

A BRIGHTER FUTURE FOR MENTAL HEALTH.

Investor Presentation 投资者报告 Private and Confidential 保密资料 May 2021 / 2021年5月



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OUR MISSION, PURPOSE, AND GOAL 我们的使命、目的和目标

Our mission at The Newly Institute is improving the lives of military veterans, first responders, First Nations, and the general public suffering from PTSD, depression, addiction, and other mental health indications with psychedelic-assisted psychotherapy, care, understanding, and empathy. 我们 The Newly Institute的使命是通过迷幻剂辅助的心理治疗、关怀、理解和同情,改善退伍军人、急救人员、原住民以及患有创伤后应激障碍、抑郁症、成瘾和其他心理健康适应症的人群的生活。

We believe that mental health treatment is in drastic need of a paradigm shift and our practice was founded to provide long-lasting change within this industry, our community, and with our clients. By fusing a bio-psycho-social-spiritual treatment model with psychedelic-assisted therapies, patients can overcome deeply embedded traumas that prevent them from living fully in their everyday lives.我们相信,心理健康治疗急需一个模式的转变,我们的实践是为了在这个行业、我们的社区和我们的客户中提供持久的改变。通过将生物-心理-社会-精神治疗模式与迷幻剂辅助治疗相融合,病人可以克服深藏的创伤,这些创伤阻碍他们在日常生活中充实生活。

With locations opening in Calgary, AB, Fredericton, NB, Edmonton, AB, as well as several more Canadian cities, The Newly Institute's goal is to become Canada's largest and premier operator of psychedelic-assisted psychotherapy clinics. 随着在阿尔伯塔省卡尔加里、新不伦瑞克省弗雷德里克顿、阿尔伯塔省埃德蒙顿以及其他几个加拿大城市开设诊所,The Newly Institute的目标是成为加拿大最大和最重要的迷幻剂辅助心理治疗诊所的运营商。



MARKET SIZE 市场规模

The World Economic Forum estimates that mental disorders cost around \$2.5 trillion in global costs in 2010 and projected costs of \$6.0 trillion by 2030. 世界经济论坛估计,2010年精神障碍的全球成本约为\$2.5万亿,到2030年预计成本为\$6.0万亿。

In any given year, 1 in 5 Canadians will experience a mental health problem or illness. 在任何一年中,每5个加拿大人中就有1个)会遇到心理健康问题或疾病。

The total cost of mental health problems to the Canadian economy exceeds \$50 billion annually.心理健康问题给加拿大经济带来的总成本每年超过\$500亿。⁽¹⁾

In 2011, mental health problems and illnesses among working adults in Canada cost employers more than \$6 billion in lost productivity. Insurance companies are motivated to fund treatments that can get people back to work. / 2011年,加拿大工作的成年人的心理健康问题和疾病使雇主损失了\$60多亿的生产力。保险公司有动力为能够让人们恢复工作的治疗提供资金。

Veterans represent a large population of patients who suffer from PTSD and refractory mood disorders with a prevalence of 2 to 5 times that of the general Canadian population.退伍军人代表了一大批患有创伤后应激障碍和难治性情绪障碍的患者,其发病率是加拿大一般人口的2至5倍。⁽²⁾

Veterans have established health care insurance that covers ketamine-enhanced psychotherapy.退伍军人已经建立了涵盖氯胺酮强化心理治疗的健康护理保险。

The public healthcare system lacks the resources to rapidly establish treatment centres for novel and effective mental health therapies.公共医疗系统缺乏资源,无法迅速建立新型和有效的心理健康疗法的治疗中心。⁽³⁾

Over 50% of Canadians report worsening mental health since the COVID-19 pandemic started, leading to increased disability claims in Canada with little access to support. 超过50%的加拿大人报告说,自从新冠疫情开始以来,心理健康状况恶化,导致加拿大的残疾索赔增加,但很少有机会获得支持。

REFERENCES 参考:

- (1) https://www.mentalhealthcommission.ca/English/what-we-do/workplace#:^:text=About%2030%20per%20cent%200f,economy%20exceeds%20%2450%20billion%20annually
- (2) Journal of Military, Veteran and Family Health 2(1) 2016 doi:10.3138/jmvfh.3258
- (3) https://cmha.ca/fast-facts-about-mental-illness

EMERGING WAVE IN THE PSYCHEDELICS SPACE 迷幻剂领域的新兴浪潮

"The next five years will be an absolute golden window for the psychedelics sector" "未来五年将是 迷幻剂领域的绝对黄金窗口期"

- Tim Ferriss

The World Health Organization ("WHO") estimates that 700 million cases of mental and neurological disorders are reported annually, accounting for 13% of the global disease burden.世界卫生组织估计,每年有7亿个精神和神经系统疾病的病例报告,占全球疾病负担的13%。

Preliminary studies from world-renowned institutions including Johns Hopkins University, New York University, the University of Toronto, and the Imperial College of London suggest that psilocybin-assisted therapy could be a revolutionary treatment for depression and addiction.包括翰斯·霍普金斯大学、纽约大学、多伦多大学和伦敦帝国学院在内的世界知名机构的初步研究表明,迷幻剂辅助治疗可能是对抑郁症和成瘾的一种革命性治疗。

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The psychedelic drugs market is forecast to grow at a CAGR of 16.3% to reach \$6.9 billion by 2027, fueled by the growing acceptance of psychedelic-derived meds to treat mental health coupled with the rising prevalence of mental disorders like depression and anxiety.迷幻剂市场预计将以16.3%的复合年增长率增长,到2027年达到\$69亿,这是因为越来越多的人接受用迷幻剂来治疗精神健康,再加上抑郁症和焦虑症等精神疾病的发病率上升。

