Form 45-106F1 Report of Exempt Distribution

ITEM 1 - REPORT TYPE

✓ New report

Amended report

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

(YYYY-MM-DD)

ITEM 2 - PARTY CERTIFYING THE REPORT

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

Investment fund issuer

✓ Issuer (other than an investment fund)

Underwriter

ITEM 3 - ISSUER NAME AND OTHER IDENTIFIERS

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

| Full legal name | Battery X Metals Inc. (formerly StraightUp Resources Inc.) / Battery X Metals Inc. (formerly StraightUp Resources Inc.) |
|---|--|
| Previous full legal name | STRAIGHTUP RESOURCES INC. |
| If the issuer's name changed in | the last 12 months, provide most recent previous legal name. |
| Website | www.batteryxmetals.com (if applicable) |
| If the issuer has a legal entity identifier, p | rovide below. Refer to Part B of the Instructions for the definition of "legal entity identifier". |
| Legal entity identifier | 984500I7D18E10J44312 |
| If two or more issuers distributed a single above. | e security, provide the full legal name(s) of the co-issuer(s) other than the issuer named |
| Full legal name(s) of co-issuer(s) | (if applicable) |

ITEM 4 - UNDERWRITER INFORMATION If an underwriter is completing the report, provide the underwriter's full legal name, firm NRD number, and SEDAR+ profile number. Full legal name Firm NRD number (if applicable)

| ITEM 5 - ISSUER INFORMATION |
|--|
| If the issuer is an investment fund, do not complete Item 5. Proceed to Item 6. |
| a) Primary industry |
| Provide the issuer's North American Industry Classification Standard (NAICS) code (6 digits only) that in your reasonable judgment most closely corresponds to the issuer's primary business activity. |
| NAICS industry code 212398 |
| If the issuer is in the mining industry , indicate the stage of operations. This does not apply to issuers that provide services to issuers operating in the mining industry. Select the category that best describes the issuer's stage of operations. |
| 🗹 Exploration 🗌 Development 🗌 Production |
| Is the issuer's primary business to invest all or substantially all of its assets in any of the following? If yes, select all that apply. |
| 🗌 Mortgages 🔄 Real estate 📄 Commercial/business debt 📄 Consumer debt 📄 Private companies |
| Cryptoassets |
| b) Number of employees |
| Number of employees: 🗹 0 - 49 🗌 50 - 99 🗌 100 - 499 🔲 500 or more |
| c) SEDAR+ profile number |
| Provide the issuer's SEDAR+ profile number |
| 000047827 |
| |

ITEM 6 - INVESTMENT FUND ISSUER INFORMATION If the issuer is an investment fund, provide the following information. a) Investment fund manager information a) Investment fund manager information Full legal name Full legal name Firm NRD number SEDAR+ profile number b) Type of investment fund Type of investment fund that most accurately identifies the issuer (select only one). Money market Equity

| Alternative strategies | Cryptoasset | 🗌 Other (describe) | | |
|---|--|--|-----------------|--------------------------------|
| Indicate whether one or both of th | e following apply to the in | vestment fund. | | |
| Invest primarily in other inve | | , | | |
| ☐ Is a UCITs Fund ¹ ¹ Undertaking for the Collective Investment that allow collective investment schemes in | nt of Transferable Securities fun | | | |
| c) Net asset value (NAV) |) of the investment fu | ind | | |
| Select the NAV range of the investn | nent fund as of the date oj | f the most recent NAV calc | ulation (Canaa | lian \$). |
| 🗌 Under \$5M | S5M to under \$2 | 25M 🗌 \$25M to und | er \$100M | Date of NAV calculation: |
| S100M to under \$500M \$500M | 🔲 \$500M to under | r \$1B 🗌 \$1B or over | | YYYY MM DD |
| ITEM 7 - INFORMATION | ABOUT THE DISTR | RIBUTION | | |
| If an issuer located outside of Cano information about purchasers resi commissions or finder's fees, in co Item 7 must reconcile with the info | ident in that jurisdiction of nnection with the distribut | f Canada only. Do not incl tion, which must be disclo | ude in Item 7 s | ecurities issued as payment of |
| a) Currency | | | | |
| Select the currency or currencies ir dollars. | ו which the distribution wo | as made. All dollar amoun | ts provided in | the report must be in Canadian |
| 🗹 Canadian dollar 🛛 US d | dollar 🗌 Euro Ot | her (describe) | | |
| b) Distribution dates | | | | |
| State the distribution start and end the distribution date as both the st include the start and end dates for | tart and end dates. If the r | report is being filed for sec | | |
| Start date 202 | | End date | | 01 24 |
| YYY | Y MM DD | | YYYY | MM DD |
| c) Detailed purchaser ir | nformation | | | |
| Complete Schedule 1 of this form | n for each purchaser and | d attach the schedule to | the complete | ed report. |
| d) Types of securities d | istributed | | | |
| Provide the following information , to indicate the security code. If pro distributed. | | | | |

