# 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.									
Instrument 81-106 Investment Fund Continuous Disclosure and the companion policy to NI 81-106.									
□ ✓ Issuer (other than an inve	estment fund)								
Underwriter	,								
Item 3 - Issuer Name and C	THER IDENTIFIERS								
Provide the following information about		vestment fund, about th	ne fund.						
Full legal nam	-								
Previous full legal nam	e								
If the issuer's name changed in t	he last 12 months, provide most	recent previous legal na	ime.						
Websit	e www.catstrategic.com	(if	applicable)						
If the issuer has a legal entity identifier.	L provide below. Refer to Part B of t	he Instructions for the a	lefinition of "legal entity identifier".						
Legal entity identifie	r								
If two or more issuers distributed a single	e security, provide the full legal no	ame(s) of the co-issuer(s	s) other than the issuer named above.						
Full legal name(s) of co-issuer(s	3)	(if	applicable)						
ITEM 4 - UNDERWRITER INFOR	ΜΑΤΙΟΝ								
If an underwriter is completing the repor		aal name and firm NRC	) number						
Full legal name									
Firm NRD number		(if applica	uble)						
If the underwriter does not have a firm N	I I I I I I I I I I I I I I I I I I I	Fice contact information	of the underwriter.						
Street address									
Municipality	icipality Province/State								
Country		Postal code/Zi	ip code						
Telephone number		٧	Vebsite	(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 0									
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 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									
Cryptoassets									
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       3       2       1       1       0									
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.									
AIIABBCMBNBNLNT									
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	S5M to under \$25M	□ \$25M to under \$100M
S100M to under \$500M	S500M to under \$1B	\$1B or over

ITEM 6 - INVESTMENT FUND ISSUER INFORMATION									
If the issuer is an investment fund, provide the following information.									
a) Investment fund ma	anager information								
Full legal name									
Firm NRD number	(if applicable)								
If the investment fund mand	ager does not have a firm NRD number, provide the head office contact information of the investment fund manager.								
Street address									
Municipality	Province/State								
Country	Postal code/Zip code								
Telephone number	Website (if applicable)								
b) Type of investment	fund								
Type of investment fund tha	t most accurately identifies the issuer (select only one) .								
Money market	Equity Fixed income Balanced								
Alternative strateg	ies Cryptoasset Other (describe)								
Indicate whether one or bot	h of the following apply to the investment fund .								
Invests primarily in	other investment fund issuers								
Is a UCITs Fund <sup>1</sup>									
	tive Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union ollective investment schemes to operate throughout the EU on a passport basis on authorization from one member state.								
c) Date of formation a	nd financial year-end of the investment fund								
Date of format	ion Financial year-end								
	YYYY MM DD MM DD								
d) Reporting issuer st	atus of the investment fund								
Is the investment fund a rep	orting issuer in any jurisdication of Canada? No Yes								
	of Canada in which the investment fund is a reporting issuer.								
	AB BC MB NB NL NT								
	NU ON PE QC SK YT								
e) Public listing status	of the investment fund								
If the investment fund has a	CUSIP number, provide below (first 6 digits only)								
	CUSIP number								
If the investment fund is publicly listed, provide the name of the exchange on which the investment fund's securities primarily trade. Provide only the name of an exchange and not a trading facility such as, for example, an automated trading system.									
Exchange n	ame								
f) Net asset value (NA	V) of the investment fund								
Select the NAV range of the	investment fund as of the date of the most recent NAV calculation (Canadian \$).								
S0 to under \$5M	\$5M to under \$25M \$25M to under \$100M								
\$100M to under \$500	DM \$500M to under \$1B \$1B or over Date of NAV calculation:								
	YYYY MM DD								

