# Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 10218541

ITEM 1 - REPORT TYPE											
✓ New report											
Amended report If amended, provide filing date of report that is being amended (YYYY-MM-DD)											
TEM 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.											
Investment fund issuer											
✓ Issuer (other than an investment fund)											
Underwriter											
ITEM 3 - ISSUER NAME AND OT											
Provide the following information about the issuer, or if the issuer is an investment fund, about the fund.											
Full legal name	'										
Previous full legal name	Scout Minerals Corp.										
If the issuer's name changed in th	e last 12 months, provide most	recent previous leg	gal name.								
Website	https://eurekalithium.ca	1/	(if applicabl	e)							
If the issuer has a legal entity identifier, pr	ovide below. Refer to Part B of t	he Instructions for	the definition (	of "legal entity identifier".							
Legal entity identifier	212398										
If two or more issuers distributed a single s	security, provide the full legal no	ame(s) of the co-is	suer(s) other th	an the issuer named above	2.						
Full legal name(s) of co-issuer(s)			(if applicable	e)							
ITEM 4 HADEDWRITER INCOM	AATION										
ITEM 4 - UNDERWRITER INFORM											
If an underwriter is completing the report,	provide the underwriter's full le	gal name and firm	n NRD number.		٦						
Full legal name											
Firm NRD number		(if ap	oplicable)								
If the underwriter does not have a firm NR	D number, provide the head off	ice contact inform	ation of the un	derwriter.	_						
Street address											
Municipality		Pro	vince/State								
Country		Postal co	de/Zip code								
Telephone number			Website		(if applicable)						

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  2 1 2 3 9 8  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  Number of employees: 0 - 49 50 - 99 100 - 499 500 or more
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  2 1 2 3 9 8  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
NAICS industry code 2 1 2 3 9 8  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
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
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
Mortgages Real estate Commercial/business debt Consumer debt Private companies   Cryptoassets      Number of employees
☐ Cryptoassets  b) Number of employees  Number of employees:   0 - 49  ☐ 50 - 99  ☐ 100 - 499  ☐ 500 or more
b) Number of employees  Number of employees:
Number of employees:
c) SEDAR profile number
Does the issuer have a SEDAR profile?
No  ✓ Yes If yes, provide SEDAR profile number  0 0 0 5 4 6 0 9
If the issuer does not have SEDAR profile complete item 5(d) - (h).
d) Head office address
Street address Province/State
Municipality Postal code/Zip code
Country Telephone number
e) Date of formation and financial year-end
Date of formation Financial year-end MM DD
f) Reporting issuer status
Is the issuer a reporting issuer in any jurisdication of Canada? No Yes
If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer.
AII AB BC MB NB NL NT
NS NU ON PE QC SK YT
g) Public listing status
If the issuer has a CUSIP number, provide below (first 6 digits only)
CUSIP number
If the issuer is publicly listed, provide the name of the exchange on which the issuer's equity securities primarily trade. Provide only the name of an exchange and not a trading facility such as, for example, an automated trading system.
Exchange name
h) Size of issuer's assets

Select the size of the issuer's assets based on its most recently available annual financial statements (Canadian \$). If the issuer has not prepared annual financial statements for its first financial year, provide the size of the issuer's assets at the distribution end date.

☐ \$0 to under \$5M	☐ \$5M to under \$25M	☐ \$25M to under \$100M
\$100M to under \$500M	☐ \$500M to under \$1B	\$1B or over

