# 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 11 12 (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	Golden Spike Resources Corp. / Golden Spike Resources Corp.
Previous full legal name	
If the issuer's name changed in	the last 12 months, provide most recent previous legal name.
Website	www.goldenspikeresources.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	25490068SSIUVUWQXZ93
lf 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 Firm NRD number SEDAR+ profile number

# **ITEM 5 – ISSUER INFORMATION**

TTEW 5 - ISSUER INFORMATION								
If the issuer is an investment fund, do not complete Item 5. Proceed to Item 6.								
a) Primary industry								
Provide the issuer's North American Industry Classification Standard (NAICS) code (6 digits only) that in your reasonable judgment most closely corresponds to the issuer's primary business activity.								
NAICS industry code 212220								
If the issuer is in the <b>mining industry</b> , indicate the stage of operations. This does not apply to issuers that provide services to issuers operating in the mining industry. Select the category that best describes the issuer's stage of operations.								
✓ Exploration								
🗌 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								
000052531								

ITEM 6 – INVESTMENT FUND ISSUER INFORMATION									
If the issuer is an investment f	If the issuer is an investment fund, provide the following information.								
a) Investment fund ma	anager information								
Full legal name				]					
Firm NRD number		(if applicable	)						
SEDAR+ profile number									
b) Type of investment	fund								
Type of investment fund that mos	st accurately identifies the	e 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 <sup>1</sup>								
	e Investment of Transferable Securities funds (UC nt schemes to operate throughout the EU on a pa							
that allow collective investmen	is schemes to operate throughout the EO on a pas	ssport basis on authoriza	uon from one mem	ber state.				
c) Net asset valu	ue (NAV) of the investment fund							
Select the NAV range of th	he investment fund as of the date of the r	nost recent NAV calcı	lation (Canadia	n \$).				
Under \$5M	S \$5M to under \$25M	Second se		Date of NAV calculation:				
\$100M to under \$50	DOM S500M to under \$1B	s1B or over	L	YYYY MM DD				
ITEM 7 – INFORM	ATION ABOUT THE DISTRIBU	JTION						
If an issuer located outsid	de of Canada completes a distribution in	a iurisdiction of Can	nda include in It	em 7 and Schedule 1				
information about purch	asers resident in that jurisdiction of Cano	ada only. Do not inclu	ıde in Item 7 sec	urities issued as payment of				
	fees, in connection with the distribution, v h the information provided in Schedule 1		ed in Item 8. The	e information provided in				
a) Currency								
Select the currency or cu dollars.	rrencies in which the distribution was ma	ıde. All dollar amount	ts provided in the	e report must be in Canadian				
🖌 Canadian dollar	🗌 US dollar 🗌 Euro Other (d	describe)						
h) Distribution								
b) Distribution o	Jales							
	rt and end dates. If the report is being file							
	ooth the start and end dates. If the report l dates for the distribution period covered		urities distribued	l on a continuous basis,				
		by the report.						
Start date	2024 11 01	End date	2024	11 01				
	YYYY MM DD		YYYY	MM DD				
c) Detailed purc	haser information							
Complete Schedule 1 of	f this form for each purchaser and atte	ach the schedule to	the completed	report.				
d) Types of secu	urities distributed							
Provide the following infe	ormation for all distributions reported on	a par sacurity basis	Defer to Part 1/1	12) of the Instructions for how				
	ode. If providing the CUSIP number, indic							
distributed.								
				Canadian \$				
Security CUSIP		Number of	Single or	Highest				
code number (if applicable)	Description of security	securities	lowest price	price Total amount				
UBS	Units - one common share and o	1,125,000.0000	0.2000	0.2000 225,000.0000				
		, ,						

	ne half of one warrant			
		ł		

### 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	(		Expiry date (YYYY-MM-	Conversion ratio	Describe other terms (if	
security code	security code	Lowest	Highest	DD)		applicable)	
WNT	CMS	0.3000	0.3000	2026-11-01	1:1	Each whole warrant is exerc isable into one common sh are at a n exercise price of \$ 0.30 per common share for a period of 24 months from the date of issuance.	

f) Summary of the distribution by jurisdiction and exemption

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

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

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

Province or country	Exemption relied on	Number of unique purchasers <sup>2a</sup>	Total amount (Canadian \$)			
Ontario	NI 45-106 2.3 [Accredited investor]	3	225,000.0000			
	Total dollar amount of securities distributed					
	Total number of unique purchasers <sup>2b</sup>	3				

<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.

<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.

