# 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	Vital Battery Metals Inc. / Vital Batter	y Metals Inc.
Previous full legal name		
If the issuer's name changed in	the last 12 months, provide most recent	previous legal name.
Website	www.vitalbatterymetals.com	(if applicable)
If the issuer has a legal entity identifier, p	rovide below. Refer to Part B of the Insti	ructions for the definition of "legal entity identifier".
Legal entity identifier		]
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 Firm NRD number SEDAR+ profile number

# **ITEM 5 - ISSUER INFORMATION**

TIEM 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 212299
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 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
000054594

ITEM 6 - INVESTMENT	FUND ISSUER INI	FORMATION		
If the issuer is an investment	fund, provide the follo	wing information.		
a) Investment fund m	anager information			
Full legal name				]
Firm NRD number		(if applicable	)	
SEDAR+ profile number				
b) Type of investment	t fund			
Type of investment fund that mo	ost accurately identifies t	he issuer (select only one).		
🗌 Money market	Equity	Fixed income	Balanced	
Alternative strategies	Cryptoasset	Other (describe)		

Indicate whether one or b	poth of the following apply to the investm	ent fund.			
🗌 Invest primarily in o	ther investment fund issuers				
Is a UCITs Fund <sup>1</sup>					
	e Investment of Transferable Securities funds (UC				Union (EU) directives
that allow collective investmen	at schemes to operate throughout the EU on a pas	sport basis on authoriza	tion from one me	mber 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 n	nost recent NAV calcı	ulation (Canadi	an \$).	
Under \$5M	□ \$5M to under \$25M	Signal \$25M to unde			calculation:
s100M to under \$50	00M S500M to under \$1B	S1B or over		YYYY	MM DD
ITEM 7 - INFORMA	ATION ABOUT THE DISTRIBU	TION			
If an issuer located outsid	de of Canada completes a distribution in	a iurisdiction of Can	ada include in	Item 7 and Sci	hedule 1
information about purch	asers resident in that jurisdiction of Cana	ida only. Do not inclu	ıde in Item 7 se	curities issued	l as payment of
, j	fees, in connection with the distribution, w h the information provided in Schedule 1		sed in Item 8. T	he informatior	n provided in
a) Currency					
Select the currency or cur dollars.	rrencies in which the distribution was ma	de. All dollar amoun	ts provided in t	he report mus	t be in Canadian
🖌 Canadian dollar	🗌 US dollar 📄 Euro Other (c	describe)			]
h) Distribution	1				
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 coverea		urities distribue	d on a continu	uous basis,
					I
Start date		End date	2023	12 28	
	YYYY MM DD		YYYY	MM DD	
c) Detailed purc	haser information				
Complete Schedule 1 of	f this form for each purchaser and atta	ich the schedule to	the completed	l report.	
d) Types of secu	urities distributed				
Provide the following info	ormation for all distributions reported on	a per security basis	Refer to Part A	(12) of the Inst	tructions for how
	ode. If providing the CUSIP number, indice				
distributed.					
				Canadian \$	
Security CUSIP		Number of	Single or	Highest	
code number (if applicable)	Description of security	securities	lowest price	price	Total amount
FTU	Each FT unit consists of one FT sh	1,673,000.0000	0.450	00	752,850.0000
				1	1 .

