Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 10157192

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 CERTIF	YING THE	REPOR	Г								
	Indicate the party certifying the report (select only one). For guidance regarding whether an issuer is an investment fund, refer to section 1.1 of National Instrument 81-106 Investment Fund Continuous Disclosure and the companion policy to NI 81-106.										
Investment fund issuer											
✓ Issuer (other than	n an inves	tment fur	nd)								
			,								
ITEM 3 - ISSUER NAME											
Provide the following informat						ment fu	nd, abou	ut the fund.]
	egal name	First Ph	ospna	ite Corp	•						
	Previous full legal name										
If the issuer's name ch	If the issuer's name changed in the last 12 months, provide most recent previous legal name.										
	Website	https://f	irstpho	osphate	.com	/		(if applicable	e)		
If the issuer has a legal entity i	identifier <u>,</u> pro	vide below	. Refer t	o Part B o	f the I	nstructio	ons for t	he definition o	of "legal entit	ty identifier".	
Legal entity	/ identifier										
If two or more issuers distribut	ed a single s	ecurity, pro	vide the	e full legal	name	(s) of th	e co-issu	ier(s) other th	an the issuer	named above	<u>}.</u>
Full legal name(s) of co	o-issuer(s)					(if applicable)					
							· · · · ·				
	ITEM 4 - UNDERWRITER INFORMATION										
If an underwriter is completing	ן the report, ן	provide the	underw	riter's full	legal	name a	nd firm l	NRD number.			г
Full legal name				<u> </u>			1				
Firm NRD number	Firm NRD number (if applicable)										
	If the underwriter does not have a firm NRD number, provide the head office contact information of the underwriter.										
Street address											
Municipality							Prov	ince/State			
Country						Pos	tal code	e/Zip code			
Telephone number								Website			(if applicable)

ITEM 5 - ISSUER INFORMATION								
If the issuer is an investment fund, do not complete Item 5. Proceed to Item 6.								
a) Primary industry								
Provide the issuer's North American Industry Classification Standard (NAICS) code (6 digits only) that in your reasonable judgment most closely corresponds to the issuer's primary business activity.								
NAICS industry code 2 1 2 2 2 2								
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.								
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 								
b) Number of employees								
Number of employees: 🗸 0 - 49 🗍 50 - 99 🗌 100 - 499 🗍 500 or more								
c) SEDAR profile number								
Does the issuer have a SEDAR profile? No ✓ Yes If yes, provide SEDAR profile number 0 0 0 2 7 7 3 9								
If the issuer does not have SEDAR profile complete item 5(d) - (h).								
d) Head office address								
Street address Province/State								
Municipality Postal code/Zip code Country Telephone number								
e) Date of formation and financial year-end								
Date of formation Financial year-end YYYY MM DD								
f) Reporting issuer status								
Is the issuer a reporting issuer in any jurisdication of Canada? No Yes								
If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer.								
AII AB BC MB NB NL NT								
NS NU ON PE QC SK YT								
g) Public listing status								
If the issuer has a CUSIP number, provide below (first 6 digits only) CUSIP number								
If the issuer is publicly listed, provide the name of the exchange on which the issuer's equity securities primarily trade. Provide only the name of an								
exchange and not a trading facility such as, for example, an automated trading system. Exchange name								
h) Size of issuer's assets								
Select the size of the issuer's assets based on its most recently available annual financial statements (Canadian \$). If the issuer has not prepared annual financial statements for its first financial year, provide the size of the issuer's assets at the distribution end date.								

