Form 45-106F1 Report of Exempt Distribution

IT IS AN OFFENCE TO MAKE A MISREPRESENTATION IN THIS REPORT

ITEM 1 - REPORT TYPE									
 New report Amended report If amended, provide filing date of report that is being amended (YYYY-MM-DD) 									
ITEM 2 - PARTY CERTIFYING THE	Report								
Indicate the party certifying the report (select only one). For guidance regarding whether an issuer is an investment fund, refer to section 1.1 of National Instrument 81-106 Investment Fund Continuous Disclosure and the companion policy to NI 81-106.									
Investment fund issuer									
✓ Issuer (other than an investment fund)									
Item 3 - Issuer Name and Oth									
Provide the following information about the		vestment fund, about the fund.							
Full legal name	Walker River Resource								
Previous full legal name									
If the issuer's name changed in	the last 12 months, provide mo	ost recent previous legal name.							
Website			(if applicable)						
If the issuer has a legal entity identifier, pro	vide below. Refer to Part B of t	the Instructions for the definition	of "leaal entitv identifier".						
Legal entity identifier									
· · · · · · · · · · · · · · · · · · ·									
ITEM 4 - UNDERWRITER INFORM	ATION								
If an underwriter is completing the report, p	provide the underwriter's full le	gal name and firm National Reg	istration Database (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		Province/State							
Country		Postal code/Zip code							
Telephone number		Website	(if applicable)						

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 corresponds to the issuer's primary business activity. For more information on finding the NAICS industry code go to Statistics Canada's NAICS industry search tool. NAICS industry code 2 1 2 2 2 1							
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.							
Is the issuer's primary business is to invest all or substantially all of its assets in any of the following? If yes, select all that apply. Image:							
b) Number of employees							
Number of employees: 🔽 0 - 49 □ 50 - 99 □ 100 - 499 □ 500 or more							
c) SEDAR profile number							
Does the issuer have a SEDAR profile? No Yes If yes, provide SEDAR profile number 0 0 3 2 7 6 4 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 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.							
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 names of all exchanges on which its securities are listed. Include only the names of exchanges for which the issuer has applied for and received a listing, which excludes, for example, automated trading systems.							
Exchange name(s):							
h) Size of issuer's assets							
Select the size of the issuer's assets for its most recent financial year-end (Canadian \$). If the issuer has not existed for a full 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							
S100M to under \$500M S500M to under \$1B \$1B or over							

ITEM 6 - INVESTMENT FUND ISSUER INFORMATION								
If the issuer is an investi	If the issuer is an investment fund, provide the following information.							
a) Investment fund manager information								
Full legal name	ull legal name							
Firm NRD number	(if applicable)							
If the investment fund man	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 that	most accurately identifies the issuer (select only one) .							
Money market	Equity Fixed income							
Balanced	Alternative strategies Other (describe)							
Indicate whether one or both	of the following apply to the investment fund .							
Invests primarily in	other investment fund issuers							
Is a UCITs Fund ¹								
¹ Undertaking for the Collectiv directives that allow collective	re Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) e investment schemes to operate throughout the EU on a passport basis on authorization from one member state.							
	nd financial year-end of the investment fund							
Date of formati								
	YYYY MM DD MM DD							
d) Reporting issuer sta	atus of the investment fund							
	orting issuer in any jurisdication of Canada? 🔲 No 🗌 Yes							
If yes, select the jurisdictions of All	of Canada in which the investment fund is a reporting issuer. AB BC MB NL NT							
e) Public listing status	NU ON PE QC SK YT 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 names of all exchanges on which its securities are listed. Include only the names of exchanges for								
which the issuer has applied for and received a listing, which excludes, for example, automated trading systems.								
Exchange name	Exchange names							
f) Net asset value (NA	V) of the investment fund							
-	nvestment fund as of the date of the most recent NAV calculation (Canadian \$).							
\$0 to under \$5M	S5M to under \$25M \$25M to under \$100M							
\$100M to under \$500								
	YYYY MM DD							

