Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 10090625

ITEM 1 - REPORT TYPE								
☐ New report								
✓ Amended report If amend								
ITEM 2 - PARTY CERTIFYING THE F	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	ous Disclosure und the compl	amon policy to tvi o i-	- 100.					
✓ Issuer (other than an investm	nent fund)							
Underwriter	nom rama,							
ITEM 3 - ISSUER NAME AND OTHE								
Provide the following information about the i		vestment fund, about	the fund.					
Full legal name	Allied Copper Corp.							
Previous full legal name								
If the issuer's name changed in the lo	ast 12 months, provide most i	recent previous legal i	name.					
Website h	nttps://www.alliedcoppe	ercorp.com/	(if applicable	e)				
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 sect	urity, provide the full legal no	ıme(s) of the co-issue	er(s) other the	an the issuer named above.				
Full legal name(s) of co-issuer(s)		((if applicable	2)				
ITEM 4 - UNDERWRITER INFORMA	TION							
If an underwriter is completing the report, provide the underwriter's full legal name and firm NRD number.								
Full legal name								
Firm NRD number (if applicable)								
If the underwriter does not have a firm NRD number, provide the head office contact information of the underwriter.								
Street address								
Municipality		Provin	nce/State		1			
Country		Postal code/	Zip code		ı			
Telephone number			Website		(if applicable)			

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 octivity. NAICS industry, code 2 1 2 2 9 9 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	Item 5 - Issuer Information
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	If the issuer is an investment fund, do not complete Item 5. Proceed to Item 6.
SEDAR profile number Does the issuer have a SEDAR profile Complete item 5(d) - (h).	a) Primary industry
If the issuer is in the mining industry, indicate the stage of operations. This does not apply to issuers that provide services to issuers aperating 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	NAICS industry code 2 1 2 2 9 9
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	mining industry. Select the category that best describes the issuer's stage of operations.
Mortgages	
Cryptoassets	
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 0 8 9 5 5 If the issuer does not have SEDAR profile complete item 5(d) - (h). d) Head office address Street address Municipality Country Postal code/Zip code Country Telephone number e) Date of formation and financial year-end Date of formation Financial year-end 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. All AB BC MB NB NB NL NT NS NU ON PE QC SK YT	b) Number of employees
Does the issuer have a SEDAR profile? No	Number of employees: ✓ 0 - 49 ☐ 50 - 99 ☐ 100 - 499 ☐ 500 or more
No ✓ Yes If yes, provide SEDAR profile number 0	c) SEDAR profile number
If the issuer does not have SEDAR profile complete item 5(d) - (h). d) Head office address Street address Province/State Postal code/Zip code Country Telephone number Date of formation and financial year-end Date of formation YYYY MM DD Financial year-end 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. All AB BC MB NB NB NL NT NS NU ON PE QC SK YT Povince/State Province/State Province/State Postal code/Zip code Telephone number No Yes No NB NB NL NT SNS NU ON PE QC SK YT	Does the issuer have a SEDAR profile?
Street address Province/State Postal code/Zip code Country Telephone number e) Date of formation and financial year-end Date of formation Financial year-end Date of formation 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. All AB BC MB NB NB NL NT NS NU ON PE QC SK YT g) Public listing status	No ✓ Yes If yes, provide SEDAR profile number 0 0 0 0 8 9 5 5
Street address	
Municipality Postal code/Zip code 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. All AB BC MB NB NB NL NT NS NU ON PE QC SK YT g) Public listing status	d) Head office address
Country Telephone number Pate of formation and financial year-end Date of formation Tinancial year-end Tinancial year-end No No No Tinancial year-end No No No Tinancial year-end No No No No Tinancial year-end No No No No Tinancial year-end No No No No No Tinancial year-end No No No No No No No No No N	Street address Province/State
e) Date of formation and financial year-end Date of formation	Municipality Postal code/Zip code
Date of formation	Country Telephone number
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. All AB BC MB NB NL NT NS NU ON PE QC SK YT g) Public listing status	e) Date of formation and financial year-end
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. All AB BC MB NB NL NT NS NU ON PE QC SK YT g) Public listing status	
If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer. All AB BC MB NB NL NT NS NU ON PE QC SK YT g) Public listing status	f) Reporting issuer status
AII	Is the issuer a reporting issuer in any jurisdication of Canada? No Yes
NS NU ON PE QC SK YT g) Public listing status	If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer.
g) Public listing status	AII AB BC MB NB NL NT
	NS NU ON PE QC SK YT
If the issuer has a CUSIP number, provide below (first 6 diaits only)	g) Public listing status
CUSIP number	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	Exchange name
h) Size of issuer's assets	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	it most accurately identifies the issuer (select only one) .			
Money market	☐ Equity ☐ Fixed income ☐ Balanced			
Alternative strate	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				
	tive Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union ollective investment schemes to operate throughout the EU on a passport basis on authorization from one member state.			
c) Date of formation a	nd financial year-end of the investment fund			
Date of forma	tion Financial year-end 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 T			
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			
If the investment fund is publicly listed, provide the name of the exchange on which the investment fund's securities primarily trade. Provide only the name of an exchange and not a trading facility such as, for example, an automated trading system.				
Exchange on				
-	AV) of the investment fund			
Select the NAV range of the investment fund as of the date of the most recent NAV calculation (Canadian \$).				
\$0 to under \$5M	\$5M to under \$25M \$25M to under \$100M			
\$100M to under \$500	DM S500M to under \$1B S1B 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	
u,	, Carroncy	

