# 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 Peloton Minerals Corporation / Peloton Minerals Corporation
Previous full legal name MONTANA GOLD MINING COMPANY INC.
If the issuer's name changed in the last 12 months, provide most recent previous legal name.
Website www.pelotonminerals.com (if applicable)
If the issuer has a legal entity identifier, provide 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 security, provide the full legal name(s) of the co-issuer(s) other than the issuer named above.
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 (if applicable)
SEDAR+ profile number

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.	Ė.
NAICS industry code 212220	
If the issuer is in the <b>mining industry</b> , indicate the stage of operations. This does not apply to issuers that provide services to issue operating in the mining industry. Select the category that best describes the issuer's stage of operations.	ers
☑ 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.	
<ul><li>☐ Mortgages</li><li>☐ Real estate</li><li>☐ Commercial/business debt</li><li>☐ Consumer debt</li><li>☐ Private companie</li><li>☐ Cryptoassets</li></ul>	<del>!</del> S
b) Number of employees	
Number of employees:	
c) SEDAR+ profile number	
Provide the issuer's SEDAR+ profile number	
000022611	
ITEM 6 - INVESTMENT FUND ISSUER INFORMATION	
TIEM 6 - INVESTMENT FOND ISSUER INFORMATION	
If the issuer is an investment fund, provide the following information.	
a) Investment fund manager information	
Full legal name	
Firm NRD number (if applicable)	
SEDAR+ profile number	
b) Type of investment fund	
Type of investment fund that most accurately identifies the issuer (select only one).	
☐ Money market ☐ Equity ☐ Fixed income ☐ Balanced	
☐ Alternative strategies ☐ Cryptoasset ☐ Other (describe)	]

Indicate whether one or b	dicate whether one or both of the following apply to the investment fund.								
☐ Invest primarily in o	☐ Invest primarily in other investment fund issuers								
☐ Is a UCITs Fund <sup>1</sup>	Is a UCITs Fund <sup>1</sup>								
= -	e Investment of Transferable Securities funds				nion (EU) directives				
that allow collective investmen	t schemes to operate throughout the EU on a	a passport basis on authorize	ation from one mem	ber state.					
c) Net asset valu	e (NAV) of the investment fun	d							
Select the NAV range of th	ne investment fund as of the date of ti	he most recent NAV calc	ulation (Canadia	ın \$).					
☐ Under \$5M	☐ \$5M to under \$25	SM   \$25M to und	er \$100M _	Date of NAV	calculation:				
□ +400M; I +50	D +500141	40							
\$100M to under \$50	00M	51B	_	YYYY	MM DD				
ITEM 7 INCORNA	TION ABOUT THE DICTOR	DUTION							
IIEM / - INFORMA	TION ABOUT THE DISTRI	ROTION							
	le of Canada completes a distributior								
,	asers resident in that jurisdiction of C	,			, ,				
	ees, in connection with the distribution the information provided in Schedu		sea in item 8. in	e injormation	proviaea in				
a) Currency	, ,	, ,							
a) carrency									
Select the currency or cur dollars.	rencies in which the distribution was	made. All dollar amoun	ts provided in th	e report must	be in Canadian				
✓ Canadian dollar	US dollar Euro Othe	er (describe)							
b) Distribution o	lates								
	t and end dates. If the report is being oth the start and end dates. If the rep								
	dates for the distribution period cove		מוזוופט מוטנוזוטמפנ	i on a contina	ous busis,				
Start date	2024 11 18	End data	2024	11 26					
Start date	YYYY MM DD	End date	YYYY	MM DD					
c) Detailed purc	haser information								
Complete Schedule 1 of	this form for each purchaser and o	attach the schedule to	the completed	report.					
d) Types of secu	rities distributed								
			D. C D A.	10) (1)	6 1				
	rmation for all distributions reported de. If providing the CUSIP number, in								
distributed.	, , ,			<b>6</b>	9				
				Canadian \$					
Security CUSIP		Number of	Single or	Highest					
code number (if	Description of security	securities	lowest price	price	Total amount				

1,448,889.0000

0.0900 130,400.0100

0.0900

applicable)

Units of 1 common share and 1 w

UBS

arrant					
l larrant l larrant			1		
arrance		larrant	1		
		arrant.	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 security code	Exercise price (Canadian \$)		Expiry date (YYYY-MM- DD)	Conversion ratio	Describe other terms (if applicable)
security code	security code	Lowest	Highest			аррисаые)
WNT	CMS	0.1200	0.1200	2027-11-18	1 to 1	

## 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 <sup>2a</sup>	Total amount (Canadian \$)		
Ontario	NI 45-106 2.3 [Accredited investor]	4	100,399.8600		
I()Hebec	NI 45-106 2.5 [Family, friends and business associates]	3	30,000.1500		
	Total dollar amount of securities distributed				
	Total number of unique purchasers <sup>2b</sup>	7			

<sup>&</sup>lt;sup>2a</sup> In calculating the number of unique purchasers per row, count each purchaser only once. Joint purchasers may be counted as one 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. If an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include net proceeds for that jurisdiction of Canada only. For jurisdictions within Canada, state the province or territory, otherwise state the country.