| Security code | | | | | | | | | Canadian \$ | |
|--|---|---|---|---|---|---------------------------------|---|--|---------------------------------------|--------------------------------|
| ² number (if Description of | | ption of security Securities | | Single or lowest price | Highest price | Total amount | | | | |
| UBS 07135M104 on | | 4 on and | • | | 1) comm share pu | 4,271,500 | .0000 | 0.100 | 0 | 427,150.0000 |
| e) De | etails of ri | ghts and | convert | ible/exc | hangeabl | e securities | | | | |
| convertible, convertible, | /exchangeat /exchangeat | ole securitie | es were dis | | | | | piry date for ea describe any o | | |
| Convertil exchange | | derlying | | dian \$) | | e (YYYY-MM- | Conv | ersion ratio | Describe other terms (applicable) | |
| security | code | rity code | Lowest | Highest | | DD) | | | арри | cable) |
| WNT | - | CMS | 0.2000 | 0.2000 | 2026 | 5-01-24 | | 1:1 | | |
| ocated out urisdiction This table r urisdiction Canada, if (| side of Cana of Canada o equires a se where a pur a purchaser | ida comple only. parate line rchaser res resides in c | tes a distr item for: ides, if a p a foreign j | ibution in (i) each ju ourchaser urisdictioi | a jurisdiction risdiction w resides in a n. | on of Canada, here a purchas | include ser resi ^f Canac | - that distributio e distributions t des, (ii) each ex la, and (iii) each | o purchasers i emption reliec | esident in that I on in the |
| or jurisuic | | | | n relied o | - | | | purchasers ^{2a} | Total amou | nt (Canadian \$) |
| Province | | NI 45-106 | - | | | | | 18 | | 397,150.000 |
| Province British Co | | | - | | - | 1 | | | | 337,130.000 |
| Province British Co Australia | | NI 45-106 | o 2.3 [Acc | leuiteu | investorj | | | 1 | | |
| British Co | | NI 45-106 | 5 2.3 [Acc | leuiteu | - | ar amount of s | ecuriti | 1 ies distributed | | 30,000.000 |
| British Co | | | - | | - | ar amount of s | ecuriti | 1 i es distributed 19 | | 30,000.0000 |
| British Co Australia ^a In calculati | ing the number | Total nu of unique pu mber of uniqu | mber of u urchasers po ue purchase | i nique pu er row, cour ers to which | Total dolla rchasers ^{2b} at each purcha the issuer dis | aser only once. Joi | int purch s, count (| | nted as one purc | 30,000.0000 \$427,150.0000 |

If the issuer is an investment fund, provide the net proceeds to the investment fund for each jurisdiction of Canada and foreign jurisdiction where a purchaser resides.³ If an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include net proceeds for that jurisdiction of Canada only. For jurisdictions within Canada, state the province or territory, otherwise state the country.

