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. 2024 04 26 (YYYY-MM-DD) 									
ITEM 2 – PARTY CERTIFYING THE REPORT									
Indicate the party certifying the report (select only one). For guidance regarding whether an issuer is an investment fund, refer to section 1.1 of National Instrument 81-106 Investment Fund Continuous Disclosure and the companion policy to NI 81-106 (in Québec, Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure).									
☐ Investment fund issuer									
☑ Issuer (other than an investment fund)									
☐ Underwriter									
ITEM 3 - ISSUER NAME AND OTHER IDENTIFIERS									
Provide the following information about the issuer, or if the issuer is an investment fund, about the fund.									
Full legal name Nine Mile Metals Ltd.									
Previous full legal name STEVENS GOLD NEVADA INC.									
If the issuer's name changed in the last 12 months, provide most recent previous legal name.									
Website www.ninemilemetals.com (if applicable)									
If the issuer has a legal entity identifier, provide below. Refer to Part B of the Instructions for the definition of "legal entity identifier".									
Legal entity identifier									
If two or more issuers distributed a single security, provide the full legal name(s) of the co-issuer(s) other than the issuer named above.									
Full legal name(s) of co-issuer(s) (if applicable)									
ITEM 4 – UNDERWRITER INFORMATION									
If an underwriter is completing the report, provide the underwriter's full legal name, firm NRD number, and SEDAR+ profile number.									
Full legal name									
Firm NRD number (if applicable)									
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 mining industry , indicate the stage of operations. This does not apply to issuers that provide services to issuer operating in the mining industry. Select the category that best describes the issuer's stage of operations.	'S
✓ 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☐ 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	
000047789	
ITEM 6 - INVESTMENT FUND ISSUER INFORMATION	
TIEM 6 - INVESTMENT FOIND ISSUER INFORMATION	
If the issuer is an investment fund, provide the following information.	
a) Investment fund manager information	
Full legal 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 UCITs Fund ¹											
1 Undertaking for the Collective Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) directives											
that allow collective investment schemes to operate throughout the EU on a passport basis on authorization from one member state.											
c) Net asset value (NAV) of the investment fund											
Select the NAV range of the investment fund as of the date of the most recent NAV calculation (Canadian \$).											
☐ Under \$5M	<u></u> :	\$5M to under \$25	M 🗌 \$25M to und	er \$100M	Date of NAV	calculation:					
☐ \$100M to under \$50	00M :	\$500M to under \$	1B		1000/	MM DD					
					YYYY	MM DD					
ITEM 7 – INFORM <i>E</i>	ATION ABOU	T THE DISTRI	BUTION								
If an issuer located outsid	le of Canada comp	letes a distributior	in a jurisdiction of Car	nada, include in I	tem 7 and Sci	hedule 1					
information about purch	asers resident in th	nat jurisdiction of C	anada only. Do not incl	ude in Item 7 sed	curities issued	l as payment of					
commissions or finder's for Item 7 must reconcile with				sed in Item 8. Th	ie informatioi	n provided in					
a) Currency											
a) carrency											
Select the currency or cur dollars.	rencies in which th	e distribution was	made. All dollar amour	nts provided in th	ne report mus	t be in Canadian					
✓ Canadian dollar	US dollar	☐ Euro Othe	er (describe)								
						-					
b) Distribution d	lates										
State the distribution star the distribution date as b											
include the start and end				urities distribuet	u on a contin	ious busis,					
Start date	2024 0	04 17	End date	2024	04 17						
Start date		M DD	End date	YYYY	MM DD						
c) Detailed purc	haser informat	ion									
c) Detailed pare	naser informati	1011									
Complete Schedule 1 of	this form for each	h purchaser and o	attach the schedule to	the completed	report.						
d) Types of secu	rities distribute	ed									
Provide the following info	ermation for all dis	tributions reportes	l on a ner security hasis	Defer to Dart A	(12) of the Inc	tructions for how					
to indicate the security co											
distributed.											
					Canadian \$						
Security CUSIP			Number of	Single or	Highest						
code number (if applicable)	Descriptio	n of security	securities	lowest price	price	Total amount					

