Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 9283561

ITEM 1 - REPORT TYPE										
New report										
Amended report If amended, provide filing date of report that is being amended 2020 11 06 (YYYY-MM-DD)										
ITEM 2 - PARTY CERTIFYIN	NG THE	REPOR	Г							
Indicate the party certifying the re Instrument 81-106 Investment Fu									estment fund, refer to se	ction 1.1 of National
Investment fund iss	uer									
✓ Issuer (other than an investment fund)										
			,							
ITEM 3 - ISSUER NAME AI										
Provide the following information		[-			-	nd, abou	it the fund.		
Full lega	al name GoldHaven Resources Corp.									
Previous full lega	Previous full legal name Altum Resource Corp.									
If the issuer's name changed in the last 12 months, provide most recent previous legal name.										
V	Website (if applicable)									
If the issuer has a legal entity ider	ntifier <u>,</u> pro	vide below	. Refer t	o Part B d	of the l	Instructio	ons for th	he definition o	of "legal entity identifier"	•
Legal entity ide	entifier									
If two or more issuers distributed of	a single se	curity, pro	vide the	full legal	name	e(s) of th	e co-issu	er(s) other th	an the issuer named abo	ve.
Full legal name(s) of co-is	suer(s)							(if applicable	e)	
ITEM 4 - UNDERWRITER I	NFORM	ATION								
If an underwriter is completing the	e report, p	rovide the	underw	riter's ful	legal	name a	nd firm N	NRD number.		
Full legal name										
Firm NRD number							(if app	licable)		
If the underwriter does not have a	ı firm NRE) number, j	orovide	the head	office	contact	informat	tion of the un	derwriter.	
Street address										7
Municipality							Provi	ince/State		7
Country						Pos	tal code	e/Zip code		7
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 in your reasonable judgment most closely corresponds to the issuer's primary business activity.
NAICS industry code 2 1 2 2 0
If the issuer is in the mining industry , indicate the stage of operations. This does not apply to issuers that provide services to issuers operating in the mining industry. Select the category that best describes the issuer's stage of operations.
Exploration Development Production
Is the issuer's primary business to invest all or substantially all of its assets in any of the following? If yes, select all that apply.
Mortgages Real estate Commercial/business debt Consumer debt Private companies
Cryptoassets
b) Number of employees
Number of employees: 🗹 0 - 49 🗌 50 - 99 🗌 100 - 499 🗌 500 or more
c) SEDAR profile number
Does the issuer have a SEDAR profile?
No ✓ Yes If yes, provide SEDAR profile number 0 0 4 8 7 9 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
YYYY 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.
AII AB BC MB NB NL NT
NS NU ON PE QC SK YT
g) Public listing status
If the issuer has a CUSIP number, provide below (first 6 digits only)
CUSIP number
If the issuer is publicly listed, provide the name of the exchange on which the issuer's equity securities primarily trade. Provide only the name of an exchange and not a trading facility such as, for example, an automated trading system.
Exchange name
h) Size of issuer's assets
Select the size of the issuer's assets based on its most recently available annual financial statements (Canadian \$). If the issuer has not prepared annual financial statements for its first financial year, provide the size of the issuer's assets at the distribution end date.

\$0 to under \$5M	\$5M to under \$25M	□ \$25M to under \$100M
S100M to under \$500M	S500M to under \$1B	S1B or over

ib close is an investment fund, provide the following information: iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii
Full legal name
Firm NRD number
If the investment fund manager does not have a firm NRD number, provide the head office contact information of the investment fund manager. Street address Municipality Country Postal code/Zjp code Telephone number Website (if applicable) D Type of investment fund Type of investment fund fund that most accurately identifies the issuer (select only one). Money market Country Postal code/Zjp code Indicate whether one or both of the following apply to the investment fund. Invests primarily in other investment fund issuers Country Indicate whether one or both of the following apply to the investment fund. Invests primarily in other investment fund issuers Indicate whether one or both of the following apply to the investment fund. Invests primarily in other investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) directives that allow collective investment fund Date of formation and financial year-end of the investment fund YYYY MM DD MM DD
Street address Municipality Province/State Country Postal code/Zip code Telephone number Website (if applicable) b Type of investment fund b Type of investment fund b Type of investment fund that most accurately identifies the issuer (select only one). Alternative strategies Cryptoasset 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 b Type of formation and financial year-end of the investment funds is on authorization from one member state. c Date of formation and financial year-end of the investment fund is a reporting issuer. c All All All All All All All All All Al
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YYYY MM DD <
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If the investment fund has a CUSIP number, provide below (first 6 digits only) CUSIP number
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 name
f) Net asset value (NAV) 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 \$500M \$500M to under \$1B \$1B or over Date of NAV calculation:

ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION

purchasers reside	ent in that the distribu	jurisdi	ction of Canada	only. Do not includ	rrisdiction of Canada, in e in Item 7 securities iss he information providec	ued a	s payment of	^r comm	issions or fi	nder's fees in
a) Currency	1									
Select the curren	cy or curre	ncies i	in which the dist	ribution was made.	All dollar amounts prov	vided i	in the report i	must b	e in Canadia	an dollars.
✓ Canadian d	dollar		US dollar	Euro	Other (descri	ibe)				
b) Distributi	on date(s)								
	and end d od covered	ates. If by the	f the report is be e report.		or securities distributed es distributed on a conti	inuou:				
	St	art da	^{te} 2020	10 29	End c	date	2020	11	04	
			YYYY	MM DD			YYYY	MM	DD	
c) Detailed	-									
Complete Sch	edule 1 d	of this	s form for eac	h purchaser and	l attach the schedul	e to	the comple	eted re	eport.	
d) Types of	securities	s distr	ributed							
	-				per security basis. Refer t CUSIP number assigned					ow to indicate the
									Canadian \$	
	IP number pplicable)		Description of security Number of securities				Single or lowest price	Hig	hest price	Total amount
U B S 381	B S 38149V103 Common shares and common 12,247,500.0 share purchase warrants					00	0 0.3000 0.3000 2,449,500.0			2,449,500.00
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	Underlyir security co			(Canadian \$) (YYYY- MM-DD)		Co	Conversion ratio Describe other items (if applicable)		ems (if applicable)	
W N T	СМ	s	0.3000	0.3000	2023-10-29	1:1 11,307,500 warrants exp October 29, 2023 940,000 warrants expire November 4, 2023		23 nts expire on		
f) Summary	of the dis	stribut	tion by jurisdic	tion and exempti	on					
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.										
-		ada, s	tate the province	e or territory, otherv	vise state the country.	NI	under of unique	- 28		
	nce or intry			Exemption relie		NU	umber of uniqu purchasers		Total an	nount (Canadian \$)
British C	Columbia		NI 45-106 2	.3 [Accredited i	nvestor]			27		1,681,500.00
British C	Columbia		associates]		ids and business			7		168,000.00
Albo	erta			.3 [Accredited i	-	_		2		50,000.00
Ont			INI 15 106 2	0.14		1		1		100 000 00
	ario		NI 45-100 Z	.3 [Accredited i	nvestorj			2		100,000.00

Belgium	Distributions to purchasers outside of local jurisdiction (BC, AB, NB)	1	5,000.00			
Switzerland	Distributions to purchasers outside of local jurisdiction (BC, AB, NB)	1	20,000.00			
Peru	Distributions to purchasers outside of local jurisdiction (BC, AB, NB)	1	75,000.00			
United Kingdom	Distributions to purchasers outside of local jurisdiction (BC, AB, NB)	1	20,000.00			
Cayman Islands	Distributions to purchasers outside of local jurisdiction (BC, AB, NB)	1	150,000.00			
	Total dollar amount of securities distributed					
	Total number of unique purchasers ^{2b} 45					

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

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

g) Net proceeds to the investment fund by jurisdiction

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

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

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

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 - COMP	PENSATIO	N INFORMATION		
		rson (as defined in NI 45-106) to whom the issuer directly provides, or litional copies of this page if more than one person was, or will		
Indicate whether	any compens	ation was paid, or will be paid, in connection with the distribution.		
No 🖸	✓ Yes	If yes, indicate number of persons compensated.	9]