ITEN	TEM 7 - INFORMATION ABOUT THE DISTRIBUTION																			
pur	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, which should 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.																			
v	Canadian dollar US dollar Euro Other (describe)																			
b)		Distri																		
	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.																			
						Sta	rt date													
								YYYY	MM	DD				Y	YYY	MM	DD			
c)	Ľ	Detai	led p	ourc	hase	er inf	forma	tion												
Con	npl	ete S	che	dule	e 1 o	of th	is forı	m for ea	ch purchas	ser ar	nd attac	h the sche	dule to t	the co	mpleted	l repo	rt.			
d)	٦	Гуре	s of	seci	uritie	es di	stribut	ted												
									butions that									Part A of the to the security	hoing	
d	istri	buted	. The	e info														e our <u>Frequer</u>		
<u>A</u>	sked	d Que	stion	<u>15.</u>													O a sa a di a sa ƙ			
														Si	ngle or		Canadian \$			
		ecurity code		USIP (if app				Desc	ription of secu	rity		Number of securities		lowest		High	Highest price		Total amount	
							Units	consist	ing of one	e (1)		10,000),000.00		0.0700		0.0700	700,0	700,000.00	
	U	B	S	931	1778				re and on											
									re purcha											
e) If									hangeable			price and exi	pirv date f	or eacl	h riaht. If c	nv cor	vertible/e	xchangeable s	ecurities	
									and describe											
	:	Securi code			derlyi urity c				se price dian \$)			ry date - MM-DD)	Convers	version atio Describe other items (if applicable)						
				5000	unty c		Lc	owest	Highest		(Talk							
								0.1200	0.1	200				10,000,000 common share purchase warrants, each						
	N	/				6					2010	05.01		convertible into a common						
	1	/ N	Т	С	Μ	S					2018	9-05-01		share of the issuer at an						
															exercise price of \$0.12 until May 1, 2019					
f)	S	umm	narv	of th	ne di	istrik	oution	by jurisd	liction and	exem	ption								J	
,											-	ourchasers fo	r each juri	isdictio	n of Cana	da ana	l foreign ju	risdiction whe	re a	
									ed on in Can e distribution								e of Canad	a completes a		
																	in the juris	diction where	а	
		naser i liction		es, if	a pu	rchas	ser resi	des in a ju	irisdiction of	Canad	da, and (i	ii) each exen	nption reli	ed on i	n Canada	, if a pi	urchaser re	sides in a fore	ign	
				with	nin C	anaa	la, stat	e the prov	ince or territ	ory, ot	herwise s	tate the cou	ntry.							
			Province or Exemption relied on								ber of hasers		Total amou	nt (Canadian \$)						
			А	lber	ta		٩	VI 45-10	6 2.3 [Acc	credit	ed inve	estor]			1			39,060	0.00	
		Bri	tish	Со	lum	bia	Ν	VI 45-10	6 2.3 [Acc	credit	ed inve	estor]			1			7,000	0.00	
		l	Nov	a S	coti	а	Ν	VI 45-10	6 2.3 [Acc	credit	ed inve	estor]			1	1		90,000	0.05	
			0	nta	rio		Ν	NI 45-10	6 2.3 [Acc	credit	ed inve	estor]			17			465,939	9.95	
			Q	uéb	ec			NI 45-10 Issociat	6 2.5 [Far es]	nily,	friends	and busir	ness		1			28,000	0.00	

5	70,000.00					
rities distributed	700,000.00					
Total number of unique purchasers ² 26						
ri						

²In calculating the total number of unique purchasers to which the issuer distributed securities, count each purchaser only once, regardless of whether the issuer distributed multiple types of securities to, and relied on multiple exemptions for, that purchaser.

g) Net proceeds to the investment fund by jurisdiction

If the issuer is an investment fund, provide the net proceeds to the investment fund for each jurisdiction of Canada and foreign jurisdiction where a purchaser resides.³ If an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include net proceeds for that jurisdiction of Canada only. For jurisdictions within Canada, state the province or territory, otherwise state the country.

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

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

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)