# **ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION**

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) Currency													
Select the currency or currencies in which the distribution was made. All dollar amounts provided in the report must be in Canadian dollars.													
$\checkmark$ (	Canadian dollar US dollar Euro Other (describe)												
b)	b) Distribution date(s)												
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 dai	<sup>te</sup> 2021	03 01	End d	ate	2021	03	01	
YYYY MM DD YYYY MM DD													
c)			-			mation							
Con	plete	e Scł	nedu	le 1 d	of this	form for eac	h purchaser and	attach the schedule	e to	the comple	eted re	eport.	
d)	Туре	es of	secu	uritie	s distr	ibuted							
								er security basis. Refer to CUSIP number assigned					ow to indicate the
											_	Canadian \$	
Sec	urity de		SIP nu applica			Description	of security	Number of securities		Single or lowest price	Hig	hest price	Total amount
UBS16934TUnits, each Unit comprised of one common share in the capital of the Issuer (a Unit Share) and one whole transferrable common share purchase Warrant.21,380,400.000.08000.08001,710,432.00									1,710,432.00				
e)	Deta	ails o	f righ	nts ar	nd cor	vertible/excha	ngeable securitie	)S			•	<b>•</b>	
-	-	-					•	cise price and expiry dat terms for each converti		-	-		xchangeable securities
exch	nvertibl nangea urity co	ble		derlyir urity c		(Cana	se price dian \$)	Expiry date Conversion			tems (if applicable)		
						Lowest	Highest		1.1		Tach		
W	N	т	С	Μ	S	0.1600	0.1600	2026-03-01	r ti v s c		nolde ourch the ca WNT orice Share day w	r thereof, ase one ( pital of th Share) at CDN\$0.1 e until clos	NT will entitle the on exercise, to CMS share in he Issuer (a t an exercise 6 per WNT se business on 0 months from its
f)	Sum	mary	∕ of tł	ne di	stribut	ion by jurisdict	ion and exemption	on					
purch distri This purch jurisc	<ul> <li>f) Summary of the distribution by jurisdiction and exemption</li> <li>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.</li> <li>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.</li> <li>For jurisdictions within Canada, state the province or territory, otherwise state the country.</li> </ul>												
			nce oi	r			Exemption relied	d on	Nu	umber of uniqu	e²ª	Total ar	nount (Canadian \$)
British Columbia NI 45-106 2.3 [Accredited in						NI 45-106 2.		-	purchasers	13		186,840.00	

British Columbia	NI 45-106 2.5 [Family, friends and business associates]	3	92,000.00			
Québec	NI 45-106 2.3 [Accredited investor]	4	222,000.00			
Québec	NI 45-106 2.5 [Family, friends and business associates]	1	80,000.00			
Ontario	NI 45-106 2.3 [Accredited investor]	9	488,192.00			
Alberta	NI 45-106 2.3 [Accredited investor]	4	169,000.00			
Monaco	NI 45-106 2.3 [Accredited investor]	1	80,000.00			
Colombia	NI 45-106 2.3 [Accredited investor]	1	240,000.00			
China	NI 45-106 2.3 [Accredited investor]	1	40,000.00			
United States	United States Distributions to purchasers outside of local jurisdiction (BC, AB, NB)		103,600.00			
United Kingdom NI 45-106 2.3 [Accredited investor]		1	8,800.00			
	Total dollar amount of securities distributed					
	Total number of unique purchasers <sup>2b</sup>	46				

<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.

<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.

#### 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.<sup>3</sup> 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>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.

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.

TEM 8 - COMPENSATION INFORMATION
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 whether any compensation was paid, or will be paid, in connection with the distribution.

🗌 No
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✓ Yes If ye

If yes, indicate number of persons compensated.

6

a) Name of person compensated and registration status										
Indicate whether the person compensated is a registrant. No Ves										
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 Leede Jones G	Sable								
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										
If a firm NRD number is not provided in	Item 8 (a), provide the busines	ss contact information of	f the person being com	pensated.						
Street address										
Municipality			Province/State							
Country		Pos	stal code/Zip code							
Email address		Te	elephone number							
c) Relationship to issuer or invest	stment fund manager									
Indicate the person's relationship with the the Instructions and the meaning of "co				ning of "connected" in Part B(2) of						
Connect with the issuer or inv		· · ·		er than an investment fund)						
Director or officer of the inves	tment fund or investment fund	d manager 🛛 Em	nplovee of the issuer o	r investment fund manager						
✓ None of the above				Ş						
d) Compensation details										
Provide details of all compensation paid, Canadian dollars. Include cash commissi incidental to the distribution, such as cle allocation arrangements with the director	ions, securities-based compens rical, printing, legal or account	ation, gifts, discounts or o ting services. An issuer is	other compensation. D not required to ask for	o not report payments for services						
Cash commissions paid	9,030.00		Security code 1	Security code 2 Security code 3						
Value of all securities distributed as compensation <sup>4</sup>	9,030.00	Security codes	W N T							
Describe terms of	warrants, options or other righ	nts 112875 Finders \ March 1, 2023.	Warrants exercisab	e at CDN\$0.08, expiry						
Other compensation <sup>5</sup>	Descri	be								
Total compensation paid	18,060.00									
Check box if the person will	or may receive any deferred	compensation (describe	e the terms below)							
<sup>4</sup> 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. <sup>5</sup> Do not include deferred compensation.										

