# Form 45-106F1 Report of Exempt Distribution

ITEM 1 - REPORT TYPE				
✓ New report				
☐ Amended report If ame	nded, provide filing date	of report that is being amo	ended	(YYYY-MM-DD)
ITEM 2 - PARTY CERTIFYING TH	e Report			
Indicate the party certifying the report (se Instrument 81-106 Investment Fund Cont		=	vestment fund, refer to section	on 1.1 of National
☐ Investment fund issuer				
✓ Issuer (other than an inve	stment fund)			
Underwriter	,			
ITEM 3 - ISSUER NAME AND O	THED IDENTIFIEDS			
Provide the following information about t		vestment fund about the fund		
Full legal name		resument fama, about the fama.		
Previous full legal name				
If the issuer's name changed in th		recent previous legal name.		
Website			۵۱	
If the issuer has a legal entity identifier, p.				
Legal entity identifier	549300NR50PFIQLXL		of legal entity wertifier.	
If two or more issuers distributed a single			an the issuer named above.	
Full legal name(s) of co-issuer(s)		(if applicabl		
ITEM 4 - UNDERWRITER INFORI	MATION			
If an underwriter is completing the report,	provide the underwriter's full le	gal name and firm NRD number.		1
Full legal name				
Firm NRD number		(if applicable)		
If the underwriter does not have a firm NI	RD number, provide the head of	fice contact information of the un	derwriter.	
Street address				
Municipality		Province/State		
Country		Postal code/Zip code		
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 <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
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:
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
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	T FUND ISSUER INFORMATION
If the issuer is an inves	tment fund, provide the following information.
a) Investment fund m	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	t fund
Type of investment fund the	at most accurately identifies the issuer (select only one) .
☐ Money market	☐ Equity ☐ Fixed income ☐ Balanced
Alternative stratec	gies Cryptoasset Other (describe)
	th of the following apply to the investment fund .
☐ Invests primarily ir	n other investment fund issuers
☐ Is a UCITs Fund¹	
	ctive 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
d) Reporting issuer st	atus of the investment fund
Is the investment fund a rep	porting 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.
All	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 n	
f) Net asset value (NA	AV) of the investment fund
Select the NAV range of the	r 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 \$50	0M S500M to under \$1B S1B 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				
Seled	ct the currency or curr	encies in which the dist	ribution was made. A	All dollar amounts provided in	the report must be in Canadian dollars.
<b>√</b> (	Canadian dollar	US dollar	Euro	Other (describe)	
b)	Distribution date(s	3)			

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 2023 02 02 YYYY MM DD

End date 2023 02 02 YYYY MM DD

#### Detailed purchaser information

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

#### 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 \$	
Secur	•	I Description of security	Number of securities	Single or lowest price	Highest price	Total amount
SU	B 46072A	Subscription Receipts	5,656,122.00	0.5000	0.5000	2,828,061.00

#### 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.

e	xcha	vertible angea rity co	able		derlyi urity c			se price dian \$)	Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other items (if applicable)
							Lowest	Highest			
S	6	U	В	U	В	S	0.0000				Each Subscription Receipt will automatically convert into one common share and one-half of one warrant upon satisfaction of certain release conditions. Each whole warrant will entitle the holder to purchase one share at \$0.75 for a period of 3 years.

#### 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

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

Province or country	Exemption relied on	Number of unique <sup>2</sup> purchasers	Total amount (Canadian \$)
Alberta	NI 45-106 2.3 [Accredited investor]	3	105,000.00
British Columbia	NI 45-106 2.3 [Accredited investor]	25	996,611.00
Ontario	NI 45-106 2.3 [Accredited investor]	32	712,200.00
United States	Other	1	32,750.00

Australia	NI 45-106 2.3 [Accredited investor]	1	25,000.00
Belgium	NI 45-106 2.3 [Accredited investor]	1	5,000.00
Cayman Islands	NI 45-106 2.3 [Accredited investor]	1	25,000.00
Germany	NI 45-106 2.3 [Accredited investor]	7	149,500.00
Nicaragua	NI 45-106 2.3 [Accredited investor]	1	15,500.00
Paraguay	NI 45-106 2.3 [Accredited investor]	3	160,000.00
Thailand	NI 45-106 2.3 [Accredited investor]	1	400,000.00
Turks and Caicos Islands	NI 45-106 2.3 [Accredited investor]	1	25,000.00
United Kingdom	NI 45-106 2.3 [Accredited investor]	1	176,500.00
	Total dollar amount of se	curities distributed	2,828,061.00
	Total number of unique purchasers <sup>2b</sup>	78	

<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 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.

### 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)

<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.

