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 04 30 (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).
☐ 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 Cascade Copper Corp. / Cascade Copper Corp.
Previous full legal name
If the issuer's name changed in the last 12 months, provide most recent previous legal name.
Website www.cascadecopper.com (if applicable)
If the issuer has a legal entity identifier, provide below. Refer to Part B of the Instructions for the definition of "legal entity identifier".
Legal entity identifier
If two or more issuers distributed a single security, provide the full legal name(s) of the co-issuer(s) other than the issuer named above.
Full legal name(s) of co-issuer(s) (if applicable)
ITEM 4 - UNDERWRITER INFORMATION
If an underwriter is completing the report, provide the underwriter's full legal name, firm NRD number, and SEDAR+ profile number.
Full legal name
Firm NRD number (if applicable)
SEDAR+ profile number

ITEM 5 - ISSUER INFORMATION	
If the issuer is an investment fund, do not complete Item 5. Proceed to Item 6.	
a) Primary industry	
Provide the issuer's North American Industry Classification Standard (NAICS) code (6 digits only) that in your reasonable judgment most closely corresponds to the issuer's primary business activity.	nt
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 iss operating in the mining industry. Select the category that best describes the issuer's stage of operations.	uers
✓ 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 compan	ies
☐ Cryptoassets	
b) Number of employees	
Number of employees:	
c) SEDAR+ profile number	
Provide the issuer's SEDAR+ profile number	
000055794	
ITEM 6 - INVESTMENT FUND ISSUER INFORMATION	
If the issuer is an investment fund, provide the following information.	
a) Investment fund manager information	
a) investment rand manager information	
Full legal name	
Firm NRD number (if applicable)	
SEDAR+ profile number	
b) Type of investment fund	
Type of investment fund that most accurately identifies the issuer (select only one).	
☐ Money market ☐ Equity ☐ Fixed income ☐ Balanced	
☐ Alternative strategies ☐ Cryptoasset ☐ Other (describe)	7

Indicate whether one or both of the following apply to the investment fund.											
☐ Invest	primarily in o	ther investment fund issuers									
☐ Is a UC	☐ Is a UCITs Fund ¹										
_	-	e Investment of Transferable Securities funds (U				Inion (EU) directives					
that allow col	that allow collective investment schemes to operate throughout the EU on a passport basis on authorization from one member state.										
c) Ne	c) Net asset value (NAV) of the investment fund										
Select the N	IAV range of th	e investment fund as of the date of the	most recent NAV calc	ulation (Canadiaı	ı \$).						
☐ Under		☐ \$5M to under \$25M	s25M to und		Date of NAV	calculation:					
			_								
\$100M	l to under \$50	00M	\$1B or over		YYYY	MM DD					
ITEM 7 –	INFORM	ATION ABOUT THE DISTRIB	UTION								
lf an issuer	located outsid	le of Canada completes a distribution in	a jurisdiction of Can	ada. include in Ite	em 7 and Sch	edule 1					
information	n about purch	asers resident in that jurisdiction of Can	ada only. Do not incl	ude in Item 7 secu	ırities issued	as payment of					
		ees, in connection with the distribution, h the information provided in Schedule		sed in Item 8. The	information	provided in					
		Title Injormation provided in Schedule	r oj tne report.								
a) Cı	urrency										
Select the currency or currencies in which the distribution was made. All dollar amounts provided in the report must be in Canadian dollars.											
✓ Canad	ian dollar	US dollar Euro Other (describe)								
h) Di	istribution c	lates									
0) 01	istribution t	idics									
		t and end dates. If the report is being fil									
		oth the start and end dates. If the repor dates for the distribution period covere		urities distribued	on a continu	ous basis,					
				2024	04 00						
	Start date	2024 04 29	End date	2024	04 29						
		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											
				D. C D A.(4	2) (6 1					
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.	•	serif previous gare eees messacif mans	and the fam of angle do		,	cay 2 cg					
					Canadian \$						
Sognific	CUSIP		Number of	Cingle av	Highast						
Security code	number (if applicable)	Description of security	securities	Single or lowest price	Highest price	Total amount					

4,555,000.0000

0.0500

0.0500 227,750.0000

UNT

147190102 Units comprised of 1 common sh

are and 1 common share purchas e warrant exercisable @\$0.08 for		
18 moth		

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 security code	Exercise price (Canadian \$)		Expiry date (YYYY-MM- DD)	Conversion ratio	Describe other terms (if applicable)
security code	ity code Security code Lowest Highest		Highest	,		аррисавіе)
WNT	CMS	0.0800		2025-10-19	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 purchasers ^{2a}	Total amount (Canadian \$)				
Alberta	NI 45-106 2.3 [Accredited investor]	7	66,000.0000				
Alberta	Existing security holder exemption	9	43,450.0000				
Alberta	Investment dealer exemption (BC, AB, SK, MB, NB)	2	7,300.0000				
British Columbia	NI 45-106 2.3 [Accredited investor]	1	20,000.0000				
British Columbia	Existing security holder exemption	1	10,000.0000				
Ontario	NI 45-106 2.3 [Accredited investor]	4	46,500.0000				
Ontario	NI 45-106 2.5 [Family, friends and business associates]	2	7,500.0000				
Panama	NI 45-106 2.3 [Accredited investor]	2	20,000.0000				
Québec	NI 45-106 2.3 [Accredited investor]	1	7,000.0000				
	\$227,750.0000						
	Total number of unique purchasers ^{2b}						

^{2a} 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,

^{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.

include net proceeds for that jurisdiction of Canada only. For jurisdictions within Canada, state the province or territory, otherwise state the country.

