# Form 45-106F1 Report of Exempt Distribution

ITEM 1 - REPORT TYPE			
✓ New report  ☐ Amended report If amended, p	provide filing date of report th	hat is being amended. (YYYY-MM-D	D)
ITEM 2 - PARTY CERTIFYING T	HE REPORT		
section 1.1 of National Instrument 81-106	Investment Fund Continuous I	garding whether an issuer is an investment fund, refer to Disclosure and the companion policy to NI 81-106 (in closure and Policy Statement to Regulation 81-106 respe	
☐ Investment fund issuer			
Issuer (other than an investment fu	ind)		
Underwriter			
ITEM 3 - ISSUER NAME AND O	THER IDENTIFIERS		
Provide the following information about to	he issuer, or if the issuer is an i	investment fund, about the fund.	
Full legal name	Big Gold Inc. / Big Gold Inc.		
Previous full legal name	1093681 BC LTD		
If the issuer's name changed in t	he last 12 months, provide mo	ost recent previous legal name.	
Website [	www.biggold.ca	(if applicable)	
If the issuer has a legal entity identifier, pr	rovide below. Refer to Part B of	f the Instructions for the definition of "legal entity identi	ifier".
Legal entity identifier			
If two or more issuers distributed a single above.	security, provide the full legal i	name(s) of the co-issuer(s) other than the issuer named	d
Full legal name(s) of co-issuer(s)		(if applicable)	
ITEM 4 - UNDERWRITER INFO	RMATION		
If an underwriter is completing the report,	provide the underwriter's full	legal name, firm NRD number, and SEDAR+ profile num	mber.
Full legal name			
Firm NRD number		(if applicable)	
SEDAR+ profile number			

ITEM 5 - ISSUER INFORMATION
If the issuer is an investment fund, do not complete Item 5. Proceed to Item 6.
a) Primary industry
Provide the issuer's North American Industry Classification Standard (NAICS) code (6 digits only) that in your reasonable judgment most closely corresponds to the issuer's primary business activity.
NAICS industry code 212220
If the issuer is in the <b>mining industry</b> , indicate the stage of operations. This does not apply to issuers that provide services to 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
000045098
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
Tun legar name
Firm NRD number (if applicable)
SEDAR+ profile number
b) Type of investment fund
Type of investment fund that most accurately identifies the issuer (select only one).
☐ Money market ☐ Equity ☐ Fixed income ☐ Balanced
☐ Alternative strategies ☐ Cryptoasset ☐ Other (describe)

Indicate whether one or both of the following apply to the investment fund.									
☐ Invest primarily in other investment fund issuers									
☐ Is a UCIT	s Fund <sup>1</sup>								
		Investment of Transferable Securities funds (U				nion (EU) directives			
that allow collect	tive investment	schemes to operate throughout the EU on a pa	issport basis on authoriza	ition from one memb	er state.				
c) Net	asset valu	e (NAV) of the investment fund							
Select the NAV	V range of the	e investment fund as of the date of the	most recent NAV calci	ulation (Canadian	\$).				
Under \$5		☐ \$5M to under \$25M	s25M to unde	-	Date of NAV c	alculation:			
Onder \$5	JIVI	\$5W to diluct \$25W	\$25W to und						
☐ \$100M to	o under \$50	DM	☐ \$1B or over	<u> </u>	YYYY	MM DD			
ITEM 7 - IN	NFORMA	TION ABOUT THE DISTRIBL	JTION						
<i>16</i> · 1					7 161				
		e of Canada completes a distribution in sers resident in that jurisdiction of Can							
commissions	or finder's fe	es, in connection with the distribution,	which must be disclos						
Item 7 must r	reconcile with	the information provided in Schedule	1 of the report.						
a) Curr	rency								
Select the currency or currencies in which the distribution was made. All dollar amounts provided in the report must be in Canadian dollars.									
✓ Canadiar	n dollar	☐ US dollar ☐ Euro Other (	describe)						
LVD: (									
b) Dist	tribution d	ates							
		and end dates. If the report is being fil							
		oth the start and end dates. If the report		urities distribued	on a continuc	us basis,			
include the sti	art ana ena (	dates for the distribution period covere	а ву тне герогт.						
	Start date	2024 10 30	End date	2024	10 30				
		YYYY MM DD		YYYY	MM DD				
c) Deta	ailed purch	aser information							
	·								
Complete Sci	hedule 1 of	this form for each purchaser and att	ach the schedule to	the completed r	eport.				
d) Typ	es of secui	ities distributed							
to indicate the		mation for all distributions reported or de. If providing the CUSIP number, indic							
distributed.									
					Canadian \$				
code	CUSIP number (if applicable)	Description of security	Number of securities	Single or lowest price	Highest price	Total amount			

