Form 45-106F1 Report of Exempt Distribution

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 (in Québec, Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure).

Investment fund issuer

✓ Issuer (other than an investment fund)

Underwriter

ITEM 3 - ISSUER NAME AND OTHER IDENTIFIERS

Provide the following information about the issuer, or if the issuer is an investment fund, about the fund.

Full legal name	Golden Cariboo Resources Ltd. / Golden Cariboo Resources Ltd.
Previous full legal name	GOLDEN CARIBOO RESOURCES LTD
If the issuer's name changed in	the last 12 months, provide most recent previous legal name.
Website	www.goldencariboo.com (if applicable)
If the issuer has a legal entity identifier, p	rovide below. Refer to Part B of the Instructions for the definition of "legal entity identifier".
Legal entity identifier	
If two or more issuers distributed a single above.	e security, provide the full legal name(s) of the co-issuer(s) other than the issuer named
Full legal name(s) of co-issuer(s)	(if applicable)

ITEM 4 - UNDERWRITER INFORMATION If an underwriter is completing the report, provide the underwriter's full legal name, firm NRD number, and SEDAR+ profile number. Full legal name Firm NRD number

SEDAR+ profile number

(if applicable)

ITEM 5 - ISSUER INFORMATION

If the issuer is an investment fund, do not complete Item 5. Proceed to Item 6.
a) Primary industry
Provide the issuer's North American Industry Classification Standard (NAICS) code (6 digits only) that in your reasonable judgment most closely corresponds to the issuer's primary business activity.
NAICS industry code 212220
If the issuer is in the mining industry , indicate the stage of operations. This does not apply to issuers that provide services to issuers operating in the mining industry. Select the category that best describes the issuer's stage of operations.
✓ Exploration ☐ Development ☐ Production Is the issuer's primary business to invest all or substantially all of its assets in any of the following? If yes, select all that apply.
🗌 Mortgages 🔄 Real estate 🔄 Commercial/business debt 📄 Consumer debt 📄 Private companies
Cryptoassets
b) Number of employees
Number of employees: 🗹 0 - 49 🗌 50 - 99 🗌 100 - 499 🔲 500 or more
c) SEDAR+ profile number
Provide the issuer's SEDAR+ profile number
000005852

ITEM 6 - INVESTMENT F	UND ISSUER IN	FORMATION		
If the issuer is an investment f	iund, provide the follo	wing information.		
a) Investment fund ma	anager information	1		
Full legal name				
Firm NRD number		(if applicable)	1	
SEDAR+ profile number				
b) Type of investment	fund			
Type of investment fund that mo	st accurately identifies	the issuer (select only one).		
🗌 Money market	Equity	Fixed income	Balanced	
Alternative strategies	Cryptoasset	Other (describe)		

