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

| ITEM 1 – REPORT TYPE | | | | | | |
|---|---|--|-----------------------------------|--|--|--|
| New report | | | | | | |
| ✓ Amended report If amended, provide | Submission ID of report that is | being amended: EDR1569595306 | -542 (Example: EDR1234567890-123) | | | |
| | | | | | | |
| ITEM 2 - PARTY CERTIFYING TH | IE 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. Superior (Other than an investment fund) | | | | | | |
| Underwriter | | | | | | |
| | | | | | | |
| ITEM 3 – ISSUER NAME AND OT | HER IDENTIFIERS | | | | | |
| Provide the following information about the Full legal name | issuer, or if the issuer is an in | ovestment fund, about the fund. | | | | |
| COVALON TECHNOLOGIES LTD. | | | | | | |
| Previous full legal name If the issuer's nam | Previous full legal name If the issuer's name changed in the last 12 months, provide most recent previous legal name. | | | | | |
| Website (if applicable) | | | | | | |
| http://www.covalon.com/ | | | | | | |
| If the issuer has a legal entity identifier, pro | ovide below. Refer to Part B of | the Instructions for the definition of | f "legal entity identifier". | | | |
| Legal entity identifier | | | | | | |
| | | | | | | |
| Did two or more co-issuers distribute a sing | ıle security? | | | | | |
| If two or more issuers distributed a single se | ecurity, provide the full legal na | ame(s) of the co-issuer(s) other tha | n the issuer named above. | | | |
| Full legal name(s) of co-issuer(s) | | | | | | |
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| ITEM 4 – UNDERWRITER INFOR | MATION | | | | | |
| If an underwriter is completing the report, pro- | rovide the underwriter's full leg | al name and firm NRD number. | | | | |
| | | | | | | |
| Does the Underwriter's Firm have an NRD Number? Firm NRD number No Yes | | | | | | |
| If the underwriter does not have a firm NRE | number, provide the head off | ice contact information of the under | writer. | | | |
| Street address | Municipality | Province/State | Postal/ZIP code | | | |
| | | | | | | |
| Country | Telephone number | Website (if applicable) | | | | |

| ITEM 5 – ISSUER INFORMATION | | | | | |
|--|-----------------------------------|------------------------------------|--------------------|--|---------------|
| a) Primary industry | | | | | |
| Provide the issuer's North American Industry Clas corresponds to the issuer's primary business activ | | CS) code (6 digits | s only) that in yo | ur reasonable judgment most clos | ely |
| NAICS industry code | | | | | |
| 541710 | | | | | |
| If the issuer is in the mining industry, indicate the the mining industry. Select the category that best Exploration Development Production | | | | provide services to issuers opera | ting in |
| Is the issuer's primary business to invest all or sul ☐ Mortgages ☐ Real estate ☐ Commercial/bus | | | | | |
| b) Number of employees | | | | | |
| ✓ 0 - 49 ☐ 50 - 99 ☐ 100 - 499 ☐ 500 or more | 1 | | | | |
| c) SEDAR profile number | | | | | |
| Does the issuer have a <u>SEDAR</u> profile? If yes, No ✓ Yes 00020 | , provide SEDAR profile r 0909 | scre | eenshot of the is: | R profile is a "private" profile, pleas suer's profile by e-mail to @osc.gov.on.ca | se provide a |
| d) Head office address | | If the issue | er does not hav | e a SEDAR profile, complete Ite | m 5(d) – (h). |
| Street address Munic | cipality | Province/State | | Postal/ZIP code | |
| | | | | | |
| Country Teleph | hone number | | | | |
| Data of formation and financial year and | | | | | |
| e) Date of formation and financial year-end | | | | | |
| Date of formation Finance | cial year-end | | | | |
| O. D. constitution in constitution | | | | | |
| f) Reporting issuer status | | | | | |
| Is the issuer a reporting issuer in any jurisdiction o | of Canada? | | | | |
| If yes, select the jurisdictions of Canada in which t ☐ AII ☐ AB ☐ BC ☐ MB ☐ NB | | issuer. | | | |
| NS NU ON PE Q | C SK YT | | | | |
| g) Public listing status | | | | | |
| Does the issuer have a CUSIP number? CUSIF | P number <i>(provide first 6</i> | 6 digits only) | | | |
| 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. | | | | | of an |
| Exchange name: | _ | | . | 7 Cdi Citi Fb | |
| | ock Exchange | TSX Venture Excl | _ | Canadian Securities Exchange | |
| London Stock Exchange Nasdaq | _ | New York Stock I | _ | Shanghai Stock Exchange | |
| | ange Of Hong Kong 🔲 - | | _ | | |
| | | | lange | JOHNER | |
| If other, describe: | | | | | |
| h) Size of issuer's assets | | | | | |
| Select the size of the issuer's assets based on its financial statements for its first financial year, prov | vide the size of the issue | er's assets at the | distribution end | | pared annual |
| \$0 to under \$5M \$5M to under \$500M \$500M to under \$500M | | \$25M to under \$1 \$1B or over | 00M | | |
| | idei \$15 | \$10 01 0vei | | | |