a) Name of person comper	nsated and regist	tration s	status								
Indicate whether the person comp	ensated is a registr	ant.		🗌 No	\checkmark	Yes					
If the person compensated is an in	dividual, provide th	he name	of the individ	lual.							
Full legal name of individual											
	Family name First given name Secondary given names										
If the person compensated is not o	ın individual, provie	de the fo	llowing infor	mation.							
Full legal name of	Full legal name of non-individual Canaccord Genuity Corp.										
Firn	Firm NRD number 9 0 0 (if applicable)										
Indicate whether the person comp	ensated facilitated	the distr	ibution throu	gh a funding	portal or a	an interne	- et-based	portal.	✓ No		Yes
b) Business contact inform	ation										
If a firm NRD number is not provi	ded in Item 8 (a), pi	rovide th	e business co	ntact inform	ation of the	e person l	being con	npensated.			
Street address											
Municipality						Province	e/State				
Country					Postal	code/Zi	p code				
Email address					Tele	ephone r	number				
c) Relationship to issuer or investment fund manager											
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the 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	Director or officer of the investment fund or investment fund manager										
None of the above											
d) Compensation details											
Provide details of all compensation Canadian dollars. Include cash com incidental to the distribution, such allocation arrangements with the o	nmissions, securitie as clerical, printing	s-based 1, legal oi	compensation r accounting	n, gifts, disco services. An i	unts or oth ssuer is no	er compe t requirea	ensation. I to ask fo	Do not report	payments	for ser	vices
Cash commissions paid	30,59	90.00				Security	code 1	Security cod	e 2 Sec	urity cod	le 3
Value of all securities distributed as compensation ⁴	45,85	55.00	S	Security code	es	WN	I T				
Describe terr	ns of warrants, opt	tions or o	other rights	Non-trans expiring O		arrants e	exercisa	ble at \$0.30) for 3 ye	ars	
Other compensation ⁵	10	0.00	Describe	Wire trans							
Total compensation paid	76,57	5.00									
Check box if the perso	on will or may rece	ive any o	deferred com	pensation (d	lescribe th	e terms b	oelow)				
⁴ Provide the aggregate value of a additional securities of the issuer rights exercisable to acquire addit ⁵ Do not include deferred compen- ⁵ Do not ⁵ Do not	. Indicate the secu itional securities of	rity code	s for all secu	on, <u>excluding</u> irities distribu	options, w ited as cor	varrants c mpensatio	or other ri on, <u>inclui</u>	ights exercisa ding options,	able to acq warrants o	nuire or other	

a) Name of person comper	nsated and regist	ration status								
Indicate whether the person comp	ensated is a registro	ant.	No No	\checkmark	Yes					
If the person compensated is an ir	ndividual, provide th	e name of the indi	vidual.							
Full legal name of individual										
Family name First given name Secondary given names										
If the person compensated is not o	an individual, provid	le the following info	ormation.							
Full legal name of non-individual Haywood Securities Inc.										
Firn	n NRD number	1 6 3	8 0			(if appl	icable)			
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.										
b) Business contact inform	ation									
If a firm NRD number is not provi	ded in Item 8 (a), pr	ovide the business	contact informati	on of the	person b	eing com	pensated.			
Street address										
Municipality				Ρ	rovince	/State				
Country				Postal c	code/Zip	o code				
Email address				Telep	phone n	umber				
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	r investment fund r	nanager	Employ	/ee of the	e issuer o	or investmen	t fund mai	nager	
✓ None of the above									0	
d) Compensation details										
Provide details of all compensation Canadian dollars. Include cash cor incidental to the distribution, such allocation arrangements with the d	nmissions, securities as clerical, printing,	s-based compensat , legal or accountin	ion, gifts, discoun g services. An issı	ts or othei ier is not i	r compen required	nsation. E to ask fo	Do not report	payments	for serv	vices
Cash commissions paid	10,50	0.00			Security of	code 1	Security code	e 2 Secu	urity code	e 3
Value of all securities distributed as compensation ⁴	15,75	0.00	Security codes		W N	Т				
Describe ter	ms of warrants, opt	ions or other rights	Non-transfer 29/23.	able wa	rrants e	xercisal	ble at \$0.30) expiring	Oct	
Other compensation ⁵		Describe								
Total compensation paid	26,25	0.00								
Check box if the perso	on will or may recei	ve any deferred co	mpensation (des	cribe the	terms be	elow)				
⁴ Provide the aggregate value of a additional securities of the issuer rights exercisable to acquire add ⁵ Do not include deferred compen- ⁵ Do not ⁵ Do n	r. Indicate the secur itional securities of	rity codes for all se								