ITEM 8 - COMPENSATION INF	ORMATION						
	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 wo	Indicate whether any compensation was paid, or will be paid, in connection with the distribution.						
□ No 🗹 Yes If	No Ves If yes, indicate number of persons compensated.						
a) Name of person compensate	ed and registration status						
Indicate whether the person compe	nsated is a registrant.	No 🔽	🖉 Yes				
If the person compensated is an indiv	idual, provide the name of the ind	ividual.					
Full legal name of individual							
Family name First given name Secondary given names							
If the person compensated is not an	individual, provide the following i	nformation.					
Full legal name of non-	individual Industrial Alliance	Securities Inc.					
Firm NR	D number		(if appl	icable)			
Indicate whether the person compen		nrough a funding porta					
b) Business contact information	I.						
If a firm NRD number is not provided	in Item 8 (a), provide the business	contact information of	^f the person being co	ompensated.			
Street address 900 - 2	6 Wellington St. E.						
Municipality Toronto)		Province/State	Ontario			
Country Canada	а	- Posta	al code/Zip code	M5E 1S2			
	o@iagto.ca	1	ephone number	4168642695			
c) Relationship to issuer or inve	-						
Indicate the person's relationship with	the issuer or investment fund ma						
B(2) of the Instructions and the mean	-						
Connect with the issuer or inv	-			er than an investment fund)			
Director or officer of the inves	stment fund or investment fund ma	anager 🗌 Empl	loyee of the issuer of	or investment fund manager			
✓ None of the above							
d) Compensation details							
Provide details of all compensation pa Canadian dollars. Include cash commi services incidental to the distribution, on, internal allocation arrangements v	issions, securities-based compensa such as clerical, printing, legal or c	tion, gifts, discounts or a	other compensation. issuer is not required	. Do not report payments for d to ask for details about, or report			
Cash commissions paid	4,480.00	Security codes	Security code 1	Security code 2 Security code 3			
Value of all securities distributed as compensation ⁴			W N T				
	warrants, options or other rights	whereby each com	nmon share purch share in the capita	nrants issued to finder, hase warrant is exercisable al of the issuer at a price of			
Other compensation ⁵	Describe						
Total compensation paid	4,480.00	·					
Check box if the person wil	l or may receive any deferred cor	npensation (describe th	he terms below)				
⁴ Provide the aggregate value of all s additional securities of the issuer. In							

rights exercisable to acquire additional securities of the issuer. ⁵Do not include deferred compensation.

a) Name of person com	pensated and regi	stration status									
Indicate whether the perso	on compensated is a i	registrant.		No		✓ Y	′es				
If the person compensated is	s an individual, provic	le the name of th	e individi	ual.							
Full legal name of indi	vidual										
	Fa	mily name	-	Firs	t given na	ame		Seco	ndary given name	s	
If the person compensated	is not an individual, p	provide the follow	ing infor	mation.							
Full legal name	e of non-individual	Hampton Sec	urities L	imited							
I	Firm NRD number (if applicable)										
Indicate whether the perso	n compensated facilit	ated the distribut	ion throu	ıgh a fun	ding por	tal or a	n interr	net-base	ed portal.	🖊 No	🗌 Yes
b) Business contact info	ormation										
If a firm NRD number is not	provided in Item 8 (a), provide the bus	iness cor	ntact info	rmation	of the p	person l	being co	ompensated.		
Street address	1800-141 Adelaid	le St W									
Municipality	Toronto					Pro	vince/	State	Ontario		
Country	Canada				Pos	tal co	de/Zip	code	M5H 3L5		
Email address	eayzenberg@har	nptonsecur			Т	elepho	one nu	mber	4168628622		
	ities.com										
c) Relationship to issue		-					-				
Indicate the person's relation <i>B(2) of the Instructions and</i>										ected" in F	Part
	uer or investment fur							-	er than an inve	stment fur	nd)
Director or officer of	the investment fund	or investment fu	nd mana	aer		sevolar	e of the	issuer	or investment fu	nd manad	ber
✓ None of the above				0.		1 - 7					, -
d) Compensation detail	S										
Canadian dollars. Include ca	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										
	·		inployee	s of a no	11-11101010		препзи	leu by l	ne issuer.		
Cash commissions p	paid 2,4	75.20	Sec	urity cod	es	Se	ecurity co	ode 1	Security code 2	Security	/ code 3
Value of all securit distributed						W	N	Т			
compensati	on ⁴										
Describe terms of warrants, options or other rights 35,360 common share purchase warrants issued to finder, whereby each common share purchase warrant is exercisable into one common share in the capital of the issuer at a price of \$0.12 until May 1, 2019											
Other compensation	on⁵	Desc	ribe								
Total compensation p	aid 2,4	75.20									
Check box if the p	erson will or may rec	eive any deferre	d compe	nsation (describe	e the te	rms bel	low)			
⁴ Provide the aggregate value											
additional securities of the rights exercisable to acquir ⁵ Do not include deferred co	e additional securitie.		an secul	nies alsti	nuulea a	is comp	Jensati	оп, <u>IACII</u>	<u>аатц</u> ориоп <i>s,</i> И	ananis O	ourer