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

# **ITEM 8 – COMPENSATION INFORMATION**

Provide information for each person (as defined in NI 45-106 (in Québec, Regulation 45-106 respecting Prospectus Exemptions)) to whom the issuer directly provides, or will provide, any compensation in connection with the distribution. <b>Complete additional copies of this page if more than one person was, or will be, compensated.</b>						
Indicate whether any com □ No ☑ Yes		·	. Г	ribution.		
			L			
a) Name of pers	on compensated	d and registratior	i status			
Indicate whether the pers	on compensated is a	a registrant.				
□ No ✓ Yes						
If the person compensate		rovide the name of th	e individual.			
Full legal name of ir		Family name	First given nam	•	Secondary given names	
<i>If the person compensate</i>	d is not an individua		0		Secondary given names	
Full legal name of r	non-individual LEE	DE FINANCIAL INC.	/ LEEDE FINANCE INC			
Firm	NRD number 577	70	(if app	licable)		
Indicate whether the pers	on compensated fac	ilitated the distributi	on through a funding p	oortal or an inte	rnet-based portal	
🖌 No 🗌 Yes						
b) Business cont	act information					
If a firm NRD number is n	ot provided in Item .	8(a) provide the hus	iness contact informati	on of the nersor	heing compensated	
Street address						
Municipality			Province/State			
Country			Postal code/Zip code			
Email address			Telephone number			
c) Relationship t	o issuer or inves	tment fund man	ager			
Indicate the person's relat 'connected' in Part B(2) of respecting Prospectus Exe	tionship with the issu the Instructions and	uer or investment fur I the meaning of 'con	nd manager (select all t trol' in section 1.4 of N		•••	
Connected with the issuer or investment fund manager						
Insider of the issuer						
Director or officer o			nd manager			
Employee of the issu		unu manager				
d) Compensatio	n 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	\$1,500.0000			
Value of all securities distributed as compensation <sup>4</sup>	\$0.0000			
Security codes	Security code 1 WNT	Security code 2	Security code 3	
Describe terms of warrants, options or other rights				]
Other compensation <sup>5</sup>				
Describe				
			_	
Total compensation paid	\$1,500.0000			
Check box if the person will or may receive any de	ferred compensation	on (describe the te	erms below)	
<sup>4</sup> Provide the aggregate value of all securities distributed as compensor securities of the issuer. Indicate the security codes for all securities dis acquire additional securities of the issuer.		-		
<sup>5</sup> Do not include deferred compensation.				
ITEM 9 – DIRECTORS, EXECUTIVE OFFICE	RS AND PRON	IOTERS OF TI	HE ISSUER	
If the issuer is an investment fund, do not complete It	em 9. Proceed to It	tem 10.		
Other compensation <sup>5</sup> Describe Total compensation paid Check box if the person will or may receive any des <sup>4</sup> Provide the aggregate value of all securities distributed as compensations securities of the issuer. Indicate the security codes for all securities dist acquire additional securities of the issuer. <sup>5</sup> Do not include deferred compensation. ITEM 9 – DIRECTORS, EXECUTIVE OFFICE	ferred compensation ation, <u>excluding</u> options, stributed as compensati	warrants or other righ on, <u>including</u> options, v AOTERS OF TI	ts exercisable to acqui varrants or other right	

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

$\checkmark$	Reporting	issuer i	in a	jurisdictior	۱of	Canada
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Foreign public issuer

Wholly owned subsidiary of a reporting issuer in any jurisdiction of Canada <sup>6</sup>

Provide name of reporting issuer

Wholly owned subsidiary of a foreign public issuer <sup>6</sup>

Provide name of foreign public issuer

Issuer distributing only eligible foreign securities and the distribution is to permitted clients only <sup>7</sup>.

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

<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 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	,,,	Residential jurisdiction of individual	Relationship to one or both i	-
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.

securities regulatory aut	hority or regulator, as applicab	ole, that I have reviewed this	'investment fund manager, to the report and to my knowledge, having to the extent required, complete.
Name of Issuer/ investment fund manager/agent	Golden Spike Resources Corp		
manager/agent			
Full legal name	ANDERSON	Keith	
	Family name	First given name	Secondary given names
Title	President		

Date

Email address | kanderson7774@gmail.com

2024

YYYY

21

DD

11

MM

Signature	Keith Anderson

# **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

Telephone number | +1 (604) 786-7774

Full legal name	KLOMP	Penilla	
	Family name	First given name	Secondary given names
Title	Corporate Secretary		
Name of company	GOLDEN SPIKE RESOURCES CO	ORP.	
Telephone number		Email address	penilla@goldenspikeresources.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.