2,000,000.0000

0.0250

0.0250 50,000.0000

One Common Share and One Wa

UNT

	rrant				
FTU	One Common Share and One Hal f Purchase Warrant	1,250,000.0000	0.0400	0.0400	50,000.0000

## 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	ngeable Underlying (Canadian \$) Expiry date (YYYY-MM- Conversion ratio		Describe other terms (if applicable)			
security code	security code	Lowest	Highest	וטט		аррисавіе)
WNT	CMS	0.0500	0.0500	2026-10-30	1:1	each Warrant entitling the holder to purchase one additional common share at a price of \$0.05 for a period of twenty four (24) months from the closing
WNT	CMS	0.0500	0.0500	2026-10-30	1:1	each full FT Warrant entitlin g the holder to purchase on e additional common share at a price of \$0.05 for a peri od of twenty four (24) mont hs

## f) Summary of the distribution by jurisdiction and exemption

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

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

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

Province or country	Exemption relied on	Number of unique purchasers <sup>2a</sup>	Total amount (Canadian \$)			
Ontario	NI 45-106 2.3 [Accredited investor]	2	100,000.0000			
	Total dollar amount of securities distributed					
	Total number of unique purchasers <sup>2b</sup>	2				

<sup>&</sup>lt;sup>2a</sup> In calculating the number of unique purchasers per row, count each purchaser only once. Joint purchasers may be counted as one purchaser.

### g) Net proceeds to the investment fund by jurisdiction

If the issuer is an investment fund, provide the net proceeds to the investment fund for each jurisdiction of Canada and foreign jurisdiction where a purchaser resides. If an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include net proceeds for that jurisdiction of Canada only. For jurisdictions within Canada, state the province or territory, otherwise

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

state the country.

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

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

# **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. 2 ✓ Yes 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 ACCILENT CAPITAL MANAGEMENT INC. Firm NRD number | 12410 (if applicable) Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal **V** No Yes b) Business contact information If a firm NRD number is not provided in Item 8(a), provide the business contact information of the person being compensated. Street address Municipality Province/State Country Postal code/Zip code jalphonso@accilentcapital.c +1 (416) 429-9779 Email address Telephone number c) Relationship to issuer or investment fund manager Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of 'connected' in Part B(2) of the Instructions and the meaning of 'control' in section 1.4 of NI 45-106 (in Québec, Regulation 45-106 respecting Prospectus Exemptions) for the purposes of completing this section. ☐ Connected with the issuer or investment fund manager Insider of the issuer (other than an investment fund) Director or officer of the investment fund or investment fund manager ☐ Employee of the issuer or investment fund manager ✓ None of the above