\$0 to under \$5M	\$5M to under \$25M	□ \$25M to under \$100M
S100M to under \$500M	S500M to under \$1B	S1B or over

If the issue is an investment fund, provide the following information: a) Investment fund manager information Full legal name									
Full legal name									
Firm NRD number (if applicable) If the investment fund manager does not have a firm NRD number, provide the head office contact information of the investment fund manager. Street address Municipality Province/State									
If the investment fund manager does not have a firm NRD number, provide the head office contact information of the investment fund manager. Street address Municipality County Postal code/Zip code County Telephone number Postal code/Zip code Do Type of investment fund Type of investment fund Type of investment fund that most accurately identifies the issuer (select only one). Do Type of investment fund that most accurately identifies the issuer (select only one). Do Money market De Quity De County De C									
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CUSIP number									
name of an exchange and not a trading facility such as, for example, an automated trading system									
name of an exchange and not a trading facility such as, for example, an automated trading system.									
Exchange name									
f) Net asset value (NAV) of the investment fund									
Select the NAV range of the investment fund as of the date of the most recent NAV calculation (Canadian \$).									
Select the NAV range of the investment fund as of the date of the most recent NAV calculation (Canadian \$). \$0 to under \$5M \$5M to under \$25M \$25M to under \$100M									
\$100M to under \$500M to under \$1B \$1B or over Date of NAV calculation:									

ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION

purci conn	If an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include in Item 7 and Schedule 1 information about purchasers resident in that jurisdiction of Canada only. Do not include in Item 7 securities issued as payment of commissions or finder's fees in connection with the distribution, which must be disclosed in Item 8. The information provided in Item 7 must reconcile with the information provided in Schedule 1 of the report.												
a)	Cur	rency	/										
Selec	Select the currency or currencies in which the distribution was made. All dollar amounts provided in the report must be in Canadian dollars.												
√ (Cana	dian	dolla	r		US dollar	Euro	Other (desci	ribe)				
b)	Dist	tribut	ion d	ate(s)								
as bo	State the distribution start and end dates. If the report is being filed for securities distributed on only one distribution date, provide the distribution date as both the start and end dates. If the report is being filed for securities distributed on a continuous basis, include the start and end dates for the distribution period covered by the report.												
				St	tart da	ate 2023	04 24	End	date	2023	04	24	
						YYYY	MM DD			YYYY	MM	DD	
c)	Det	ailed	purc	hase	r info	ormation							
Con	nplet	e Scl	nedu	le 1 d	of thi	is form for eac	h purchaser and	attach the schedu	le to	o the comp	leted r	eport.	
d)	Tvp	es of	seci	urities	s dist	ributed							
Prov	d) Types of securities distributed Provide the following information for all distributions reported on a per security basis. Refer to Part A(12) of the Instructions for how to indicate the security code. If providing the CUSIP number, indicate the full 9-digit CUSIP number assigned to the security being distributed.												
		_										Canadian \$	5
	urity ode				Number of securities		Single or lowest price	Hi	ghest price	Total amount			
υ	NT	3	361 <i>′</i>	1D	sha cor	re in the capit poration and c	of (1) common al of the one-half of one urchase warrant	1,205,217	.00	0.700	00		843,651.90
F	т	3	361 <i>°</i>	ID	(1) of t one	common shar	its consisting of e in the capital a and one-half of re purchase	1,869,375.00		0.800	00		1,495,500.00
e)	Det	ails c	of righ	nts ar	nd co	nvertible/excha	ngeable securities	3					
								ise price and expiry d erms for each conver					exchangeable securities
excl	onvertible / changeable ecurity code Underlying security code Exercise price (Canadian \$) Lowest Highest			Expiry date (YYYY- MM-DD)	c	Conversion ratio	De	escribe other	items (if applicable)				
w	N	т	с	м	S	1.2500		2026-04-24	026-04-24		Each whole warrant entitles t holder to purchase one common share at a price of \$1.25, subject to accelerated expiry.		nase one e at a price of
W	N	т	С	М	S	1.2500		2026-04-24	1:1		expiry. Each whole warrant entitles holder to purchase one common share at a price of \$1.25, subject to accelerate expiry.		nase one e at a price of
f)	Sum	mary	/ of tl	ne di	stribu	ition by jurisdict	ion and exemption	n					

