Form 45-106F1 Report of Exempt Distribution

ITEM 1 - REPORT TYPE

✓ New report

Amended report

If amended, provide filing date of report that is being amended.

(YYYY-MM-DD)

ITEM 2 - PARTY CERTIFYING THE REPORT

Indicate the party certifying the report (select only one). For guidance regarding whether an issuer is an investment fund, refer to section 1.1 of National Instrument 81-106 Investment Fund Continuous Disclosure and the companion policy to NI 81-106 (in Québec, Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement Fund Continuous Disclosure).

Investment fund issuer

✓ Issuer (other than an investment fund)

Underwriter

ITEM 3 - ISSUER NAME AND OTHER IDENTIFIERS

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

Full legal name	Forge Resources Corp. (formerly, Benjamin Hill Mining Corp.) / Forge Resources Corp. (formerly, Benjamin Hill Mining Corp.)				
Previous full legal name	BENJAMIN HILL MINING CORP. (FORMERLY, MOJAVE GOLD CORP.)				
If the issuer's name changed in the last 12 months, provide most recent previous legal name.					
Website	www.forgeresourcescorp.com (if applicable)				
If the issuer has a legal entity identifier, p	rovide below. Refer to Part B of the Instructions for the definition of "legal entity identifier".				
Legal entity identifier					
lf 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 INFORMATION If an underwriter is completing the report, provide the underwriter's full legal name, firm NRD number, and SEDAR+ profile number. Full legal name Firm NRD number (if applicable)

ITEM 5 - ISSUER INFORMATION
If the issuer is an investment fund, do not complete Item 5. Proceed to Item 6.
a) Primary industry
Provide the issuer's North American Industry Classification Standard (NAICS) code (6 digits only) that in your reasonable judgment most closely corresponds to the issuer's primary business activity.
NAICS industry code 212220
If the issuer is in the mining industry , indicate the stage of operations. This does not apply to issuers that provide services to issuers operating in the mining industry. Select the category that best describes the issuer's stage of operations.
🗹 Exploration 🗌 Development 🗌 Production
Is the issuer's primary business to invest all or substantially all of its assets in any of the following? If yes, select all that apply.
🗌 Mortgages 🔄 Real estate 🔲 Commercial/business debt 📄 Consumer debt 🗌 Private companies
Cryptoassets
b) Number of employees
Number of employees: 🗹 0 - 49 🗌 50 - 99 🗌 100 - 499 🗌 500 or more
c) SEDAR+ profile number
Provide the issuer's SEDAR+ profile number 000036946

ITEM 6 - INVESTMENT FUND ISSUER INFORMATION

If the issuer is an investment fund, provide the following information.						
a) Investment fund m	anager information					
Full legal name]			
Firm NRD number		(if applicable)				
SEDAR+ profile number		7				
		-				
b) Type of investment	: fund					
<i>Type of investment fund that mo</i>	ost accurately identifies the issuer (sele	<i>ct only one).</i> ed income				
-						

Alternative strategies	Cryptoasset	🗌 Other (describe)					
Indicate whether one or both of the	e following apply to the in	vestment fund.					
Invest primarily in other inve		5					
☐ Is a UCITs Fund ¹ ¹ Undertaking for the Collective Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) directives that allow collective investment schemes to operate throughout the EU on a passport basis on authorization from one member state.							
c) Net asset value (NAV)	of the investment fu	nd					
Select the NAV range of the investn	nent fund as of the date of	f the most recent NAV calc	ulation (Canad	lian \$).			
🗌 Under \$5M	S5M to under \$2	25M 🗌 \$25M to und	er \$100M	Date of NAV calculation:			
S100M to under \$500M \$500M	S500M to under \$	\$1B 🗌 \$1B or over		YYYY MM DD			
ITEM 7 - INFORMATION	ABOUT THE DISTR	RIBUTION					
information about purchasers resi commissions or finder's fees, in co	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 ir dollars.	n which the distribution wo	as made. All dollar amoun	ts provided in a	the report must be in Canadic	an		
🗹 Canadian dollar 🛛 US d	lollar 🗌 Euro Ot	her (describe)					
b) Distribution dates							
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 distribued on a continuous basis, include the start and end dates for the distribution period covered by the report.							
Start date 202		End date	2024	06 28			
YYY	Y MM DD		YYYY	MM DD			
c) Detailed purchaser ir	formation						
Complete Schedule 1 of this form	n for each purchaser and	d attach the schedule to	the complete	d report.			
d) Types of securities di	istributed						
Provide the following information j to indicate the security code. If pro distributed.					wc		