Indicate whether one or l	dicate whether one or both of the following apply to the investment fund.				
🗌 Invest primarily in c	Invest primarily in other investment fund issuers				
☐ Is a UCITs Fund ¹					
	re Investment of Transferable Securities funds nt schemes to operate throughout the EU on a				n Union (EU) directives
	it schemes to operate throughout the EO on a	pussport basis on authorize	nion from one me	mber state.	
c) Net asset valu	ue (NAV) of the investment fund	b			
Select the NAV range of t	he investment fund as of the date of th	ne most recent NAV calc	ulation (Canadi	ian \$).	
Under \$5M	S5M to under \$25				V calculation:
\$100M to under \$5	00M 🗌 \$500M to under \$	1B 🗌 \$1B or over		YYYY	MM DD
ITEM 7 - INFORMA	ATION ABOUT THE DISTRII	BUTION			
If an issuer located outsi	de of Canada completes a distribution	in a iurisdiction of Can	ada. include in	Item 7 and S	ichedule 1
information about purch	asers resident in that jurisdiction of Co	anada only. Do not incl	ude in Item 7 se	curities issue	ed as payment of
	fees, in connection with the distribution th the information provided in Schedu		sed in Item 8. T	he informatio	on provided in
a) Currency					
Select the currency or cu dollars.	rrencies in which the distribution was	made. All dollar amoun	ts provided in t	he report mi	ıst be in Canadian
✓ Canadian dollar	an dollar 🔲 US dollar 🔲 Euro Other (describe)				
b) Distribution (lates				
b) Distribution (
	rt and end dates. If the report is being both the start and end dates. If the rep				
	l dates for the distribution period cove			eu on a conti	nuous busis,
Start date	2024 03 08	End data	2024	03 08	7
Start date	YYYY MM DD	End date	2024 YYYY	MM DD	
			1111		
c) Detailed purc	haser information				
Complete Schedule 1 oj	f this form for each purchaser and a	ittach the schedule to	the complete	d report.	
d) Types of secu	urities distributed				
Provide the following infe	ormation for all distributions reported	on a per security basis	Refer to Part A	(12) of the In	structions for how
	ode. If providing the CUSIP number, in				
distributed.					_
				Canadian	\$
Security CUSIP		Number of	Single or	Highest	
code applicable)	Description of security	securities	lowest price	price	Total amount
UBS 380813402	Units	12,910,000.0000	0.1000	0.1000	1,291,000.0000
	1		1	1	

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.

Convertible / exchangeable	Underlying		se price dian \$)	Expiry date (YYYY-MM-	Conversion ratio	Describe other terms (if
security code	security code	Lowest	Highest	DD)		applicable)
WNT	CMS	0.1200	0.2000	2029-03-09	1:1	Half Warrant . Each whole tr ansferable warrant exercise able at a price of \$0.12, 0.1 4, 0.16, 0.18 and 0.20 expiri ng on March 8, 2029

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

Province or country	Exemption relied on	Number of unique purchasers ^{2a}	Total amount (Canadian \$)
British Columbia	NI 45-106 2.3 [Accredited investor]	48	676,000.0000
British Columbia	NI 45-106 2.5 [Family, friends and business associates]	4	40,000.0000
Alberta	NI 45-106 2.3 [Accredited investor]	4	42,500.0000
Ontario	NI 45-106 2.3 [Accredited investor]	7	230,000.0000
Québec	NI 45-106 2.3 [Accredited investor]	1	50,000.0000
Yukon	NI 45-106 2.3 [Accredited investor]	1	5,000.0000
Austria	NI 45-106 2.3 [Accredited investor]	1	10,000.0000
Germany	NI 45-106 2.3 [Accredited investor]	5	112,500.0000
Switzerland	NI 45-106 2.3 [Accredited investor]	2	60,000.0000
United Kingdom	NI 45-106 2.3 [Accredited investor]	1	25,000.0000
United Kingdom	NI 45-106 2.5 [Family, friends and business associates]	1	40,000.0000
	Total dollar am	ount of securities distributed	\$1,291,000.0000
	Total number of unique purchasers ^{2b}	75	

^{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 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.*³*If an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include net proceeds for that jurisdiction of Canada only. For jurisdictions within Canada, state the province or territory, otherwise state the country.*

Province or country	Net proceeds (Canadian \$)
Total net proceeds to the investment fund	

³"Net proceeds" means the gross proceeds realized in the jurisdiction from the distributions for which the report is being filed, less the gross redemptions that occurred during the distribution period covered by the report.

Provide information for each person (as defined in NI 45-106) (in Québec, Regulation 45-106 respecting Prospectus Exemptions) to whom the issuer directly provides, or will provide, any compensation in connection with the distribution. Complete additional copies of this page if more than one person was, or will be, compensated.		
Indicate whether any compensation was paid, or will be paid, in connection with the distribution.		
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.	7	
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. Secondary given names		
Full legal name of non-individual PI Financial Corp./Corporation Financière PI		
Firm NRD number 5290 (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		
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 (in Québec, Regulation 45-106 respecting Prospectus Exemptions) for the purposes of completing this section.		
Connected 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		