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. <b>Complete additional copies of this page if more than one person was, or will be, compensated.</b>
Indicate whether any compensation was paid, or will be paid, in connection with the distribution.
No ✓ Yes If yes, indicate number of persons compensated. 3

a) Name of person comp	ensated and reg	istration status								
Indicate whether the person co	mpensated is a regis	strant.	☐ No		$\checkmark$	Yes				
If the person compensated is an individual, provide the name of the individual.										
Full legal name of indiv	ridual									
		Family name	<u> </u>	First	given na	ime		Secondar	y given names	;
If the person compensated is no	ot an individual, pro	vide the following in	formation.							
Full legal name	of non-individual	Echelon Wealth	Partners I	nc.						
F	irm NRD number	3 2	4 2	0			(if appl	icable)		
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.  V No Yes										
b) Business contact infor	mation									
If a firm NRD number is not pro	ovided in Item 8 (a),	provide the business	s contact info	ormation	of the p	erson be	eing com	pensated.		
Street address										
Municipality					Pr	ovince/	/State			
Country				Po	ostal co	ode/Zip	code			
Email address					Teleph	none 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  Insider of the issuer (other than an investment fund)										
Director or officer of t	he investment fund	or investment fund	manager		Employe	ee of the	issuer (	or investment fo	ınd manager	ſ
None of the above				<u>—</u>						
d) Compensation details										
Provide details of all compensate Canadian dollars. Include cash of incidental to the distribution, sure allocation arrangements with the Cash commissions page.	commissions, securit ch as clerical, printi ne directors, officers	ties-based compenso ng, legal or accounti	ition, gifts, di ng services. A	scounts o An issuer	or other is not re sated by	compen equired t y the issu	sation. [ to ask fo	Do not report po r details about,	yments for so or report on,	ervices internal
Value of all securitie						Security o	T	Security code 2	Security co	ode 3
distributed as compensatio			Security c	odes	Ľ	/V   IV				
Describe terms of warrants, options or other rights 48,000 common share purchase warrants each exercisable at \$0.75 into one (1) common share for a period of three years from the date of issuance.										
Other compensatio	n <sup>5</sup>	Describ	е							
Total compensation pa	id									
✓ Check box if the pe	rson will or may red	ceive any deferred o	compensatio	n (descril	be the t	erms be	low)			
The above descrit following satisfact			release of	funds fi	rom es	crow by	y the su	ubscription re	eipts agen	t
<sup>4</sup> Provide the aggregate value of additional securities of the issu- rights exercisable to acquire and <sup>5</sup> Do not include deferred comp	uer. Indicate the sec dditional securities	curity codes for all s								er

a) Name of person compensated and registration status										
Indicate whether the person co	mpensated is a regis	strant.	☐ No		✓ '	Yes				
If the person compensated is an individual, provide the name of the individual.										
Full legal name of indiv	ridual									
		Family name	I	First	given naı	me		Secondar	y given names	3
If the person compensated is no	If the person compensated is not an individual, provide the following information.									
Full legal name	of non-individual	PI Financial Co	rp./Corpora	ition Fina	ancière	e PI				
F	irm NRD number	5 2	9 0				(if app	licable)		
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.  V No Yes										
b) Business contact info	mation									
If a firm NRD number is not pro	ovided in Item 8 (a),	provide the busines	s contact info	ormation o	of the pe	erson b	eing con	npensated.		
Street address										
Municipality					Pro	ovince	/State			
Country				Po	ostal co	ode/Zip	code			
Email address				-	Teleph	ione ni	umber			
c) Relationship to issuer	or investment fur	nd manager								
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 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 t	he investment fund	or investment fund	manager	□ E	mploye	e of the	e issuer	or investment f	und manage	r
✓ None of the above										
d) Compensation details										
Provide details of all compensate Canadian dollars. Include cash incidental to the distribution, sur allocation arrangements with the Cash commissions page 1.5.	commissions, securit ch as clerical, printi ne directors, officers	ties-based compenso ng, legal or accounti	ation, gifts, di ing services. <i>i</i>	scounts o An issuer i	r other o is not re sated by	comper equired the iss	nsation. I to ask fo uer.	Do not report po or details about,	yments for s or report on,	services internal
·		110.00				Security of		Security code 2	Security c	ode 3
Value of all securitie distributed as compensation			Security of	odes	_ v	W   N	Т			
Describe terms of warrants, options or other rights  10,800 common share purchase warrants each exercisable at \$0.75 into one (1) common share for a period of three years from the date of issuance.										
Other compensatio	n <sup>5</sup>	Describ	ре							
Total compensation pa	id									
✓ Check box if the pe	rson will or may red	ceive any deferred o	compensatio	n (describ	oe the te	erms be	elow)			
The above descri following satisfact			release of	funds fr	om es	crow b	y the s	ubscription re	ceipts agen	nt
<sup>4</sup> Provide the aggregate value additional securities of the issurights exercisable to acquire a <sup>5</sup> Do not include deferred comp	uer. Indicate the sec dditional securities	curity codes for all s								ner