Select the currency or currencies in which the distribution was made. All dollar amounts provided in the report must be in Canadian dollars.

b) Distribution date(s)

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 02 24

YYYY MM DD

End date 2023 02 24

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 \$	
	ecurit code	,	CUSIP number (if applicable)			Single or lowest price	Highest price	Total amount
U	В	S	91728E	Units, consisting of one common share and one-half of one common share purchase warrant	20,000,000.00	0.2000	0.2000	4,000,000.00

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		, ,		•		se price adian \$)	Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other items (if applicable)	
							Lowest	Highest			
,	W	N	Т	С	М	S	0.3000		2025-02-24	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 ²⁸ purchasers	Total amount (Canadian \$)
British Columbia	NI 45-106 2.3 [Accredited investor]	32	1,256,034.00
British Columbia	NI 45-106 2.5 [Family, friends and business associates]	2	39,925.20
Alberta	NI 45-106 2.3 [Accredited investor]	24	438,166.60
Alberta	NI 45-106 2.5 [Family, friends and business associates]	5	47,500.00
Ontario	NI 45-106 2.3 [Accredited investor]	22	984,548.40
Saskatchewan	NI 45-106 2.3 [Accredited investor]	1	10,000.00

	Total number of unique purchasers ² b 107				
	4,000,000.00				
Switzerland	NI 45-106 2.3 [Accredited investor]	1	75,000.00		
Germany	NI 45-106 2.3 [Accredited investor]	3	147,500.00		
Australia	NI 45-106 2.5 [Family, friends and business associates]	1	10,000.00		
Australia	NI 45-106 2.3 [Accredited investor]	1	195,625.80		
Monaco	NI 45-106 2.3 [Accredited investor]	1	100,000.00		
Czech Republic	Other	1	10,000.00		
Indonesia	Other	1	60,000.00		
Cyprus	NI 45-106 2.3 [Accredited investor]	1	25,000.00		
Nicaragua	Other	1	40,000.00		
Thailand	NI 45-106 2.3 [Accredited investor]	1	200,000.00		
United Kingdom	Other	1	164,000.00		
United States	NI 45-106 2.3 [Accredited investor]	6	190,000.00		
Saskatchewan	NI 45-106 2.5 [Family, friends and business associates]	2	6,700.00		

^{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, 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.

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)

^{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.

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. 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.	ITEM 8 - COMPENSATION INFORMATION						
□ No □ Yes If yes indicate number of persons compensated □ 4	Indicate whether any compensation was paid, or will be paid, in connection with the distribution.						
in yes, indicate number of percents compensated.	No ✓ Yes If yes, indicate number of persons compensated. 4						