ITEM 6 - INVESTMENT	FUND ISSUER INFORMATION
If the issuer is an inves	tment fund, provide the following information.
a) Investment fund ma	anager information
Full legal name	
Firm NRD number	(if applicable)
If the investment fund mand	ager does not have a firm NRD number, provide the head office contact information of the investment fund manager.
Street address	
Municipality	Province/State
Country	Postal code/Zip code
Telephone number	Website (if applicable)
b) Type of investment	fund
Type of investment fund tha	nt most accurately identifies the issuer (select only one) .
Money market	☐ Equity ☐ Fixed income ☐ Balanced
Alternative strateg	gies Cryptoasset Other (describe)
Indicate whether one or bot	h of the following apply to the investment fund .
Invests primarily in	n other investment fund issuers
☐ Is a UCITs Fund¹	
<sup>1</sup> Undertaking for the Collec (EU) directives that allow c	tive Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union collective investment schemes to operate throughout the EU on a passport basis on authorization from one member state.
c) Date of formation a	and financial year-end of the investment fund
Date of forma	tion Financial year-end MM DD MM DD
d) Reporting issuer st	atus of the investment fund
Is the investment fund a rep	orting issuer in any jurisdication of Canada? No Yes
If yes, select the jurisdictions	s of Canada in which the investment fund is a reporting issuer.
☐ AII ☐	AB BC MB NB NL NT
□ NS □	NU ON PE QC SK YT
e) Public listing status	s of the investment fund
If the investment fund has a	CUSIP number, provide below (first 6 digits only)
	CUSIP number
	blicly listed, provide the name of the exchange on which the investment fund's securities primarily trade. Provide only the not a trading facility such as, for example, an automated trading system.
Exchange on an exchange and h	
-	AV) of the investment fund
	investment fund as of the date of the most recent NAV calculation (Canadian \$).
\$0 to under \$5M	s5M to under \$25M s25M to under \$100M
\$100M to under \$500	DM \$500M to under \$1B \$1B or over Date of NAV calculation:  YYYY MM DD

# **ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION**

If an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include in Item 7 and Schedule 1 information about purchasers resident in that jurisdiction of Canada only. Do not include in Item 7 securities issued as payment of commissions or finder's fees in connection with the distribution, which must be disclosed in Item 8. The information provided in Item 7 must reconcile with the information provided in Schedule 1 of the report.

	' '										
a)	Currency										
Sele	Select the currency or currencies in which the distribution was made. All dollar amounts provided in the report must be in Canadian dollars.										
<b>√</b> (	Canadian dollar US	6 dollar		] Euro	Other (describe)						
b)	Distribution date(s)										
as b	State the distribution start and end dates. If the report is being filed for securities distributed on only one distribution date, provide the distribution date as both the start and end dates. If the report is being filed for securities distributed on a continuous basis, include the start and end dates for the distribution period covered by the report.										
	Start date	2023	06	23	End date	2023	06	23			
		YYYY	MM	DD	•	YYYY	MM	DD			

#### c) Detailed purchaser information

Complete Schedule 1 of this form for each purchaser and attach the schedule to the completed report.

## d) Types of securities distributed

Provide the following information for all distributions reported on a per security basis. Refer to Part A(12) of the Instructions for how to indicate the security code. If providing the CUSIP number, indicate the full 9-digit CUSIP number assigned to the security being distributed.

					Canadian \$		
S	Security CUSIP number (if applicable)		Description of security	Number of securities	Single or lowest price	Highest price	Total amount
U	N	T	Units @ \$0.50 consisting of one common share in the capital of the Issuer and one-half of one common share purchase warrant.	2,193,164.00	0.5000		1,096,582.00
F	Т	U	Flow-Through Units @ \$0.60 consisting of one common share in the capital of the Issuer that qualifies as a "flow-through share" as defined in the Income Tax Act (Canada) and one half of one flow-through common share warrant.	59,000.00	0.6000		35,400.00
F	Т	U	Super-Flow-Through Units @ \$0.65 consisting of one common share that qualifies as a "flow-through share" as defined in the Income Tax Act (Canada) and one half of one flow-through common share purchase warrant.	700,000.00	0.6500		455,000.00

#### 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 security code		Underlying security code										se price idian \$)	Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other items (if applicable)
						Lowest	Highest								
W	N	Т	С	М	S	0.7500		2025-06-23	1:1						
W	N	Т	F	Т	S	0.8500		2025-06-23	1:1						
W	N	Т	F	T	S	0.8500		2025-06-23	1:1						

## 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 <sup>28</sup> purchasers	Total amount (Canadian \$)					
British Columbia	NI 45-106 2.3 [Accredited investor]	7	636,982.00					
Saskatchewan	NI 45-106 2.3 [Accredited investor]	1	25,000.00					
Ontario	NI 45-106 2.3 [Accredited investor]	9	915,000.00					
Québec	NI 45-106 2.3 [Accredited investor]	1	10,000.00					
	Total dollar amount of securities distributed							
	Total number of unique purchasers <sup>2b</sup>	18						

<sup>&</sup>lt;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.