					Canadian \$	
Security code	CUSIP number (if applicable)	Description of security	Number of securities	Single or lowest price	Highest price	Total amount
UBS	34630Q109	Each unit consists of one flow-thr ough common share and one no n-flow-through share purchase w arrant	687,500.0000	0.8000	0.8000	550,000.0000

e) Details of rights and convertible/exchangeable securities

If any rights (e.g. warrants, options) were distributed, provide the exercise price and expiry date for each right. If any convertible/exchangeable securities were distributed, provide the conversion ratio and describe any other terms for each convertible/exchangeable security.

Convertible / exchangeable	Underlying security code	Exercise price (Canadian \$)		Expiry date (YYYY-MM- DD)	Conversion ratio	Describe other terms (if applicable)	
security code	security code	Lowest	Highest			applicable)	
WNT	CMS	1.1000	1.1000	2025-06-28	1:1		

f) Summary of the distribution by jurisdiction and exemption

State the total dollar amount of securities distributed and the number of purchasers for each jurisdiction of Canada and foreign jurisdiction where a purchaser resides and for each exemption relied on in Canada for that distribution. However, if an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include distributions to purchasers resident in that jurisdiction of Canada only.

This table requires a separate line item for: (i) each jurisdiction where a purchaser resides, (ii) each exemption relied on in the jurisdiction where a purchaser resides, if a purchaser resides in a jurisdiction of Canada, and (iii) each exemption relied on in Canada, if a purchaser resides in a foreign jurisdiction.

For jurisdictions within Canada, state the province or territory, otherwise state the country.

Province or country	Exemption relied on	Number of unique purchasers ^{2a}	Total amount (Canadian \$)
Ontario	NI 45-106 2.3 [Accredited investor]	1	500,000.0000
British Columbia	NI 45-106 2.3 [Accredited investor]	1	50,000.0000
	\$550,000.0000		
	Total number of unique purchasers ^{2b}	2	

^{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.

ITEM 8 - COMPENSATION INFORMATION

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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. 2								
a) Name of per	rson compensated a	nd registratior	n status					
Indicate whether the pe	rson compensated is a re	egistrant.						
lf the person compensa	ted is an individual, prov	ide the name of th	ne individual.		•			
Full legal name of	individual							
lf the person compensa	_{Fa} ted is not an individual, µ	mily name provide the follow	First given nam ing information.	ne	Secondary giver	า names		
Full legal name of	f non-individual Marqu	uest Asset Manag	gement Inc.					
Fin	m NRD number		(if app	licable)				
Indicate whether the pe	rson compensated facilit	ated the distributi	ion through a funding i	portal or a	n internet-based po	ortal		
√ No □ Yes	, ,		5, 5,		1			
b) Business col	ntact information							
lf a firm NRD number is	not provided in Item 8(a	ı), provide the bus	iness contact informati	ion of the p	person being comp	ensated.		
Street address	161 Bay Street, Suite 4	1010						
Municipality	Toronto		Province/State	Ontario				
Country	Canada		Postal code/Zip code	M5J2S1				
Email address	gdrodge@marquest.ca	a	Telephone number	+1 (416)	777-7350			
c) Relationship	to issuer or investm	hent fund man	ager					
Indicate the person's rel 'connected' in Part B(2)	ationship with the issuer of the Instructions and the xemptions) for the purpo	or investment fur ne meaning of 'cor	nd manager (select all t ntrol' in section 1.4 of N					
	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 is I None of the above	suer or investment fun e	d manager						
d) Compensati	on 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	\$15,000.0000	\$15,000.0000	
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	18,750 Warrants share	exercisable at \$1.1	0 per warrant
Other compensation ⁵			
Describe			
			_
Total compensation paid	\$15,000.0000		
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 - 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. 2								
a) Name of person compensated and registration status								
Indicate whether the person compensated is a registrant. □ No ✓ Yes If the person compensated is an individual, provide the name of the individual.	_							
Full legal name of individual								
Family name First given name Secondary given names If the person compensated is not an individual, provide the following information.								
Full legal name of non-individual GLORES SECURITIES INC								
Firm NRD number 70180 (if applicable)								
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal								
🗹 No 🗌 Yes								
b) Business contact information								
If a firm NRD number is not provided in Item 8(a), provide the business contact information of the person being compensated.								
Street address								
Municipality Province/State								
Country Postal code/Zip code								
Email address Telephone number								
c) Relationship to issuer or investment fund manager								
c) Relationship to issuer or investment fund manager Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of 'connected' in Part B(2) of the Instructions and the meaning of 'control' in section 1.4 of NI 45-106 (in Québec, Regulation 45-106								
respecting Prospectus Exemptions) for the purposes of completing this section.								
Connected with the issuer or investment fund manager								
 Insider of the issuer (other than an investment fund) Director or officer of the investment fund or investment fund manager 								
Employee of the issuer or investment fund manager								
✓ None of the above								
d) Compensation details								