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

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

ITEM 8 - COMPENSATION INFORMATION

| Provide information for each person (as defined in whom the issuer directly provides, or will provide, o copies of this page if more than one person wa s | any compensatio | n in connection with t | |
|--|---|---|-------------------------------------|
| Indicate whether any compensation was paid, or w | | nnection with the distrons compensated. | |
| a) Name of person compensated and | d registration | status | |
| Indicate whether the person compensated is a regi | | | |
| □ No ☑ Yes | | | |
| If the person compensated is an individual, provide | e the name of the | e individual. | |
| Full legal name of individual | | | |
| Famil If the person compensated is not an individual, pro | y name ovide the followin | First given nam | e Secondary given names |
| Full legal name of non-individual Canacco | ord Genuity Corp | o./Corporation Canac | cord Genuity |
| Firm NRD number 900 | | (if app | licable) |
| Indicate whether the person compensated facilitate | ed the distributio | | |
| ✓ No ☐ Yes | | | |
| | | | |
| b) Business contact information | | | |
| If a firm NRD number is not provided in Item 8(a), (| provide the busir | ness contact information | on of the person being compensated. |
| Street address 609 Granville Street, Suit | te 2200 | | |
| Municipality Vancouver | | Province/State | British Columbia |
| Country Canada | Р | ostal code/Zip code | V7Y 1H2 |
| Email address | | Telephone number | +1 (604) 643-7300 |
| c) Relationship to issuer or investme | nt fund mana | ger | |
| Indicate the person's relationship with the issuer of 'connected' in Part B(2) of the Instructions and the respecting Prospectus Exemptions) for the purpose | r investment fund meaning of 'cont is of completing t | d manager (select all t rol' in section 1.4 of N | |
| Connected with the issuer or investment fun Insider of the issuer (other than an investment) | - | | |
| Director or officer of the investment fund on | | nd manager | |
| Employee of the issuer or investment fund i | 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 | 1200 | | | |
|--|------------------|---------------------|-----------------|--|
| Value of all securities distributed as compensation ⁴ | | | | |
| Security codes | Security code 1 | Security code 2 | Security code 3 | |
| Describe terms of warrants, options or other rights | | | | |
| Other compensation ⁵ | | | | |
| Describe | | | | |
| Total compensation paid | 1200 | | | |
| Check box if the person will or may receive any def | erred compensati | on (describe the te | erms below) | |
| ⁴ Provide the aggregate value of all securities distributed as compensa securities of the issuer. Indicate the security codes for all securities dis acquire additional securities of the issuer. ⁵ Do not include deferred compensation. | | - | | |