#### 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.

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

<sup>&</sup>lt;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.

#### h) Offering materials - This section applies only in Saskatchewan, Ontario, Québec, New Brunswick and Nova Scotia.

If a distribution has occurred in Saskatchewan, Ontario, Québec, New Brunswick or Nova Scotia, complete the table below by listing the offering materials that are required under the prospectus exemption relied on to be filed with or delivered to the securities regulatory authority or regulator in those jurisdictions.

In Ontario, if the offering materials listed in the table are required to be filed with or delivered to the Ontario Securities Commission (OSC), attach an electronic version of the offering materials that have not been previously filed with or delivered to the OSC.

Description	Date of document or other material (YYYY-MM-DD)	Previously filed with or delivered to regulator? (Y/N)	Date previously filed or delivered (YYYY-MM-DD)

<sup>&</sup>lt;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.

TEM 8 - COMPENSATION	INFORMATION	l									
Provide information for each person (as defined in NI 45-106) 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 compensation was paid, or will be paid, in connection with the distribution.											
No ✓ Yes If yes, indicate number of persons compensated. 8											
a) Name of person compens	a) Name of person compensated and registration status										
Indicate whether the person compe	nsated is a registra	nt.	☐ No ✓	Yes							
If the person compensated is an inc	dividual, provide the	e name of the indivi	dual.								
Full legal name of individu	Full legal name of individual										
	Fa	mily name	First given	name	•	Seco	ndary gi	ven names			
If the person compensated is not a	n individual, provid	e the following infor	mation.								
Full legal name of	non-individual [	AYWOOD SECU	JRITIES INC. / VALE	URS MO	BILIEF	RES HAYV	VOOD	Inc.			
Firm	NRD number	1 6 3	0		(if app	licable)					
Indicate whether the person compe	nsated facilitated t	he distribution throu	igh a funding portal or c	ın internet	-based p	oortal.	<b>✓</b>	No [	Yes		
b) Business contact informa	tion										
If a firm NRD number is not provid	ed in Item 8 (a), pro	ovide the business co	ontact information of the	e person be	eing con	npensated.					
Street address											
Municipality				Province/	'State						
Country			Postal	code/Zip	code						
Email address			Tele	phone nu	ımber						
c) Relationship to issuer or	nvestment fund	manager									
Indicate the person's relationship w the Instructions and the meaning o						aning of "co	nnected	d" in Part E	3(2) of		
Connect with the issuer of	or investment fund	manager	Inside	r of the iss	uer (oth	ner than an	investn	nent fund)			
Director or officer of the i	nvestment fund or	investment fund ma	anager	yee of the	issuer	or investme	ent fund	l manager			
None of the above											
d) Compensation details											
Provide details of all compensation Canadian dollars. Include cash com incidental to the distribution, such a allocation arrangements with the d	missions, securities ns clerical, printing,	-based compensation legal or accounting	n, gifts, discounts or oth services. An issuer is not	er compen required t	sation. I o ask fo	Do not repo	rt paym	ents for se	ervices		
Cash commissions paid	1,400	0.00	[	Security of	ode 1	Security co	ode 2	Security co	ode 3		
Value of all securities distributed as compensation⁴			Security codes	W N	Т						
Describe term	s of warrants, opti	ons or other rights	2,800 Broker Warra	ints exerc	isable	at \$0.75 u	ıntil Ju	ne 23, 20	)25.		
Other compensation <sup>5</sup>		Describe									
Total compensation paid											
Check box if the perso	n will or may receiv	/e any deferred con	npensation (describe the	e terms be	low)						
<sup>4</sup> Provide the aggregate value of a additional securities of the issuer.									or.		
rights exercisable to acquire addit			ภานธอ นเอเทมนเ <del>เ</del> น สร COF	npensauoi	i, <u>ii iCiUC</u>	<u>y</u> υμιιοί18	, walla	กเอ บา บเกิย	71		