a) Name of person compens	sated and registrat	on status									
Indicate whether the person compe	nsated is a registrant.		No No	\checkmark	Yes						
If the person compensated is an ind	lividual, provide the n	ame of the indivi	dual.								
Full legal name of individu	al										
	Family name First given name Secondary given names										
If the person compensated is not an	-	-									
Full legal name of non-individual PI Financial Corp.											
Firm	NRD number 5	2 9	0			(if appl	icable)				
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. Ves											
b) Business contact informa	tion										
If a firm NRD number is not provide	ed in Item 8 (a), provi	de the business c	ontact informati	ion of the	person b	eing cor	pensated.				
Street address											
Municipality				Р	rovince	e/State					
Country				Postal c	code/Zip	o code					
Email address				Telep	hone n	umber					
c) Relationship to issuer or i	nvestment fund ma	anager	-								
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 i											
✓ None of the above	Director or officer of the investment fund or investment fund manager Employee of the issuer or investment fund manager										
d) Compensation details											
Provide details of all compensation Canadian dollars. Include cash com incidental to the distribution, such a allocation arrangements with the di	missions, securities-bo s clerical, printing, leg	ased compensation al or accounting	on, gifts, discoun services. An issi	nts or othei uer is not i	r comper required	nsation. L to ask fo	Do not repor	t payments	s for serv	rices	
Cash commissions paid	3,360.0	0			Security	code 1	Security coo	de 2 Sec	urity code	3	
Value of all securities distributed as compensation ⁴	5,040.0	0	Security codes		W N	Т					
Describe term	s of warrants, option	s or other rights	Non-transfe 29/23.	rable wa	rrants e	xercisa	ble at \$0.3	0 expirinç) on Oc	t	
Other compensation ⁵		Describe									
Total compensation paid	8,400.0	0									
Check box if the persor	n will or may receive	 any deferred cor	npensation (des	scribe the	terms be	elow)					
⁴ Provide the aggregate value of all additional securities of the issuer. rights exercisable to acquire additi ⁵ Do not include deferred compens	Indicate the security ional securities of the	codes for all sec									

a) Name of person compen	sated and regist	tration s	status									
Indicate whether the person compe	ensated is a registr	ant.		No No		✓	Yes					
If the person compensated is an in	If the person compensated is an individual, provide the name of the individual.											
Full legal name of individu	Full legal name of individual											
	Family name First given name Secondary given names											
If the person compensated is not a	If the person compensated is not an individual, provide the following information.											
Full legal name of	Full legal name of non-individual Mackie Research Capital Corporation											
Firm	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 informa	ation											
If a firm NRD number is not provid	ded in Item 8 (a), p	rovide th	e business co	ntact infor	mation of	f the pe	erson b	eing con	npensated.			
Street address												
Municipality						Pro	ovince	/State				
Country					Pos	stal co	ode/Zip	o code				
Email address					Т	Feleph	ione n	umber				
c) Relationship to issuer or	investment fund	l manag	jer									
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							-		ner than an i	nvestmer	nt fund)	
Director or officer of the	investment fund o	r investn	nent fund ma	inager	🗍 En	nploye	e of the	e issuer	or investme	nt fund m	anager	
✓ None of the above				Ū							Ū	
d) Compensation details												
Provide details of all compensation Canadian dollars. Include cash com incidental to the distribution, such allocation arrangements with the a	nmissions, securitie as clerical, printing	s-based 1, legal oi	compensatio r accounting	n, gifts, diso services. Ar	counts or n issuer is	other o not re	comper quired	nsation. I to ask fo	Do not repor	t paymen	ts for se	ervices
Cash commissions paid	8,89	90.00				S	Security	code 1	Security coo	de 2 Se	curity co	de 3
Value of all securities distributed as compensation ⁴	13,33	35.00	S	Security co	des	V	V N	Т				
Describe tern	ns of warrants, op	tions or o	other rights	Non-tran 29/23.	sferable	e warr	ants e	xercisa	ble at \$0.3	0 expirir	ig on C	Oct
Other compensation ⁵			Describe									
Total compensation paid	22,22	25.00										
Check box if the perso	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 addit ⁵ Do not include deferred compen- ⁵ Do not ⁵ D	Indicate the secu	rity code	es for all secu									er