4,090,910.0000

0.1100

450,000.0000

UBS

applicable)

Flow-through units consisting of o

	ne common share and one-half of one common share purchase warrant.			
UBS	Non-flow-through units consistin g of one common share and one- half of one common share purch ase warr	585 000 0000	0.0750	43,875.0000

e) Details of rights and convertible/exchangeable securities

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

Convertible / exchangeable	Underlying security code	Exercise price (Canadian \$)		Expiry date (YYYY-MM-	Conversion ratio	Describe other terms (if	
security code		Lowest	Highest	DD)		applicable)	

f) Summary of the distribution by jurisdiction and exemption

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

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

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

Province or country	Exemption relied on	Number of unique purchasers ^{2a}	Total amount (Canadian \$)						
British Columbia	NI 45-106 2.3 [Accredited investor]	3	28,875.0000						
Alberta	NI 45-106 2.3 [Accredited investor]	2	15,000.0000						
Ontario	NI 45-106 2.10 [Minimum amount investment]	1	200,000.0000						
British Columbia NI 45-106 2.3 [Accredited investor		1	250,000.0000						
	\$493,875.0000								
	Total dollar amount of securities distributed Total number of unique purchasers ^{2b} 7								

^{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.

^{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.

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

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

ITEM 8 - COMPENSATION INFORMATION 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. If yes, indicate number of persons compensated. 2 ☐ No ✓ 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 **GLORES SECURITIES INC** 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 | 10 Loggers Trail Municipality | Whitchurch-Stoufville Province/State Ontario Country Canada Postal code/Zip code L4A 2L6 Email address | info@gloressecurities.com Telephone number | +1 (647) 267-5380 c) Relationship to issuer or investment fund manager Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of 'connected' in Part B(2) of the Instructions and the meaning of 'control' in section 1.4 of NI 45-106 (in Québec, Regulation 45-106 respecting Prospectus Exemptions) for the purposes of completing this section. Connected with the issuer or investment fund manager Insider of the issuer (other than an investment fund) Director or officer of the investment fund or investment fund manager ☐ Employee of the issuer or investment fund manager ✓ None of the above d) Compensation details

Provide details of all compensation paid, or to be paid, to the Provide all amounts in Canadian dollars. Include cash compensation. Do not report payments for services incident services. An issuer is not required to ask for details about, or employees of a non-individual compensated by the issue	nmissions, securitie ntal to the distribut or report on, intern	s-based compensat ion, such as clerica	ion, gifts, discounts o , printing, legal or ac	or other ccounting
Cash commissions paid	\$20,000.0000			
Value of all securities distributed as compensation ⁴				
Security codes	Security code 1	Security code 2	Security code 3	
Security codes	CMS	WNT		
Describe terms of warrants, options or other rights		share purchase w chase one commo ths.	- 1	
Other compensation ⁵				
Describe				
•			_	
Total compensation paid	\$20,000.0000			
Check box if the person will or may receive any defe	erred compensation	on (describe the te	erms below)	
⁴ Provide the aggregate value of all securities distributed as compensations securities of the issuer. Indicate the security codes for all securities distributed as compensation. ⁵ Do not include deferred compensation.		_	•	

