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 TH	E REPORT									
Indicate the party certifying the report (sel				estment fund, refer to secti	on 1.1 of National					
Instrument 81-106 Investment Fund Continuous Disclosure and the companion policy to NI 81-106. Investment fund issuer										
✓ Issuer (other than an investment fund)										
Underwriter	anon ana,									
ITEM 3 - ISSUER NAME AND OT										
Provide the following information about the			the fund.							
Full legal name	IMC International Minir	ig Corp.								
Previous full legal name										
If the issuer's name changed in th	e last 12 months, provide most	recent previous legal n	пате.							
Website	https://imcxmining.com	/ (i	if applicable	<u>e)</u>						
If the issuer has a legal entity identifier, pr	ovide below. Refer to Part B of t	he Instructions for the	definition o	of "legal entity identifier".						
Legal entity identifier	549300NR50PFIQLXL	156								
If two or more issuers distributed a single s	security, provide the full legal no	me(s) of the co-issuer	(s) other the	an the issuer named above	<u>.</u>					
Full legal name(s) of co-issuer(s)		(if	if applicable	2)						
ITEM A. HANDEDWOITED INCOM	AATION									
ITEM 4 - UNDERWRITER INFORM										
If an underwriter is completing the report,	provide the underwriter's full le	gal name and firm NR	RD number.		1					
Full legal name										
Firm NRD number		(if applic	cable)							
If the underwriter does not have a firm NR	D number, provide the head off	ice contact information	n of the und	derwriter.	7					
Street address										
Municipality		Provinc	ce/State							
Country		Postal code/Z								
Telephone number		,	Website		(if applicable)					

Item 5 - Issuer Information
If the issuer is an investment fund, do not complete Item 5. Proceed to Item 6.
a) Primary industry
Provide the issuer's North American Industry Classification Standard (NAICS) code (6 digits only) that in your reasonable judgment most closely corresponds to the issuer's primary business activity.
NAICS industry code 2 1 2 2 3 3
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
Does the issuer have a SEDAR profile?
No ✓ Yes If yes, provide SEDAR profile number 0 0 0 4 7 1 0 1
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 MM DD Financial year-end
f) Reporting issuer status
Is the issuer a reporting issuer in any jurisdication of Canada? No Yes
If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer.
AII AB BC MB NB NL NT
NS NU ON PE QC SK YT
g) Public listing status
If the issuer has a CUSIP number, provide below (first 6 digits only) CUSIP number
If the issuer is publicly listed, provide the name of the exchange on which the issuer's equity securities primarily trade. Provide only the name of an exchange and not a trading facility such as, for example, an automated trading system.
Exchange name
h) Size of issuer's assets

Select the size of the issuer's assets based on its most recently available annual financial statements (Canadian \$). If the issuer has not prepared annual financial statements for its first financial year, provide the size of the issuer's assets at the distribution end date.

☐ \$0 to under \$5M	☐ \$5M to under \$25M	☐ \$25M to under \$100M
\$100M to under \$500M	☐ \$500M to under \$1B	\$1B or over

ITEM 6 - INVESTMENT	FUND ISSUER INFORMATION
If the issuer is an inves	tment 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	nt most accurately identifies the issuer (select only one) .
Money market	☐ Equity ☐ Fixed income ☐ Balanced
Alternative strateg	gies Cryptoasset Other (describe)
Indicate whether one or bot	h of the following apply to the investment fund .
Invests primarily in	n other investment fund issuers
☐ Is a UCITs Fund¹	
¹ Undertaking for the Collec (EU) directives that allow c	tive Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union collective investment schemes to operate throughout the EU on a passport basis on authorization from one member state.
c) Date of formation a	and financial year-end of the investment fund
Date of forma	tion Financial year-end 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
If yes, select the jurisdictions	s of Canada in which the investment fund is a reporting issuer.
☐ AII ☐	AB BC MB NB NL NT
□ NS □	NU ON PE QC SK YT
e) Public listing status	s of the investment fund
If the investment fund has a	CUSIP number, provide below (first 6 digits only)
	CUSIP number
	blicly listed, provide the name of the exchange on which the investment fund's securities primarily trade. Provide only the not a trading facility such as, for example, an automated trading system.
Exchange on an exchange and h	
-	AV) of the investment fund
	investment fund as of the date of the most recent NAV calculation (Canadian \$).
\$0 to under \$5M	\$5M to under \$25M \$25M to under \$100M
\$100M to under \$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											
Sele	Select the currency or currencies in which the distribution was made. All dollar amounts provided in the report must be in Canadian dollars.											
✓ Canadian dollar ☐ US dollar ☐ Euro ☐ Other (describe)												
b)	Distribution date(s)											
as b	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.											
	Start date	2021	04	16	End date	2021	04	16				
		YYYY	MM	DD		YYYY	MM	DD	•			