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 ^{2ª} purchasers	Total amount (Canadian \$)			
British Columbia	NI 45-106 2.3 [Accredited investor]	11	995,501.00			
Ontario	NI 45-106 2.3 [Accredited investor]	3	158,999.80			
Ontario	NI 45-106 2.5 [Family, friends and business associates]	6	294,779.90			
Ontario	NI 45-106 2.10 [Minimum amount investment]	1	150,220.00			
Québec	NI 45-106 2.3 [Accredited investor]	20	574,650.00			
United States	Distributions to purchasers outside of local jurisdiction (BC, AB, NB)	1	25,001.20			
Luxembourg	NI 45-106 2.3 [Accredited investor]	1	105,000.00			
United Kingdom	NI 45-106 2.3 [Accredited investor]	1	35,000.00			
	Total dollar amount of securities distributed					

^{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.

h) Offering materials - This section applies only in Saskatchewan, Ontario, Québec, New Brunswick and Nova Scotia.

If a distribution has occurred in Saskatchewan, Ontario, Québec, New Brunswick or Nova Scotia, complete the table below by listing the offering materials that are required under the prospectus exemption relied on to be filed with or delivered to the securities regulatory authority or regulator in those jurisdictions.

In Ontario, if the offering materials listed in the table are required to be filed with or delivered to the Ontario Securities Commission (OSC), attach an electronic version of the offering materials that have not been previously filed with or delivered to the OSC.

Description	Date of document or other material (YYYY-MM-DD)	Previously filed with or delivered to regulator? (Y/N)	Date previously filed or delivered (YYYY-MM-DD)	

ITEM 8 - COMPENSATION	NFORMATION
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Provide information for each person (as defined in NI 45-106) to whom the issuer directly provides, or will provide, any compensation in connection with the distribution. Complete additional copies of this page if more than one person was, or will be, compensated.									
Indicate whethe	Indicate whether any compensation was paid, or will be paid, in connection with the distribution.								
🗌 No	✓ Yes	If yes, indicate number of persons compensated.	8						

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	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 LEEDE JONES GABLE INC.										
Firm NRD number 5 7 7 0 (if applicable)										
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.										
b) Business contact information	b) Business contact information									
If a firm NRD number is not provided in Item 8 (a)	provide the business c	ontact information o	of the person being o	compensated.						
Street address										
Municipality			Province/Stat	e						
Country		Pc	ostal code/Zip cod	e						
Email address		- 	Telephone numbe	er						
c) Relationship to issuer or investment fu	nd manager									
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.										
Connect with the issuer or investment fu		· · ·		other than an investment fund)						
Director or officer of the investment fund	or investment fund m	anager 🗖 F	molovee of the issu	er or investment fund manager						
				or or investment fund manager						
d) Compensation details		10 11 11 01 11								
Provide details of all compensation paid, or to be p Canadian dollars. Include cash commissions, securi										
incidental to the distribution, such as clerical, print allocation arrangements with the directors, officers				for details about, or report on, internal						
	440.00	and the compension	-							
Value of all securities		.	Security code 1							
distributed as compensation ⁴										
Describe terms of warrants, o	options or other rights			e one common share at a price ect to accelerated expiry.						
Other compensation ⁵	Describe									
Total compensation paid 5,	440.00									
Check box if the person will or may re	ceive any deferred cor	npensation (describ	be the terms below)							
⁴ Provide the aggregate value of all securities dist	ributed as compensation	on, excludina option	ns, warrants or othe	r rights exercisable to acquire						
additional securities of the issuer. Indicate the se	curity codes for all sec	urities distributed a	s compensation, <u>inc</u>	luding options, warrants or other						
rights exercisable to acquire additional securities of the issuer. ⁵ Do not include deferred compensation.										

