Form 45-106F1 Report of Exempt Distribution

ITEM 1 - REPORT TYPE								
✓ New report								
Amended report If ame	Amended report If amended, provide filing date of report that is being amended (YYYY-MM-DD)							
ITEM 2 - PARTY CERTIFYING TH	ITEM 2 - PARTY CERTIFYING THE REPORT							
Indicate the party certifying the report (se Instrument 81-106 Investment Fund Con				ection 1.1 of National				
Investment fund issuer	and the comp		100.					
 ✓ Issuer (other than an inve 	stment fund)							
	,							
Item 3 - Issuer Name and O	THER IDENTIFIERS							
Provide the following information about		vestment fund, about a	the fund.					
Full legal name	ESGold Corp.							
Previous full legal name	e Secova Metals Corp.							
If the issuer's name changed in t	he last 12 months, provide most	recent previous legal r	name.					
Website	www.esgold.com (if applicable)							
If the issuer has a legal entity identifier.	rovide below. Refer to Part B of t	the Instructions for the	definition of "legal entity identifie	-".				
Legal entity identifier								
If two or more issuers distributed a single	security, provide the full legal n	ame(s) of the co-issuer	r(s) other than the issuer named ab	ove.				
Full legal name(s) of co-issuer(s)	(i	if applicable)					
Item 4 - Underwriter Infor	MATION							
If an underwriter is completing the report		gal name and firm NR	RD 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		Provine	ce/State					
Country		Postal code/2	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 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 0 2 2 5 7 6				
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

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 mane	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	t fund				
Type of investment fund the	nt most accurately identifies the issuer (select only one) .				
Money market	Equity Fixed income Balanced				
Alternative strateg	jies 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 Fund					
	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				
YYYY MM DD MM DD					
d) Reporting issuer status of the investment fund					
	porting issuer in any jurisdication of Canada? No Yes				
	s of Canada in which the investment fund is a reporting issuer.				
	NU ON PE QC SK YT				
e) Public listing status	s of the investment fund				
If the investment fund has a	CUSIP number, provide below (first 6 digits only)				
	CUSIP number				
	blicly listed, provide the name of the exchange on which the investment fund's securities primarily trade. Provide only the not a trading facility such as, for example, an automated trading system.				
Exchange n	ame				
f) Net asset value (NA	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	S5M to under \$25M \$25M to under \$100M				
\$100M to under \$50	0M S500M to under \$1B \$1B or over Date of NAV calculation:				
	YYYY MM DD				

ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION

	About the Distribution				
purchasers resident in that jurise	anada completes a distribution in a juri diction of Canada only. Do not include 1, which must be disclosed in Item 8. The	in Item 7 securities issue	ed as payment of c	commissions or fil	nder's fees in
a) Currency					
Select the currency or currencies	s in which the distribution was made. A	ll dollar amounts provid	ed in the report m	ust be in Canadia	an dollars.
Canadian dollar	US dollar Euro	Other (describe			
b) Distribution date(s)					
	end dates. If the report is being filed for				
distribution period covered by the	. If the report is being filed for securities he report.	alstributed on a continu	ious basis, include	e the start and en	a dates for the
Start d	late 2023 05 24	End da	^{te} 2023	05 24	
	YYYY MM DD			MM DD	
c) Detailed purchaser info					
		attach the schedule	to the complet	ad ranget	
•	nis form for each purchaser and a		to the complet	eu report.	
d) Types of securities dis	stributed				
-	on for all distributions reported on a pe	-			ow to indicate the
security code. If providing the C	USIP number, indicate the full 9-digit C	USIP number assigned t	to the security beir	ng distributed.	
				Canadian \$	
Security CUSIP number		Number of	Single or		
code (if applicable)	Description of security	securities	lowest price	Highest price	Total amount
СМС	mmon shares, without par	50,000,000.00	0.0500	0.0500	2,500,000.00
	lue.				
e) Details of rights and co	onvertible/exchangeable securities	S			
If any rights (e.g. warrants, optic	ons) were distributed, provide the exerc	ise price and expiry date	for each right. If a	any convertible/e	xchangeable securities
	onversion ratio and describe any other t	terms for each convertib	le/exchangeable s	ecurity.	
Convertible / exchangeable Underlying	Exercise price (Canadian \$)	Expiry date	Conversion		
security code security code	Lowest Highest	(YYYY- MM-DD)	ratio	Describe other in	tems (if applicable)
	ution by jurisdiction and exemption				
	f securities distributed and the number of exemption relied on in Canada for that				
	Canada, include distributions to purchas				a completes a
	ne item for: (i) each jurisdiction where o				
purchaser resides, if a purchase iurisdiction.	r resides in a jurisdiction of Canada, an	d (iii) each exemption re	elled on in Canada	, if a purchaser re	esides in a foreign
	, state the province or territory, otherwis	se state the country.			
Province or	Exemption relied	00	Number of unique?	2ª Total or	nount (Canadian \$)
country	· · ·		purchasers		
Québec	NI 45-106 2.13 [Petroleum, r mining properties]	natural gas and		1	2,500,000.00
					2 500 000 00
		al dollar amount of se	curriles distribut		2,500,000.00
	Total number of	unique purchasers ^{2b}		1	
^{2a} In calculating the number of	unique purchasers per row, count each	purchaser only once. Jo	int purchasers ma	y be counted as o	one purchaser.
^{2b} In calculating the total numb	per of unique purchasers to which the is	suer distributed securitie	es, count each pure	chaser 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	NFORMATION				
Provide information for each perso the distribution. Complete additi					any compensation in connection with i ted.
Indicate whether any compensation	on was paid, or will be paid,	in connectio	on with the distributio	n.	
✓ No 🗌 Yes	If yes, indicate numbe	er of perso	ns compensated.		
a) Name of person compen-	sated and registration st	atus			
Indicate whether the person compe	nsated is a registrant.		No [Yes	
If the person compensated is an inc	lividual, provide the name c	of the individ	lual.		
Full legal name of individu	al				
	Family name	e	First give	en name	Secondary given names
If the person compensated is not a	ו individual, provide the foll	owing inforr	nation.		
Full legal name of	non-individual				
Firm	NRD number			(if app	blicable)
Indicate whether the person compe	ensated facilitated the distrik	ution throu	ah a fundina portal or		portal. No Yes
b) Business contact informa					
If a firm NRD number is not provid		husiness co	ntact information of t	he person heina coi	mnensated
Street address					
				Province/State	
Municipality			_		
Country			Posta	al code/Zip code	
Email address			Те	lephone number	
c) Relationship to issuer or	nvestment fund manage	er			
Indicate the person's relationship w the Instructions and the meaning c					raning of "connected" in Part B(2) of
Connect with the issuer of	or investment fund manage	r	Insic	der of the issuer (ot	her than an investment fund)
Director or officer of the i	nvestment fund or investme	ent fund ma	nager 🗌 Emp	loyee of the issuer	or investment fund manager
None of the above					
d) Compensation details					
	missions, securities-based co ns clerical, printing, legal or o	ompensation accounting :	n, gifts, discounts or ot services. An issuer is n	ther compensation. ot required to ask f	stribution. Provide all amounts in Do not report payments for services for details about, or report on, internal
Cash commissions paid				Security code 1	Security code 2 Security code 3
Value of all securities distributed as compensation ⁴		S	ecurity codes		
Describe term	ns of warrants, options or ot	ther rights			
Other compensation ⁵		Describe			
Total compensation paid					
Check box if the perso	n will or may receive any de	eferred com	pensation (describe t	he terms below)	
⁴ Provide the aggregate value of a					
additional securities of the issuer. rights exercisable to acquire addit ⁵ Do not include deferred compens	ional securities of the issue		rities distributed as co	ompensation, <u>inclu</u>	<u>ding</u> options, warrants or other

ITEM 9 - DIRECTORS, EXECU	TIVE OFFICERS	AND PROMOT	ERS OF THE ISS	UER					
If the issuer is an investment fund	l, do not complete I	tem 9. Procced to	Item 10.						
Indicate whether the issuer is any o	f the following (select	t the one that appli	es - if more than one	applies, select onl	y one).				
Reporting issuer in any juris	diction 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 issu	ier ⁶							
Provide name of	foreign public issue	r]	
Issuer distributing only eligi	ole foreign securities	and the distributio	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 subsid securities that are required by law to respectively. ⁷ Check this box if it applies to the cu clients. Refer to the definitions of "e	be owned by its dir urrent distribution eve	ectors, are benefic en if the issuer mad	ially owned by the re de previous distributi	eporting issuer or i ions of other types	the foreign	public is	suer,		
If the issuer is none of the			. ,						
a) Directors, executive officer					<u> </u>				
Provide the following information for territory; otherwise state the country.						tate the	province	or	
Organization or company name	Secondary given Business location of non-individual or residentail iuricidiation of Relationship to issuer (select all that apply)								
				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	Organization or company name 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 eac		.,	, ,	111 1 11 11 -					
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	ESGold Corp.							
Full legal name	Giuliano Tony							
	Family name	First given name	· ·	Seconda	iry given n	ames		
Title	Chief Financial Officer							
Telephone number	5142419161	Email address	anthony.	giuliano@	sympat	ico.ca		
Signature	"Anthony Giuliano"	Date	2023	05	30			
			YYYY	MM	DD			

ITEM 11- CONTACT PERSON

Provide the following business contact information for the individual that the securities regulatory authority or regulator may contact with any questions regarding the contents of this report, if different than the individual certifying the report in Item 10.

Same as individual certifying the report

Full legal name				Title	
·	Family name	First given name	Secondary given names		
Name of company					
Telephone number		Er	mail 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.