- Data Bridge Market Research (https://www.prnewswire.com/news-rele ase s/p sychedo 2



In the US, more than 30 million people are using psychedelic drugs. This factor has increased the research and development activities in psychedelic drugs across the US.在美国,有3000多万人在使用迷幻剂。这一因素增加了整个美国在迷幻剂方面的研究和开发活动。

- Department of Neuroscience, Pacinty of Medicine, Norwegian University of Science and Technology, Trondheim, Norway 挪*談*持 隆赫姆市挪威科技大学医学院神经科学 3



The value of the psychedelics market is worth more than \$100 billion. 迷幻剂市场的价值超过\$1000亿美元。

- Canaccora Genuity Group

(https://www.baystreet.ca/stocksto watch/9311/Psyche
delic-Drugs-Could-Create-a-100-Billon-Investment-



Imperial College London

30% of cases of depression are not responsive to standard treatments. This unmet need remains core to working towards a new standard of mental health care. 30%的抑郁症病例对标准治疗没有反应。这种未得到满足的需求仍然是努力实现心理健康护理新标准的核心。

- Khalid Saad Al-Harbi, Medical College, King Saud Bin Abdulaziz University for Health Sciences, Riyadh, Kingdom of Saudi Arabia 沙特阿拉伯利维得 市本阿卜杜勒阿齐兹健康科学大学医学院

- With US\$17 million in private funding and a full panel of planned studies, Johns Hopkins investigators launched the Center for Psychedelic and Consciousness Research in September 2019. 凭借1700万美元的私募资金和一个完整的计划研究小组,约翰斯霍普金斯大学的调查人员于2019年9月启动了迷幻和意识研究中心。
- The Experimental Therapeutics Research Group at the NYU School of Medicine is conducting a study to investigate the effectiveness of psilocybin-assisted therapy for alcohol addiction. 纽约大学医学院的实验治疗学研究小组正在进行一项研究,调查迷幻剂辅助治疗酒精成瘾的有效性。
- The Psychedelic Studies Research Program (PSRP) establishes standards for the rigorous study of psychedelics while initiating fruitful collaborations with other research groups and industry partners; the PSRP has already received fundraising approval from the University of Toronto.迷幻研究计划(PSRP)为严格的迷幻剂研究建立了标准,同时启动了与其他研究小组和行业伙伴的富有成效的合作;PSRP已经获得了多伦多大学的筹款批准。
- 4 Imperial College London launched the world's first Centre for Psychedelics Research in April 2019. 伦敦帝国学院于2019年4月启动了世界上第一个迷幻剂研究中心。



TARGET MARKETS 目标市场

In any given year, 1 in 5 people in Canada will personally experience a mental health problem or illness.

在任何一年里,加拿大每5个人中就有1个人会遇到心理健康问题或疾病。

Military Veterans 退伍军人 PTSD 创伤后应激障碍

71% of Veterans in receipt of disability benefits for a mental health condition have PTSD. / 71%因精神健康状况领取残疾津贴的退伍军人有创伤后应激障碍。



First Nations Addiction成瘾

Alcohol and drug abuse were considered problems in 73% and 59% of First Nations communities, respectively.酗酒和吸毒分别是73%和59%的原住民社区的问题。





First Responders 急救人员 *Trauma 创伤*

It is estimated that over 70,000 Canadian first responders have experienced PTSD in their lifetimes.据估计,超过7万名加拿大急救人员在他们的一生中经历了创伤后应激障碍。



Long-Term Disabilities 长期残疾 Depression抑郁症

In any given week, at least 500,000 employed Canadians are unable to work due to mental health problems.在每个星期,至少有50万名加拿大就业者因精神健康问题而无法工作。



Our Leadership Team Have Proven Track Records



Arthur H. Kwan
MBA, CFA, ICD.D
Chief Executive Officer

Arthur was the Founder, President & CEO of Cannalncome Fund, whose management contract was acquired by Balancing Rock in 2021. He was also the Co-Founder, President & CEO of Seven Leaf Ventures, which was acquired by Stem Holdings in 2020, and Vice President and Equity Partner of Westwind Partners, which was acquired by Thomas Weisel Partners Group in 2008.



Dr. Robert L. Tanguay
MD, FRCPC, CCSAM, CISAM
Chief Medical Officer

Dr. Tanguay is one of a few Psychiatrists who has completed two fellows hips: one in Addiction Medicine and one in Pain Medicine. He was the Medical Lead for Addiction Education for AHS. He is the Regional Director for AB and NWT for the Canadian Society of Addiction Medicine (CSAM) and the President of the Pain Society of Alberta.



Dr. Marshall J. Ross *MD, FRCPC*Chief Scientific Officer

Dr. Ross created a new protocol that formed the basis of a province-wide program to treat opiate addiction in the emergency department and has guided treatment for over 3,000 Albertans. He is an award-winning clinician, medical researcher, and a published author on a range of topics including the efficacy of subdissociative dose ketamine.



Colonel (Retired) Richard F. Pucci *OMM, CD, BSc, MDS*Chief Operating Officer

Colonel (Retired) Pucci served as the Deputy Commander of the Canadian Forces Health Services, during which time he oversaw a team of approximately 6,400 active members. He also held the position of Chief of Staff of the Health Services Group, with the overall responsibility for infrastructure budget of \$600 million.



Colonel (Retired) / Dr. Rakesh Jetly CD, OMM, MD, CCFP, FRCPC Chief Strategy Officer

Colonel (Retired) and Dr. Jetly was appointed senior psychiatrist and mental health clinical advisor to the CF Surgeon General. He was additionally appointed "The CF Brigadier Jonathan C. Meakins, CBE, RCAMC Chair in Military Mental Health". He has published numerous articles in professional journals on such topics as PTSD.