c) Detailed purchaser information

Complete Schedule 1 of this form for each purchaser and attach the schedule to the completed report.

d) Types of securities distributed

Provide the following information for all distributions reported on a per security basis. Refer to Part A(12) of the Instructions for how to indicate the security code. If providing the CUSIP number, indicate the full 9-digit CUSIP number assigned to the security being distributed.

							Canadian \$	
Security code			CUSIP number (if applicable)	Description of security	Number of securities	Single or lowest price	Highest price	Total amount
ι	J N	Т	45250W10 1	Units, each consisting of one common share and one common share purchase warrant	835,000.00	0.1500	0.1500	125,250.00
F	Т	L	45250W10 1	Flow-through units, each consisting of one flow-through common share and one common share purchase warrant	6,486,870.00	0.2000	0.2000	1,297,374.00

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.

excl	Convertible / exchangeable security code		Underlying security code				se price adian \$)	Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other items (if applicable)
						Lowest	Highest			
W	N	Т	С	М	S	0.3000	0.3000	2023-04-16	1:1	835,000 common share purchase warrants, each convertible into a common share of the Issuer at an exercise price of \$0.30 until April 16, 2023
W	N	Т	С	М	S	0.3000	0.3000	2023-04-16	1:1	6,486,670 common share purchase warrants, each convertible into a common share of the Issuer at an exercise price of \$0.30 until April 16, 2023

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 ²⁸ purchasers	Total amount (Canadian \$)					
British Columbia	NI 45-106 2.3 [Accredited investor]	15	962,624.00					
Alberta	NI 45-106 2.3 [Accredited investor]	2	110,000.00					
Ontario	NI 45-106 2.10 [Minimum amount investment]	1	300,000.00					
New Brunswick	NI 45-106 2.3 [Accredited investor]	1	20,000.00					
British Columbia	NI 45-106 2.5 [Family, friends and business associates]	1	30,000.00					
	Total dollar amount of securities distributed							
	Total number of unique purchasers ² b							

^{2a} 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 state the country.

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

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

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

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

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

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

^{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.

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 ✓ Yes If yes, indicate number of persons compensated. 7								

a) Name of person comp	ensated ar	nd regis	tration	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 Canaccord Genuity Corp.														
Firm NRD number 9 0 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 pr	ovided in Iten	n 8 (a), p	rovide t	he busii	ness co	ntact info	rmation	of the	persor	n being co	mpensa	ited.		
Street address														
Municipality								F	Provin	ce/State				
Country							P	ostal	code/2	Zip code				
Email address								Telep	hone	number				
c) Relationship to issuer	or investme	ent func	d mana	ger										
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section. Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund) Director or officer of the investment fund or investment fund manager 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 7,367.50										ervices internal				
·								- 1	Т	ty code 1	Secui	rity code 2	Security c	ode 3
Value of all securitie distributed as compensation	- 1				S	Security co	des	L	W	N T				
Describe	erms of war	rants, op	tions or	other r	ights		to one	comr				s, each ex d of two y		
Other compensation	n ⁵			Des	cribe									
Total compensation pa	id	7,36	37.50											
Check box if the pe	rson will or r	nay rece	ive any	deferre	ed com	pensation	(descr	ibe the	terms	below)				
⁴ Provide the aggregate value additional securities of the issinghts exercisable to acquire a ⁵ Do not include deferred comp	ıer. Indicate dditional sec	the secu	rity cod	les for a										er