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	\$15,000.0000			
Value of all securities distributed as compensation ⁴				
Security codes	Security code 1	Security code 2	Security code 3	
	WNT			
Describe terms of warrants, options or other rights	18,750 Warrants share	exercisable at \$1.1	0 per warrant	
Other compensation ⁵				
Describe				
Total compensation paid	\$15,000.0000			
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 compensate 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 OFFICERS AND PROMOTERS OF THE ISSUER

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

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

☑ Reporting issuer in a jurisdiction of Canada	ł
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Foreign public issuer

Wholly owned subsidiary of a reporting issuer in any jurisdiction of Canada ⁶

Provide name of reporting issuer

Wholly owned subsidiary of a foreign public issuer ⁶

Provide name of foreign public issuer

 \Box Issuer distributing only eligible foreign securities and the distribution is to permitted clients only ⁷.

If the issuer is at least one of the above, do not complete Item 9(a) - (c). Proceed to Item 10.

⁶ An issuer is a wholly owned subsidiary of a reporting issuer or a foreign public issuer if all of the issuer's outstanding voting securities, other than securities that are required by law to be owned by its directors, are beneficially owned by the reporting issuer or the foreign public issuer, respectively.

⁷ Check this box if it applies to the current distribution even if the issuer made previous distributions of other types of securities to non-permitted clients. Refer to the definitions of "eligible foreign security" and "permitted client" in Part B(1) of the Instructions.

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

a) Directors, executive officers and promoters of the issuer

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

Organization or company name	Family name	First given	Secondary given names	Business location of non-individual or residential jurisdiction of individual	Relationship to iss (select all that apj		
		name		Province or country	D	0	Р

b) Promoter information

If the promoter listed above is not an individual, provide the following information for each director and executive officer of the promoter. For locations within Canada, state the province or territory, otherwise state the country. For "Relationship to promoter", "D" – Director, "O" – Executive Officer.

Organization or	Family	First given	, , ,	Residential jurisdiction of individual		promoter (select if applicable)
company name	name	name	names	Province or country	D	0
c) Residential a	ddress of	each indivi	dual			

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

By completing the inform securities regulatory aut	<i>file a completed report of exempt distribution.</i> y completing the information below, I certify, on behalf of the issuer/underwriter/investment fund manager, to the ecurities regulatory authority or regulator, as applicable, that I have reviewed this report and to my knowledge, having xercised reasonable diligence, the information provided in this report is true and, to the extent required, complete.					
Name of Issuer/ investment fund manager/agent	Forge Resources Corp.					
Full legal name	MCCLAY	Cc	le			
	Family name	First give	en name	Secondary given names		
Title	CEO & Director					
Telephone number	+1 (604) 910-0616	Email address	cole@forgeres	sourcescorp.com		
Signature	"Cole McClay"	Date	2024 YYYY	06 28 MM DD		

ITEM 11 - CONTACT PERSON

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

☑ Same as individual certifying the report

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

NOTICE – COLLECTION AND USE OF PERSONAL INFORMATION

The personal information required under this form is collected on behalf of and used by the securities regulatory authority or regulator under the authority granted in securities legislation for the purposes of the administration and enforcement of the securities legislation. If you have any questions about the collection and use of this information, contact the securities regulatory authority or regulator in the local jurisdiction(s) where the report is filed, at the address(es) listed at the end of this form.

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

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

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