| IIEM 7 – INFORMATIO | N ABOUT THE DISTRIBUTION | DN | | | | |
|---|--|----------------------|------------------------|------------------|------------------------------|--|
| If an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include in Item 7 and Schedule 1 information about purchasers resident in that jurisdiction of Canada only. Do not include in Item 7 securities issued as payment of commissions or finder's fees in connection with the distribution, which must be disclosed in Item 8. The information provided in Item 7 must reconcile with the information provided in Schedule 1 of the report. | | | | | | |
| a) Currency | | | | | | |
| | Select the currency or currencies in which the distribution was made. All dollar amounts provided in the report must be in Canadian dollars. 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 End Date 2019-09-18 | | | | | | |
| c) Detailed purchaser info | rmation | | | | | |
| - | s form for each purchaser and attac Schedule 1(110882161.4).xlsx - 49 K | | he completed rep | ort. | | |
| d) Types of securities distr | ributed | | | | | |
| | tion for all distributions reported on a number, indicate the full 9-digit CUS | | | | now to indicate the security | |
| | | | | Canadian \$ | | |
| Security co | ode CUSIP number | Number of securities | Single or lowest price | Highest price | Total amount | |
| UBS | 22282D302 | 2,530,500.0000 | 2.0000 | 2.0000 | 5,061,000.0000 | |
| Description of security: | | | | | | |
| 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. Not Applicable | | | | | | |
| Convertible / Underlying | Exercise price (Canadian \$) | Expiry date | | Conversion ratio | | |

| Convertible / exchangeable | Underlying security | Exercis (Canad | • | Expiry date (YYYY-MM-DD) | Conversion ratio |
|---------------------------------------|---------------------|-------------------|---------|-----------------------------|------------------|
| security code | code | Lowest | Highest | (1111-141141-00) | |
| WNT | CMS | 2.0000 | 2.0000 | 2024-09-18 | |
| Describe other terms: (if applicable) | | | | | |

f) Summary of the distribution by jurisdiction and exemption

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 of Canada, state the province or territory, otherwise state country.

| Province or country | Exemption relied on | No. of unique purchasers ^{2a} | Total amount (Canadian \$) |
|---------------------|-------------------------------------|--|-------------------------------|
| Ontario | NI 45-106 2.3 [Accredited investor] | 22 | 3,725,692.0000 |
| British Columbia | NI 45-106 2.3 [Accredited investor] | 2 | 616,000.0000 |
| Quebec | NI 45-106 2.3 [Accredited investor] | 4 | 350,000.0000 |
| Alberta | NI 45-106 2.3 [Accredited investor] | 6 | 344,308.0000 |
| Nova Scotia | NI 45-106 2.3 [Accredited investor] | 1 | 25,000.0000 |
| | 5,061,000.0000 | | |
| | Total number of unique purchas | sers ^{2b} 35 | |

^{2a}In calculating the number of unique purchasers per row, count each purchaser only once. Joint purchasers may be counted as one purchaser.

^{2b}In calculating the total number of unique purchasers to which the issuer distributed securities, count each purchaser only once, regardless of whether

| ber of unique purchasers to whe types of securities to, and reli | | |
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| ITE | ITEM 7 – INFORMATION ABOUT THE DISTRIBUTION | | | | | |
|-------------------------------|---|------------------------------------|--|-----------------------------------|----------|--|
| h) (| h) Offering materials - This section applies only in Saskatchewan, Ontario, Québec, New Brunswick and Nova Scotia. | | | | | |
| mate in th In C an e | If a distribution has occurred in Saskatchewan, Ontario, Québec, New Brunswick or Nova Scotia, complete the table below by listing the offering materials that are required under the prospectus exemption relied on to be filed with or delivered to the securities regulatory authority or regulator in those jurisdictions. In Ontario, if the offering materials listed in the table are required to be filed with or delivered to the Ontario Securities Commission (OSC), attach an electronic version of the offering materials that have not been previously filed with or delivered to the OSC. Not Applicable | | | | | |
| | Description | Date of document or other material | Previously filed with or delivered to regulator? | Previously filed Submission ID | Filename | |
| 1. | | | YN | | | |