a) Name of person comp	ensated and re	egistration status									
Indicate whether the person co	mpensated is a re	egistrant.		☐ No		\checkmark	Yes				
If the person compensated is ar	individual, prov	ide the name of the	individ	lual.							
Full legal name of indiv	ridual										
		Family name		•	First	given na	ame		Secondary (jiven names	S
If the person compensated is no											
Full legal name	of non-individu	ıal Raymond Ja	mes L	₋td.							
F	irm NRD numb	er 8 2	4	0				(if app	licable)		
Indicate whether the person co	mpensated facilit	ated the distribution	n throu	gh a fund	ng porta	l or an	internet-	-based	portal.	No [Yes
b) Business contact infor	mation										
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						Pi	rovince/	'State			
Country		Postal code/Zip code									
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 for the purposes of completing this section. Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund) Director or officer of the investment fund or investment fund manager None of the above											
d) Compensation details											
Provide details of all compensat Canadian dollars. Include cash of incidental to the distribution, su allocation arrangements with the Cash commissions pa	commissions, secu ch as clerical, pri ne directors, office	urities-based compe nting, legal or accou	ensation unting :	n, gifts, dis services. A	counts o n issuer i	r other is not re sated b	compensequired to the compension to the compensi	sation. o ask fo uer.	Do not report payı or details about, or	ments for so report on,	ervices internal
·							Security c		Security code 2	Security of	ode 3
Value of all securitie distributed as compensatio	- 1		S	Security co	des		W N	Т			
Describe t	erms of warrants	s, options or other r	ights		to one	comm			arrants, each ex period of two y		
Other compensatio	n ⁵	Des	cribe								
Total compensation pa	id 1	0,150.00									
Check box if the pe	rson will or may	receive any deferre	ed com	pensation	(describ	oe the t	terms be	low)			
⁴ Provide the aggregate value of additional securities of the issurights exercisable to acquire as ⁵ Do not include deferred comp	uer. Indicate the a dditional securiti	security codes for a									er

a) Name of person comp	ensated	and regis	tration	status										
Indicate whether the person co.	mpensate	d is a regist	rant.			☐ No		√	Yes					
If the person compensated is a	individu	al, provide t	he name	e of the	individ	dual.								
Full legal name of indiv	ridual													
	L	·	amily na	ame			Firs	t given ı	name			Secondary of	given names	S
If the person compensated is no	ot an indiv	vidual, provi	de the f	ollowing	j infor	mation.								
Full legal name	of non-i	ndividual	PI Fina	ancial (Corp.									
F	irm NRD) number	5	2	9	0				(if ap	plicable))		
Indicate whether the person co	mpensate	d facilitated	the dist	ribution	throu	ıgh a fundi	ng port	al or a	n inter	— net-based	l portal.	\checkmark] No [Yes
b) Business contact info	mation													
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								F	Provin	ce/State	:			
Country		Postal code/Zip code												
Email address		Telephone number												
c) Relationship to issuer	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 for the purposes of completing this section. Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund manager) 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 details														
Provide details of all compensations of all compensations and canadian dollars. Include cash incidental to the distribution, sure allocation arrangements with the Cash commissions page 1.	commission ch as cler de director	ons, securition ical, printing rs, officers o	es-basea g, legal d	compe or accou	nsatio Inting	n, gifts, dis services. A	counts n issuer	or othe is not	er comp requir	oensation ed to ask	. Do not	report payı	nents for s	ervices
Casii commissions pe		2,10	0.00					- 1	Secur	ity code 1	Secu	rity code 2	Security of	ode 3
Value of all securitie distributed as compensation					5	Security co	des		W	N T				
Describe t	erms of w	varrants, op	tions or	other ri	ghts		to one	comr				s, each ex d of two y		
Other compensation	n ⁵			Desc	cribe									
Total compensation pa	id	2,10	00.00											
Check box if the pe	rson will	or may rece	ive any	deferre	d com	npensation	(descr	ibe the	terms	below)				
⁴ Provide the aggregate value additional securities of the issinghts exercisable to acquire a ⁵ Do not include deferred comp	ier. Indica dditional s	ate the secu securities o	rity cod	les for a										er

