Form 45-106F1 Report of Exempt Distribution

ITEM 1 – REPORT TYPE						
☐ New report ✓ Amended report If amended, p	provide filing date of report that is being amended. 2024 01 05 (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 C	OTHER IDENTIFIERS					
Provide the following information about t	the issuer, or if the issuer is an investment fund, about the fund.					
Full legal name	First Phosphate Corp. (formerly First Potash Corp.) / First Phosphate Corp. (formerly First Potash Corp.)					
Previous full legal name	FIRST POTASH CORP.					
If the issuer's name changed in	the last 12 months, provide most recent previous legal name.					
Website	www.firstphosphate.com (if applicable)					
If the issuer has a legal entity identifier, p Legal entity identifier	rovide below. Refer to Part B of the Instructions for the definition of "legal entity identifier".					
If two or more issuers distributed a single above.	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 INFO	DRMATION					
If an underwriter is completing the report	, provide the underwriter's full legal name, firm NRD number, and SEDAR+ profile number.					
Full legal name	, symmetric programme of the control					
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.
NAICS industry code 212398
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
000027739
ITEM 6 - INVESTMENT FUND 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 (describ	oe)					
Indicate whether one or both of the following apply to the investment fund. Invest primarily in other investment fund issuers Is a UCITs Fund ¹ Undertaking for the Collective Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) directives								
c) Net asset value (NAV			thorization from one m	ermber state.				
Select the NAV range of the investr	-		V calculation (Cana	dian \$)				
Under \$5M \$100M to under \$500M	\$5M to under \$	\$25M	under \$100M	Date of NAV calculation: YYYY MM DD				
ITEM 7 - INFORMATION	ABOUT THE DIST	RIBUTION						
If an issuer located outside of Can information about purchasers res commissions or finder's fees, in co Item 7 must reconcile with the info	ident in that jurisdiction on the control of the co	of Canada only. Do no ution, which must be d	ot include in Item 7 s	securities issued as payment of				
a) Currency								
Select the currency or currencies in dollars. Canadian dollar US of		vas made. All dollar al	mounts provided in	the report must be in Canadian				
b) Distribution dates								
State the distribution start and en the distribution date as both the s include the start and end dates for Start date	tart and end dates. If the rather distribution period c	report is being filed for covered by the report.	or securities distribu	·				
c) Detailed purchaser i	nformation							
Complete Schedule 1 of this for		nd attach the schedu	ıle to the completo	ed report.				
d) Types of securities d	istributed							
Provide the following information to indicate the security code. If prodistributed.								

				Canadian \$			
Security code	CUSIP number (if applicable)	Description of security	Number of securities	Single or lowest price	Highest price	Total amount	
FTS			10,590,000.0000	0.5000		5,295,000.0000	
UNT		Each Hard Dollar Unit (i) 1 commo n share; and (ii) one half of 1 purc hase warrant	3,090,438.0000	0.4000		1,248,675.2000	

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	Underlying (Canadian \$) ecurity code		Expiry date (YYYY-MM-DD)	Conversion ratio	Describe other terms (if applicable)
security code	security code	Lowest	Highest			аррисаые)
UNT	CMS	0.4000			1:1	
UNT	WNT	0.5000		2025-12-31	1/2	

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		Total amount (Canadian \$)	
Québec	NI 45-106 2.5 [Family, friends and business associates]	3	45,000.0000	
British Columbia	NI 45-106 2.3 [Accredited investor]	5	3,620,000.0000	
Switzerland	NI 45-106 2.3 [Accredited investor]	1	62,500.0000	
Luxembourg	NI 45-106 2.3 [Accredited investor]	2	160,000.0000	
Québec	NI 45-106 2.3 [Accredited investor]	25	805,000.0000	
Ontario	NI 45-106 2.3 [Accredited investor]	6	1,811,175.2000	
Ontario	Ontario NI 45-106 2.5 [Family, friends and business associates]		40,000.0000	
	\$6,543,675.2000			
	Total number of unique purchasers ^{2b} 43			

^{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. 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.