Nadine Weller
CA, CPA, FEA
Chief Financial Officer

Nadine has been working in accounting since 2007 and currently holds her CPA and FEA designations. She was formerly with MNP and has over 14 years of accounting, auditing, and taxation experience. Nadine also volunteers in the community, acting as a Treasurer for two private schools and working with the CPA volunteer tax program.



Marney Riendeau BScN, RN VP, Clinical Operations

Marney has over 30 years of clinical, nursing, and management experience. She was the Program Manager for the Operational Stress Injury ("OSI") Clinic, operated by Carewest Innovative Health Care. She built the Calgary OSI clinic from eight to 40 employees to be one of the largest in the country.



Graeme Dick *BMgt*VP, Capital Markets

Graeme has more than 20 years of experience providing investor relations and capital markets guidance to both private and public Canadian companies. His capital markets relationships include retail brokers, high net worth private investors, and institutional and investment banking contacts throughout North America.



我们的领导团队有成功的履历



Arthur H. Kwan

工商管理硕士、注册金融分析师、 公司董事协会专业董事认证 首席执行官

Arthur 曾是Cannalncome Fund的创始人、总裁和首席执行官,其管理合同在2021年被Balancing Rock收购。他还曾是Seven Leaf Ventures的联合创始人、总裁兼首席执行官,该公司2020年被Stem Holdings收购了。他还曾担任Westwind Partners的副总裁兼权益合伙人。该公司2008年被Thomas Weisel Partners Group收购了。



Robert L. Tanguay博士 MD, FRCPC, CCSAM, CISAM 首席医学官

Tanguay 博士是少数完成两项研究的精神病学家之一: 一项是成瘾医学,另一项是疼痛医学。他曾是AHS的成瘾教育的医疗负责人,现为加拿大成瘾医学会(CSAM)阿尔伯塔省和西北地区的区域主任,也是阿尔伯塔省疼痛协会的主席。



Marshall J. Ross博士 MD, FRCPC 首席科学官

Ross博士创建了一个新的协议,该协议构成了全省范围内在急诊科治疗阿片剂成瘾的方案的基础,并指导了3000多名阿尔伯塔省人的治疗。他是一位屡获殊荣的临床医生、医学研究员,并在一系列课题上发表了文章,包括亚分离剂量氯胺酮的疗效。



Richard F. Pucci上校(退役) OMM, CD, BSc, MDS 首席运营官+

Pucci 上校(退役)曾担任加拿大军队卫生服务部门的副指挥官,在此期间,管理着一支由大约6,400名现役成员组成的团队,还担任过卫生服务集团办公室主任的职务,全面负责\$6亿的基础设施预算。



Dr. Rakesh Jetly博士,上校(退役) *CD, OMM, MD, CCFP, FRCPC* 首席战略官

Jetly 博士、上校(退役)曾被任命为CF Surgeon General的高级精神病学家和心理健康 临床顾问,还曾被任命为"The CF Brigadier Jonathan C. Meakins, CBE, RCAMC Chair in Military Mental Health",已经在专业期刊上 发表了许多文章,主题包括创伤后应激障碍。



Nadine Weller CA, CPA, FEA 首席财务官

Nadine 自2007年以来一直从事会计工作,目前拥有注册会计师和家族企业规划师资格,曾在MNP工作,有超过14年的会计、审计和税务经验,还在社区做志愿者,担任两所私立学校的财务主管,并与CPA志愿者税务项目合作。



Marney Riendeau BScN, RN 临床运费副首裁

Marney 有超过30年的临床、护理和管理经验,曾是由Carewest Innovative Health Care运营的操作压力伤害("OSI")诊所的项目经理,将卡尔加里OSI诊所的员工从8人增加到40人,成为全国最大的诊所之一。



Graeme Dick BMgt 资本市场副总裁

Graeme 有超过20年的经验,为加拿大私营和 上市公司提供投资者关系和资本市场指导。 他的资本市场关系包括零售经纪人、高净值 私人投资者,以及整个北美的机构和投资银 行人脉。





Dr. Marie Claire Bourque *MD, MSc, FRCPC*Psychiatrist (Toronto)

Dr. MC is a sports psychiatrist leading mental health and peak performance for the Toronto Maple Leafs. Dr. MC is the Past President of Foothills Medical Staff Association and Founder of Limbus Movement. Dr. MC is a mental health expert and specializes in mental and physical fitness. She is also a Clinical Assistant Professor at the UoC.



Dr. Kaitlin Chivers-Wilson *MD, MSc, FRCPC*Psychiatrist (Calgary)

Dr. Kaitlin Chivers-Wilson is the Medical Director at the Carewest OSI Clinic, serving Canadian Forces veterans and RCMP officers, with expertise in trauma-informed psychotherapy and psychopharmacology treatments. Dr. Chivers-Wilson has additional training in a variety of psychotherapy modalities including ART, PET, and ISTDP.



Dr. Atul Khullar *MD, MSc, FRCPC, DAPBN*Psychiatrist (Edmonton)

Dr. Khullar is a psychiatrist who specializes in the integrative management of sleep, mood / anxiety, and attention deficit disorders. Dr. Khullar is also a consultant for organizations such as the Grey Nuns Hospital, Edmonton Oilers, Canadian Winter Olympic team, and MedSleep, a Canada-wide network of sleep clinics.