<sup>&</sup>lt;sup>5</sup>Do not include deferred compensation.

a) Name of person comper	nsated and regis	stration	status									
Indicate whether the person comp	Indicate whether the person compensated is a registrant.    No   Yes											
If the person compensated is an in	ndividual, provide	the name	of the indivi	idual.								
Full legal name of individe	Full legal name of individual											
Family name First given name Secondary given names												
If the person compensated is not a	an individual, prov	ide the fo	ollowing info	rmation.								
Full legal name of	Full legal name of non-individual RESEARCH CAPITAL CORPORATION / CORPORATION RECHERCHE CAPITAL											
Firm NRD number 3 0 7 0 (if applicable)												
Indicate whether the person comp	pensated facilitated	the dist	ribution thro	ugh a fund	ling port	tal or a	n intern	⊐ net-based	portal.	<b>√</b>	No 🗌 Ye	)S
b) Business contact information	ation											
If a firm NRD number is not provid	ded in Item 8 (a), <sub>I</sub>	provide tl	he business c	ontact info	ormation	of the	person	being co	mpensated.			7
Street address												
Municipality						F	rovino	ce/State				
Country					Р	ostal	code/Z	ip code				٦
Email address						Telep	ohone	number				Ī
c) Relationship to issuer or	investment fun	d mana	ger									
Indicate the person's relationship with the Instructions and the meaning of				-					-	onnecte	d" in Part B(2) o	f
Connect with the issuer				or are par		-	-		ther than ai	n investi	ment fund)	
Director or officer of the	investment fund	or investi	ment fund m	anager	_	Emplo	vee of t	he issue	or investm	ent fun	d manager	
<u> </u>	investment rand	or investi	nont fana in	anagei		Lilipio	ycc or t	110 133001	or investin	ioni iani	a manager	
✓ None of the above												
d) Compensation details												
Provide details of all compensation Canadian dollars. Include cash con incidental to the distribution, such allocation arrangements with the c	nmissions, securiti as clerical, printin	es-based g, legal o	compensation	on, gifts, di services.	iscounts An issuer	or othe r is not	er comp require	ensation. d to ask f	Do not rep	ort payr	nents for services	
Cash commissions paid	42,0	00.00					Securit	y code 1	Security of	code 2	Security code 3	
Value of all securities distributed as compensation <sup>4</sup>				Security o	odes		W	N T				
·	ms of warrants, op	otions or	other rights	84,000	Broker	Warr	ants ex	kercisab	le at \$0.75	5 until .	June 25, 2023	]
Other compensation <sup>5</sup>			Describe									آ
Total compensation paid												_
Check box if the person	on will or may rec	eive any	deferred cor	mpensatio	n (descr	ibe the	eterms	below)				7
<sup>4</sup> Provide the aggregate value of a additional securities of the issuer rights exercisable to acquire addi <sup>5</sup> Do not include deferred compen	r. Indicate the sec litional securities d	urity code	es for all sec									Т.