ITEM 8 – COMPENSATION INFORMATION	ON									
Provide information for each person (as defined in NI 45-106) (in Québec, Regulation 45-106 respecting Prospectus Exemptions) to whom the issuer directly provides, or will provide, any compensation in connection with the distribution. Complete additional copies of this page if more than one person was, or will be, compensated.										
Indicate whether any compensation was paid, or will be paid, in connection with the distribution.										
☐ No ✓ Yes If yes, indicate num	ber of persons compensated. [2	2								
a) Name of person compensated and re	gistration status									
Indicate whether the person compensated is a registrar	nt.									
☐ No ✓ Yes										
If the person compensated is an individual, provide the	name of the individual.									
Full legal name of individual										
Family nam If the person compensated is not an individual, provide		e Secondary given names								
Full legal name of non-individual Qwest Invest	tment Fund Management Ltd.									
Firm NRD number	(if app	licable)								
Indicate whether the person compensated facilitated th	e distribution through a funding p	portal or an internet-based portal								
✓ No ☐ Yes										
b) Business contact information										
If a firm NRD number is not provided in Item 8(a), provi	ide the husiness contact informati	on of the person being compensated								
Street address Suite 702 - 1030 West Georgi		on of the person being compensated.								
	7									
Municipality Vancouver	Province/State	British Columbia								
Country Canada	Postal code/Zip code	V6E 2Y3								
Email address fabbasi@qwestfunds.com	Telephone number	+1 (250) 588-7714								
c) Relationship to issuer or investment fo	und 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.										
\square Connected with the issuer or investment fund m	nanager									
$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $	und)									
Director or officer of the investment fund or inve	_									
Employee of the issuer or investment fund man	ager									
✓ 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	mmissions, securitie ntal to the distribut or report on, intern	s-based compensat ion, such as clerica	ion, gifts, discounts l, printing, legal or d	or other accounting
Cash commissions paid	\$16,000.0000			
Value of all securities distributed as compensation ⁴				
Security codes	Security code 1	Security code 2	Security code 3	
Security codes	CMS	WNT		
Describe terms of warrants, options or other rights		share purchase w chase one commo ths.	_	
Other compensation ⁵				
Describe			_ 	
Describe				
Total compensation paid	\$16,000.0000			
Check box if the person will or may receive any def	ferred compensati	on (describe the te	ப erms below)	
		(
⁴ Provide the aggregate value of all securities distributed as compensate securities of the issuer. Indicate the security codes for all securities distributed as acquire additional securities of the issuer. ⁵ Do not include deferred compensation.		_	·	
ITEM 9 – DIRECTORS, EXECUTIVE OFFICE	DS AND DDON	AOTERS OF T	HE ICCLIED	
If the issuer is an investment fund, do not complete It			IIL ISSOLK	
,				
Indicate whether the issuer is any of the following (select t	he one that applies	– if more than one	applies, select only	one).
✓ Reporting issuer in a jurisdiction of Canada				
Foreign public issuer				
☐ Wholly owned subsidiary of a reporting issuer in a	ny jurisdiction of C	anada ⁶		
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 ⁷ .	
If the issuer is at least one of the above, do not compl		·	•	
⁶ An issuer is a wholly owned subsidiary of a reporting issusecurities, other than securities that are required by law to	uer or a foreign pub	lic issuer if all of th	e issuer's outstandi	

or the foreign public issuer, respectively. ⁷ Check this box if it applies to the current distribution even if the issuer made previous distributions of other types of securities to non-permitted clients. Refer to the definitions of "eligible foreign security" and "permitted client" in Part B(1) of the Instructions.	
☐ If the issuer is none of the above, check this box and complete Item 9(a) – (c).	
a) Directors, executive officers and promoters of the issuer	

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

	Organization or company name	Family name	First given	Secondary given names	Business location of non-individual or residential jurisdiction of individual	Relationship to issuer (select all that apply)		
			name		Province or country	D	0	P
Ī	_							

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			Residential jurisdiction of individual	Relationship to promoter (select one or both 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 requi to file a completed report	ires an issuer or underwriter the of exempt distribution.	at makes a distrik	bution of securi	ities under certain pro	spectus exemptions
securities regulatory aut	nation below, I certify, on beh hority or regulator, as applica igence, the information provic	ble, that I have r	eviewed this r	eport and to my know	wledge, having
Name of Issuer/ investment fund manager/agent	Nine Mile Metals Ltd.				
Full legal name	MALETTE	Cha	rles		
	Family name	First give	en name	Secondary given na	ames
Title	Director, President and Corp	orate Secretary			
Telephone number	+1 (604) 428-5171	Email address	bud@ninemil	emetals.com	
Signature	"Charles MaLette"	Date	2024 YYYY	04 24 MM DD	

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Telephone number

, .	,		regulatory authority or regulator m lividual certifying the report in Item	
Same as individual c	ertifying the report			
Full legal name	POTTS	Gemma		
	Family name	First given name	Secondary given names	
Title	Paralegal			
Name of company	OWEN BIRD LAW CORPORATION			

Email address | gpotts@owenbird.com

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.