a) Name of person com	pensated and registration	on status								
Indicate whether the person compensated is a registrant. No Ves										
If the person compensated is an individual, provide the name of the individual.										
Full legal name of individual     Skarica     David										
Family name         First given name         Secondary given names										
If the person compensated is not an individual, provide the following information.										
Full legal name	e of non-individual									
F	Firm NRD number   (if applicable)									
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. Ves										
b) Business contact info	rmation									
If a firm NRD number is not p	ovided in Item 8 (a), provid	le the business co	ontact informa	ition of the	person be	ing com	pensated.			
Street address	1 Periwinkle Drive									
Municipality	Gregory Town			Р	Province/	State	Eleuthera	1		
Country	Bahamas			Postal c	code/Zip	code	33172			
Email address	addictedtoprofits@hoti	mail.com		Telep	hone nu	mber	24235970	)23		
c) Relationship to issue	r or investment fund ma	nager								
Indicate the person's relations							ning of "coni	nected" in Part	B(2) of	
the Instructions and the mean	uer or investment fund ma		or the purpose		-		ar than an in	vestment fund)	N	
Director or officer of	the investment fund or inv	estment fund ma	anager	_ Employ	vee of the	issuer o	r investmen	it fund manager		
✓ None of the above										
d) Compensation details	3									
Provide details of all compensa Canadian dollars. Include cash										
incidental to the distribution, su	uch as clerical, printing, leg	al or accounting	services. An is	suer is not i	required to	o ask for				
allocation arrangements with t	-	¬`	individual con	npensated b	by the issu	ier.				
Cash commissions p	paid 7,602.00	<u></u>		-	Security co		Security code	e 2 Security c	ode 3	
Value of all securiti distributed as compensati	. 7 602 00	2	Security codes	S	WN	Т				
Describe	terms of warrants, options	or other rights	95025 Find 1, 2023.	ders Warra	ants exer	rcisable	at CDN\$0	).08, expiry M	arch	
Other compensation	on⁵	Describe								
Total compensation p	aid 15,204.00	, J								
Check box if the p	erson will or may receive a	any deferred con	npensation (de	escribe the	terms bel	low)				
<sup>₄</sup> Provide the aggregate value										
additional securities of the iss rights exercisable to acquire a			urities distribu	ted as com	pensation	n, <u>includi</u>	ing options,	warrants or oth	er	
<sup>5</sup> Do not include deferred compensation.										

a) Name of person comper	sated and regist	ration sta	atus									
Indicate whether the person comp	ensated is a registro	ant.		🗌 No		$\checkmark$	Yes					
If the person compensated is an in	dividual, provide th	e name o	f the indivio	dual.								
Full legal name of individe	ual											
	Fa	amily name	9		First	given na	ame		Seco	ndary given	names	
If the person compensated is not an individual, provide the following information.												
Full legal name of	Full legal name of non-individual Powerone Capital Markets Limited											
Firm NRD number 1 7 0 1 0 (if applicable)												
Indicate whether the person comp	Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.											
b) Business contact informa	ation											
If a firm NRD number is not provid	ded in Item 8 (a), pr	ovide the	business co	ontact infor	mation	of the p	person b	eing com	pensated.			
Street address												
Municipality						P	rovince	/State				
Country					P	ostal c	ode/Zip	o code				
Email address						Telepl	hone n	umber				
c) Relationship to issuer or	investment fund	manage	r									
Indicate the person's relationship to the Instructions and the meaning of the meaning the meaning of the meaning the meaning of the meaning o									ning of "co	nnected" ii	ו Part B(ג	'2) of
Connect with the issuer						-	•		er than an	investmer	t fund)	
Director or officer of the	investment fund or	investme	ent fund ma	nager		Employ	ee of the	e issuer (	or investme	ent fund ma	anager	
✓ None of the above				-							-	
d) Compensation details												
Provide details of all compensation Canadian dollars. Include cash con incidental to the distribution, such allocation arrangements with the c	nmissions, securities as clerical, printing,	s-based co legal or c	ompensatio accounting	n, gifts, disc services. An	ounts o issuer	or other is not r	· comper equired	nsation. E to ask fo	Do not repo	rt payment	ts for serv	vices
Cash commissions paid	17,50	0.00					Security	code 1	Security co	ode 2 Se	curity cod	le 3
Value of all securities distributed as compensation⁴	17,50	0.00	S	Security coo	des	,	W N	Т				
Describe terr	ns of warrants, opti	ions or otl	her rights	218750 I March 1,			ants e	kercisab	le at CDN	I\$0.08, ex	çpiry	
Other compensation <sup>5</sup>			Describe									
Total compensation paid	35,000	00.0										]
Check box if the perso	on will or may recei	ve any de	eferred corr	pensation	(descri	ibe the i	terms be	elow)				
<sup>4</sup> Provide the aggregate value of a additional securities of the issuer rights exercisable to acquire addi <sup>5</sup> Do not include deferred compention <sup>5</sup> Do not include deferred compention	. Indicate the secur itional securities of	ity codes	for all secu									