a) Name of person comp	pensated and regis	stration status						
Indicate whether the person co	mpensated is a regist	rant.	✓ No	Yes				
If the person compensated is a	n individual, provide	the name of the individ	lual.					
Full legal name of indiv	vidual							
		Family name	Firs	st given name		Secondary given names		
	If the person compensated is not an individual, provide the following information.							
Full legal name of non-individual MJP Justus 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 info	rmation							
If a firm NRD number is not pr	ovided in Item 8 (a), p	provide the business co	ntact information	n of the person be	ing com	pensated.		
Street address	2203 - 609 Carde	ro Street						
Municipality	Vancouver			Province/	State	British Columbia		
Country	Canada		F	Postal code/Zip	code	V6G 3H7		
Email address	mpound@wealthr	ninerals.com		Telephone nu	mber	6043632885		
c) Relationship to issuer	or investment fun	d manager						
						ning of "connected" in Part B(2) of		
the Instructions and the meani	-		· · ·			er than an investment fund)		
		-				er than an investment fund)		
Director or officer of	the investment fund	or investment fund ma	inager	Employee of the	issuer o	or investment fund manager		
✓ None of the above								
d) Compensation details	3							
Canadian dollars. Include cash	commissions, securiti Ich as clerical, printin	es-based compensatio g, legal or accounting	n, gifts, discounts services. An issue	or other compens r is not required to	sation. D o ask for	tribution. Provide all amounts in Do not report payments for services r details about, or report on, internal		
Cash commissions pa	aid 3,6	75.00		Security co	ode 1	Security code 2 Security code 3		
Value of all securiti distributed as compensatio	55	12.50	Security codes	W N	Т			
	terms of warrants, or	 otions or other rights		ble warrants ex	ercisat	ble at \$0.30 expiring on Oct		
Other compensation	on ⁵	Describe	29/23.					
Total compensation pa		37.50						
Check box if the pe	erson will or may rec	eive any deferred com	pensation (desc	ribe the terms bel	ow)			
⁴ Provide the aggregate value additional securities of the iss rights exercisable to acquire a ⁵ Do not include deferred comp	uer. Indicate the sec additional securities o	urity codes for all secu						

a) Name of person com	pensated and regist	tration status					
Indicate whether the person cc	mpensated is a registr	ant.	✓ No	Yes			
If the person compensated is a	n individual, provide th	ne name of the indivi	dual.				
Full legal name of indi	vidual Ikani		Priscilla				
	F	amily name	Fi	st given name		Secondary given names	
If the person compensated is n	If the person compensated is not an individual, provide the following information.						
Full legal name of non-individual							
Firm NRD number (if applicable)							
Indicate whether the person co	mpensated facilitated	the distribution throu	ıgh a funding po	rtal or an internet-	based p	ortal. 🖌 No 🗌 Yes	
b) Business contact info	rmation						
If a firm NRD number is not pr	ovided in Item 8 (a), pl	rovide the business co	ontact informatic	on of the person bei	ng com	pensated.	
Street address	1876 Eureka Aven	ue					
Municipality	Port Coquitlam]	Province/S	State	British Columbia	
Country	Canada			Postal code/Zip	code	V3C 5C1	
Email address	pi@ebcint.com			Telephone nu	mber	6045297707	
c) Relationship to issue	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 iss	uer or investment fund	l manager		Insider of the issu	uer (oth	er than an investment fund)	
Director or officer of	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	3						
Provide details of all compensa Canadian dollars. Include cash	tion paid, or to be paic commissions, securitie ıch as clerical, printing	s-based compensatio , legal or accounting	n, gifts, discount services. An issu	s or other compens er is not required to	ation. D ask for	ribution. Provide all amounts in 00 not report payments for services r details about, or report on, internal	
Cash commissions p	aid 12,60	0.00		Security co	ode 1	Security code 2 Security code 3	
Value of all securiti distributed as compensati	18 00	0.00	Security codes	W N	Т		
Describe terms of warrants, options or other rights on Oct 29/23. 7,000 non-transferable warrants exercisable at \$0.30 expiring on Nov 4/23.							
Other compensation	on⁵	Describe					
Total compensation p	aid 31,50	0.00					
Check box if the p	erson will or may rece	ive any deferred con	npensation (deso	cribe the terms belo	ow)]	
⁴ Provide the aggregate value additional securities of the iss rights exercisable to acquire a ⁵ Do not include deferred com	uer. Indicate the secu additional securities of	rity codes for all sect					