a) Name of person comp	pensated and regis	stration status								
Indicate whether the person co	mpensated is a regis	trant.	√	No		Yes				
If the person compensated is a	n individual, provide	the name of the in	dividua	ıl.						
Full legal name of indi	vidual									
		Family name		Fi	rst given	name		Secondary	given names	
If the person compensated is n	ot an individual, prov	ride the following i	nforma	tion.						
Full legal name	of non-individual	Freeform Com	munic	ations Inc.,						
F	Firm NRD number						(if appl	licable)		
Indicate whether the person co	mpensated facilitated	d the distribution ti	hrough	a funding po	rtal or a	n interne	et-based p	oortal. 🗸	No [Yes
b) Business contact info	rmation									
If a firm NRD number is not provided in Item 8 (a), provide the business contact information of the person being compensated.										
Street address 1100-1111 Melville Street										
Municipality	Vancouver	Vancouver			ı	Province	e/State	British Colum	bia	
Country	Canada	nada Postal code/Zip code V6E 3V6								
Email address					Tele	ohone r	number			
c) Relationship to issuer	or investment fun	d manager								
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section. Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund) Director or officer of the investment fund or investment fund manager Employee of the issuer or investment fund manager										
✓ None of the above										
d) Compensation details	3									
Provide details of all compensa Canadian dollars. Include cash incidental to the distribution, su allocation arrangements with to Cash commissions p	commissions, securiti uch as clerical, printin he directors, officers c	ies-based compens g, legal or account or employees of a r	ation, g ing ser	gifts, discount vices. An issu	s or othe er is not	er compe requirea	nsation. L I to ask fo	Do not report pay	ments for s	ervices
Cash commissions p	3,0	00.00			ŀ	Security	code 1	Security code 2	Security co	ode 3
Value of all securiti distributed as compensation			Sec	curity codes		W	1 T			
Describe	terms of warrants, o	otions or other righ	\$(e comr			arrants, each ex period of two y		
Other compensation	on ⁵	Descri	be							
Total compensation pa	5,6	00.00								
Check box if the person will or may receive any deferred compensation (describe the terms below)										
⁴ Provide the aggregate value additional securities of the iss rights exercisable to acquire a ⁵ Do not include deferred comp	uer. Indicate the sec additional securities o	urity codes for all	sation, s securiti	<u>excluding</u> op ies distributed	tions, wa d as con	arrants c	or other rig on, <u>includ</u>	ghts exercisable i ling options, warr	o acquire ants or oth	er