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

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

<sup>&</sup>lt;sup>2b</sup>In calculating the total number of unique purchasers to which the issuer distributed securities, count each purchaser only once, regardless of whether the issuer distributed multiple types of securities to, and relied on multiple exemptions for, that purchaser.

# **ITEM 8 - COMPENSATION INFORMATION** 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. ☐ No ✓ Yes If yes, indicate number of persons compensated. | 1 a) Name of person compensated and registration status Indicate whether the person compensated is a registrant. □ No **✓** Yes If the person compensated is an individual, provide the name of the individual. Full legal name of individual Family name First given name Secondary given names If the person compensated is not an individual, provide the following information. Full legal name of non-individual IBK CAPITAL CORP. Firm NRD number | 1790 (if applicable) Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal **V** 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

Provide details of all compensation paid, or to be paid, to Provide all amounts in Canadian dollars. Include cash cor compensation. Do not report payments for services incide services. An issuer is not required to ask for details about, or employees of a non-individual compensated by the issu	mmissions, securitie ntal to the distribut or report on, intern	s-based compensati ion, such as clerical,	ion, gifts, discounts , printing, legal or d	or other accounting
Cash commissions paid	\$10,432.0000			
Value of all securities distributed as compensation <sup>4</sup>	\$0.0000			
1 a	Security code 1	Security code 2	Security code 3	
Security codes	WNT	Security code 2	Security code 5	
Describe terms of warrants, options or other rights	144,889 warrants 5 yrs	exercisable into u	nits at \$0.09 for	
Other compensation <sup>5</sup>				
Describe			7	
			_	
Total compensation paid	\$10,432.0000			
☐ Check box if the person will or may receive any def	ferred compensati	on (describe the te	rms below)	
		(	,	
<sup>4</sup> Provide the aggregate value of all securities distributed as compensate securities of the issuer. Indicate the security codes for all securities distributed as acquire additional securities of the issuer. <sup>5</sup> Do not include deferred compensation.		_	· ·	
ITEM O DIDECTORS EVECUTIVE OFFICE	DC AND DDOA	AOTERS OF TH	TE ICCLIED	
ITEM 9 – DIRECTORS, EXECUTIVE OFFICE	KS AND PKUI	IUTEKS OF TR	1E ISSUEK	
If the issuer is an investment fund, do not complete It	em 9. Proceed to I	tem 10.		
Indicate whether the issuer is any of the following (select t	he one that applies	– if more than one o	applies, select only	one).
Reporting issuer in a jurisdiction of Canada				
Foreign public issuer				
☐ Wholly owned subsidiary of a reporting issuer in a	ny jurisdiction of C	anada <sup>6</sup>		
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 a	nd the distribution	is to permitted cli	ents only <sup>7</sup> .	
If the issuer is at least one of the above, do not compl				
<sup>6</sup> An issuer is a wholly owned subsidiary of a reporting issues securities, other than securities that are required by law to	ıer or a foreign pub	lic issuer if all of the	e issuer's outstandi	-

or the foreign public issuer, respectively.

,			•	issuer made previous distributions of ot security" and "permitted client" in Part B	3,
☐ If the issuer is n	one of the	above, che	eck this box and	complete Item 9(a) – (c).	
a) Directors, e	xecutive (	officers an	d promoters o	f the issuer	
, ,	,		,,	icer and promoter of the issuer. For loca nship to issuer", "D" – Director, "O" – Exe	
Organization or	Family	First	Secondary	Business location of non-individual or residential jurisdiction of	Relationship to issuer

Organization or company name	Family name	First given name	Secondary given names	Business location of non-individual or residential jurisdiction of individual	residential jurisdiction of (select all that apply)		
		name		Province or country	D	0	P

#### 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	· ·	Secondary given	or marvidual one or both it app	•	
company name	company name   name   names	Province or country	D	О		

#### 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 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

securities regulatory aut	nation below, I certify, on beh	able, that I have r	eviewed this re	nvestment fund manager, to the eport and to my knowledge, havin o the extent required, complete.	ng		
investment fund Peloton Minerals Corporation							
manager/agent							
Full legal name	PLEXMAN	PLEXMAN Eric John					
	Family name	First give	en name	Secondary given names			
Title	Secretary						
Telephone number	+1 (519) 964-2836	Email address	eplexhome@	outlook.com			
Signature	/s/ Eric J. Plexman	Date	2024	11 27			
			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		Fmail 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.