Dr. Wiplove Lamba *MD, FRCPC, ISAM, DABAM*Psychiatrist (Toronto)

Dr. Lamba is an addiction psychiatrist and the physician lead of the Concurrent Disorders Program at Ontario Shores Centre for Mental Health Sciences. He was previously the education lead of the Addiction Program at St. Michael's Hospital. He has served as the regional director of Ontario for the CSAM.



Dr. Annabel Mead *MD, MBBS, FAChAM, DABAM*Physician - Addiction (Vancouver)

Dr. Mead is an addiction physician with special interests in concurrent psychiatric disorders. She is a Fellow of the Australasian Chapter of Addiction Medicine, a diplomate of the American Board of Addiction Medicine, and Clinical Assistant Professor at UBC. She was also the past Director of the BCCSU Addiction Medicine Fellowship program.



Dr. Eric McGillis *MD, FRCPC*Toxicologist (Calgary)

Dr. McGillis is a medical toxicologist consultant and is a clinical lecturer at the Department of Emergency Medicine, University of Calgary. As well he is an Attending Physician, Emergency Medicine at the Rockyview General Hospital. He has extensive knowledge and experience in clinical pharmacology and toxicology.



Dr. Adrian Norbash *CD, BSc, MD, CCFP, FRCPC*Psychiatrist (Edmonton)

Dr. Norbash is a serving member of the Canadian Armed Forces. He is a medical specialist officer serving in the Royal Canadian Medical Service. He is currently the Chief Psychiatrist, Canadian Forces, Western Area. He also is a Staff Psychiatrist for the Calgary Police Service and for the Alberta Health Services, Calgary Zone.



Dr. Jennifer Swainson *MD, FRCPC*Psychiatrist (Edmonton)

Dr. Swainson has a focus on treatment resistant depression and has particular interest and expertise in the use of ketamine in this area. She has co-led the development of one of the original IV ketamine programs in Canada and is a key contributor to the CANMAT task force update on use of ketamine for depression.





Marie Claire Bourque博士 MD, MSc, FRCPC 精神病学专家(多伦多)

MC博士是一位体育精神病学专家,领导多伦多枫叶队的心理健康和巅峰表现,是Foothills Medical Staff Association的前任主席和Limbus Movement的创始人,是一位心理健康专家,专门研究心理和身体健康,还是UoC的一名临床助理教授。



Kaitlin Chivers-Wilson博士 MD, MSc, FRCPC 精神病学专家(卡尔加里)

Kaitlin Chivers-Wilson博士是Carewest OSI诊所的医务主任,为加拿大军队退伍军人和皇家骑警提供服务,擅长创伤知情心理治疗和精神药理学治疗,还接受了各种心理治疗模式的培训,包括ART、PET和ISTDP。



Atul Khullar博士 *MD, MSc, FRCPC, DAPBN*精神病学专家(埃德蒙顿)

Khullar医生是一名精神病学专家,擅长睡眠、情绪/焦虑和注意力缺陷障碍的综合管理,也是Grey Nuns Hospital、Edmonton Oilers、加拿大冬奧队和MedSleep(一个全加拿大的睡眠诊所网络)等机构的顾问。



Wiplove Lamba博士 *MD, FRCPC, ISAM, DABAM*精神病学专家(多伦多)

Lamba 博士是一名成瘾精神病学专家,也是安大略省海岸精神健康科学中心并发症项目的医生负责人,曾是St. Michael's Hospital成瘾项目的教育负责人,曾担任CSAM安大略省的区域主任。



Annabel Mead博士
MD, MBBS, FAChAM, DABAM
内科医生 – 成瘾症(温哥华)

Mead 医生是一名成瘾方面的医生,对并发性精神疾病特别感兴趣,是澳大利亚成瘾医学分会的研究员,美国成瘾医学委员会的认证医师,以及卑诗大学的临床助理教授,曾是BCCSU成瘾医学研究项目的主任。



Eric McGillis博士 MD, FRCPC 毒理学家(卡尔加里)

McGillis 博士是一名医药毒理学顾问,也是卡尔加里大学急诊医学系的临床讲师,同时也是Rockyview 综合医院急诊科的主治医生,在临床药理学和毒理学方面有丰富的知识和经验。



Adrian Norbash博士 CD, BSc, MD, CCFP, FRCPC 精神病学专家(埃德蒙顿)

Norbash 医生是加拿大武装部队的一名现役成员,是一名在加拿大皇家医疗服务机构服务的医学专家官员,目前是加拿大西部地区部队的首席精神病学专家,也是卡尔加里警察局和阿尔伯塔省卫生局卡尔加里区的工作人员精神病学专家。



Jennifer Swainson博士 MD, FRCPC 精神病学专家(埃德蒙顿)

Swainson博士专注于治疗抵抗性抑郁症,并对氯胺酮在该领域的应用有特别的兴趣和专长。她共同领导了加拿大最初的静脉注射氯胺酮项目的发展,并且是CANMAT工作组关于使用氯胺酮治疗抑郁症的重要贡献者。



Our Corporate Advisory Board is Comprised of Leaders in Veteran Affairs, Indigenous Affairs, Psychotherapy, Pharmacology, and Various Stakeholder Groups



Trevor Berard *CCAC, RCAS, ACD*Advisor, Indigenous Affairs

Over the past 25 years, Trevor's focus has been doing humanitarian work in helping communities deal with mental health and addictions issues. He is an Indigenous Addictions Specialist and has mostly worked with First Nations. Trevor received a National Award from the Canadian Addiction Counselors Certification Federation.