ITEM 8 - COMPENSATION INFORMATION

| Provide information for e whom the issuer directly copies of this page if m | provides, or will | provide, any co | ompensatio | n in connecti | | • | | • |
|--|--|--|-----------------------------|----------------------------------|------------------------|----------------|---------------------|----------|
| Indicate whether any con □ No ☑ Yes | | paid, or will be _i indicate numb | | | г | ribution. 2 | | |
| a) Name of pers | son compens | ated and reg | istration | status | | | | |
| Indicate whether the pers | son compensate | d is a registrant | <u>.</u> | | | | | |
| No √ Yes | 1 | 0 | | | | | | |
| If the person compensate | ed is an individu | al, provide the r | name of the | e individual. | | | | |
| Full legal name of ir | ndividual | | | | | | | |
| lf the person compensate | ed is not an indiv | Family name vidual, provide t | | | given nam n. | ne | Secondary giver | ו names |
| Full legal name of | non-individual | RESEARCH CA CAPITAL | NPITAL COF | RPORATION / | CORPC | RATION F | RECHERCHE | |
| Firm | NRD number | 3070 | | | (if app | licable) | | |
| Indicate whether the pers | son compensate | d facilitated the | distributic | on through a f | - funding μ | portal or a | n internet-based po | ortal |
| b) Business con | tact informat | ion | | | | | | |
| lf a firm NRD number is r | not provided in I | tem 8(a), provid | le the busir | ness contact ii | nformati | ion of the J | person being compe | ensated. |
| Street address | 1920-1075 Geo | rgia St W | | | | | | |
| Municipality | Vancouver | | | Provinc | e/State | British C | olumbia | |
| Country | Canada | | P | ostal code/Z | ip code | V6E 3C9 | | |
| Email address | VIB@researchc | apital.com | | Telephone r | number | +1 (778) | 373-4100 | |
| c) Relationship t | to issuer or ir | vestment fu | nd mana | ger | | | | |
| Indicate the person's rela 'connected' in Part B(2) oj respecting Prospectus Exe | itionship with th f the Instruction | e issuer or inves s and the mean | stment fund ing of 'cont | d manager (se rol' in section | | | • | |
| Connected with the | issuer or inves | tment fund ma | anager | | | | | |
| Insider of the issuer | | | | | | | | |
| Director or officer o | | | | nd manager | | | | |
| Employee of the iss | uer or investme | ent fund manag | ger | | | | | |
| ✓ 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 | 5532 | | |
|--|--|---------------------------------|-------------------------|
| Value of all securities distributed as compensation ⁴ | 5532 | | |
| Convit codos | Security code 1 | Security code 2 | Security code 3 |
| Security codes | UBS | | |
| Describe terms of warrants, options or other rights | Each non-transfe to acquire an adc \$0.20 until Januar | | |
| Other compensation ⁵ | | | |
| Describe | | | |
| | | | |
| Total compensation paid | 11064 | | |
| Check box if the person will or may receive any def | erred compensati | on (describe the te | erms below) |
| | | | |
| ⁴ Provide the aggregate value of all securities distributed as compensa | | | |
| securities of the issuer. Indicate the security codes for all securities dis acquire additional securities of the issuer. | tributed as compensati | on, <u>including</u> options, v | varrants or other right |

⁵Do not include deferred compensation.

ITEM 9 – DIRECTORS, EXECUTIVE OFFICERS AND PROMOTERS OF THE ISSUER

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

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

Reporting issuer in a jurisdiction of Canada

Foreign public issuer

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

Provide name of reporting issuer

Wholly owned subsidiary of a foreign public issuer ⁶

Provide name of foreign public issuer

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

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

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

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

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

a) Directors, executive officers and promoters of the issuer

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

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

b) Promoter information

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

| Organization or | Family | First given | Secondary given | Residential jurisdiction of individual | Relationship to promoter (select one or both if applicable) | | | |
|-----------------|--------|-------------|-----------------|---|--|---|--|--|
| company name | name | name | names | Province or country | D | 0 | | |
| | | | | | | | | |

c) Residential address of each individual

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

ITEM 10 - CERTIFICATION

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

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

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

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

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

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/ investment fund manager/agent | Battery X Metals Inc. | | | | | | | | |
|---|-------------------------|--|---------|----|--------|-----------------|--|--|--|
| Full legal name | BREZER | BREZER Mark | | | | | | | |
| | Family name | First give | en name | | Second | ary given names | | | |
| Title | Chief Executive Officer | | | | | | | | |
| Telephone number | +1 (604) 741-0444 | 741-0444 Email address mbrezer@battery | | | | .com | | | |
| Signature | /s/ Mark Brezer | Date | 2024 | 01 | 31 | | | | |
| | | | YYYY | MM | DD | | | | |
| | | | | | | | | | |

ITEM 11 - CONTACT PERSON

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

Same as individual certifying the report

| Full legal name | LORETTE | Jennifer | |
|------------------|--|------------------|-----------------------|
| | Family name | First given name | Secondary given names |
| Title | Corporate Secretary | | |
| Name of company | KEYSTONE CORPORATE SERVICES INC. | | |
| Telephone number | Email address jennifer@keystonecorp.ca | | |

NOTICE – COLLECTION AND USE OF PERSONAL INFORMATION

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

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

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

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