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.	If the person compensated is not an individual, provide the following information.							
Full legal name of non-individual Foster & Associates Financial Services Inc.								
Firm NRD number (if applicable)								
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. 🗹 No 🗌	Yes							
b) Business contact information								
If a firm NRD number is not provided in Item 8 (a), provide the business contact information of the person being compensated.								
Street address 1100-372 Bay St								
Municipality Toronto Province/State Ontario								
Country Canada Postal code/Zip code M5H 2W9								
Email address info@fostergroup.ca Telephone number 4163691980								
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 Par	t							
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 amou 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 on, internal allocation arrangements with the directors, officers or employees of a non-individual compensated by the issuer.								
Cash commissions paid 1,596.00 Security codes Security code 1 Security code 2 Security code 2	ode 3							
Value of all securities W N T								
distributed as compensation ⁴								
Describe terms of warrants, options or other rights 22,800 common share purchase warrants issued to finder, whereby each common share purchase warrant is exercisable into one common share in the capital of the issuer at a price of \$0.12 until May 1, 2019								
Other compensation ⁵ Describe								
Total compensation paid 1,596.00								
Check box if the person will or may receive any deferred compensation (describe the terms below)								
⁴ Provide the aggregate value of all securities distributed as compensation, <u>excluding</u> options, warrants or other rights exercisable to acquire	, ,							
additional securities of the issuer. Indicate the security codes for all securities distributed as compensation, including options, warrants or o rights exercisable to acquire additional securities of the issuer.	ther							

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 informa	tion.							
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.								
b) Business contact information								
If a firm NRD number is not provided in Item 8 (a), provide the business contac	t information of the person being compensated.							
Street address 700-200 Burrard St								
Municipality Vancouver	Province/State British Columbia							
Country Canada	Postal code/Zip code V6C 3L6							
Email address kbella@haywood.com	Telephone number 8006639499							
c) Relationship to issuer or investment fund manager	0000000400							
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 45-10								
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								
Canadian dollars. Include cash commissions, securities-based compensation, gi services incidental to the distribution, such as clerical, printing, legal or account								
on, internal allocation arrangements with the directors, officers or employees of								
Cash commissions paid 1,604.00								
Value of all securities	y codes Security code 1 Security code 2 Security code 3 W N T Image: Code 3							
distributed as	W N T							
compensation ⁴								
Describe terms of warrants, options or other rights 22,9	14 common share purchase warrants issued to finder, reby each common share purchase warrant is exercisable							
into	one common share in the capital of the issuer at a price of							
	2 until May 1, 2019							
Other compensation ⁵ Describe								
Total compensation paid 1,604.00								
Check box if the person will or may receive any deferred compensation	tion (describe the terms below)							
⁴ Provide the aggregate value of all securities distributed as compensation, <u>e</u>	xcluding options, warrants or other rights exercisable to acquire							
additional securities of the issuer. Indicate the security codes for all securitie rights exercisable to acquire additional securities of the issuer.	s distributed as compensation, <u>including</u> options, warrants or other							

a) Name of person compensated and registration status									
Indicate whether the person compensated is a registrant.	Indicate whether the person compensated is a registrant. 🔲 No 📝 Yes								
If the person compensated is an individual, provide the name of the in	dividual.								
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 Echelon Wealth Partners Inc.									
Firm NRD number (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 provided in Item 8 (a), provide the busine	ss contact information of the person being compensated.								
Street address 2000-1 Adelaide St E									
Municipality Toronto	Province/State Ontario								
Country Canada	Postal code/Zip code M5C 2V9								
Email address info@echelonpartners.com									
Into we chelon partners.com	1 elephone number 4166494273								
c) Relationship to issuer or investment fund manager	nanager (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 I									
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 r	nanager Employee of the issuer or investment fund manager								
✓ None of the above									
d) Compensation details									
	lentified in Item 8(a) in connection with the distribution. Provide all amounts in								
	ation, gifts, discounts or other compensation. Do not report payments for caccounting services. An issuer is not required to ask for details about, or report								
on, internal allocation arrangements with the directors, officers or emp									
Cash commissions paid 22,400.00	Security codes Security code 1 Security code 2 Security code 3								
Value of all securities	Security codes Security code 1 Security code 2 Security code 3 W N T Image: Comparison of the security code 3 Image: Comparison of the security code 3								
distributed as compensation ⁴									
Describe terms of warrants, options or other rights	220,000 common share purchase warrants issued to finder								
	whereby each common share purchase warrant is exercisable								
	into one common share in the capital of the issuer at a price of \$0.12 until May 1, 2019								
Other compensation ⁵ Describe									
Total compensation paid 22,400.00									
Check box if the person will or may receive any deferred co	ompensation (describe the terms below)								
⁴ Provide the aggregate value of all securities distributed as compen-	sation, <u>excluding</u> options, warrants or other rights exercisable to acquire								
	securities distributed as compensation, <u>including</u> options, warrants or other								

