORS, EXECUTIVE OFFICERS AND PROMOTERS OF THE ISSUER									
If the issuer is an investment fund, do not complete Item 9. Procced to Item 10.									
Indi	Indicate whether the issuer is any of the following (select all that apply).								
Ŀ	Reporting issuer in any jurisdic	tion of Canada							
Ľ	Foreign public issuer								
Ľ	Wholly owned subsidiary of a r	eporting issuer in a	iny jurisdiction o	f 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 for	eign 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 a		•						
Pro	ovide the following information for ritory; otherwise state the country.	each director, execu	itive officer and p				ıda, sta	te the p	province or
	Organization or company name	Family name	First given Secondary given name names				Relationship to issuer (select all that apply)		that
					Province o	rovince or country		0	Р
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 names	Residential jurisdiction of individual	urisdiction of (select on		onship to promoter e or both if applicable)	
					Province or country	D		C	>
c)	c) Residential address of each individual								
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	Ackerman	Scott	
	Family name	First given name	Secondary given names
Title	CEO		
Name of issuer/underwriter/ investment fund manager	NeutriSci International Inc.		
Telephone number	7783316505	Email address sacke	rman@emprisecapital.com
Signature	/s/ "Scott Ackerman"	Date 20	16 11 28
		YY	YY 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.

 $\checkmark$  Same as individual certifying the report

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:

- 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.