Cash commissions paid	9840.0000			
Value of all securities distributed as compensation ⁴				
Security codes	Security code 1	Security code 2	Security code 3	
	CMS	WNT		
Describe terms of warrants, options or other rights	\$0.12, 0.14, .016,	arrants exerciseab .018 and 0.20 expi		
Other compensation ⁵				
Describe				
Total compensation paid	9840			
Check box if the person will or may receive any def	erred compensatio	on (describe the te	erms below)	
⁴ Provide the aggregate value of all securities distributed as compensa securities of the issuer. Indicate the security codes for all securities dis acquire additional securities of the issuer. ⁵ Do not include deferred compensation.	•	•	•	

Provide information for each person (as defined in NI 45-106) (in Québec, Regulation 45-106 respecting Prospectus Exemption whom the issuer directly provides, or will provide, any compensation in connection with the distribution. Complete addition copies of this page if more than one person was, or will be, compensated.	
Indicate whether any compensation was paid, or will be paid, in connection with the distribution.	
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 name If the person compensated is not an individual, provide the following information.	s
Full legal name of non-individual HAYWOOD SECURITIES INC. / VALEURS MOBILIERES HAYWOOD Inc.	
Firm NRD number 1630 (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 compensate	ed.
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 (in Québec, Regulation 45- respecting Prospectus Exemptions) for the purposes of completing this section.	
 Connected 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	

Cash commissions paid	34000.0000			
Value of all securities distributed as compensation ⁴				
Security codes	Security code 1	Security code 2	Security code 3	
	CMS	WNT		
Describe terms of warrants, options or other rights	\$0.12, 0.14, .016,	/arrants exercisea .018 and 0.20 exp		
Other compensation ⁵				
Describe				
Total compensation paid	34000			
Check box if the person will or may receive any def	erred compensation	on (describe the te	erms below)	
⁴ Provide the aggregate value of all securities distributed as compensa securities of the issuer. Indicate the security codes for all securities dis acquire additional securities of the issuer. ⁵ Do not include deferred compensation.	• •	•	•	

Provide information for each person (as defined in NI 45-106) (in Québec, Regulation 45-106 respecting Prospectus Exemptions) to whom the issuer directly provides, or will provide, any compensation in connection with the distribution. Complete additional copies of this page if more than one person was, or will be, compensated.				
Indicate whether any compensation was paid, or will be paid, in connection with the distribution.				
a) Name of person compensated and registration status				
Indicate whether the person compensated is a registrant.				
□ 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. Secondary given names				
Full legal name of non-individual RESEARCH CAPITAL CORPORATION / CORPORATION RECHERCHE				
Firm NRD number 3070 (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				
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 (in Québec, Regulation 45-106 respecting Prospectus Exemptions) for the purposes of completing this section.				
Connected 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

Cash commissions paid	2400.0000		
Value of all securities distributed as compensation ⁴			
Security codes	Security code 1	Security code 2	Security code 3
	CMS	WNT	
Describe terms of warrants, options or other rights	24,000 Broker Wa \$0.12, 0.14, .016, 2029		
Other compensation ⁵			
Describe			
Total compensation paid	2400		
Check box if the person will or may receive any def	erred compensatio	on (describe the te	rms below)
⁴ Provide the aggregate value of all securities distributed as compensa securities of the issuer. Indicate the security codes for all securities dis acquire additional securities of the issuer. ⁵ Do not include deferred compensation.		-	