a) Name of person comp	ensated and	registration	on status								
Indicate whether the person con	npensated is a i	egistrant.			☐ No	<b>√</b>	Yes				
If the person compensated is an individual, provide the name of the individual.											
Full legal name of individual											
		Family	name		Firs	st given	name		Seconda	ry given nam	es
If the person compensated is no	t an individual,	provide th	e following	g infor	rmation.						
Full legal name	of non-individ	lual Car	accord G	enui	ty Corp./Corpor	ation (	Canacc	ord Gei	nuity		
Fi	rm NRD num	ber g	0	0				(if app	plicable)		
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.											
b) Business contact infor	mation										
If a firm NRD number is not pro	vided in Item 8	(a), provia	e the busii	ness c	ontact informatio	n of the	e person i	being co	mpensated.		
Street address											
Municipality						ı	Provinc	e/State			
Country					Ī	Postal	code/Zi	p code			
Email address					1	Tele	phone r	number			
c) Relationship to issuer or investment fund manager											
the Instructions and the meanin	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 issue			•		Ц	mside	r or the is	ssuer (o	ther than an inv	estment iun	ia)
Director or officer of the	ne investment f	und or inv	estment fu	ınd ma	anager	Emplo	yee of th	ne issuei	r or investment	und manag	jer
None of the above											
d) Compensation details											
Provide details of all compensations and compensations and compensations. Include cash control incidental to the distribution, such allocation arrangements with the Cash commissions pa	ommissions, sec ch as clerical, pr e directors, offic	curities-ba inting, leg	sed compe al or accou ployees of a	nsatic Inting	on, gifts, discounts services. An issue	or other	er compe required	nsation. I to ask f	Do not report p	ayments for	r services
		52,200.00	<u></u>				Security	T	Security code	2 Security	code 3
Value of all securitie distributed as compensation				;	Security codes		W	I T			
Describe terms of warrants, options or other rights  181,920 common share purchase warrants each exercisable at \$0.75 into one (1) common share for a period of three years from the date of issuance.											
Other compensation	n <sup>5</sup>		Des	cribe							
Total compensation pa	Total compensation paid										
✓ Check box if the per	rson will or may	receive a	ny deferre	ed con	mpensation (desc	ribe the	e terms b	elow)			
The above describe following satisfaction					elease of funds	from 6	escrow	by the s	subscription re	ceipts age	∍nt
<sup>4</sup> Provide the aggregate value of additional securities of the issurights exercisable to acquire ac <sup>5</sup> Do not include deferred compa	er. Indicate the Iditional securi	security of	odes for a								

тем <mark>9 - Di</mark> rectors, <b>E</b> xecu	TIVE OFFICERS	AND PROMOT	TERS OF THE ISS	SUER					
If the issuer is an investment fund	d, do not complete	Item 9. Procced to	Item 10.						
Indicate whether the issuer is any o	f the following (selec	t the one that appli	es - if more than one	applies, select onl	y one).				
✓ Reporting issuer in any juris	diction of Canada								
Foreign public issuer									
Wholly owned subsidiary of	a reporting issuer in	n any jurisdiction of	Canada <sup>6</sup>						
Provide nan	ne of reporting issue	r						7	
Wholly owned subsidiary of	a foreign public issu	uer <sup>6</sup>						_	
Provide name of	foreign public issue	r						7	
Issuer distributing only eligi	ble foreign securities	and the distribution	on is to permitted clie	ents only <sup>7</sup>				_	
If the issuer is at least one of the	-			-					
<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. <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.  If the issuer is none of the above, check this box and complete Item 9(a) - (c).									
a) Directors, executive officer	s and promoters o	of the issuer							
Provide the following information for territory; otherwise state the country.						tate the	province	or	
Organization or company name  Family name  First given name  Secondary given names  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 within Canada, state the province or									
Organization or company name	Organization or company name Family name First given name First given name Residential jurisdiction of individual Relationship to promoter (select one or both if applicable)								
				Province or country	D		C	)	
c) Residential address of eac	h individual								
Complete Schedule 2 of this form	providing the full r	esidential address	for each individue	ıl listed in Item 9	(a) and (h)	and at	tach to t	he	

 $completed\ report.\ Schedule\ 2\ also\ requires\ information\ to\ be\ provided\ about\ control\ persons.$ 

#### 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	Interra Copper Corp.					
Full legal name	Francis					
	Family name	First given name	•	Seconda	ary given n	ames
Title	Corporate Secretary					
Telephone number	6046122111	Email address	janet@ke	eystonec	orp.ca	
Signature	/s/ Janet Francis	Date	2023	02	09	
			YYYY	MM	DD	

ITEM 11- CONTACT I	PERSON				
	ness contact information for this report, if different than		urities regulatory authority or report in Item 10.	regulator may	contact with any questions
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		