a) Name of person compensated and registration status											
Indicate whether the person compensated is a registrant.											
If the person compensated is an individual, provide the name of the individual.											
Full legal name of individ	ual										
	Family name First given name Secondary given names										
If the person compensated is not a	If the person compensated is not an individual, provide the following information.										
Full legal name of non-individual RAYMOND JAMES LTD.											
Firm NRD number 8 2 4 0 (if applicable)											
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.											
b) Business contact information	b) Business contact information										
If a firm NRD number is not provid	ded in Item 8 (a), pro	vide the busine	ss contact in	formation	of the p	person b	eing com	pensated.			
Street address											
Municipality					P	rovince	/State				
Country				P	ostal c	ode/Zip	o code				
Email address					Telepł	hone n	umber				
c) Relationship to issuer or	investment fund r	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 "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.											
	Connect with the issuer or investment fund manager Insider of the purposes of completing this section.										
Director or officer of the	investment fund or	investment fund	d manager		Employe	ee of the	e issuer (or investme	nt fund ma	anager	
✓ None of the above			0							Ū	
d) Compensation details											
Provide details of all compensation Canadian dollars. Include cash com incidental to the distribution, such	d) Compensation details Provide details of all compensation paid, or to be paid, to the person identified in Item 8(a) in connection with the distribution. Provide all amounts in Canadian dollars. Include cash commissions, securities-based compensation, gifts, discounts or other compensation. Do not report payments for services incidental to the distribution, such as clerical, printing, legal or accounting services. An issuer is not required to ask for details about, or report on, internal allocation arrangements with the directors, officers or employees of a non-individual compensated by the issuer.										
Cash commissions paid	5,640	.00				Security	code 1	Security coo	de 2 Sec	curity code	e 3
Value of all securities distributed as compensation⁴			Security	codes		W N	T				
Describe terr	ms of warrants, option	ons or other right						ne commo t to accele			ce
Other compensation ⁵		Descri									
Total compensation paid	5,640	.00									
Check box if the perso	Check box if the person will or may receive any deferred compensation (describe the terms below)										
⁴ Provide the aggregate value of all securities distributed as compensation, <u>excluding</u> options, warrants or other rights exercisable to acquire additional securities of the issuer. Indicate the security codes for all securities distributed as compensation, <u>including</u> options, warrants or other rights exercisable to acquire additional securities of the issuer. ⁵ Do not include deferred compensation.											

a) Name of person compo	ensated and regis	tration	status									
Indicate whether the person con	npensated is a regist	rant.		🗌 No		\checkmark	Yes					
If the person compensated is an	individual, provide t	he name	e of the indivi	dual.								
Full legal name of indivi	dual											
		amily na	ame		First	t given na	ame		Seco	ndary given	names	
If the person compensated is not an individual, provide the following information.												
Full legal name	of non-individual	PI Fina	ancial Corp.	/Corporat	tion Fin	nancièr	e Pl					
Fi	rm NRD number	5	2 9	0				(if appli	cable)			
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 pro	vided in Item 8 (a), p	rovide tl	he business c	ontact info	rmation	of the p	person b	eing com	pensated.			_
Street address												
Municipality						Р	rovince	/State				1
Country					Р	ostal c	ode/Zip	o code				Ī
Email address						Telepl	hone n	umber				ĺ
c) Relationship to issuer of	or investment fund	d mana	ger									_
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of												
	the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section. Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund)											
	Director or officer of the investment fund or investment fund manager											
		n investi		anagei		Linbioa			n investine	ini iunu ma	nayei	
✓ None of the above												
d) Compensation details												
Provide details of all compensati Canadian dollars. Include cash co												S
incidental to the distribution, suc allocation arrangements with the	h as clerical, printing	g, legal c	or accounting	services. A	n issuer	is not r	equired	to ask for				
Cash commissions pai		64.00	vees of a non-	-maiviauai	compen		y the iss	<i>uer.</i>				_
Value of all securities							Security W N		Security co	de 2 Sec	curity code 3	
distributed as compensation	-		:	Security co	odes							
Describe te	erms of warrants, op	tions or	other rights							on share a erated exp		
Other compensation	h ⁵		Describe									Ī
Total compensation pai	d 4,46	64.00		L								
Check box if the per	son will or may rece	eive any	deferred cor	npensation	ı (descri	ibe the	terms be	elow)				
												7
⁴ Provide the aggregate value o	f all securities distri	buted as	Comnensati	on excludi	ina ontic	ons wa	rrante o	r other ric	ihts exercie	sable to ac	nuire	L
additional securities of the issue	er. Indicate the secu	irity cod	es for all sec	urities distr	ibuted a	as comp	pensatio	n, <u>includi</u>	ing options	, warrants	or other	
⁵ Do not include deferred compe		1551										
L												