	ovides, or will provide, any co	ompensation in connection	on 45-106 respecting Prospectus Exemptions) to n with the distribution. Complete additional
Indicate whether any compe	-	<i>paid, in connection with th</i> per of persons compensa	
a) Name of persor	n compensated and reg	gistration status	
Indicate whether the person Indicate whether the person Indicate whether the person If the person compensated is			
Full legal name of indiv	vidual		
If the person compensated is	Family name s not an individual, provide		ven name Secondary given names
Full legal name of nor	n-individual LEEDE JONES	GABLE INC.	
Firm NI	RD number 5770		(if applicable)
Indicate whether the person	compensated facilitated the	e distribution through a fui	nding portal or an internet-based portal
☑ No 🗌 Yes			
b) Business contac	ct information		
lf a firm NRD number is not	provided in Item 8(a), provid	de the business contact inf	ormation of the person being compensated.
Street address			
Municipality		Province/	/State
Country		Postal code/Zip	code
Email address] Telephone nu	mber
c) Relationship to i	issuer or investment fu	Ind manager	
Indicate the person's relation 'connected' in Part B(2) of the respecting Prospectus Exemp Connected with the iss Insider of the issuer (or	nship with the issuer or inve e Instructions and the mean ptions) for the purposes of c suer or investment fund m ther than an investment fu	stment fund manager (sele ning of 'control' in section 1 ompleting this section. anager und)	ect all that apply). Refer to the meaning of .4 of NI 45-106 (in Québec, Regulation 45-106
	ne investment fund or inve r or investment fund mana	-	
✓ None of the above		·o-·	
d) Compensation of	details		

Cash commissions paid	12080.0000			
Value of all securities distributed as compensation ⁴				
Security codes	Security code 1	Security code 2	Security code 3	
	CMS	WNT		
Describe terms of warrants, options or other rights		/arrants exercisea .018 and 0.20 exp		
Other compensation ⁵				
Describe				
Total compensation paid	12080			
Check box if the person will or may receive any def	erred compensatio	on (describe the te	erms below)	
⁴ Provide the aggregate value of all securities distributed as compensa securities of the issuer. Indicate the security codes for all securities dis acquire additional securities of the issuer. ⁵ Do not include deferred compensation.		0	1	

Provide information for each person (as defined in NI 45-106) (in Québec, Regulation 45-106 respecting Prospectus Exemptions) to whom the issuer directly provides, or will provide, any compensation in connection with the distribution. Complete additional copies of this page if more than one person was, or will be, compensated.	1
Indicate whether any compensation was paid, or will be paid, in connection with the distribution.	
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. Secondary given names	1
Full legal name of non-individual Echelon Wealth Partners Inc.	
Firm NRD number 32420 (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	
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 (in Québec, Regulation 45-106 respecting Prospectus Exemptions) for the purposes of completing this section.	
Connected 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	

Cash commissions paid	800.0000			
Value of all securities distributed as compensation ⁴				
Security codes	Security code 1	Security code 2	Security code 3	
	WNT			
Describe terms of warrants, options or other rights	\$0.12, 0.14, .016,	rants exerciseable .018 and 0.20 exp		
Other compensation ⁵				
Describe				
Total compensation paid	800			
Check box if the person will or may receive any def	erred compensation	on (describe the te	rms below)	
⁴ Provide the aggregate value of all securities distributed as compensa securities of the issuer. Indicate the security codes for all securities dis acquire additional securities of the issuer.	• •	•	•	
⁵ Do not include deferred compensation.				

Provide information for each person (as defined in NI 45-106) (in Québec, Regulation 45-106 respecting Prospectus whom the issuer directly provides, or will provide, any compensation in connection with the distribution. Complete copies of this page if more than one person was, or will be, compensated.	
Indicate whether any compensation was paid, or will be paid, in connection with the distribution.	
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 gi If the person compensated is not an individual, provide the following information.	iven names
Full legal name of non-individual STEPHENAVENUE SECURITIES INC.	
Firm NRD number 8080 (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 con	npensated.
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 me 'connected' in Part B(2) of the Instructions and the meaning of 'control' in section 1.4 of NI 45-106 (in Québec, Regula respecting Prospectus Exemptions) for the purposes of completing this section.	
Connected 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	