d) Compensation details				
Provide details of all compensation paid, or to be paid, to Provide all amounts in Canadian dollars. Include cash con compensation. Do not report payments for services incide services. An issuer is not required to ask for details about, or employees of a non-individual compensated by the issu	nmissions, securitie ntal to the distribut or report on, intern	s-based compensat ion, such as clerica	tion, gifts, discounts l, printing, legal or	or other accounting
Cash commissions paid	\$3,500.0000			
Value of all securities distributed as compensation <sup>4</sup>				
Security codes	Security code 1	Security code 2	Security code 3	
security codes	WNT			
Describe terms of warrants, options or other rights	87,500 Warrants	@ \$0.05 for 24 Mo	onths	
Other compensation <sup>5</sup>				
Describe				
Total compensation paid	\$3,500.0000			
Check box if the person will or may receive any def	erred compensation	on (describe the te	erms below)	
<sup>4</sup> 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.		_		
<sup>5</sup> 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 If yes, indicate number of persons compensated. 2 ✓ 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 Eco-Praxis 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 | 339 Kilgour Ave Municipality | Welland Province/State Ontario Country Canada Postal code/Zip code L3C 2R3 Email address | info@eco-praxis.com Telephone number | +1 (416) 540-6036 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 concompensation. Do not report payments for services incide services. An issuer is not required to ask for details about, or employees of a non-individual compensated by the issuer	nmissions, securitie ntal to the distribut or report on, intern	s-based compensat ion, such as clerica	ion, gifts, discount , printing, legal or	s or other accounting
Cash commissions paid	\$3,500.0000			
Value of all securities distributed as compensation <sup>4</sup>				
Security codes	Security code 1	Security code 2	Security code 3	]
	WNT			
Describe terms of warrants, options or other rights	140,000 Warrant	s @ \$0.05 for 24 M	onths	]
Other compensation <sup>5</sup>				
Describe				
Total compensation paid	\$3,500.0000		7	
☐ Check box if the person will or may receive any def	erred compensati	on (describe the te	erms below)	
<sup>4</sup> 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. <sup>5</sup> Do not include deferred compensation.		_		
ITEM 9 - DIRECTORS, EXECUTIVE OFFICE	RS AND PRO	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 t	he one that applies	_ if more than one	annlies select only	( one)
Reporting issuer in a jurisdiction of Canada	re one that applies	ij more than one	applies, sciect only	onej.
☐ Foreign public issuer				
$\hfill \square$ Wholly owned subsidiary of a reporting issuer in ar	ny jurisdiction of C	anada <sup>6</sup>		
Provide name of reporting issuer				
☐ Wholly owned subsidiary of a foreign public issuer	6			
Provide name of foreign public issuer				
☐ Issuer distributing only eligible foreign securities a	nd the distribution	is to permitted cli	ents only <sup>7</sup> .	
If the issuer is at least one of the above, do not compl	ete Item 9(a) – (c).	Proceed to Item 1	0.	
<sup>6</sup> An issuer is a wholly owned subsidiary of a reporting issu securities, other than securities that are required by law to or the foreign public issuer, respectively.	be owned by its di	rectors, are benefic	ially owned by the	reporting issuer
<sup>7</sup> Check this box if it applies to the current distribution even	n if the issuer made	previous distributi	ons 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	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		Secondary given	Secondary given of individual		promoter (select if applicable)
company name	name	name	names –	Province or country	D	О

### c) Residential address of each individual

Complete Schedule 2 of this form providing the full residential address for each individual listed in Item 9(a) and (b) and attach to the completed report. Schedule 2 also requires information to be provided about control persons.

## **ITEM 10 - CERTIFICATION**

Provide the following certification and business contact information of an officer, director or agent of the issuer or underwriter. If the issuer or underwriter is not a company, an individual who performs functions similar to that of a director or officer may certify the report. For example, if the issuer is a trust, the report may be certified by the issuer's trustee. If the issuer is an investment fund, a director or officer of the investment fund manager (or, if the investment fund manager is not a company, an individual who performs similar functions) may certify the report if the director or officer has been authorized to do so by the investment fund.

The certification may be delegated, but only to an agent that has been authorized by an officer or director of the issuer or underwriter to prepare and certify the report on behalf of the issuer or underwriter. If the report is being certified by an agent on behalf of the issuer or underwriter, provide the applicable information for the agent in the boxes below.

If the individual completing and filing the report is different from the individual certifying the report, provide the name and contact details for the individual completing and filing the report in Item 11.

The signature on the report must be in typed form rather than handwritten form. The report may include an electronic signature provided the name of the signatory is also in typed form.

Securities legislation requires an issuer or underwriter that makes a distribution of securities under certain prospectus exemptions to file a completed report of exempt distribution.

securities regulatory aut exercised reasonable dil	hority or regulator, as applica	ble, that I have r	eviewed this re	vestment fund manager, to the eport and to my knowledge, ha o the extent required, complete	ving
Name of Issuer/ investment fund	Big Gold Inc.				
manager/agent					
Full legal name	BEN BOUAZZA	Wafae			
	Family name	First give	en name	Secondary given names	
Title	Corporate Secretary				
Telephone number	+1 (647) 367-6201	Email address	wafae@venex	capital.com	
Signature	Wafae Ben bouazza	Date	2024 YYYY	11 06 MM DD	

1766777	CT PERSON
	 LIPERSUM

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
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						_
Full legal name	MITCHELL		Anne			
	Family name		First given name		Secondary given names	
Title	Manager Issuer Services					
Name of company	GROVE CORPORATE SERVICES LTD./GROVE CORPORATE SERVICES LTD.					
Telephone number			Email address	sedar	@grovecorp.ca	

## 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.