a) Name of person compe	ensated and regist	ration status								
Indicate whether the person com	pensated is a registro	ant.	No No	✓ Y	′es					
If the person compensated is an individual, provide the name of the individual.										
Full legal name of indivi	dual									
	F	amily name	Fire	st given nam	ne	Secondary given names				
If the person compensated is not an individual, provide the following information.										
Full legal name of	of non-individual	Canaccord Genui	ty Corp./Corpor	ration Car	naccord Ger	uity				
Fir	m NRD number	9 0 0			(if app	licable)				
Indicate whether the person com	pensated facilitated	the distribution thro	ugh a funding por	rtal or an in	nternet-based	portal. 🖌 No 🗌 Yes				
b) Business contact inform	b) Business contact information									
If a firm NRD number is not prov	vided in Item 8 (a), pr	ovide the business c	ontact informatio	n of the pei	rson being cor	npensated.				
Street address										
Municipality				Pro	vince/State					
Country			I	Postal coo	de/Zip code					
Email address				Telepho	one number					
c) Relationship to issuer c	or investment fund	manager	-							
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of										
	the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section. Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund)									
		-								
Director or officer of th	e investment fund of	r investment fund m	anager	Employee	e of the issuer	or investment fund manager				
✓ None of the above										
d) Compensation details										
Canadian dollars. Include cash co incidental to the distribution, suc	ommissions, securities h as clerical, printing	s-based compensation legal or accounting	on, gifts, discounts services. An issue	s or other co er is not req	ompensation. Juired to ask fo	stribution. Provide all amounts in Do not report payments for services or details about, or report on, internal				
allocation arrangements with the			-individual compe	ensated by a	the issuer.					
Cash commissions pai	, -	0.00			ecurity code 1	Security code 2 Security code 3				
Value of all securities distributed as compensatior			Security codes	W	N T					
Describe te	erms of warrants, opt	ions or other rights				one common share at a subject to accelerated expiry.				
Other compensation	5	Describe		<u> </u>						
Total compensation pai	d 14,20	0.00								
Check box if the per	son will or may recei	ve any deferred cor	mpensation (desc	ribe the ter	rms below)					
⁴ Provide the aggregate value of additional securities of the issue rights exercisable to acquire ad ⁵ Do not include deferred compe- ⁵ Do	er. Indicate the secu Iditional securities of	rity codes for all sec								