	are and	one HA	LF NFT w	/arrant					
e) Details	of rights and	convert	ible/exc	hangeable	securities				
lf any rights (e.g. v convertible/excha convertible/excha	ngeable securitie	es were di							
Convertible / exchangeable security code	Underlying security code		se price dian \$) Highest		e (YYYY-MM- D)	Conve	ersion ratio	D	escribe other terms (if applicable)
WNT	CMS	0.6000		2026-	-12-28				
		1	I	I					
f) Summa	ry of the distr	ibution	by juris	diction and	exemptio	n			
located outside oj jurisdiction of Car	<sup>f</sup> Canada comple nada only. s a separate line a purchaser res	tes a distr item for: ides, if a p	ribution in (i) each ju ourchaser	n a jurisdiction	n of Canada, ere a purchas	include ser resi	distributions des, (ii) each	s to pi exemp	However, if an issuer urchasers resident in that otion relied on in the emption relied on in
		a torpian i	iuricdictio	n	-				
					erwise state t				
For jurisdictions w Province or country		ate the pr		territory, oth	erwise state t	he coui Numb		_	Total amount (Canadian \$)
For jurisdictions w	vithin Canada, st	ate the pr	ovince or	territory, oth d on	erwise state t	he coui Numb	ntry. er of unique	_	Total amount (Canadian
For jurisdictions w Province or country	vithin Canada, st	ate the pr Exemp .3 [Accre	rovince or <b>tion relie</b> dited inv	<i>territory, oth</i> <b>d on</b> /estor]	erwise state t	he coui Numb	ntry. er of unique	_	Total amount (Canadian \$)
For jurisdictions w Province or country British Columb	vithin Canada, st ia NI 45-106 2. NI 45-106 2.	Exemp 3 [Accre 3 [Accre	rovince or <b>tion relie</b> dited inv dited inv	territory, oth d on (estor] (estor]		he coui Numb	ntry. er of unique	_	<b>Total amount (Canadian \$)</b> 200,700.0000
For jurisdictions w Province or country British Columb Ontario	vithin Canada, st ia NI 45-106 2. NI 45-106 2. ia NI 45-106 2.	Exemp 3 [Accre 3 [Accre 5 [Family	tion relie dited inv dited inv dited inv y, friends	territory, oth d on vestor] vestor] s and busing	ess	he coui Numb	ntry. er of unique	_	Total amount (Canadian \$) 200,700.0000 499,500.0000
For jurisdictions w Province or country British Columb Ontario British Columb	vithin Canada, st ia NI 45-106 2. NI 45-106 2. ia NI 45-106 2. associates] NI 45-106 2.	Exemp 3 [Accre 3 [Accre 5 [Family	tion relie dited inv dited inv dited inv y, friends	territory, oth d on vestor] vestor] s and busine s and busine	ess	he coui Numb pur	ntry. er of unique chasers <sup>2a</sup>	3 1 2 1	Total amount (Canadian \$)           200,700.0000           499,500.0000           42,300.0000
For jurisdictions w Province or country British Columb Ontario British Columb	vithin Canada, st ia NI 45-106 2. NI 45-106 2. associates] NI 45-106 2. associates]	ate the pr Exemp 3 [Accre 3 [Accre 5 [Family 5 [Family	tion relie dited inv dited inv dited inv y, friends	territory, oth d on vestor] vestor] s and busine s and busine	ess ess bllar amount	he coui Numb pur	ntry. er of unique chasers <sup>2a</sup>	3 1 2 1	Total amount (Canadian \$)           200,700.0000           499,500.0000           42,300.0000           10,350.0000
For jurisdictions were province or country British Columb Ontario British Columb Manitoba 2a In calculating the results of the second s	vithin Canada, st ia NI 45-106 2. NI 45-106 2. associates] NI 45-106 2. associates] NI 45-106 2. associates]	ate the pr Exemp 3 [Accre 3 [Accre 5 [Famil] 5 [Famil] Total nun urchasers p ue purchase	tion relie dited inv dited inv dited inv y, friends y, friends y, friends	territory, oth d on vestor] vestor] s and busine s and busine Total do nique purchas of the issuer distri	ess ess ollar amount asers <sup>2b</sup> ser only once. Journies	he cour Numb pur of secu	ntry. er of unique chasers <sup>2a</sup> urities distrib	3 1 2 1 <b>puted</b> 7 ounted	Total amount (Canadian \$)           200,700.0000           499,500.0000           42,300.0000           10,350.0000           \$752,850.0000
For jurisdictions were province or country British Columb Ontario British Columb Manitoba	vithin Canada, st ia NI 45-106 2. NI 45-106 2. associates] NI 45-106 2. associates] NI 45-106 2. associates]	ate the pr Exemp 3 [Accre 3 [Accre 5 [Famil] 5 [Famil] 5 [Famil] Total nun urchasers p ue purchase tites to, and	tion relie dited inv dited inv y, friends y, friends y, friends rer row, cour ers to which relied on m	territory, oth d on vestor] vestor] s and busine s and busine s and busine Total do nique purchas the issuer distri- putiple exemption	ess ess bliar amount asers <sup>2b</sup> ser only once. Jour ributed securities ons for, that pur	he cour Numb pur of secu	ntry. er of unique chasers <sup>2a</sup> urities distrib	3 1 2 1 <b>puted</b> 7 ounted	Total amount (Canadian \$)         200,700.0000         499,500.0000         42,300.0000         10,350.0000         \$752,850.0000         as one purchaser.