a) Name of person comp	pensated and regis	stration status				
Indicate whether the person co	mpensated is a regist	rant.	✓ No	Yes	5	
If the person compensated is a	n individual, provide t	he name of the indiv	idual.			
Full legal name of indiv	/idual					
		Family name	Fir	st given name		Secondary given names
If the person compensated is not an individual, provide the following information.						
Full legal name of non-individual Hurricane Corporate Services Inc.						
Firm NRD number (if applicable)						
Indicate whether the person co	mpensated facilitated	the distribution thro	ugh a funding po	rtal or an inte	ernet-based p	ortal. 🗸 No 🗌 Yes
b) Business contact info	rmation					
If a firm NRD number is not pr			ontact informatic	on of the perso	on being com	pensated.
Street address	610 - 700 West Po	ender Street				
Municipality	Vancouver			Provir	nce/State	British Columbia
Country	Canada			Postal code	/Zip code	V6C 1G8
Email address	kulwant.sandher@	gmail.com		Telephon	e number	6046699788
c) Relationship to issuer	or investment fund	d manager				
Indicate the person's relationsh the Instructions and the meani						ning of "connected" in Part B(2) of
Connect with the issu	uer or investment fun	d manager		Insider of the	e issuer (oth	er than an investment fund)
Director or officer of	the investment fund o	or investment fund m	anager	Employee of	f the issuer o	or investment fund manager
✓ None of the above						
d) Compensation details	;					
Canadian dollars. Include cash	commissions, securitien ich as clerical, printing	es-based compensation g, legal or accounting	on, gifts, discount. J services. An issue	s or other com er is not requi	npensation. D red to ask foi	tribution. Provide all amounts in Do not report payments for services r details about, or report on, internal
Cash commissions pa	aid 35,7	00.00		Secu	rity code 1	Security code 2 Security code 3
Value of all securiti distributed as compensatio	E2 E	50.00	Security codes	W	N T	
Describe terms of warrants, options or other rights Oct 29/23. 3,500 non-transferable warrants exercisable at \$0.30 expiring Nov 4/23.						
Other compensatic	n ⁵	Describe				
Total compensation pa	aid 89,28	50.00				
Check box if the pe	erson will or may rece	eive any deferred con	mpensation (deso	cribe the term	s below)	
⁴ Provide the aggregate value additional securities of the iss rights exercisable to acquire a ⁵ Do not include deferred comp	uer. Indicate the secu additional securities o	irity codes for all sec				

a) Name of person compensated and registration status								
Indicate whether the person compensated is a registrant.	✓ No Yes							
If the person compensated is an individual, provide the name of the in	dividual.							
Full legal name of individual Stern	Gerald							
Family name	First given name Secondary given names							
If the person compensated is not an individual, provide the following	If the person compensated is not an individual, provide the following information.							
Full legal name of non-individual								
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 8225 Tidewater Place								
Municipality Vancouver	Province/State British Columbia							
Country Canada	Postal code/Zip code V6P 6R3							
Email address sgstern@shaw.ca	Telephone number 6046691717							
c) Relationship to issuer or investment fund manager								
Indicate the person's relationship with the issuer or investment fund n the Instructions and the meaning of "control" in section 1.4 of NI 45-	nanager (select all that apply). Refer to the meaning of "connected" in Part B(2) of							
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 fun	d manager 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 services							
incidental to the distribution, such as clerical, printing, legal or account	ting 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 Cash commissions paid 700.00	non-individual compensated by the issuer.							
	Security code 1 Security code 2 Security code 3							
Value of all securities distributed as compensation ⁴ 1,050.00	Security codes							
Describe terms of warrants, options or other rig	Non-transferable warrants exercisable at \$0.30 expiring Oct 29/23.							
Other compensation ⁵ Descr	be							
Total compensation paid 1,750.00								
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 compen-	sation, <u>excluding options</u> , warrants or other rights exercisable to acquire							
	securities distributed as compensation, <u>including</u> options, warrants or other							
⁵ Do not include deferred compensation.								