Colleen E. Clark

MSW, RSW

National Director, Psychotherapy

Colleen is a leader in Canada in trauma therapy and in training others to provide trauma therapy. She is Canada's Certified Trainer for Accelerated Resolution Therapy. Ms. Clark is a Diplomat with the American Academy of Experts in Traumatic Stress, Board Certified in Bereavement Trauma, and Board Certified in Sexual Abuse.



Joan Hollihan BComm Advisor, Benefits

Joan built her 36 year career with Aon and Mercer where she consulted to clients regarding their employee benefit programs. Joan worked closely with group insurance companies and benefit providers in the areas of disability claims and financial management, as claims and the related costs continue to increase significantly each year.



Carl MacAulay
BA
Advisor, First Responders

Carl retired from the Royal Canadian Mounted Police (RCMP) after 25 years of service. He obtained extensive training in criminal investigations, suspect interrogations, and public relations. Carl spent 10 years in Burnaby, BC at one of Canada's largest and busiest RCMP Detachments.



Sat Parhar
M.O.M.
Advisor, First Responders

Deputy Chief (retired) Parhar joined the Calgary Police Service in 1991 and retired after 29 years of service. Deputy Parhar is a recipient of the Queen's Diamond Jubilee Medal, Calgary Police Service Distinguished Service Medal, Police Exemplary Service Medal, the Life Saving Award, and is a Member of the Order of Merit Police Forces, CPS.



Arron Victory
Task Force 1-07
Advisor, Veteran Affairs

Arron joined the Canadian Armed Forces where he served for over 13 years in an infantry unit spending a large portion of that time in Recce/Sniper platoons including a 6-month combat mission to Afghanistan with Task Force 1-07, as well as a deployment to Haitiin support of OP Halo in 2004.



Ray Yue RPharm Advisor, Pharmacology

Ray is a Clinical Pharmacist. Ray is a Co-Founder and Director of Canndara. He is also the Chairman and Co-Founder of Imagine Health and FEMME | HOMME Medical. Ray is a member of YPO, a City of Edmonton Top 40 under 40 Alumni and was selected as Canada's Top 40 Canadian Entrepreneurs by Ivey Business.

BOARD OF DIRECTORS and LEGAL COUNSEL

Arthur H. Kwan – CEO, The Newly Institute Martin Cheyne – CEO, Boulder Energy David Isaak – CEO, Boaz Pharmaceuticals

Michael J. Saliken, LLB – Partner, BLG Corporate Secretary David Wood, PhD, LLB – GC, PsyGen Labs Advisor, Regulatory and IP



我们的企业咨询委员会由退伍军人事务、原住民事务、心理治疗、药理学和各种利益相关群体的领导者组成。



Trevor Berard *CCAC, RCAS, ACD*顾问、原住民事务

在过去的25年里, Trevor的工作重点是做人 道主义工作,帮助社区处理心理健康和成瘾问题。他是一名原住民成瘾问题专家,主要与原住民合作。 Trevor获得了加拿大成瘾咨询师认证联合会颁发的国家奖。



Colleen E. Clark MSW, RSW 心理疗法国家理事

Colleen是加拿大创伤治疗和培训他人提供创伤治疗方面的领导者,是加拿大加速解决疗法的认证培训师,是美国创伤性压力专家协会的外交官,获得丧亲创伤委员会认证以及性虐待委员会认证。



Joan Hollihan *商学学士* 福利顾问

Joan在怡安和美世公司度过了她36年的职业生涯,为客户提供有关员工福利计划的咨询服务,与团体保险公司和福利供应商在残疾索赔和财务管理领域密切合作,因为索赔和相关费用每年都在大幅增加。



Carl MacAulay *文学学士* 急救人员顾问

Carl在服务25年后从加拿大皇家骑警(RCMP)退休,在刑事调查、嫌疑人审讯和公共关系方面获得了广泛的培训,在卑诗省本那比市的加拿大最大和最繁忙的皇家骑警支队之一工作了10年。



Sat Parhar M.O.M. 急救人员顾问

Parhar副局长(己退休)于1991年加入卡尔加 里警察局,在服务29年后退休,获得了女王 钻石庆典奖章、卡尔加里警察局杰出服务奖章、警察模范服务奖章、救生奖,并且是CPS 警察部队荣誉勋章的成员。



Arron Victory Task Force 1-07 退伍军人事务顾问

Arron加入了加拿大武装部队,在步兵部队服役超过13年,其中大部分时间在侦察/狙击排服役,包括在1-07特遣部队执行为期6个月的阿富汗作战任务,以及在2004年部署到海地支持光环行动。



Ray Yue *RPharm* 药理学顾问

Ray是一名临床药剂师,是Canndara的联合创始人和董事,也是Imagine Health和FEMME | HOMME Medical的主席和联合创始人,是YPO的成员,是埃德蒙顿市40位40岁以下的最优秀校友之一,并被Ivey Business选为加拿大40位顶级加拿大企业家之一。

董事和法律顾问

Arthur H. Kwan – 首席执行官,The Newly Institute Martin Cheyne – 首席执行官,Boulder Energy David Isaak – 首席执行官,Boaz Pharmaceuticals

Michael J. Saliken,法学士- 合伙人,BLG *公司秘书*

David Wood博士,法学士 – GC, PsyGen Labs 顾问,法规和知识产权



PHASE I - 2021E / 2022E 第一阶段 - 2021E / 2022E

Calgary / Edmonton 卡尔加里/埃德蒙顿

The Newly Institute aims to be Canada's largest provider of evidence based, medically supervised, psychedelic assisted and supported psychotherapy clinics dedicated to helping both veterans and civilians suffering from PTSD, addiction, depression, and other mental health conditions. / The Newly Institute的目标是成为加拿大最大的循证、医学监督、迷幻剂辅助和支持的心理治疗诊所,致力于帮助患有创伤后应激障碍、成瘾、抑郁症和其他心理健康状况的退伍军人和平民。