a) Name of person compensated and reg	istration status							
Indicate whether the person compensated is a regi	strant.	No v	Yes					
If the person compensated is an individual, provide	e the name of the individu	ıal.						
Full legal name of individual								
	Family name	First giver	n name	Secondary (	jiven names			
If the person compensated is not an individual, pro	ovide the following inform	ation.						
Full legal name of non-individual Canaccord Genuity Corp./Corporation Canaccord Genuity								
Firm NRD number 9 0 0 (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 con	tact information of th	ne person being co	mpensated.				
Street address								
Municipality			Province/State					
Country		Posta	l code/Zip code					
Email address		Tele	ephone number					
c) Relationship to issuer or investment fu	nd manager							
Indicate the person's relationship with the issuer of					ed" in Part B(2) of			
the Instructions and the meaning of "control" in se		· · · <u> </u>						
Connect with the issuer or investment fu	ind manager		er of the issuer (o	ther than an invest	ment runa)			
Director or officer of the investment fund	I or investment fund man	ager Empl	oyee of the issue	r or investment fun	d manager			
✓ None of the above								
d) Compensation details								
Provide details of all compensation paid, or to be p								
Canadian dollars. Include cash commissions, securi incidental to the distribution, such as clerical, printi								
allocation arrangements with the directors, officers								
Cash commissions paid 1,	510.74		Security code 1	Security code 2	Security code 3			
Value of all securities	Se	ecurity codes	W N T					
distributed as compensation <sup>4</sup>								
Describe terms of warrants,	options or other rights	3,021 Broker Warra	ants exercisable	e at \$0.75 until Ju	une 23, 2025.			
Other compensation <sup>5</sup>	Describe							
Total compensation paid								
Check box if the person will or may re	ceive any deferred comp	ensation (describe th	ne terms below)					
<sup>4</sup> Provide the aggregate value of all securities dist	ributed as compensation	, excluding options, v	warrants or other l	rights exercisable t	o acquire			
additional securities of the issuer. Indicate the se rights exercisable to acquire additional securities	curity codes for all secur							
<sup>5</sup> Do not include deferred compensation.								

a) Name of person comp	ensated and reg	istration status					
Indicate whether the person cor	mpensated is a regi	strant.	☐ No	$\checkmark$	Yes		
If the person compensated is an	individual, provide	the name of the indiv	idual.				
Full legal name of indiv	ridual						
		Family name		First given na	ame	Secondary (	given names
If the person compensated is no	ot an individual, pro	vide the following info	rmation.				
Full legal name of non-individual PI Financial Corp./Corporation Financière PI							
Firm NRD number 5 2 9 0 (if applicable)							
Indicate whether the person cor	npensated facilitate	ed the distribution thro	ugh a funding p	ortal or an	internet-based	d portal. ✓	No Yes
b) Business contact infor	mation						
If a firm NRD number is not pro	ovided in Item 8 (a),	provide the business o	ontact informa	tion of the p	person being co	mpensated.	
Street address							
Municipality				Р	rovince/State	;	
Country				Postal c	ode/Zip code	,	
Email address				Telep	hone numbei		
c) Relationship to issuer	or investment fu	nd 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 for the purposes of completing this section.  Connect 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 pa		980.00			Security code 1	Security code 2	Security code 3
Value of all securitie distributed as compensatio	-		Security codes		WNT		
Describe to	erms of warrants, o	options or other rights				e at \$0.75 until J sable at \$0.85 ur	
Other compensation	n <sup>5</sup>	Describe					
Total compensation pa	id						
Check box if the pe	rson will or may re	ceive any deferred co	mpensation (de	scribe the	terms below)		
<sup>4</sup> Provide the aggregate value of additional securities of the issurights exercisable to acquire as <sup>5</sup> Do not include deferred comp	uer. Indicate the sed dditional securities	curity codes for all sec					