| ITEM 8 – COMPENSATION INFORMATION | | | | | | | |
|---|---|---------------------------|---------------------------|---------------------------|-----------------------|---|--|
| Provide information for each pers connection with the distribution. | | | | | | | |
| Indicate whether any compensation \(\sqrt{N} \) No \(\sqrt{Y} \) Yes | Indicate whether any compensation was paid, or will be paid, in connection with the distribution. ✓ No ☐ Yes | | | | | | |
| PERSON 1 | | | | | | | |
| a) Name of person compensa | ted and registration | on status | | | | | |
| Indicate whether the person com | pensated is a regis | trant. | | | | | |
| If the person compensated is an individual, provide the full legal name of the individual. Family name Secondary given names | | | | | | | |
| | | | | | | | |
| If the person compensated is not Full legal name of non-individual | | <u> </u> | | Firm NRD number (if a | | | |
| Indicate whether the person com | pensated facilitated | the distribution throu | gh a funding _l | oortal or an internet-bas | sed portal. | | |
| b) Business contact information | on | | | | | | |
| If a firm NRD number is not prov | ided in Item 8(a), p | rovide the business c | ontact informa | ation of the person beir | ng compensated. | | |
| Street address | Municip | ality | Province/Sta | te | Postal/ZIP code | | |
| | | | | | | | |
| Country | Telepho | ne number | Email addre | SS | | | |
| c) Relationship to issuer or in | vostmont fund ma | anagor . | | | | | |
| | | | | | | | |
| Indicate the person's relationship Part B(2) of the Instructions and Connected with the issuer or i | the meaning of "co | ntrol" in section 1.4 of | NI 45-106 fo | | oleting this section. | | |
| Insider of the issuer (other tha | n an investment fun | d) | None | of the above | | | |
| Director or officer of the invest | ment fund or invest | ment fund manager | | | | | |
| 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 | | | | | | | |
| Value of all securities distributed as | | Security code1 | | curity code2 | Security code: | 3 | |
| compensation ⁴ | | Describe terms of wa | arrants, optio | ns or other rights | | | |
| | | | | | | | |
| Other compensation ⁵ | | Describe | | | | | |
| | | | | | | | |
| | | | | | | | |
| Total compensation Paid | 0.0000 | | | | | | |
| Check box if the person will o | or may receive any | u deferred compensatio | n (describe th | e terms below) | | | |
| | . , | · | • | , | | | |
| | | | | | | | |

⁴ Provide the aggregate value of all securities distributed as compensation, excluding options, warrants or other rights exercisable to acquire additional securities of the issuer. Indicate the security codes for all securities distributed as compensation, including options, warrants or other rights exercisable to acquire additional securities of the issuer.

⁵ Do not include deferred compensation.

| ITEM 9 – D | ITEM 9 – DIRECTORS, EXECUTIVE OFFICERS AND PROMOTERS OF THE ISSUER | | | | | |
|---|---|---|---|---|--|--|
| Indicate whether the issuer is any of the following (select the one that applies - if more than one applies, select only one). Reporting issuer in any jurisdiction of Canada Foreign public issuer Wholly owned subsidiary of a reporting issuer in any jurisdiction of Canada 6 Provide name of reporting issuer Wholly owned subsidiary of a foreign public issuer 6 Provide name of foreign public issuer Issuer distributing only eligible foreign securities and the distribution is to permitted clients only 7 If the issuer is at least one of the above, do not complete Item 9(a) – (c). Proceed to Item 10. 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. 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. | | | | | | |
| If the issu | uer is none of the above, check this box an | d complete Item 9(a) – (c). | | | | |
| a) Directors | executive officers and promoters of the iss | suer | | | | |
| | Illowing information for each director, executive wise state the country. For "Relationship to iss" Organization or company name | | | Relationship to issuer (select all that apply) | | |
| YN | | | | □ D □ O □ P | | |
| If the promote | information In listed above is not an individual, provide the tanks, state the province or territory, otherwise state | | | | | |
| | Organization or company name | Family name First given name Secondary given name | Residential jurisdiction of individual | Relationship to promoter (select one or both if applicable) | | |
| | | | | □ □ □ O | | |
| c) Residenti | al address of each individual | | · | | | |
| | hedule 2 of this form providing the full resid completed report. Schedule 2 also requires | | | | | |

ITEM 10 - CERTIFICATION

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

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

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

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

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

By completing the information below, I certify, on behalf of the issuer/underwriter, to the securities regulatory authority or regulator, as applicable, that I have reviewed this report and to my knowledge, having exercised reasonable diligence, the information provided in this report is true and, to the extent required, complete.

| lame of issuer/underwriter/agent Covalon Technologies Ltd. | | | | |
|--|------------------|-----------------------|--|--|
| Full legal name - Family name | First given name | Secondary given names | | |
| Pedlar | Brian | | | |
| Title | Telephone number | Email address | | |
| Chief Executive Officer | 905-366-0966 | bpedlar@covalon.com | | |
| Signature (Signed) "Brian Pedlar" | Date 2019-09-27 | | | |

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 | Same as individual certifying the report | | | | | |
| Full legal name - Family name | First given name | Secondary given names | Title | | | |
| | | | | | | |
| Name of company | | Telephone number Er | 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 Schedule 1 or 2, that this information is being collected by the securities regulatory authority or regulator under the authority granted in securities legislation, that this information is being collected for the purposes of the administration and enforcement of the securities legislation of the local jurisdiction, and of the title, business address and business telephone number of the public official in the local jurisdiction, as set out in this form, who can answer questions about the security regulatory authority's or regulator's indirect collection of the information, and
- b) has authorized the indirect collection of the information by the securities regulatory authority or regulator.

| EDR1569595306-948 | 2019-10-02 12:04:49.836 |
|-------------------|-------------------------|
| Submission ID | Date |