a) Name of person compen	sated and registra	ation status										
Indicate whether the person comp	Indicate whether the person compensated is a registrant. No Ves											
If the person compensated is an individual, provide the name of the individual.												
Full legal name of individu	ıal											
	Far	mily name	Fir	st given n	ame	l	Seco	ondary given	names			
If the person compensated is not an individual, provide the following information.												
Full legal name of	Full legal name of non-individual RAYMOND JAMES LTD.											
Firm NRD number 8 2 4 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 provid	led in Item 8 (a), pro	vide the business c	ontact informatio	n of the p	person beir	ng comp	oensated.					
Street address												
Municipality				Р	rovince/S	State						
Country			ا آ	Postal c	code/Zip c	code						
Email address			<u> </u>	Telep	hone nun	nber						
c) Relationship to issuer or	investment fund r	nanager										
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				-	-		er than an	investment	fund)			
Director or officer of the		-	anager \square			,		ent fund ma	,			
None of the above		nvestment rana m	инадет	Linploy		00001 0	i iiivootiiik	one rana ma	nagei			
d) Compensation details	.,					., ,,						
Provide details of all compensation Canadian dollars. Include cash con incidental to the distribution, such allocation arrangements with the a	nmissions, securities- as clerical, printing, l	based compensation	on, gifts, discounts services. An issue	s or other er is not r	r compenso required to	ation. Do ask for	o not repo	rt payments	s for se	rvices		
Cash commissions paid	14,000	.00			Security cod	de 1	Security co	nde 2 Sec	urity co	de 3		
Value of all securities			Security codes		W N	Т						
distributed as compensation ⁴ Describe term	s of warrants, optic	ns or other rights	70,000 finder							nal		
			common shar	re for a	period for	r two y	ears at \$	0.30 per s	hare.			
Other compensation ⁵		Describe										
Total compensation paid	14,000	.00										
Check box if the person	n will or may receiv	e any deferred cor	mpensation (desc	ribe the	terms belo	ow)						
⁴ Provide the aggregate value of a	Il securities distribut	ted as compensati	on, <u>excluding op</u> t	ions, wa	errants or o	ther rigi	hts exerci	sable to acc	uire			
additional securities of the issuer. rights exercisable to acquire addi	Indicate the securit tional securities of th	y codes for all sec	urities distributed	as com	pensation,	<u>includii</u>	ng options	s, warrants o	or othe	er		
⁵ Do not include deferred compen-	sation.											

a) Name of person comper	nsated and regist	ration 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 individ	ual										
	F	amily name	'	First give	en name		Second	ary given nan	nes		
If the person compensated is not an individual, provide the following information.											
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 compensated facilitated the distribution through a funding portal or an internet-based portal. Ves											
b) Business contact information											
If a firm NRD number is not provi	ded in Item 8 (a), pr	ovide the busines	s contact info	rmation of t	he person bei	ng compe	ensated.				
Street address											
Municipality					Province/S	State					
Country				Posta	al code/Zip	code					
Email address				Tel	lephone nur	mber					
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 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		-	manager	_	loyee of the i	•			,		
None of the above					,				5 -		
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	70	0.00			Security co	de 1 S	Security code	2 Securit	y code 3		
Value of all securities distributed as compensation ⁴			Security c	odes	WN	Т					
Describe terr	ms of warrants, opt	ions or other right			ants exercis						
Other compensation ⁵		Describ			.,						
Total compensation paid	70	0.00									
Check box if the person will or may receive any deferred compensation (describe the terms below)											
⁴ Provide the aggregate value of a additional securities of the issuer rights exercisable to acquire addi ⁵ Do not include deferred compen	. Indicate the secui itional securities of	rity codes for all s	ation, <u>excluo</u> ecurities dist	ing options, ributed as co	warrants or compensation,	other right including	es exercisal g options, v	ble to acquii varrants or o	re other		

a) Name of person comper	nsated and regis	stration	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 individe	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	ACUM	IEN CAPIT	AL FINAN	ICE PA	RTNE	ERS L	_IMI	ΓED					
Firm NRD number 6 0 7 0 (if applicable)														
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. Ves														
b) Business contact information														
If a firm NRD number is not provid	ded in Item 8 (a), բ	orovide t	he business (contact info	ormation	of the	perso	n bei	ng com	pensated.	•			
Street address														
Municipality						F	Provir	nce/S	State					
Country					Р	ostal	code/	Zip (code					
Email address				Ī		Telep	phone	e nur	mber					
c) Relationship to issuer or investment fund manager														
Indicate the person's relationship the Instructions and the meaning				-						ning of "c	connect	ed" in I	Part I	B(2) of
Connect with the issuer	or investment fun	d mana	ger		□ '	Insider	of the	e issu	er (oth	er than a	n inves	tment t	fund)	
Director or officer of the	investment fund	or invest	ment fund n	nanager		Emplo	yee of	the i	ssuer o	or investn	nent fur	nd man	nager	
✓ 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 o	nmissions, securiti as clerical, printin	es-basea g, legal o	compensation accounting	ion, gifts, di g services. A	scounts d An issuer	or othe is not	er com requir	penso ed to	ation. D ask for	o not rep	ort pay	ments	for se	ervices
Cash commissions paid	3,0	22.00					Secur	rity co	de 1	Security	code 2	Secu	rity co	ode 3
Value of all securities distributed as compensation ⁴				Security c	odes		W	N	Т					
Describe terr	ms of warrants, op	otions or	other rights							to purch				
Other compensation ⁵			Describe		- Criare) 101 u	ропс	<u> </u>		- Caro at	Ψ0.00	 	iaio.	
Total compensation paid	3,02	22.00												
Check box if the person	on will or may rece	eive any	deferred co	mpensatio	n (descri	ibe the	terms	s belo	ow)					
⁴ Provide the aggregate value of a additional securities of the issuer rights exercisable to acquire addi ⁵ Do not include deferred compen	r. Indicate the secu itional securities o	ırity cod	es for all sed											er