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 inc	dividual.							
Full legal name of individual								
LFamily name	First give	en name	Secondary g	 given names				
If the person compensated is not an individual, provide the following in								
Full legal name of non-individual FIDELITY CLE	ARING CANADA ULC	/ COMPENSATION	 ON FIDELITY C	ANADA				
E: NDD								
Firm NRD number 2 8 8 8 0 (if applicable)  Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. No ✓ Yes								
	rough a funding portation	an internet basea p	ortat.	110 1				
b) Business contact information  If a firm NRD number is not provided in Item 8 (a), provide the busines	s contact information of the	ha parsan haina cam	noncatod					
Street address	s contact information of th	The person being com						
Municipality		Province/State						
Country	Posta	al code/Zip code						
Email address	Tel	lephone number						
c) Relationship to issuer or investment fund manager								
Indicate the person's relationship with the issuer or investment fund m the Instructions and the meaning of "control" in section 1.4 of NI 45-10		•	ning of "connecte	ed" in Part B(2) of				
Connect with the issuer or investment fund manager	· · · · <u></u>	der of the issuer (oth	er than an invest	ment fund)				
Director or officer of the investment fund or investment fund	manager	oloyee of the issuer of	or investment fun	d manager				
_	manager zmp	noyee of the isoder t	or investment ran	a manager				
None of the above								
d) Compensation details								
Provide details of all compensation paid, or to be paid, to the person id Canadian dollars. Include cash commissions, securities-based compens								
incidental to the distribution, such as clerical, printing, legal or account	ing services. An issuer is no	ot required to ask fo						
allocation arrangements with the directors, officers or employees of a n	on-individual compensate	ed by the issuer.						
Cash commissions paid 5,250.00		Security code 1	Security code 2	Security code 3				
Value of all securities distributed as compensation⁴	Security codes	WNT						
Describe terms of warrants, options or other righ	ts 10,500 Broker Wa	arrants exercisable	e at \$0.75 until	June 23, 2025				
Other compensation <sup>5</sup> Descri								
Total compensation paid								
Check box if the person will or may receive any deferred	compensation (describe t	the terms below)						
<sup>4</sup> Provide the aggregate value of all securities distributed as compens								
additional securities of the issuer. Indicate the security codes for all singhts exercisable to acquire additional securities of the issuer.	ecurities distributed as co	ompensation, <u>includ</u>	<u>ing</u> options, warra	ants or other				
<sup>5</sup> Do not include deferred compensation.								

a) Name of person compe	nsated and registrati	on status									
Indicate whether the person com	pensated is a registrant.		☐ No	$\checkmark$	Yes						
If the person compensated is an i	ndividual, provide the n	ame of the indivi	dual.								
Full legal name of individ	lual										
	Famil	y name	Firs	st given na	ame		Sec	ondary g	iven na	mes	
If the person compensated is not	an individual, provide tl	ne following infor	mation.								
Full legal name of non-individual GLORES SECURITIES INC											
Fir	Firm NRD number 7 0 1 8 0 (if applicable)										
Indicate whether the person com	pensated facilitated the	distribution thro	ugh a funding por	tal or an	internet	-based <sub>l</sub>	portal.	<b>√</b>	] No		Yes
b) Business contact inform	nation										
If a firm NRD number is not prov	ided in Item 8 (a), provid	de the business co	ontact information	n of the p	erson be	eing con	npensated.				
Street address											
Municipality				Pı	rovince	/State					
Country			Ī	Postal c	ode/Zip	code					
Email address				Teleph	none nu	ımber					
c) Relationship to issuer o	r investment fund ma	nager									
Indicate the person's relationship the Instructions and the meaning								onnecte	d" in P	art B	(2) of
Connect with the issue	r or investment fund ma	ınager		Insider	of the iss	suer (otl	ner than ar	n investi	ment fu	und)	
Director or officer of the	e investment fund or inv	estment fund ma	anager	Employe	ee of the	issuer	or investm	ent fund	d mana	ager	
✓ None of the above											
d) Compensation details											
Provide details of all compensation Canadian dollars. Include cash co- incidental to the distribution, such allocation arrangements with the	mmissions, securities-bo as clerical, printing, leg	sed compensational or accounting	n, gifts, discounts services. An issue	or other r is not re	compen equired t	sation. to ask fo	Do not rep	ort payn	nents f	or sei	vices
Cash commissions paid	22,750.0	0			Security of	code 1	Security of	ode 2	Secur	ity cod	de 3
Value of all securities distributed as compensation			Security codes	\	W N	Т					
•	ms of warrants, options	or other rights	17,500 Broke 2025.	r Warra	nts exe	rcisabl	e at \$0.85	5 until .	June 2	23,	
Other compensation <sup>5</sup>		Describe									
Total compensation paid	ı										
Check box if the pers	on will or may receive	any deferred con	npensation (desc	ribe the t	terms be	elow)					
<sup>4</sup> Provide the aggregate value of additional securities of the issue rights exercisable to acquire add <sup>5</sup> Do not include deferred compe	r. Indicate the security ditional securities of the	codes for all sec									r