a) Name of person compensated a	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 indiv	idual.						
Full legal name of individual								
	Family name	First given n	name See	condary given names				
If the person compensated is not an individual, provide the following information.								
Full legal name of non-individual Canaccord Genuity Corp								
Firm NRD number 9 0 0 (if applicable)								
Indicate whether the person compensated	Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.							
b) Business contact information								
If a firm NRD number is not provided in Ite	rm 8 (a), provide the business o	ontact information of the	person being compensated	!				
Street address								
Municipality		P	Province/State					
Country		Postal	code/Zip code					
Email address		Telep	bhone number					
c) Relationship to issuer or investr	nent fund manager							
Indicate the person's relationship with the the Instructions and the meaning of "contr				connected" in Part B(2) of				
Connect with the issuer or inves		· · · _ ·	of the issuer (other than a	n investment fund)				
Director or officer of the investm	ent fund or investment fund m	anager 🦳 Employ	vee of the issuer or investr	nent fund manager				
✓ None of the above				C C				
d) Compensation details								
Provide details of all compensation paid, or Canadian dollars. Include cash commission incidental to the distribution, such as cleric allocation arrangements with the directors,	s, securities-based compensati al, printing, legal or accounting	on, gifts, discounts or othe services. An issuer is not i	r compensation. Do not rep required to ask for details o	port payments for services				
Cash commissions paid	23,466.80		Security code 1 Security	code 2 Security code 3				
Value of all securities distributed as compensation <sup>4</sup>	23,466.80	Security codes	W N T					
Describe terms of wa	rrants, options or other rights	293335 Finders War March 1, 2023.	rants exercisable at CD	N\$0.08, expiry				
Other compensation⁵	Describe							
Total compensation paid	46,933.60							
Check box if the person will or	may receive any deferred co	mpensation (describe the	terms below)					
<sup>4</sup> Provide the aggregate value of all securi additional securities of the issuer. Indicate rights exercisable to acquire additional se <sup>5</sup> Do not include deferred compensation.	e the security codes for all sec							

a) Name of person compens	ated and registrat	ion status							
Indicate whether the person comper	nsated is a registrant		No No	$\checkmark$	Yes				
If the person compensated is an ind	ividual, provide the r	name of the indiv	idual.						
Full legal name of individua	al								
	Fam	ily name	Fi	rst given n	ame	Seco	ndary given names		
If the person compensated is not an individual, provide the following information.									
Full legal name of n	ion-individual Ma	ickie Research	Capital Corpo	ration					
Firm	Firm NRD number 3 0 7 0 (if applicable)								
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.									
b) Business contact informat	ion								
If a firm NRD number is not provide	d in Item 8 (a), prov	ide the business c	ontact informatio	on of the	person bein	g compensated.			
Street address									
Municipality				Р	Province/St	ate			
Country				Postal c	code/Zip c	ode			
Email address			1	Telep	hone num	ber			
c) Relationship to issuer or ir	nvestment fund m	anager							
Indicate the person's relationship wi the Instructions and the meaning of							nnected" in Part B(2) of		
Connect with the issuer of				-	-		investment fund)		
Director or officer of the ir	vestment fund or in	vestment fund m	anager 🗖	Employ	vee of the is	suer or investme	ent fund manager		
$\checkmark$ None of the above									
d) Compensation details									
Provide details of all compensation generation p Canadian dollars. Include cash comm incidental to the distribution, such as allocation arrangements with the dir	nissions, securities-b s clerical, printing, le	ased compensation gal or accounting	on, gifts, discount services. An issu	rs or othei er is not i	r compensat required to d	tion. Do not repo ask for details ab	rt payments for services		
Cash commissions paid	1,500.0	00			Security cod	e 1 Security co	ode 2 Security code 3		
Value of all securities distributed as compensation <sup>4</sup>			Security codes		WN	т			
Describe terms	s of warrants, optior	us or other rights	0 Finders Wa 2023.	arrants e	exercisable	e at CDN\$0.08	, expiry March 1,		
Other compensation⁵		Describe							
Total compensation paid	1,500.0	00							
L Check box if the person	will or may receive	 any deferred cor	mpensation (des	cribe the	terms below	N)			
<sup>4</sup> Provide the aggregate value of all additional securities of the issuer. I rights exercisable to acquire additic <sup>5</sup> Do not include deferred compensa	ndicate the security onal securities of the	codes for all sec							