a) Name of person comp	pensated and regis	stration status						
Indicate whether the person co	mpensated is a regist	rant.	✓ No	Yes				
If the person compensated is ar	n individual, provide	the name of the individ	dual.					
Full legal name of indiv	/idual							
		Family name	Firs	st given name		Secondary given names		
If the person compensated is no	If the person compensated is not an individual, provide the following information.							
Full legal name of non-individual Euromerica Capital Group 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 infor	rmation							
If a firm NRD number is not pro	ovided in Item 8 (a), j	provide the business co	ontact information	n of the person	being com	pensated.		
Street address	404 - 999 Canada	a Place						
Municipality	Vancouver			Provinc	e/State	British Columbia		
Country	Canada		F	Postal code/Z	ip code	V6C 3E2		
Email address	euromerica@me.	com		Telephone i	number	6047267195		
c) Relationship to issuer	or investment fun	d manager						
						ning of "connected" in Part B(2) of		
the Instructions and the meanin	-		or the purposes o			er than an investment fund)		
		-						
Director or officer of t	the investment fund	or investment fund ma	inager	Employee of the	ne issuer c	or investment fund manager		
None of the above								
d) Compensation details	i							
Canadian dollars. Include cash o incidental to the distribution, su	commissions, securiti och as clerical, printin	es-based compensatio g, legal or accounting	n, gifts, discounts services. An issue	or other compe er is not required	ensation. D d to ask for	ribution. Provide all amounts in 10 not report payments for services • details about, or report on, internal		
allocation arrangements with th Cash commissions pa		r employees of a non-	inaiviauai compe	ensatea by the is	ssuer.			
Value of all securitie					y code 1	Security code 2 Security code 3		
distributed as compensatio	15.7	50.00	Security codes					
Describe t	terms of warrants, op	otions or other rights	Non-transfera 4/23.	ble warrants	exercisat	ble at \$0.30 expiring Nov		
Other compensatio	n ⁵	Describe						
Total compensation pa	aid 26,2	50.00						
Check box if the pe	erson will or may rec	eive any deferred com	pensation (desc	ribe the terms t	celow)			
⁴ Provide the aggregate value of additional securities of the issu- rights exercisable to acquire a ⁵ Do not include deferred comp	uer. Indicate the sec additional securities of	urity codes for all secu						

ITEM 9 - DIRECTORS, EXECU	TIVE OFFICERS	AND PROMOT	ERS OF THE ISS	UER						
If the issuer is an investment fund, do not complete Item 9. Procced to Item 10.										
Indicate whether the issuer is any o	f the following (seled	t the one that appli	es - if more than one	applies, select onl	y one).					
Reporting issuer in any juris	diction of Canada									
Foreign public issuer	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 iss	uer ⁶						_		
Provide name of	foreign public issue	er								
Issuer distributing only eligi	ble foreign securitie	s and the distributio	n is to permitted clie	ents only ⁷				_		
If the issuer is at least one of the	above, do not com	plete Item 9(a) – (d	:). 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.										
a) Directors, executive officer	s and promoters	of the issuer								
Provide the following information for territory; otherwise state the country.						tate the	province	or		
Organization or company name	Family name	First given name	Secondary given names	Business location of non-individual or residentail jurisdiction of individual						
				Province or	country	D	0	Р		
b) Promoter information										
If the promoter listed above is not an individual, provide the following information for each director and executive officer of the promoter. For locations within Canada, state the province or territory; otherwise state the country. For "Relationship to promoter", "D" – Director, "O" – Executive Officer.										
Organization or company name	Family name	First given name	Secondary given names	Individual						
				Province or country	D		С)		
c) Residential address of eac	h 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 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	GoldHaven Resources Corp.							
Full legal name	Ritchie Marla				Kathleen			
	Family name First given name			Secondary given names				
Title	Corporate Secretary							
Telephone number	6046385938	Email address m		marla@goldhavenresources.com				
Signature	Marla K. Ritchie	Date	202	0	11	16		
			YYY	Y	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				Title	
·	Family name	First given name	Secondary given names		
Name of company					
Telephone number		Er	nail address		

Notice - Collection and use of personal information

The personal information required under this form is collected on behalf of and used by the securities regulatory authority or regulator under the authority granted in securities legislation for the purposes of the administration and enforcement of the securities legislation.

If you have any questions about the collection and use of this information, contact the securities regulatory authority or regulator in the local jurisdiction(s) where the report is filed, at the address(es) listed at the end of this form.

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

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

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