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 If yes, indicate number of persons compensated. | 8 ✓ Yes a) Name of person compensated and registration status Indicate whether the person compensated is a registrant. **V** 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 Corton Capital Inc. Firm NRD number (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 | 1490-1075 Georgia St W Municipality Vancouver Province/State | British Columbia Country Canada Postal code/Zip code V6E 3C9 Email address | mark@wolverton.ca Telephone number | +1 (604) 726-7916 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 con compensation. Do not report payments for services incides services. An issuer is not required to ask for details about, or employees of a non-individual compensated by the issuer	nmissions, securitie ntal to the distribut or report on, intern	s-based compensat ion, such as clerical	ion, gifts, discounts , printing, legal or	s or other accounting
Cash commissions paid	0			
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 Other compensation 5	time prior to 5:00 31, 2025 (the "Exe	oroker warrants ex) p.m. (Toronto timercise Period") at a of \$0.50 per Share	ie) on December	
Describe				
Total compensation paid	0			
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.		_	•	

ITEM 8 – COMPEN	ISATION INFORMATION	ON						
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. 8								
a) Name of per	son compensated and reg	gistration status						
✓ No Yes	rson compensated is a registran							
Full legal name of	individual							
If the person compensat	Family name ted is not an individual, provide		ne Secondary given names					
Full legal name of	non-individual LEEDE JONES	GABLE INC.						
Firr	m NRD number 5770	(if app	olicable)					
Indicate whether the per ✓ No ☐ Yes	rson compensated facilitated the	e distribution through a funding p	portal or an internet-based portal					
b) Business cor	ntact information							
If a firm NRD number is	not provided in Item 8(a), provid	de the business contact informati	ion of the person being compensated.					
Street address	#1000 - 110 Yonge St.							
Municipality	Toronto	Province/State	Ontario					
Country	Canada	Postal code/Zip code	M5C 1T4					
Email address	nonbrokered@leedejonesga ble.com Telephone number +1 (604) 658-3083							
c) Relationship to issuer or investment fund manager								
'connected' in Part B(2) or respecting Prospectus Ex	of the Instructions and the mean exemptions) for the purposes of c	ing of 'control' in section 1.4 of Nonpleting this section.	that apply). Refer to the meaning of Il 45-106 (in Québec, Regulation 45-106					
<u> </u>	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 managerEmployee of the issuer or investment fund manager								
✓ None of the above		1801						
E. None of the above								

Provide details of all compensation paid, or to be paid, to Provide all amounts in Canadian dollars. Include cash con compensation. Do not report payments for services incider services. An issuer is not required to ask for details about, or employees of a non-individual compensated by the issu	nmissions, securitie ntal to the distribut or report on, intern	s-based compensat ion, such as clerica	ion, gifts, discounts , printing, legal or (or other accounting
Cash commissions paid	43600			
Value of all securities distributed as compensation ⁴				
Security codes	Security code 1	Security code 2	Security code 3	
Security codes	WNT			
Describe terms of warrants, options or other rights Other compensation ⁵ Describe	5			
Total compensation paid	43600			
Check box if the person will or may receive any def	erred compensati	on (describe the te	erms below)	
⁴ Provide the aggregate value of all securities distributed as compensate securities of the issuer. Indicate the security codes for all securities distributed as compensation. ⁵ Do not include deferred compensation.	• .	_		

d) Compensation details

ITEM 8 – COMPENSAT	TON INFORMATIO	N				
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.						
		paid, in connection with the distr	ibution.			
☐ No ✓ Yes	If yes, indicate numb	er of persons compensated. [8	3			
a) Name of person o	compensated and regi	istration status				
Indicate whether the person co ✓ No ☐ Yes						
If the person compensated is a		ame of the individual.				
Full legal name of individ						
If the person compensated is n	Family name not an individual, provide ti	First given name he following information.	e Secondary given names			
Full legal name of non-i	ndividual Canaccord Ge	nuity Corp./Corporation Canac	cord Genuity			
Firm NRD	number 900	(if appl	licable)			
Indicate whether the person co	ompensated facilitated the	distribution through a funding p	ortal or an internet-based portal			
✓ No ☐ Yes						
b) Business contact	information					
If a firm NRD number is not pr	ovided in Item 8(a), provid	e the business contact informatio	on of the person being compensated.			
Street address 609 G	Granville St., Suite 2200					
Municipality	ouver	Province/State	British Columbia			
Country	da	Postal code/Zip code	V7Y 1H2			
Email address slege	r@cgf.com	Telephone number	+1 (604) 643-0230			
c) Relationship to iss	suer or investment fur	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 (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						
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 de	etails					

compensation. Do not report payments for services incided services. An issuer is not required to ask for details about, or employees of a non-individual compensated by the issuer is not required to ask for details about, or employees of a non-individual compensated by the issuer.	or report on, intern		, ,	•
Cash commissions paid	22400			
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 Other compensation ⁵ Describe				
Total compensation paid	22400			
☐ Check box if the person will or may receive any def	erred compensati	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 disacquire additional securities of the issuer. 5Do not include deferred compensation.			·	
⁵ Do not include deferred compensation.				