a) Name of person compensated and regi	stration status								
Indicate whether the person compensated is a regis	trant.	□ No 🗸	🖉 Yes						
If the person compensated is an individual, provide the name of the individual.									
Full legal name of individual									
	Family name	First given	n name	Secondary given names					
If the person compensated is not an individual, provide the following information.									
Full legal name of non-individual	EMD FINANCIAL	INC. / LA FINANCIÈ	RE EMD INC.						
Firm NRD number	3 6 4	8 0	(if applic	able)					
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. Vo Ves									
b) Business contact information									
If a firm NRD number is not provided in Item 8 (a),	provide the business c	ontact information of th	ne person being comp	ensated.					
Street address									
Municipality			Province/State						
Country		Postal	l code/Zip code						
Email address		Tele	ephone number						
c) Relationship to issuer or investment fur	d manager	-	-						
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.									
Connect with the issuer or investment fu		· · · _ ·	-	r than an investment fund)					
Director or officer of the investment fund	-		·	investment fund manager					
				investment fund manager					
✓ None of the above									
d) Compensation details									
Provide details of all compensation paid, or to be po Canadian dollars. Include cash commissions, securit									
incidental to the distribution, such as clerical, printin allocation arrangements with the directors, officers	ng, legal or accounting	services. An issuer is no	ot required to ask for a						
	600.00	-individual compensated	-						
Value of all securities			Security code 1 S	Security code 2 Security code 3					
distributed as compensation ⁴		Security codes							
Describe terms of warrants, o	ptions or other rights			ne common share at a bject to accelerated expiry.					
Other compensation ⁵	Describe								
Total compensation paid 15,6	00.00								
Check box if the person will or may rec	eive any deferred cor	mpensation (describe th	ne terms below)						
⁴ Provide the aggregate value of all securities distr	ibuted as compensati	on, <u>excludina</u> options, w	warrants or other righ	nts exercisable to acquire					
additional securities of the issuer. Indicate the security codes for all securities distributed as compensation, <u>including</u> options, warrants or other rights exercisable to acquire additional securities of the issuer.									
⁵ Do not include deferred compensation.									

a) Name of person compe	nsated and regis	stration	status								
Indicate whether the person com	pensated is a regist	rant.		No No	\checkmark	Yes					
If the person compensated is an individual, provide the name of the individual.											
Full legal name of individ	lual										
	Family name First given name Secondary given names										
If the person compensated is not an individual, provide the following information.											
Full legal name o	f non-individual	MINE E	EQUITIES L	TD.							
Fin	m NRD number	6	5 6	6 (0		(if appl	icable)			
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. 🔽 No 🗌 Yes											
b) Business contact inform	nation										
If a firm NRD number is not prov	ided in Item 8 (a), _I	provide th	ne business co	ontact informa	ation of th	e person b	eing com	pensated.			
Street address											
Municipality						Province	e/State				
Country					Postal	l code/Zij	o code				
Email address					Tele	ephone n	umber				
c) Relationship to issuer o	r investment fun	d manag	ger								
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.											
Connect with the issuer or investment fund manager											
Director or officer of the	e investment fund o	or investr	nent fund ma	inager	Emple	oyee of th	e issuer o	or investmen	t fund ma	nager	
None of the above				-							
d) Compensation details											
Provide details of all compensatio Canadian dollars. Include cash co incidental to the distribution, such allocation arrangements with the	mmissions, securiti as clerical, printin	es-based g, legal o	compensatio r accounting	n, gifts, discou services. An is	unts or oth ssuer is no	ner comper t required	nsation. E to ask fo	Do not report	payments	for serv	vices
Cash commissions paid	30,0	00.00				Security	code 1	Security code	e 2 Secu	urity cod	e 3
Value of all securities distributed as compensation	20.0	99.90	S	Security code	S	СМ	S				
	ms of warrants, or	otions or	other rights	42,857 cor \$0.70 per s		ares of t	ne Issue	er at a deen	ned value	e of	
Other compensation ⁵			Describe								
Total compensation paid	I 59,99	99.90									
Check box if the pers	on will or may reco	eive any	deferred corr	pensation (d	lescribe th	e terms b	elow)				
⁴ Provide the aggregate value of all securities distributed as compensation, <u>excluding</u> options, warrants or other rights exercisable to acquire additional securities of the issuer. Indicate the security codes for all securities distributed as compensation, <u>including</u> options, warrants or other rights exercisable to acquire additional securities of the issuer. ⁵ Do not include deferred compensation.											