a) Name of person com	pensated and reg	istration status							
Indicate whether the person co	mpensated is a regis	strant.	✓ No	Yes					
If the person compensated is a	n individual, provide	the name of the indivi	dual.						
Full legal name of indi	vidual								
		Family name	First gi	iven name	Secondary gi	ven names			
If the person compensated is n	•								
Full legal name	Full legal name of non-individual RBC Investor Services Trust in Trust for A/C 147622172								
F	irm NRD number			(if appl	icable)				
Indicate whether the person co	mpensated facilitate	ed the distribution throu	ıgh a funding portal	or an internet-based p	oortal.	No 🗌 Yes			
b) Business contact info	rmation								
If a firm NRD number is not pr	ovided in Item 8 (a),	provide the business co	ontact information o	f the person being com	pensated.				
Street address	2nd-380 Welling	ton St W							
Municipality	Toronto			Province/State	Ontario				
Country	Canada		Pos	stal code/Zip code	M5V 1E3				
Email address			Т	elephone number					
c) Relationship to issuer	or investment fur	nd manager	•						
Indicate the person's relationsh the Instructions and the meani					ning of "connected	d" in Part B(2) of			
Connect with the iss	uer or investment fu	nd manager	Ins	sider of the issuer (oth	ner than an investr	nent fund)			
Director or officer of	the investment fund	or investment fund ma	anager	mployee of the issuer	or investment fund	l manager			
✓ None of the above									
d) Compensation details	<b>.</b>								
Provide details of all compensa Canadian dollars. Include cash incidental to the distribution, so allocation arrangements with to	commissions, securions and as clerical, printion the directors, officers	ties-based compensationg, legal or accounting	n, gifts, discounts or services. An issuer is	other compensation. <i>E</i> not required to ask fo	Do not report paym	nents for services			
Cash commissions p	aid			Security code 1	Security code 2	Security code 3			
Value of all securiti distributed as compensation		;	Security codes	WNT					
Describe	terms of warrants, o	pptions or other rights	17,500 Broker W 2025.	Varrants exercisable	e at \$0.85 until J	une 23,			
Other compensation	on <sup>5</sup>	Describe							
Total compensation pa	aid								
Check box if the po	erson will or may re	ceive any deferred con	npensation (describe	e the terms below)					
<sup>4</sup> Provide the aggregate value additional securities of the iss rights exercisable to acquire a <sup>5</sup> Do not include deferred com	uer. Indicate the sec additional securities	curity codes for all sect	on, <u>excluding</u> option urities distributed as	s, warrants or other rig compensation, <u>includ</u>	ghts exercisable to ling options, warra	acquire nts or other			