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

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 If yes, indicate number of persons compensated. | 8 ✓ Yes a) Name of person compensated and registration status Indicate whether the person compensated is a registrant. **V** 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 Sightline Wealth Management LP Firm NRD number | 59260 (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 | 1010 De La Gauchetiere Street West Municipality Montreal Province/State Québec Country Canada Postal code/Zip code | H3B 5J2 kgordon@sightlinewealthmg Email address t.com Telephone number +1 (647) 300-6835 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) $\hfill \square$ Director or officer of the investment fund or investment fund manager ☐ Employee of the issuer or investment fund manager ✓ None of the above

Provide details of all compensation paid, or to be paid, to Provide all amounts in Canadian dollars. Include cash con compensation. Do not report payments for services incider services. An issuer is not required to ask for details about, or employees of a non-individual compensated by the issu	nmissions, securities ntal to the distribut or report on, intern	s-based compensati ion, such as clerical,	ion, gifts, discount , printing, legal or	s or other accounting
Cash commissions paid	3200			
Value of all securities distributed as compensation ⁴				
Security codes	Security code 1	Security code 2	Security code 3	
Security codes	WNT]
Describe terms of warrants, options or other rights Other compensation ⁵ Describe	to 5:00 p.m. (Toro	rants exercisable a onto time) on Dece iod") at a price (the er Share	mber 31, 2025	
Total compensation paid	3200			
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.		_	·	

d) Compensation details

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. | 8 a) Name of person compensated and registration status Indicate whether the person compensated is a registrant. **V** 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 Raymond James Ltd. Firm NRD number (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 | 2100 – 925 West Georgia Street Municipality Vancouver Province/State British Columbia Country Canada Postal code/Zip code V6C 3L2 Karine.Bernier@raymondja Email address mes.ca Telephone number +1 (604) 654-7312 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) $\hfill \square$ Director or officer of the investment fund or investment fund manager ☐ Employee of the issuer or investment fund manager ✓ None of the above

Provide details of all compensation paid, or to be paid, to Provide all amounts in Canadian dollars. Include cash con compensation. Do not report payments for services incider services. An issuer is not required to ask for details about, or employees of a non-individual compensated by the issu	nmissions, securitie ntal to the distribut or report on, intern	s-based compensat ion, such as clerical	ion, gifts, discount , printing, legal or	s or other accounting
Cash commissions paid	14400			
Value of all securities distributed as compensation ⁴				
Security codes	Security code 1	Security code 2	Security code 3	
security codes	WNT]
Describe terms of warrants, options or other rights Other compensation ⁵ Describe	prior to 5:00 p.m	arrants exercisable . (Toronto time) on se Period") at a pri er Share	December 31,	
Total compensation paid	14400			
Check box if the person will or may receive any def 4Provide 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. 5Do not include deferred compensation.	tion, <u>excluding</u> options,	warrants or other righ	ts exercisable to acqui	

d) Compensation details

ITEM 8 – COMPENSATION INFORMATIO	ON			
Provide information for each person (as defined in NI 45 whom the issuer directly provides, or will provide, any cocopies of this page if more than one person was, or w	mpensation in connection with t			
Indicate whether any compensation was paid, or will be				
☐ No ☑ Yes If yes, indicate numb	er of persons compensated. [§	3		
a) Name of person compensated and reg	istration status			
Indicate whether the person compensated is a registrant.				
✓ No ☐ Yes				
	name of the individual.			
Full legal name of individual				
Family name If the person compensated is not an individual, provide t		e Secondary given names		
Full legal name of non-individual WEALTH CREA	ATION PRESERVATION & DONA	TION INC.		
Firm NRD number 23920	(if app	licable)		
Indicate whether the person compensated facilitated the	distribution through a funding p	oortal or an internet-based portal		
✓ No				
b) Business contact information				
lf a firm NRD number is not provided in Item 8(a), provid	le the business contact information	on of the person being compensated.		
Street address 353 Dalhousie Street, 2nd Floo	or			
Municipality Ottawa	Province/State	Ontario		
Country	Postal code/Zip code	K1N 2G1		
Email address peter.nicholson@wcpd.com	Telephone number	+1 (613) 596-3277		
c) Relationship to issuer or investment fu	nd manager			
Indicate the person's relationship with the issuer or inves 'connected' in Part B(2) of the Instructions and the meani respecting Prospectus Exemptions) for the purposes of co	stment fund manager (select all ti ing of 'control' in section 1.4 of N			
Connected with the issuer or investment fund manager				
☐ Insider of the issuer (other than an investment fu	nd)			
Director or officer of the investment fund or inves	_			
Employee of the issuer or investment fund manag	ger			
✓ None of the above				
d) Compensation details				