Cash commissions paid	4000.0000			
Value of all securities distributed as compensation ⁴				
Security codes	Security code 1	Security code 2	Security code 3	
	CMS	WNT		
Describe terms of warrants, options or other rights	40,000 Broker Wa \$0.12, 0.14, .016, 2029	arrants exerciseab .018 and 0.20 exp	•	
Other compensation ⁵				
Describe				
Total compensation paid	4000			
Check box if the person will or may receive any def	erred compensatio	on (describe the te	erms below)	
⁴ Provide the aggregate value of all securities distributed as compensa securities of the issuer. Indicate the security codes for all securities dis acquire additional securities of the issuer. ⁵ Do not include deferred compensation.	•	•		

Provide information for each person whom the issuer directly provides, or copies of this page if more than o r	r will provide, any co	mpensatio	n in connection with t			
Indicate whether any compensation	was paid, or will be p yes, indicate numb		Г	ribution. 8		
a) Name of person comp	ensated and regi	istration	status			
Indicate whether the person compen	nsated is a registrant.					
🗌 No 🗹 Yes						
If the person compensated is an indi	ividual, provide the n	ame of the	e individual.			
Full legal name of individual						
If the person compensated is not an	Family name individual, provide ti	he followin	First given nam ng information.	e	Secondary giv	ven names
Full legal name of non-individ	lual Canaccord Ge	nuity Corp	o./Corporation Canac	cord Gen	uity]
Firm NRD num	ber 900		(if app	licable)		
Indicate whether the person compen	nsated facilitated the	distributio	n through a funding p	oortal or a	n internet-based	portal
✓ No □ Yes	-					
b) Business contact infor	mation					
If a firm NRD number is not provided	d in Item 8(a), provid	e the busir	ness contact information	on of the p	person being com	pensated.
Street address						
Municipality			Province/State			
Country		Р	ostal code/Zip code			
Email address			Telephone number			
c) Relationship to issuer of	or investment fur	nd mana	ger			
Indicate the person's relationship with 'connected' in Part B(2) of the Instruct respecting Prospectus Exemptions) for	th the issuer or inves ctions and the meani	tment func ing of 'cont	d manager (select all t rol' in section 1.4 of N			
Connected with the issuer or in		-				
Insider of the issuer (other tha		-	- d			
 Director or officer of the inves Employee of the issuer or inve 			id manager			
\checkmark None of the above	.sunent iunu mand	501				
d) Compensation details						

Cash commissions paid	4560.0000			
Value of all securities distributed as compensation ⁴				
Security codes	Security code 1	Security code 2	Security code 3	
	CMS	WNT		
Describe terms of warrants, options or other rights	\$0.12, 0.14, .016,	arrants exerciseab .018 and 0.20 exp		
Other compensation ⁵				
Describe				
Total compensation paid	4560			
Check box if the person will or may receive any def	erred compensatio	on (describe the te	rms below)	
⁴ Provide the aggregate value of all securities distributed as compensa securities of the issuer. Indicate the security codes for all securities dis acquire additional securities of the issuer. ⁵ Do not include deferred compensation.	•	•		

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Provide information for whom the issuer directly copies of this page if n	v provides, or wi	ll provide, any coi	mpensation	in connection with t			
Indicate whether any co □ No ☑ Yes				Г	ribution. 8		
a) Name of per	son compens	sated and regi	istration s	tatus			
Indicate whether the per □ No ☑ Yes If the person compensat		-		ndividual.			
Full legal name of	individual	KLINGEBIEL	L	Christian			
If the person compensat	ted is not an ind	Family name ividual, provide tl	he following	First given nam information.	e	Secondary giver	า names
Full legal name of	non-individual						
Firr	n NRD number			(if app	licable)		
Indicate whether the pe	rson compensat	ed facilitated the	distribution	through a funding p	oortal or ar	n internet-based po	ortal
☑ No 🗌 Yes	·	·				·	
b) Business cor	ntact informa	tion					
			a tha huaina	aa aa mtarat informaati		avaan baina aanaa	
<i>If a firm NRD number is</i> Street address		-					
Municipality	Le Millefiori			Province/State			
Country	Monaco		Pos	stal code/Zip code			
Email address	ck@milestone	media.ch	Т	elephone number	377 (417)	979-80047	
c) Relationship	to issuer or i	nvestment fur	nd manag	er			
Indicate the person's rel 'connected' in Part B(2) o respecting Prospectus E	ationship with ti of the Instruction	he issuer or invest ns and the meani	tment fund i ng of 'contro	manager (select all t. ol' in section 1.4 of N			
Connected with th	e issuer or inve	stment fund ma	nager				
🗌 Insider of the issue	er (other than a	n investment fur	nd)				
Director or officer	of the investme	ent fund or inves	stment fund	manager			
Employee of the is	suer or investm	nent fund manag	ger				
✓ None of the above	1						
d) Compensati	on details						