Fredericton/Ottawa弗雷德里克顿/渥太华

Located in New Brunswick, 5th Canadian Division Support Base Gagetown ("5 CDSB Gagetown") is the second largest public sector employer in the province. The base and its lodger units provide full-time employment to approximately 6,500 military members, including the Reserve Force, and 1,000 civilians. 位于新不伦瑞克省的加拿大第五师支援基地("5 CDSB Gagetown")是该省第二大公共部门雇主。该基地及其住宿单位为大约6,500名军人(包括后备部队)和1,000名平民提供全职就业。

Victoria / Toronto 维多利亚/多伦多

Canadian Forces Base Esquimalt ("CFB Esquimalt") is Canada's Pacific Coast naval base and home port to Maritime Forces Pacific and Joint Task Force Pacific Headquarters. As of 2018, 4,411 military personnel and 2,762 civilians work at CFB Esquimalt.加拿大埃斯基马尔特基地("CFB埃斯基马尔特")是加拿大太平洋海岸的海军基地,也是太平洋海事部队和太平洋联合特遣部队总部的母港。截至2018年,有军职人员4411人、文职人员2762人在加拿大埃斯基马尔特基地工作。



RESEARCH 研究

The Newly Institute will be ideally positioned to contribute to Phase III Trials by providing psychedelic supported psychotherapy to patients enrolled in randomized controlled trials being conducted by pharmaceutical companies and research institutions. / The Newly Institute非常适合,通过向参加制药公司和研究机构进行的随机对照试验的病人提供迷幻剂支持的心理疗法,为三期临床试验作出贡献。



- Since termination of a period of research from the 1950s to the early 1970s, most psychedelic substances have been classified as "drugs of abuse" with no recognized medical value. 自从20世纪50年代至70年代初的一段研究结束后,大多数迷幻物质被归类为没有公认的医疗价值的"滥用药物"。
- In clinical research settings around the world, renewed investigations are taking place on the use of psychedelic substances for treating illnesses such as addiction, depression, anxiety, and PTSD.在世界各地的临床研究中,正在对使用迷幻物质治疗成瘾、抑郁症、焦虑和创伤后应激障碍等疾病进行新的调查。
- Controlled clinical studies have recently been conducted to assess the basic psychopharmacological properties and therapeutic efficacy of these drugs as adjuncts to existing psychotherapeutic approaches.最近进行了对照临床研究,以评估这些药物作为现有心理治疗方法的辅助手段的基本精神药理学特性和治疗效果。
- The Newly Institute is committed to conducting research to both validate our internal protocols and contribute to the scientific literature surrounding psychedelic supported psychotherapy for the treatment of mental health conditions. / The Newly Institute致力于开展研究,以验证我们的内部协议,并为围绕迷幻剂支持的心理疗法治疗心理健康适应症的科学文献作出贡献。













TELE-HEALTH - HOMECOMING APP 远程健康 - HOMECOMING APP



Online platform for lasting behavioral

integration of psychedelic experiences



The Newly Institute is in discussions with Homecoming to on-board a tele-health platform. Homecoming is an online platform for lasting, scalable, and accessible behavioral integration of psychedelic experiences. / The Newly Institute 正在与Homecoming讨论加入一个远程健康平台。Homecoming是一个在线平台,用于持久的、可扩展的、可获得的迷幻体验的行为整合。

Note: The proposed product development is subject to ongoing negotiations and discussions and may be subject to change.注:拟议的产品开发有待于持续的谈判和讨论,可能会有变化。



A digital health product that introduces tech-assisted economies of scale into the integration process 将技术辅助的规模经济引入整合过程的数字 医疗产品



Leveraging Al-powered group therapy, personalized content, product strategy, and brief teletherapy interventions 利用人工智能驱动的团体治疗、个性化的内容、产品策略和简短的远程治疗干预措施



Companion physical practices are further leveraged for lasting integration outcomes进一步利用同伴身体实践,以获得持久的整合成果



STRATEGIC COLLABORATIONS 战略合作

The Newly Institute is forming collaborations with strategic parties to help veterans, first responders, and First Nations across Canada.

