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 Battery 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 Instructions for the definition of "legal entity identifi	ier".
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 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									
000054594									

ITEM 6 - INVESTMENT FUND ISSUER INFORMATION								
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 k	both of the following apply to the investm	ent 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.									
that allow collective investmen	that allow conective investment schemes to operate an orginal the Lo on a passport basis on addionization from one memori 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 calci	ulation (Canadi	an \$).					
Under \$5M	□ \$5M to under \$25M	Signal \$25M to unde			calculation:				
\$100M to under \$50	00M S500M to under \$1B	S1B or over		YYYY	MM DD				
ITEM 7 - INFORMA	ATION ABOUT THE DISTRIBU	ITION							
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	ada only. Do not inclu	ıde in Item 7 se	curities issued	l as payment of				
, j	fees, in connection with the distribution, w th the information provided in Schedule 1		sed in Item 8. Ti	he informatior	n provided in				
a) Currency									
Select the currency or cu 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)]				
b) Distribution									
b) Distribution o	Jates								
	rt and end dates. If the report is being file								
	both the start and end dates. If the report I dates for the distribution period coverea		urities distribue	d on a continu	uous basis,				
					I				
Start date		End date	2024	08 22					
	YYYY MM DD		YYYY	MM DD					
c) Detailed purc	haser information								
Complete Schedule 1 of	f this form for each purchaser and atta	ach 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 hasis	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				
UBS	Each unit consists of one COMMO	4,347,826.0000	0.115	0	499,999.9900				
L I				1					

			e half wa 5 per sha	rrant, exe ire							
e) Details (of rights and	convert	ible/exc	hangeable sec	urities						
lf any rights (e.g. w convertible/exchar convertible/exchar	ngeable securitie	s were di									
Convertible / exchangeable	exchangeable Underlying (Canadian \$) Expiry date (YYYY-MM- security code DD) DD) DD DD DD DD DD										
security code	Security cour	Lowest	Highest	,					applicable)		
WNT	CMS	0.1500		2026-08-2	2						
f) Summar	ry of the distr	ibution	by jurise	diction and exe	emptio	n					
located outside of jurisdiction of Can This table requires jurisdiction where Canada, if a purch For jurisdictions w	ada only. s a separate line a purchaser res. paser resides in c	item for: ides, if a p a foreign j	(i) each ju ourchaser iurisdictio	risdiction where a resides in a juriso n.	purchas liction of	ser resi f Canac	ides, (ii) each (da, and (iii) ea	exem	ption relied	on in the	
Province or country			tion relied	-		Numbe	er of unique chasers ^{2a}		Total amo	unt (Canadian \$)	
British Columbi	NI 45-106 54 2 [l isted issuer financing						21		363,724.9900		
Manitoba	NI 45-106 5A.2 [Listed issuer financing exemption]			1		11,500.0000					
Alberta	NI 45-106 5A.2 [Listed issuer financing exemption]						1		78,775.0000		
Ontario	NI 45-106 5 exemption]		ed issuer	financing				1		46,000.0000	
				Total dollar a	mount	of secu	irities distrib	uted	\$	499,999.9900	
	Т	otal num	ber of uni	ique purchasers ^{2l}				25			

^{2a} In calculating the number of unique purchasers per row, count each purchaser only once. Joint purchasers may be counted as one purchaser.

^{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.

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.*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 (a whom the issuer directly provides, or w copies of this page if more than one	ill provide, any co	mpensation in connect						
Indicate whether any compensation wa		<i>paid, in connection with</i> er of persons compen]				
a) Name of person comper	isated and reg	istration status						
Indicate whether the person compensa	ted is a registrant.	:						
🗌 No 🛛 Yes								
If the person compensated is an indivia	lual, provide the n	name of the individual.						
Full legal name of individual								
If the person compensated is not an inc	Family name dividual, provide ti		t given name nn.	Secondary given r	lames			
Full legal name of non-individua	Full legal name of non-individual RESEARCH CAPITAL CORPORATION / CORPORATION RECHERCHE							
Firm NRD number 3070 (if applicable)								
Indicate whether the person compensa	ted facilitated the	distribution through a	 funding portal o	r an internet-based por	tal			
✔ No								
b) Business contact informa	ation							
If a firm NRD number is not provided ir	n Item 8(a) provid	le the husiness contact i	information of th	e nerson heing comper	nsated			
					Succa.			
Street address]				-			
Municipality		Provinc	ce/State					
Country		Postal code/Z	Zip code					
Email address		Telephone	number					
c) Relationship to issuer or	invostmont fu	nd managor						
Indicate the person's relationship with t 'connected' in Part B(2) of the Instructio respecting Prospectus Exemptions) for t	ns and the meani	ing of 'control' in sectior						
Connected with the issuer or inve	estment fund ma	anager						
🗌 Insider of the issuer (other than a	an investment fu	nd)						
Director or officer of the investm	ent fund or inves	stment fund manager						
Employee of the issuer or investr	nent fund manaរូ	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	\$19,523.5500			
Value of all securities distributed as compensation ⁴				_
Security codes	Security code 1 WNT	Security code 2	Security code 3	
Describe terms of warrants, options or other rights	169,770 finder's v until August 22, 2	varrants exercisab 026	le at \$0.15 valid	
Other compensation ⁵				
Describe				
Total compensation paid	\$19,523.5500			
Check box if the person will or may receive any def	erred compensatio	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 each person (as defined in NI 45-106) (in Québec, Regulation 45-106 respecting Prospectus whom the issuer directly provides, or will provide, any compensation in connection with the distribution. Complete 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.	
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 g If the person compensated is not an individual, provide the following information.	given names
Full legal name of non-individual VENTUM FINANCIAL CORP.	
Firm NRD number 5290 (if applicable)	
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based	l portal
✓ 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 co	npensated.
Street address	
Municipality Province/State	
Country Postal code/Zip code	
Email address Telephone number	
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 me 'connected' in Part B(2) of the Instructions and the meaning of 'control' in section 1.4 of NI 45-106 (in Québec, Regul 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 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	\$2,070.0000			
Value of all securities distributed as compensation ⁴				
Security codes	Security code 1	Security code 2	Security code 3	
	compensation 4 Security code 1 Security code 2 Security code 3 Security codes UNT UNT Image: solution of the security code 3 s or other rights 18,000 finder's warrants exercisable at \$0.15 valid until August 22, 2026			
Describe terms of warrants, options or other rights			e at \$0.15 valid	
Other compensation ⁵				
Describe				
Total compensation paid	\$2,070.0000			
Check box if the person will or may receive any def	erred compensatio	on (describe the te	erms below)	
	• •	•	•	
⁵ 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).

\checkmark	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 issue (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		promoter (select if applicable)
company name	name	name	names	Province or country	D	0
c) Residential a	ddress of	each indivi	dual			

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	nation below, l certify, on beh hority or regulator, as applica igence, the information provio	ble, that I have r	eviewed this r	eport and to my knowledge, l	naving		
Name of Issuer/ investment fund							
manager/agent					_		
Full legal name	PLADSON	Ke	lly				
	Family name	First give	en name	Secondary given names	_		
Title	Corporate Secretary						
Telephone number	+1 (604) 726-6749	Email address	kelly@niacorp	oorateservices.com			
Signature	Kelly Pladson	Date	2024	08 26			
			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.