a) Name of person compensated	and registration status							
Indicate whether the person compensated	d is a registrant.	No 🔽	∕ Yes					
If the person compensated is an individuo	al, provide the name of the ind	ividual.						
Full legal name of individual								
	Family name	First give	n name	Secondary given names				
If the person compensated is not an individual, provide the following information.								
Full legal name of non-individual Haywood Securities Inc.								
Firm NRD number 1 6 3 0 (if applicable)								
Indicate whether the person compensated	d facilitated the distribution the	rough a funding portal or	an internet-based porto	al. 🖌 No 🗌 Yes				
b) Business contact information								
If a firm NRD number is not provided in I	tem 8 (a), provide the business	contact information of th	he person being compen	isated.				
Street address								
Municipality			Province/State					
Country		Posta	al code/Zip code					
Email address			ephone number					
c) Relationship to issuer or invest	tment fund manager							
Indicate the person's relationship with the the Instructions and the meaning of "con				g of "connected" in Part B(2) of				
Connect with the issuer or inve		· · · ·	· •	han an investment fund)				
Director or officer of the investr	ment fund or investment fund	manager 🦳 Empl	loyee of the issuer or in	vestment fund manager				
✓ None of the above			,	J. J				
d) Compensation details								
Provide details of all compensation paid, of Canadian dollars. Include cash commission incidental to the distribution, such as cleri allocation arrangements with the director	ons, securities-based compensa ical, printing, legal or accounti	tion, gifts, discounts or oti ng services. An issuer is no	her compensation. Do n ot required to ask for de	ot report payments for services				
Cash commissions paid	1,500.00		Security code 1 Se	curity code 2 Security code 3				
Value of all securities distributed as compensation <sup>4</sup>	1,500.00	Security codes	W N T					
Describe terms of w	/arrants, options or other right	s 18750 Finders Wa 1, 2023.	rrants exercisable at	CDN\$0.08, expiry March				
Other compensation <sup>5</sup>	Describ							
Total compensation paid	3,000.00							
Check box if the person will or may receive any deferred compensation (describe the terms below)								
<sup>4</sup> Provide the aggregate value of all secu additional securities of the issuer. Indica rights exercisable to acquire additional s <sup>5</sup> Do not include deferred compensation.	ate the security codes for all se securities of the issuer.							

TEM 9 - DIRECTORS, EXECUTIVE OFFICERS AND PROMOTERS OF THE ISSUER									
If the issuer is an investment fund	d, 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 ir	n any jurisdiction of	Canada <sup>6</sup>						
Provide name of reporting issuer									
Wholly owned subsidiary of	a foreign public issu	uer <sup>6</sup>						Ţ	
Provide name of	foreign public issue	er 🗌						]	
Issuer distributing only eligi	ble foreign securities	s and the distributio	on is to permitted clie	nts only <sup>7</sup>				L	
If the issuer is at least one of the	above, do not com	plete Item 9(a) – (	c). Proceed to Item 1	10.					
<ul> <li><sup>6</sup>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.</li> <li><sup>7</sup>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.</li> <li>If the issuer is none of the above, check this box and complete Item 9(a) - (c).</li> </ul>									
		·	item 5(u) - (c).						
a) Directors, executive officer									
Provide the following information for territory; otherwise state the country.						state the j	province	)r	
Organization or company name       Family name       First given name       Secondary given names       Business location of non-individual or residentail jurisdiction of individual       Relationship to issuer (select all that apply)									
				Province or	country	D	0	Р	
b) Promoter information									
If the promoter listed above is not an individual, provide the following information for each director and executive officer of the promoter. For locations within Canada, state the province or territory; otherwise state the country. For "Relationship to promoter", "D" – Director, "O" – Executive Officer.									
Organization or company name	Family name	First given name	Secondary given	Residential jurisdiction of individual		ationship one or bo			
				Province or country	D		0		
a) Popidantial address of sea	h individual								
c) Residential address of eac		unidantic	for each individual	listed in Item A	(a) and /1-	) and -4	ach += +		
Complete Schedule 2 of this form	providing the full r	residential address	s for each individual	l listed in Item 9	(a) and (b	) and att	ach to th	ie	

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	CAT Strategic Metals Corporation								
Full legal name	Rosner								
	Family name		Secondary given names						
Title	Chairman, Director and Chief Executive Officer								
Telephone number	6046743145 Email address robert@				ert@catstrategic.com				
Signature	Robert Rosner Date			03	10				
			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		E	mail 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.