Province or country	Net proceeds (Canadia
Total net proceeds to the investment fund	

state the country.

<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.

an \$)

# **ITEM 8 - COMPENSATION INFORMATION**

whom the issuer directly		mpensation in connection with t	106 respecting Prospectus Exemptions) to the distribution. <b>Complete additional</b>
Indicate whether any co □ No ☑ Yes	mpensation was paid, or will be If yes, indicate numb	·	ribution. 1
a) Name of per	rson compensated and reg	istration status	
🗌 No 🗹 Yes	rson compensated is a registrant ted is an individual, provide the r		
Full legal name of	individual		
lf the person compensa	Family name ted is not an individual, provide t	6	ne Secondary given names
Full legal name of	f non-individual GloRes Securi	ties lnc.	
Fin	m NRD number	(if app	licable)
Indicate whether the pe	rson compensated facilitated the	distribution through a funding i	portal or an internet-based portal
✓ No □ Yes		alou 12 au or an o agir a fan an 6 r	
b) Business co	ntact information		
lf a firm NRD number is	not provided in Item 8(a), provid	le the business contact informati	ion of the person being compensated.
Street address	10 Loggers Trail		
Municipality	Stouffville	Province/State	Ontario
Country	Canada	Postal code/Zip code	L4A 2L6
Email address	ritu.gupte@gloressecurities. com	Telephone number	+1 (647) 267-5380
c) Relationship	to issuer or investment fu	nd manager	
'connected' in Part B(2)		ing of 'control' in section 1.4 of N	that apply). Refer to the meaning of II 45-106 (in Québec, Regulation 45-106
Connected with th	e issuer or investment fund ma	anager	
🗌 Insider of the issue	er (other than an investment fu	nd)	
	of the investment fund or inves	-	
	suer or investment fund manag	ger	
✓ None of the above	2		

#### 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	34987.5		
Value of all securities distributed as compensation <sup>4</sup>			
Security codes	Security code 1	Security code 2	Security code 3
Security codes	WNT		
Describe terms of warrants, options or other rights		arrants exercisabl ecember 28, 2025	e at \$0.60 per
			_
Other compensation <sup>5</sup>			
Describe			
Total compensation paid	34987.5		
Check box if the person will or may receive any def	ferred compensation	on (describe the te	erms below)
<sup>4</sup> Provide the aggregate value of all securities distributed as compensa	tion, <u>excluding</u> options,	warrants or other righ	ts exercisable to acqui
securities of the issuer. Indicate the security codes for all securities dis	tributed as compensati	on, <u>including</u> options, v	warrants or other right
acquire additional securities of the issuer.			

<sup>5</sup>Do 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 <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 o			Secondary given	Residential jurisdiction of individual		promoter (select if applicable)
company name	e 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	Vital Battery Metals Inc.					
Full legal name	PLADSON Kelly					
	Family name	First give	en name	-	Secondary given names	
Title	Corporate Secretary					
Telephone number	+1 (604) 726-6749	Email address	kelly@niacor	porate	services.com	
Signature	Kelly Pladson	Date	2024	01	02	
			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			
	Family name	First given name	Secondary given names
Title			
Name of company			
Telephone number		Email address	

# NOTICE – COLLECTION AND USE OF PERSONAL INFORMATION

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

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.