The Newly Institute正在与战略各方形成合作,以帮助加拿大各地的退伍军人、急救人员和原住民。



















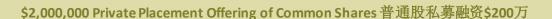


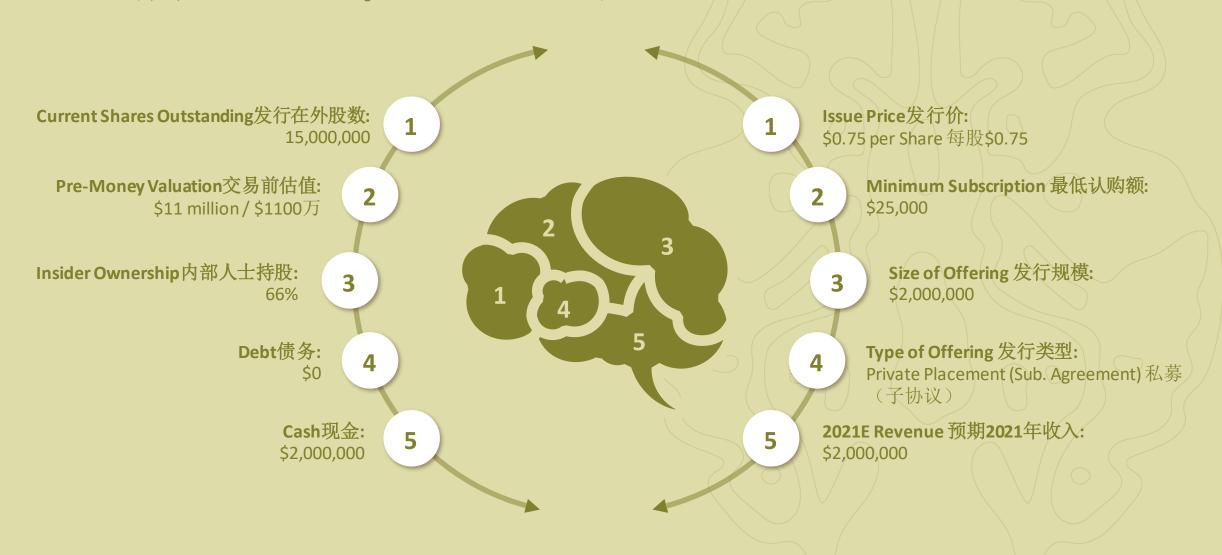














USE OF PROCEEDS 资金用途

This private placement will enable us to further develop at least two additional clinics.这次私募的资金将使我们能够进一步发展至少另外两个诊所。

ITEM 事项	ALLOCATION金额
Clinics - Edmonton and Ottawa 诊所 – 埃德蒙顿 和渥太华	\$1,250,000
First Nations Strategic Initiative 原住民战略合作项目	\$150,000
Clinical Trials Strategic Initiative 临床试验战略合作项目	\$150,000
Pain Treatment Strategic Initiative疼痛处理战略合作项目	\$150,000
Offering Costs 发行成本	\$100,000
Working Capital 运营资本	\$200,000



DEEP VALUE 深度价值

Note: (1) anticipated clinic openings in 2022E 注: (1)预计在2022年开设诊所

The Newly Institute's pre-money valuation is extremely compelling relative to its peer group.

相对于同行而言,The Newly Institute的交易前估值是非常引人注目的。

Competitors 竞争对手	field trip		Numinus	Newly
Stock Symbol 股票代码	FTRP	NM	NUMI	IPO - Q4/21
Intensive Outpatient Program 强化的门诊项目	No无	No无	No无	Yes有
Clinic Locations 诊所位置	Tor / USA / Net	USA	Van / Mtl	Cgy / Frd / Edm Ott / Tor / Hal (1)
Market Capitalization 市值	\$231 million / \$2.31 亿	\$44 million / \$4400万	\$183 million / \$1.83 亿	\$11 million / \$1100万

COMPELLING VALUATION 诱人的估值



WHY INVEST? 为何投资?

These are a few reasons why we are different.这些是我们与众不同的几个原因。



Best-in-Class Team一流的团队

Each doctor have won accolades and awards in their respective fields.每位医生都在各自的领域赢得了荣誉和奖项。



First Mover Advantage 先发优势

We are poised to become Canada's largest operator of psychedelic-assisted clinics.我们准备成为加拿大最大的迷幻剂辅助诊所的运营商。



Valuable IP 宝贵的知识产权

We are developing our own appto aggregate data on veterans.我们正在开发自己的应用程序,以汇总退伍军人的数据。



Short Term Liquidity 短期流动性

We are targeting to go public in Q4 2021 via an IPO or RTO.我们的目标是在2021年第四季度通过IPO或RTO上市。



Low Valuation 估值低

The \$11 million pre-money valuation is deeply discounted. 交易前估值为\$1,100万,估值折价很大



Multiple Revenue Streams 多个营收来源

Veterans, First Responders, First Nations, Long-Term Disability退伍军人、急救人员、 原住民、长期残疾者



Strategic Partnerships 战略合作伙伴

We have formed collaborations with several strategic groups.我们已经与多个战略集团形成了合作关系。



Significant Growth 巨大增长

The proceeds from the IPO will be geared towards expansion into the US. / IPO的收益将用于向美国扩张。



STATUTORY AND CONTRACTUAL RIGHTS OF ACTION 法定和约定的诉讼权利

Securities legislation in certain of the provinces of Canada may deem this Presentation to be an offering memorandum and accordingly provide purchasers with statutory rights of rescission or damages, or both, in the event this Presentation contains a misrepresentation. A "misrepresentation" is an untrue statement of a material fact or an omission to state a material fact that is required to be stated or that is necessary to make any statement not misleading or false in the light of the circumstances in which it was made. These remedies must be commenced by the purchaser within the time limits prescribed and are subject to the defences contained in the applicable securities legislation. Purchasers should refer to the applicable provisions of these rights or consult with a legal advisor.

The following is a summary of the statutory rights of rescission or damages, or both, under securities legislation in certain of the provinces of Canada where that is required to be disclosed under the relevant securities legislation, and as such, is subject to the express provisions of the legislation and the related regulations and rules. The rights described below are in addition to, and without derogation from, any other right or remedy available at law to purchasers of the Securities.

Ontario Purchasers

Ontario securities legislation provides that where an offering memorandum is delivered to a purchaser and contains a misrepresentation, the purchaser will be deemed to have relied upon the misrepresentation and will, except as provided below, have a statutory right of action for damages or for rescission against the issuer and a selling security holder on whose behalf the distribution is made; if the purchaser elects to exercise the right of rescission, the purchaser will have no right of action for damages against the issuer or any selling security holder. No such action shall be commenced more than, in the case of an action for rescission, 180 days after the date of the transaction that gave rise to the cause of action, or, in the case of an action for rescission, the european shall not be rescission, the earlier of: (i) 180 days after the date of the transaction that gave rise to the cause of action, or (ii) three years after the date of the transaction that gave rise to the cause of action, or (iii) three years after the date of the transaction that gave rise to the cause of action. The Ontario legislation provides a number of limitations and defences to such actions, including: (a) the issuer or any selling security holder is not liable if the purchaser purchased the securities with knowledge of the misrepresentation; (b) in an action for damages, the issuer of the misrepresentation relied upon; and (c) in no case shall the amount recoverable exceed the price at which the securities were offered.