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

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

ITEM 8 - COMPENSATION INFORMATION Provide information for each person (as defined in 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. **Complete additional** 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. If yes, indicate number of persons compensated. 2 ☐ No ✓ Yes 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 given names If the person compensated is not an individual, provide the following information. Full legal name of non-individual LEEDE JONES GABLE INC. Firm NRD number (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 contact information of the person being compensated. Street address | 421 7 Ave Sw #3415, Calgary, Ab Municipality | Calgary Province/State Alberta Country Canada Postal code/Zip code T2P 4K9 Email address | info@leedejonesgable.com Telephone number | +1 (403) 531-6800 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 meaning of 'connected' in Part B(2) of the Instructions and the meaning of 'control' in section 1.4 of NI 45-106 (in Québec, Regulation 45-106 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 a Provide all amounts in Canadian dollars. Include cash come compensation. Do not report payments for services incider services. An issuer is not required to ask for details about, or employees of a non-individual compensated by the issue	nmissions, securitie ntal to the distribut or report on, intern	s-based compensat ion, such as clerical	ion, gifts, discount. , printing, legal or	s or other accounting
Cash commissions paid	\$12,100.0000			
Value of all securities distributed as compensation ⁴				
Security codes	Security code 1	Security code 2	Security code 3	
Security codes	WNT			
Describe terms of warrants, options or other rights Other compensation ⁵ Describe	242,000 Finder W shares at \$0.05 w	arrants exercisabl vithin 18 months	e into common	
Total compensation paid	\$12,100.0000			
Check box if the person will or may receive any def	erred compensation	on (describe the te	erms below)	
⁴ Provide the aggregate value of all securities distributed as compensations securities of the issuer. Indicate the security codes for all securities distributed 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 Exemptions) to whom the issuer directly provides, or will provide, any compensation in connection with the distribution. **Complete additional** 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. ☐ No If yes, indicate number of persons compensated. 2 ✓ Yes 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 given names If the person compensated is not an individual, provide the following information. Full legal name of non-individual Haywood Securities Inc. Firm NRD number (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 contact information of the person being compensated. Street address 200 Burrard Street, Suite 700 Municipality Vancouver Province/State | British Columbia Country Canada Postal code/Zip code V6C 3L6 Email address | info@haywood.com Telephone number | +1 (604) 697-7100 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 meaning of 'connected' in Part B(2) of the Instructions and the meaning of 'control' in section 1.4 of NI 45-106 (in Québec, Regulation 45-106 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 Provide all amounts in Canadian dollars. Include cash concompensation. Do not report payments for services incide services. An issuer is not required to ask for details about, or employees of a non-individual compensated by the issuer	nmissions, securitie ntal to the distribut or report on, intern	s-based compensat ion, such as clerical	ion, gifts, discounts , printing, legal or	s or other accounting
Cash commissions paid	\$960.0000		7	
Value of all securities distributed as compensation ⁴				
	Security code 1	Security code 2	Security code 3	
Security codes	WNT			
Describe terms of warrants, options or other rights	19,200 Finder Wa shares at \$0.05 w	rrants exercisable vithin 18 months	into common	
Other compensation ⁵			7	
Describe			i	
Describe				
Total compensation paid	\$960.0000		7	
Check box if the person will or may receive any def	erred compensati	on (describe the te	rms 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 9 – DIRECTORS, EXECUTIVE OFFICE	DC AND DDON	AOTERS OF TH	HE ICCLIED	
			HE ISSUEK	
If the issuer is an investment fund, do not complete It	em 9. Proceed to I	tem 10.		
to disease wheels with a second secon		:6 41		
Indicate whether the issuer is any of the following (select to	ne 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 a	ny jurisdiction of C	anada ⁶		
Provide name of reporting issuer	iy jarisarenon or e			
_	6			
Wholly owned subsidiary of a foreign public issuer	0			
Provide name of foreign public issuer				
Issuer distributing only eligible foreign securities and	nd the distribution	is to permitted cli	ents only ⁷ .	
If the issuer is at least one of the above, do not compl	ete Item 9(a) – (c).	Proceed to Item 1	0.	
⁶ An issuer is a wholly owned subsidiary of a reporting issu		• •		-

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, e	xecutive (officers an	d promoters o	f 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	Family	First	Secondary	Business location of non-individual or residential jurisdiction of	Relationship to issuer			

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	P

b) Promoter information

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

Organization or	Family	First given Secondary given		Residential jurisdiction of individual	•	promoter (select if applicable)
company name	name	name	names -	Province or country	D	О

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 CASCADE COPPER CORP. manager/agent					
Full legal name	ACKERT	Jeffrey		S.	
	Family name	First give	en name	Secondary given names	_
Title	PRESIDENT, CEO AND DIRECTOR				
Telephone number	+1 (613) 851-7669	Email address	jackert@casca	decopper.com	
Signature	"Jeffrey Ackert"	Date	2024 YYYY	04 30 MM DD	

ITEM 11 - CONTACT PERSON

Telephone number | +1 (403) 237-0018

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

SALEM

Norma

Family name

First given name

Secondary given names

Title

PARALEGAL

Name of company

HEIGHINGTON LAW

Email address | norma@hlf.ca

NOTICE - COLLECTION AND USE OF PERSONAL INFORMATION

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

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

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

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