a) Name of person comp	pensated and reg	istration status						
Indicate whether the person co	ompensated is a regis	strant.	☐ No	✓ `	Yes			
If the person compensated is a	n individual, provide	the name of the indiv	idual.					
Full legal name of indi	vidual							
		Family name	Fi	st given nar	me	Secondary of	jiven names	
If the person compensated is n	ot an individual, pro	vide the following info	rmation.					
Full legal name	e of non-individual	Qwest Investmen	t Fund Manage	ement Ltd	l.			
F	Firm NRD number	2 2 0	0 0		(if appli	cable)		
Indicate whether the person co	ompensated facilitate	ed the distribution thro	ugh a funding po	rtal or an i	internet-based p	ortal. 🗸	No 🗌 Ye	es
b) Business contact info	rmation							
If a firm NRD number is not provided in Item 8 (a), provide the business contact information of the person being compensated.								
Street address Suite 732 – Four Bentall Centre, 1055 Dunsmuir Street								
Municipality	Vancouver			Pro	ovince/State	British Colum	bia	٦
Country	Canada	nada Postal code/Zip code V7X 1L2						
Email address		Telephone number						Ī
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 for the purposes of completing this section. Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund)								
<u> </u>	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 compensa Canadian dollars. Include cash incidental to the distribution, su allocation arrangements with to	commissions, securituch as clerical, printil he directors, officers	ties-based compensations, legal or accounting or employees of a non	on, gifts, discount services. An issu	s or other o er is not re	compensation. D equired to ask for	o not report payr	ments for services	
Cash commissions p	21,0	00.00		S	Security code 1	Security code 2	Security code 3	
Value of all securiti distributed as compensation			Security codes	V	V N T			
Describe	terms of warrants, o	options or other rights		e commo		arrants, each e		
Other compensation	on ⁵	Describe]
Total compensation pa	aid 21,0	00.00						_
Check box if the pe	erson will or may red	ceive any deferred co	mpensation (des	cribe the te	erms below)			
⁴ Provide the aggregate value additional securities of the iss rights exercisable to acquire a ⁵ Do not include deferred comp	suer. Indicate the sec additional securities	curity codes for all sec						

a) Name of person comp	pensated and regis	stration stat	tus								
Indicate whether the person co	mpensated is a regis	trant.		✓ No			Yes				
If the person compensated is a	n individual, provide	the name of	the indivi	dual.							
Full legal name of indi	vidual										
		Family name			Firs	t given r	name		Secondary	given name	5
If the person compensated is n	ot an individual, prov	ride the follow	ving infor	mation.							
Full legal name	of non-individual	King Fina	ncial Co	rporation							
F	Firm NRD number							(if app	licable)		
Indicate whether the person co	mpensated facilitated	d the distribu	tion throu	ıgh a fund	ing port	tal or a	n intern	_ et-based _i	portal.	✓ No [Yes
b) Business contact info	rmation										
If a firm NRD number is not pr	ovided in Item 8 (a),	provide the b	usiness co	ontact info	rmation	of the	person	being con	mpensated.		
Street address 584 Barnham Place											
Municipality	West Vancouver					F	Provinc	e/State	British Colu	mbia	
Country	Canada	Postal code/Zip code V7S 1T7									
Email address						Telep	ohone i	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 for the purposes of completing this section. Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund) Director or officer of the investment fund or investment fund manager Employee of the issuer or investment fund manager											
✓ None of the above											
d) Compensation details	3										
Provide details of all compensa Canadian dollars. Include cash incidental to the distribution, su allocation arrangements with to Cash commissions p	commissions, securiti uch as clerical, printin he directors, officers c	ies-based cor g, legal or ac	npensatio counting	n, gifts, di. services. A	scounts In issuei	or othe r is not	er compo required by the is	ensation. d to ask fo ssuer.	Do not report pa	yments for s	services
		10.10				-		y code 1	Security code 2	Security of	ode 3
Value of all securiti distributed as compensation	I		;	Security co	odes	L	W	N T			
Describe	terms of warrants, o	ptions or oth	er rights		nto one	comn			warrants, each period of two		
Other compensation	on ⁵		Describe								
Total compensation pa	29,2	16.18									
Check box if the person will or may receive any deferred compensation (describe the terms below)											
⁴ Provide the aggregate value additional securities of the iss rights exercisable to acquire a ⁵ Do not include deferred comp	uer. Indicate the sec additional securities o	urity codes f	mpensatio or all sect	on, <u>exclud</u> urities dist	ing option	ons, wa as com	arrants o	or other ri ion, <u>includ</u>	ights exercisable ding options, wa	to acquire rrants or oth	ner