a) Name of person compe	ensated and regis	stration status						
Indicate whether the person comp	pensated is a regist	trant.	✓ No		Yes			
If the person compensated is an i	individual, provide	the name of the indiv	ridual.					
Full legal name of individ	dual							
		Family name	'	First given	name		Secondary	given names
If the person compensated is not	an individual, prov	ide the following info	rmation.					
Full legal name o	of non-individual	Market Smart Co	mmunications	Inc.				
Firm	m NRD number					(if app	olicable)	
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.  V No Yes								
b) Business contact inform	nation							
If a firm NRD number is not prov	rided in Item 8 (a), <sub>I</sub>	provide the business o	contact informat	tion of the	e person	being cor	mpensated.	
Street address 4	09 Granville St							
Municipality V	'ancouver				Provinc	ce/State	British Colu	mbia
Country C	Canada		Ī	Postal	code/Z	Zip code	V6C 1T2	
Email address			Ī	Tele	phone	number		
c) Relationship to issuer of	r investment fun	d manager						
Indicate the person's relationship								ted" in Part B(2) of
the Instructions and the meaning			for the purposes	_	-			
Connect with the issuer	r or investment fur	nd manager	<u>L</u>	Inside	r of the	issuer (ot	her than an inve	stment fund)
Director or officer of the	e investment fund	or investment fund m	nanager	Emplo	yee of t	he issuer	or investment fu	ınd manager
✓ None of the above								
d) Compensation details								
Provide details of all compensatio								
Canadian dollars. Include cash co- incidental to the distribution, such								
allocation arrangements with the								,
Cash commissions paid	d 2,4	50.00			Securit	y code 1	Security code 2	Security code 3
Value of all securities			Security codes		W	N T		
distributed as compensation								
Describe ter	rms of warrants, op	otions or other rights	4,900 Broke	er Warra	ints exe	ercisable	at \$0.75 until	June 23, 2025.
Other compensation <sup>5</sup>		Describe						
Total compensation paid	t							
Check box if the pers	son will or may rec	eive any deferred co	mpensation (de	scribe the	e terms	below)		
<sup>4</sup> Provide the aggregate value of	all securities distri	buted as compensati	ion, <u>exc</u> ludina d	ptions, w	arrants	or other n	ights exercisable	e to acquire
additional securities of the issue rights exercisable to acquire add	er. Indicate the sec	urity codes for all sed						
<sup>5</sup> Do not include deferred compe								

тем 9 - Directors, Execu	TIVE OFFICERS	AND PROMOT	ERS OF THE ISS	SUER				
If the issuer is an investment fund	d, do not complete l	Item 9. Procced to	Item 10.					
Indicate whether the issuer is any o	f the following (select	t the one that appli	es - if more than one	applies, select onl	y one).			
✓ Reporting issuer in any juris	sdiction of Canada							
Foreign public issuer								
Wholly owned subsidiary of	a reporting issuer in	any jurisdiction of	Canada <sup>6</sup>					
Provide nan	ne of reporting issue	r						7
Wholly owned subsidiary of	a foreign public issu	uer <sup>6</sup>						_
Provide name of	foreign public issue	r						7
Issuer distributing only eligil	ble foreign securities	and the distribution	n is to permitted clie	ents only <sup>7</sup>				_
If the issuer is at least one of the	above, do not comp	olete Item 9(a) – (d	c). Proceed to Item	10.				
<sup>6</sup> An issuer is a wholly owned subside securities that are required by law to respectively. <sup>7</sup> Check this box if it applies to the collients. Refer to the definitions of "e.	o be owned by its dir urrent distribution evo	rectors, are benefic en if the issuer mad	ially owned by the re de previous distribut	eporting issuer or ti tions of other types	the foreign	public is	ssuer,	
If the issuer is none of the	above, check this b	oox and complete	Item 9(a) - (c).					
a) Directors, executive officer	s and promoters of	of the issuer						
Provide the following information for	•		moter of the issuer T	or locations within	Canada s	tate the	nrovince	or
territory; otherwise state the country.							province	
Organization or company name	Family name	First given name	Secondary given names			lationship to issuer elect all that apply)		
				Province or	country	D	0	Р
b) Promoter information								
If the promoter listed above is not an within Canada, state the province or								
Organization or company name	Family name	First given name	Secondary given names	Residential jurisdiction of individual			to promo	
				Province or country	D		C	)
c) Residential address of eac	h individual							
Complete Schedule 2 of this form completed report. Schedule 2 also					(a) and (b)	and at	tach to t	he

# **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 exemt 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/underwriter/ investment fund manager/agent	Eureka Lithium Corp.					
Full legal name	Bowra					
	Family name	First given name	<b>'</b>	Seconda	ary given na	ames
Title	Chief Financial Officer					
Telephone number	*******	Email address	*****	*****		
Signature	"Gareth Bowra"	Date	2023	06	30	
		_	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	Gilchrist	Jamey		Title	Paralegal			
	Family name	First given name	Secondary given names	_				
Name of company	DLA Piper LLP							
Telephone number	******	Em	ail 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.

The attached 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 Schedules 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.