Cash commissions paid	112400		
/alue of all securities distributed as compensation ⁴			
Security codes	Security code 1	Security code 2	Security code 3
security codes	WNT		
Describe terms of warrants, options or other rights	prior to 5:00 p.m. (Toronto time) on December 31, 2025 (the "Exercise Period") at a price (the "Exercise Price") of \$0.50 per Share		
Other compensation ⁵			
Describe			
			_
Total compensation paid	112400		
Check box if the person will or may receive any def	erred compensation	on (describe the te	erms below)

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

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d) Compensation details				
Provide details of all compensation paid, or to be paid, to Provide all amounts in Canadian dollars. Include cash con compensation. Do not report payments for services incides services. An issuer is not required to ask for details about, or employees of a non-individual compensated by the issuer	nmissions, securitie ntal to the distribut or report on, intern	s-based compensat ion, such as clerica	tion, gifts, discounts l, printing, legal or	s or other accounting
Cash commissions paid	2400			
Value of all securities distributed as compensation ⁴				
Security codes	Security code 1 WNT	Security code 2	Security code 3	
Describe terms of warrants, options or other rights Other compensation ⁵ Describe	2,400 broker war share until Decen	rants exercisable a nber 31, 2025	at \$0.50 per	
Total compensation paid ☐ Check box if the person will or may receive any def		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.	tion, <u>excluding</u> options,	warrants or other righ	ts exercisable to acqui	

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 If yes, indicate number of persons compensated. | 8 **V** Yes a) Name of person compensated and registration status Indicate whether the person compensated is a registrant. **V** 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. RESEARCH CAPITAL CORPORATION / CORPORATION RECHERCHE Full legal name of non-individual **CAPITAL** Firm NRD number | 3070 (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 | 199 Bay Street, Suite 4500, Commerce Court West, Box 368 Municipality | Toronto Province/State Ontario Country Canada Postal code/Zip code M5L 1G2 Email address | vib@researchcapital.com Telephone number +1 (888) 884-9588 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) $\hfill \square$ 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 con compensation. Do not report payments for services incider services. An issuer is not required to ask for details about, or employees of a non-individual compensated by the issu	nmissions, securitie ntal to the distribut or report on, intern	s-based compensat ion, such as clerica	ion, gifts, discounts l, printing, legal or	s or other accounting
Cash commissions paid	32000			
Value of all securities distributed as compensation ⁴	4			
Security codes	Security code 1 WNT	Security code 2	Security code 3	
Describe terms of warrants, options or other rights	32,000 broker wa December 31, 20	arrants exercisable 25	at \$0.50 before	
Other compensation ⁵			7	
Describe				
Total compensation paid	32000		7	
☐ Check box if the person will or may receive any def	erred compensati	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.	= :	=	·	
ITEM 9 – DIRECTORS, EXECUTIVE OFFICE	RS AND PROM	MOTERS OF T	HE ISSUER	
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 th	he one that applies	– if more than one	applies, select only	one).
✓ Reporting issuer in a jurisdiction of Canada☐ Foreign public issuer				
☐ Wholly owned subsidiary of a reporting issuer in ar	ny jurisdiction of C	anada 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 ar	nd the distribution	is to permitted cli	ents only ⁷ .	
If the issuer is at least one of the above, do not comple	ete Item 9(a) – (c).	Proceed to Item 1	0.	
⁶ An issuer is a wholly owned subsidiary of a reporting issu	ıer or a foreign pub	lic issuer if all of the	e issuer's outstandi	ng 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	

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	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	Residential jurisdiction of individual		promoter (select if applicable)
company name	name	name	names	Province or country	D	O

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 to file a completed report of exempt distribution.							ptions	
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.							ng	
Name of Issuer/ investment fund First Phosphate Corp. manager/agent								
Full legal name	KURTZ	Ben	nett					
	Family name	First give	n name	•	Seconda	ary given names		
Title	CAO & CFO							
Telephone number	+1 (416) 200-0657	Email address	bennett@firs	stphosp	hate.c	com		
Signature	Bennett Kurtz	Date	Date 2024 01 05					
			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 c	ertifying the report					
Full legal name	YEO		Noella			
	Family name		First given name	Secondary given names		
Title	Law Clerk					
Name of company	Garfinkle Biderman LLP					
Telephone number			Email address	nyeo@garfinkle.com		

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.