a) Name of person compe	ensated and registra	ation 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 indivi	dual										
Family name First given name Secondary given names										ies	
If the person compensated is not an individual, provide the following information.											
Full legal name of	of non-individual IN	ITRYNSYC CAF	PITAL CORPOR	RATION							
Firm NRD number 3 0 0 8 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 prov	vided in Item 8 (a), pro	vide the business co	ontact informatio	n of the p	erson be	ing con	npensated.				
Street address											
Municipality				Pr	rovince/	State					
Country				Postal co	ode/Zip	code					
Email address				Telepl	hone nu	ımber					
c) Relationship to issuer or investment fund manager											
Indicate the person's relationship the Instructions and the meaning							ning of "co	onnected	l" in Pai	rt B(2) of	
Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund)											
Director or officer of th	e investment fund or i	nvestment fund ma	anager	Employe	ee of the	issuer	or investme	ent fund	manag	ger	
None of the above											
d) Compensation details											
Provide details of all compensation Canadian dollars. Include cash continuity incidental to the distribution, such allocation arrangements with the	mmissions, securities- h as clerical, printing, l	based compensatic egal or accounting	n, gifts, discounts services. An issue	or other er is not re	compen equired t	sation. I o ask fo	Do not repo	rt paym	ents for	r services	
Cash commissions paid	82,480	.00		3	Security c	ode 1	Security co	ode 2	Security	code 3	
Value of all securities distributed as compensation			Security codes	\	W N	Т					
•	rms of warrants, optio	ns or other rights	412,400 finde								
Other compensation	5	Describe	COMMON SHAR		Jenou II	JI WO	years at ψ	0.50 pt	51 31101	6.	
Total compensation paid	d 82,480.	00									
Check box if the pers	son will or may receive	any deferred cor	npensation (desc	ribe the t	terms be	low)					
⁴ Provide the aggregate value of additional securities of the issue rights exercisable to acquire add ⁵ Do not include deferred compe	er. Indicate the security ditional securities of th	y codes for all sec	on, <u>excluding</u> opt urities distributea	ions, war I as comp	rrants or pensation	other riç n, <u>includ</u>	ghts exercis <u>ling</u> options	sable to s, warrai	acquire nts or o	e ther	

тем 9 - Directors, Execu	TIVE OFFICERS	AND PROMOT	ERS OF THE ISS	SUER								
If the issuer is an investment fund, do not complete Item 9. Procced 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 any juris	sdiction 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 issue	r						7				
Issuer distributing only eligil	ble foreign securities	and the distribution	n is to permitted clie	ents only ⁷				_				
If the issuer is at least one of the	above, do not comp	olete Item 9(a) – (d	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 officer	e and promoters of	of the issuer										
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.							province					
Organization or company name	Family name	First given name	Secondary given names	Business loc non-individi resident jurisdictio individu	ual or ail n of		onship to					
				Province or	Province or country		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	Relationsl (select one or							
				Province or country	1		C)				
c) Residential address of each 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	Allied Copper Corp.										
Full legal name	Hookey	Kyle									
	Family name	First given name	-	Seconda	ary given na	ames					
Title	Director										
Telephone number	61431920389	Email address khoo				I					
Signature	"Kyle Hookey"	Date	2023	06	20						
			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	Knappe	Sara				Title	Corporate Secretary				
	Family name	First given	name	Secondary	given names						
Name of company	CRONIN SERVICES LT										
Telephone number	7783863642		Em	ail address	SKNAPPE@	CRONI	NCAPITAL.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.

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.