Cash commissions paid	8800.0000			
Value of all securities distributed as compensation ⁴				
Security codes	Security code 1	Security code 2	Security code 3	
Security codes	CMS	WNT		
		arrants exerciseab	•	
Describe terms of warrants, options or other rights	\$0.12, 0.14, .016, .018 and 0.20 expiring on March 8, 2029			
Other compensation ⁵				
Describe				
Total compensation paid	8800		7	
Check box if the person will or may receive any def	erred compensation	on (describe the te	erms below)	
⁴ Provide the aggregate value of all securities distributed as compensa securities of the issuer. Indicate the security codes for all securities dis acquire additional securities of the issuer.		0	,	
⁵ Do not include deferred compensation.				

ITEM 9 – DIRECTORS, EXECUTIVE OFFICERS AND PROMOTERS OF THE ISSUER

If the issuer is an investment fund, do not complete Item 9. Proceed to Item 10.

Indicate whether the issuer is any of the following (select the one that applies - if more than one applies, select only one).

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.

⁶ 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.

⁷ 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 issuer is none of the above, check this box and complete Item 9(a) – (c).

a) Directors, executive officers and promoters of the issuer

Provide the following information for each director, executive officer and promoter of the issuer. For locations within Canada, state the province or territory, otherwise state the country. For "Relationship to issuer", "D" – Director, "O" – Executive Officer, "P" – Promoter.

Organization or company name	Family name	First given	Secondary given names	Business location of non-individual or residential jurisdiction of individual	Relationship to issuer (select all that apply)		
		name		Province or country	D	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	Family	First given	, , ,	Residential jurisdiction of individual	Relationship to one or both	promoter (select if applicable)
company name	name	name	names	Province or country	D	0

c) Residential address of each individual

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

ITEM 10 - CERTIFICATION

Provide the following certification and business contact information of an officer, director or agent of the issuer or underwriter. If the issuer or underwriter is not a company, an individual who performs functions similar to that of a director or officer may certify the report. For example, if the issuer is a trust, the report may be certified by the issuer's trustee. If the issuer is an investment fund, a director or officer of the investment fund manager (or, if the investment fund manager is not a company, an individual who performs similar to that of a director of 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/investment fund manager, to the securities regulatory authority or regulator, as applicable, that I have reviewed this report and to my knowledge, having exercised reasonable diligence, the information provided in this report is true and, to the extent required, complete.

	Name of Issuer/ investment fund Golden Cariboo Resources Ltd.						
manager/agent							
Full legal name	CALLAGHAH	James			Frances Gerrard		
	Family name	First give	en name		Secondary given	names	
Title	Director						
Telephone number	+1 (604) 551-7685	Email address	jfgcallaghan@	@gmail	.com		
Signature	"J F G Callaghan"	Date	2024	03	19		
			YYYY	MM	DD		

ITEM 11 - CONTACT PERSON

Provide the following business contact information for the individual that the securities regulatory authority or regulator may contact with any questions regarding the contents of this report, if different than the individual certifying the report in Item 10.

✓ Same as individual certifying the report

Full legal name			
	Family name	First given name	Secondary given names
Title			
Name of company			
Telephone number		Email 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.

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.