a) Name of person compens	sated and regist	tration state	JS									
Indicate whether the person compe	ensated is a registr	ant.		🗌 No		\checkmark	Yes					
If the person compensated is an inc	dividual, provide tl	he name of t	he indivi	dual.								
Full legal name of individu	al											
	F	amily name			First gi	iven na	ime		Secor	ndary given	names	
If the person compensated is not an individual, provide the following information.												
Full legal name of	non-individual	NATIONAL	BANK	FINANCI	AL INC.	./FINA	NCIÈF	RE BAN	QUE NAT	IONALE	INC.	
Firm	NRD number	1 9	6	0				(if appli	cable)			
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. 🗹 No 🗌 Yes												
b) Business contact informa	tion											
If a firm NRD number is not provide	ed in Item 8 (a), p	rovide the bı	isiness co	ontact inforr	mation o	f the p	erson be	eing com	pensated.			
Street address]
Municipality						Pr	ovince	/State				1
Country					Pos	stal co	ode/Zip	code				Ī
Email address				ĺ	Т	Teleph	none nu	ımber				Ī
c) Relationship to issuer or i	investment fund	lmanager		-					-			_
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.												
Connect with the issuer or investment fund manager												
Director or officer of the i	nvestment fund o	r investment	fund ma	anager	Er	mploye	e of the	issuer o	r investme	ent fund ma	inager	
\checkmark None of the above				-							-	
d) Compensation details												
Provide details of all compensation Canadian dollars. Include cash com incidental to the distribution, such a allocation arrangements with the di	missions, securitie as clerical, printing	s-based com , legal or acc	pensatic counting	on, gifts, disc services. An	counts or issuer is	other onot re	compen equired t	sation. D to ask for	o not repor	rt payments	s for services	
Cash commissions paid	4,00	0.00				S	Security o	ode 1	Security co	de 2 Sec	curity code 3	1
Value of all securities distributed as compensation ⁴			:	Security coo	des	V	N N	Т				
Describe term	ns of warrants, op	tions or othe	r rights							on share a erated exp]
Other compensation ⁵		D	escribe							i		ļ
Total compensation paid	4,00	0.00										
Check box if the person	n will or may rece	ive any defe	rred con	npensation	(describe	e the te	erms be	low)				
												7
⁴ Provide the aggregate value of al additional securities of the issuer. rights exercisable to acquire addit. ⁵ Do not include deferred compens.	Indicate the secu ional securities of	rity codes fo	pensatio r all sect	on, <u>excludin</u> urities distrit	n <u>g</u> option. buted as	es, wari s comp	rants or ensatio	other rig n, <u>includi</u>	hts exercis <u>ng</u> options,	able to acc , warrants (juire or other	_

a) Name of person comp	ensated and regis	stration stat	us									
Indicate whether the person con	npensated is a regist	rant.		🗌 No		\checkmark	Yes					
If the person compensated is an	individual, provide	the name of t	he indivi	dual.								
Full legal name of indiv	idual											
		Family name			First	t given n	name		Seco	ndary given	names]
If the person compensated is not an individual, provide the following information.												
Full legal name	of non-individual	RESEARC CAPITAL	CH CAP	ITAL CO	RPOR	ATION	I / COF	RPORA	TION REC	HERCHE		
Fi	rm NRD number	3 0	7	0				(if app	licable)			
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.												
b) Business contact infor	mation											
If a firm NRD number is not pro	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	Municipality Province/					e/State				1		
Country					Р	ostal o	code/Zi	p code				Ī
Email address						Telep	hone r	number				
c) Relationship to issuer	or investment fun	d manager										
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.												
	-		43-100	or the pur	·		-			investmen	t fund)	
Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund)												
Director or officer of th	ne investment fund	or investmen	t fund ma	anager		Employ	/ee of th	ne issuer	or investme	ent fund ma	nager	
None of the above												
d) Compensation details												
Provide details of all compensate Canadian dollars. Include cash c incidental to the distribution, suc allocation arrangements with th	ommissions, securiti ch as clerical, printin	es-based con g, legal or ac	npensatio counting	n, gifts, di services. A	scounts o An issuer	or othe is not i	r compe required	ensation. I to ask fo	Do not repo	rt payment	s for service	
Cash commissions pa	id 4,0	35.08					Security	code 1	Security co	de 2 Sec	curity code 3	3
Value of all securitie			ç	Security c	odes		W N	ιТ				
distributed as compensation				-			•		•			_
Describe to	erms of warrants, op	otions or othe	er rights						one comm et to accele			
Other compensation	15	D	escribe									
Total compensation pa	id 4,0	35.08										
Check box if the per	rson will or may rec	eive any defe	erred con	npensatio	n (descri	ibe the	terms b	oelow)				
⁴ Provide the aggregate value of additional securities of the issu rights exercisable to acquire ad ⁵ Do not include deferred comp	er. Indicate the sec Iditional securities c	urity codes fo										