a) Name of person com	pensated and regis	stration status							
Indicate whether the person co	mpensated is a regis	trant.	✓ No		Yes				
If the person compensated is a	n individual, provide	the name of the indiv	ridual.						
Full legal name of indi	vidual								
		Family name	F	irst given n	ame	I	Secondary of	jiven names	
If the person compensated is n	ot an individual, prov	ride the following info	rmation.						
Full legal name	of non-individual	McMillan Strateg	es						
F	Firm NRD number					(if appli	icable)		
Indicate whether the person co	mpensated facilitated	d the distribution thro	ugh a funding p	ortal or ar	internet	-based p	ortal. 🗸	No [Yes
b) Business contact info	rmation								
If a firm NRD number is not pr	ovided in Item 8 (a),	provide the business (contact informati	on of the	person be	ing com	pensated.		
Street address 820 – 1125 West 12th Avenue									
Municipality	Vancouver	Vancouver			rovince/	State	British Colum	bia	
Country	Canada	anada Postal code/Zip code V6H 3Z3							
Email address				Telep	hone nu	ımber			
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 for the purposes of completing this section. Connect with the issuer or investment fund manager Director or officer of the investment fund or investment fund manager Employee of the issuer 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 details									
Provide details of all compensa Canadian dollars. Include cash incidental to the distribution, su allocation arrangements with t	commissions, securiti uch as clerical, printin he directors, officers c	ies-based compensati ng, legal or accounting or employees of a nor	on, gifts, discoun g services. An issi	ts or othe ier is not i	r compen: required t	sation. D o ask for	o not report payı	ments for se	ervices
Cash commissions p	2,1	00.00			Security c	ode 1	Security code 2	Security co	ode 3
Value of all securiti distributed as compensation			Security codes		W N	Т			
Describe	terms of warrants, o	ptions or other rights		ne comm			rrants, each experiod of two y		
Other compensation	on ⁵	Describe							
Total compensation p	2,1	00.00							
Check box if the person will or may receive any deferred compensation (describe the terms below)									
⁴ Provide the aggregate value additional securities of the iss rights exercisable to acquire a ⁵ Do not include deferred com	uer. Indicate the sec additional securities o	urity codes for all sed	ion, <u>excluding</u> op curities distribute	otions, wa od as com	nrrants or pensation	other rig	nhts exercisable t ing options, warn	o acquire ants or oth	er

тем 9 - Directors, Execu	TIVE OFFICERS	AND PROMOT	ERS OF THE ISS	SUER						
If the issuer is an investment fund	d, do not complete l	Item 9. Procced to	Item 10.							
Indicate whether the issuer is any o	f the following (select	t the one that appli	es - if more than one	applies, select onl	y one).					
✓ Reporting issuer in any juris	sdiction of Canada									
Foreign public issuer										
Wholly owned subsidiary of	a reporting issuer in	any jurisdiction of	Canada ⁶							
Provide nan	ne of reporting issue	r						7		
Wholly owned subsidiary of a foreign public issuer ⁶										
Provide name of foreign public issuer										
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 comp	olete Item 9(a) – (d	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										
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 name	Secondary given names	non-individ resident jurisdictio				nship to issuer all that apply)		
				Province or	country	D	0	Р		
b) Promoter information										
If the promoter listed above is not an within Canada, state the province or										
Organization or company name	Family name	First given name	Secondary given names	Residential jurisdiction of individual			to promo			
				Province or country	D		C)		
c) Residential address of eac	h individual									
Complete Schedule 2 of this form completed report. Schedule 2 also					(a) and (b)	and at	tach to t	he		

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	IMC International Mining Corp	IC International Mining Corp.										
Full legal name	Francis	Janet										
	Family name	First given name	<u>'</u>	Seconda	ary given names							
Title	Corporate Secretary											
Telephone number	6046122111	Email address	janet@k	eystoneco	orp.ca							
Signature	/s/ Janet Francis	Date	2021	04	23							
		•	YYYY	MM	DD							

ITEM 11- CONTACT F	PERSON										
. 3	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 individua	al certifying the report										
Full legal name				Title							
•	Family name	First given name	Secondary given names		_						
Name of company											
Telephone number		Er	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.