These rights are not available for a purchaser that is: (a) a Canadian financial institution, meaning either: (i) an association governed by the Cooperative Credit Associations Act (Canada) or a central cooperative credit society for which an order has been made under section 473(1) of that Act; or (ii) a bank, loan corporation, trust company, trust corporation, insurance company, treasury branch, credit union, caisse populaire, financial services cooperative, or league that, in each case, is authorized by an enactment of Canada or a province or territory of Canada; (b) a Schedule III bank, meaning an authorized foreign bank named in Schedule III of the Bank Act (Canada); (c) the Business Development Bank of Canada incorporated under the

Saskatchewan Purchasers

Saskatchewan securities legislation provides that in the event that an offering memorandum, together with any amendments thereto, or advertising and sales literature disseminated in connection with an offering of securities contains a misrepresentation, a purchaser who purchases such securities has, without regard to whether the purchaser relied on the misrepresentation, a right of action for damages against: (a) the issuer and the selling security holder on whose behalf the distribution is made; (b) every promoter and director of the issuer or the selling security holder, as the case may be, at the time the offering memorandum or any amendment to it was sent or delivered; (c) every person or company whose consent has been filed respecting the offering, but only with respect to reports, opinions or statements that have been made by them; (d) every person who or company that, in addition to the persons or companies mentioned in clauses (a) to (c), signed the offering memorandum or at mendment to the offering memorandum, and the selling security holder under the offering memorandum or a mendment to the offering memorandum. If such purchaser elects to exercise a statutory right of rescission against the issuer or selling security holder, it shall have no right of action for damages against that person or company. No such action for rescission or damages shall be commenced more than, in the case of a right of rescission, 180 days after the date of the transaction that gave rise to the cause of action, and (ii) one year after the plaintiff first had knowledge of the facts giving rise to the cause of action, and (ii) six years after the date of the transaction that gave rise to the cause of action.

The Saskatchewan legislation provides a number of limitations and defences, including: (a) no person or company will be liable if the person or company proves that the purchaser purchased the securities with knowledge of the misrepresentation; (b) in the case of an action for damages, no person or company will be liable for all or any portion of the damages that it proves do not represent the depreciation in value of the securities as a result of the misre presentation; and (c) in no case will the amount recoverable in any action exceed the price at which the securities were offered to the purchaser.

No person or company, other than the issuer, will be liable if the person or company proves that: (a) the offering memorandum or any amendment to it was sent or delivered, that person or company gave reasonable general notice that it was so sent or delivered; (b) after the filing of the offering memorandum or any amendment to it and be fore the pur chaser, on be coming aware of any misrapresentation in the person's or company's consent to it and gave reasonable general notice that it was so sent or delivered; (b) after the filing of the offering memorandum or any amendment to it and be fore the pur chaser, on be coming aware of any misrapresentation in the mental memorandum or any amendment to it and the responsor's or company's consent to it and gave reasonable general notice that (i) there person's or company had not reasonable general notice that (i) there person or company had not reasonable general notice that (ii) there person or company had not reasonable general notice that (ii) there person or company had not reasonable general notice that (ii) there person or company had not reasonable general notice that (ii) there person or company had not reasonable general notice that person or company had not reasonable general notice that person or company had not reasonable general notice that person or company had not reasonable general notice that person or company had not reasonable general notice that the person or company had not reasonable general notice that such use had been and did not believe that (ii) there person or company had not reasonable general notice that such use had been and agave reasonable general notice that the person or company amendment to it given the person or company is seport, (ii) with respect to any part of the offering memorandum or any amendment to it did not fairly represent that contains a misrepresentation attributable to fairly represent that contains a misrepresentation attributable to fairly represent that contains a misrepresentation attributable to fairly represent tha

The Saskatchewan legislation also provides that where an individual makes a verbal statement to a prospective purchaser that contains a misrepresentation relating to the security, purchased and the verbal statement is made either before or contemporaneously with the purchase of the security, the purchaser is deemed to have relied on the misrepresentation, if it was a misrepresentation at the time of purchase, and has a right of action for damages against the individual who made the verbal statement.

The Saskatchewan legislation provides a purchaser with the right to void the purchase agreement and to recover all money and other consideration paid by the purchaser for the securities are sold in contravention of Saskatchewan securities legislation, regulations or a decision of the Financial and Consumer Affairs Authority of Saskatchewan legislation also provides a right of action for rescission or damages to a purchaser of securities to whom an offering memorandum or any amendment to it was not sent or delivered prior to or at the same time as the purchaser enters into an agreement to purchase the securities, as required by the Saskatchewan legislation.

The Saskatchewan legislation also provides that a purchaser who has received an amended offering memorandum that was amended and delivered in accordance with such legislation has a right to withdraw from the agreement to purchase the securities by delivering a notice to the person who or company that is selling the securities, indicating the purchaser's intention not to be bound by the purchaser within two business days of receiving the amended offering memorandum.

A BRIGHTER FUTURE FOR MENTAL HEALTH 心理健康更光明的未来





CONTACT 联系人

Arthur H. Kwan, MBA, CFA, ICD.D 工商管理硕士、注册金融分析师、公司董事协会专业董事认证 President & CEO 总裁兼首席执行官

(403) 999-7808 arthur@thenewly.ca