TEM 9 - DIRECTORS, EXECUTIVE OFFICERS AND PROMOTERS OF THE ISSUER											
If the issuer is an investment fund	If the issuer is an investment fund, do not complete Item 9. Procced 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).											
✓ Reporting issuer in any jurisdiction of Canada											
Foreign public issuer											
Wholly owned subsidiary of a reporting issuer in any jurisdiction of Canada ⁶											
Provide nar	ne of reporting issue	ər]			
Wholly owned subsidiary of a foreign public issuer ⁶											
Provide name of foreign public issuer											
Issuer distributing only eligi	ble foreign securitie	s and the distributio	n is to permitted clie	ents only ⁷							
If the issuer is at least one of the	above, do not com	plete 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.											
a) Directors, executive officer	s and promoters	of the issuer									
Provide the following information for territory; otherwise state the country.						tate the	province	or			
Organization or company name	Family name	First given name	Secondary given names	Business loc non-individu resident jurisdictio individu	ual or ail n of		ationship to issuer lect all that apply)				
				Province or	country	D	0	Р			
b) Promoter information											
If the promoter listed above is not ar within Canada, state the province or											
Organization or company name	anization or company name Family name First given name name			Residential jurisdiction of individual		tionship to promoter ne or both if applicable)					
				Province or country D			0				
				country							
				country							

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 to file a completed report of exemt 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/underwriter/ investment fund manager/agent	First Phosphate Corp.						
Full legal name	Kurtz						
	Family name	Family name First given name				ames	
Title	CFO						
Telephone number	4162000657	Email address	bennett@	nett@firstphosphate.com			
Signature	Bennett Kurtz	Date	2023	05	04		
			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				Title	
·	Family name	First given name	Secondary given names		
Name of company					
Telephone number		Er	nail address		

Notice - Collection and use of personal information

The personal information required under this form is collected on behalf of and used by the securities regulatory authority or regulator under the authority granted in securities legislation for the purposes of the administration and enforcement of the securities legislation.

If you have any questions about the collection and use of this information, contact the securities regulatory authority or regulator in the local jurisdiction(s) where the report is filed, at the address(es) listed at the end of this form.

The attached Schedules 1 and 2 may contain personal information of individuals and details of the distribution(s). The information in Schedules 1 and 2 will not be placed on the public file of any securities regulatory authority or regulator. However, freedom of information legislation may require the securities regulatory authority or regulator to make this information available if requested.

By signing this report, the issuer/underwriter confirms that each individual listed in Schedule 1 or 2 of the report who is resident in a jurisdiction of Canada:

- a) has been notified by the issuer/underwriter of the delivery to the securities regulatory authority or regulator of the information
 pertaining to the individual as set out in Schedules 1 or 2, that this information is being collected by the securities regulatory
 authority or regulator under the authority granted in securities legislation, that this information is being collected for the purposes of
 the administration and enforcement of the securities legislation of the local jurisdiction, and of the title, business address and
 business telephone number of the public official in the local jurisdiction, as set out in this form, who can answer questions about the
 security regulatory authority's or regulator's indirect collection of the information, and
- b) has authorized the indirect collection of the information by the securities regulatory authority or regulator.