a) Name of person compensated and registration status	
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 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 Origin Merchant Securities Inc.]
Firm NRD number (if applicable)	•
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. 🗹 No 🗌 Ye	es
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 1500-220 Bay St]
Municipality Toronto Province/State Ontario]
Country Canada Postal code/Zip code M5J 2W4	٦
Email address info@originmerchant.com Telephone number 4168000850	Ī
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	
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	1
services incidental to the distribution, such as clerical, printing, legal or accounting services. An issuer is not required to ask for details about, or repor	t
on, internal allocation arrangements with the directors, officers or employees of a non-individual compensated by the issuer.	
Cash commissions paid 15,280.00 Security codes Security code 1 Security code 2 Security code 3	
Value of all securities W N T	1
distributed as compensation ⁴	
Describe terms of warrants, options or other rights 218,290 common share purchase warrants issued to finder,	٦
whereby each common share purchase warrant is exercisable	
into one common share in the capital of the issuer at a price of \$0.12 until May 1, 2019	
Other compensation ⁵ Describe	1
Total compensation paid 15,280.00	-
Check box if the person will or may receive any deferred compensation (describe the terms below)	
	٦
	1
⁴ Provide the aggregate value of all securities distributed as compensation, <u>excluding</u> options, warrants or other rights exercisable to acquire	

ITEM 9 - DIRECTORS, EXECUTIVE	OFFICERS A	ND PROMO	TERS OF THE I	SSUER				
If the issuer is an investment fund, do n	not complete Ite	em 9. Procced to	o Item 10.					
Indicate whether the issuer is any of the fo	llowing (select a	ll that apply).						
Reporting issuer in any jurisdiction	of Canada							
Foreign public issuer								
Wholly owned subsidiary of a repo	orting issuer in a	ny jurisdiction of	Canada ⁶					
Provide name of re	eporting issuer							
Wholly owned subsidiary of a forei	ign public issuer	6						
Provide name of foreign	n public issuer							
Issuer distributing eligible foreign s	securities only to	permitted clien	ts ⁷					
If the issuer is at least one of the above	e, do not compl	ete Item 9(a) –	(c). Proceed to Ite	<i>m 10</i> .				
⁶ An issuer is a wholly owned subsidiary of securities that are required by law to be ow ⁷ Check this box if it applies to the current of clients. Refer to the definitions of "eligible t	vned by its direc distribution even foreign security"	tors, are benefic if the issuer ma and "permitted of	ially owned by the de previous distrib client" in Part B(1)	reporting issuer utions of other ty	or the foreig pes of secu	n publ	ic issue	er, respectively.
If the issuer is none of the above,			Item 9(a) - (c).					
a) Directors, executive officers and	<u>.</u>							
Provide the following information for each territory; otherwise state the country. For						da, sta	te the p	rovince or
Organization or company name	Family name	First given name	Secondary give names	n Business lo non-indivio resider jurisdicti indivio	dual or ntail ion of		ationshi issuer ect all t apply)	
				Province o	r country	D	0	Р
b) Promoter information		·	·					
, If the promoter listed above is not an indi within Canada, state the province or territ		-						
Organization or company name Fa	Family name	First given name Secondary given names Residential jurisdiction of individual Relationship to promoter (select one or both if applicable)						
				Province or country	D		С)
c) Residential address of each indiv	vidual							
Complete Schedule 2 of this form provid completed report. Schedule 2 also requi					m 9(a) and	(b) an	d attac	h to the

ITEM 10 - CERTIFICATION

Provide the following certification and business contact information of an officer or director 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 not be delegated to an agent or other individual preparing the report on behalf of the issuer or underwriter. If the individual completing and filing the report is different from the individual certifying the report, provide their name and contact details 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.

IT IS AN OFFENCE TO MAKE A MISREPRESENTATION IN THIS REPORT

By completing the information below, I certify to the securities regulatory authority or regulator that:

- I have read and understand this report; and
- all of the information provided in this report is true.

Full legal name	David	Michel					
	Family name	First given name		Secondary given names			
Title	Chief Executive Officer/President/Director						
Name of issuer/underwriter/ investment fund manager	Walker River Resources Corp.						
Telephone number	8198740030	Email address ir	nfo@wrrg	jold.com			
Signature	Michel David	Date	2017	05	10		
			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.

Full legal name	Francis	Janet		Title Director
	Family name	First given name	Secondary given names	
Name of company	Keystone Corporate Se	rvices Inc.		
Telephone number	6046122111	E	mail address janet@ke	

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.