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 CERTIFYIN	IG THE REPORT							
Indicate the party certifying the report (se National Instrument 81-106 Investment F				section 1.1 of				
Investment fund issuer								
✓ Issuer (other than an inve	estment fund)							
Underwriter								
ITEM 3 – ISSUER NAME AN	ID OTHER IDENT	IFIERS						
Provide the following information about t	he issuer, or if the issuer i	is an investment fund, about t	he fund.					
Full legal name	Rise Gold Corp.							
Previous full legal name	Rise Resources Inc.							
If the issuer's name changed in	the last 12 months, provi	ide most recent previous legal	name.					
Website	www.risegoldcorp.co	om (if a	pplicable)					
If the issuer has a legal entity identifier, p	rovide below. Refer to Par	t B of the Instructions for the	definition of "legal entity identifi	er".				
Legal entity identifier								
ITEM 4 – UNDERWRITER IN		- full land a surger and firms Ned	tional Desistantian Database (NI					
If an underwriter is completing the report, Full legal name	, provide the underwriters	s fuil legal name and firm Nat	tional Registration Database (NR	D) number.				
Firm NRD number		(if applicable)						
If the underwriter does not have a firm N	RD number, provide the h	ead office contact information	n of the underwriter.					
Street address		1						
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 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.
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
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 2 7 7 5 0 If the issuer does not have a SEDAR profile complete Item 5(d) – (h).
d) Head office address
Street address Suite 488 – 1090 West Georgia Street Province/State BC
Municipality Vancouver Postal code/Zip code V6E 3V7
Country Canada Telephone number 604-260-4577
e) Date of formation and financial year-end
Date of formation20070209Financial year-end731YYYYMMDDMMDD
f) Reporting issuer status
Is the issuer a reporting issuer in any jurisdiction of Canada? No ✓ Yes
If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer. All AB BC MB 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 7 6 7 6 0 M
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 names CSE
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. Image: style="text-align: center;">
\$100M to under \$500M \$500M to under \$1B \$1B or over

ITEM 6 – INVESTMENT FUND ISSUER INFORMATION

If the issuer is an investm	nent fund, provide the following information.
a) Investment fund	manager information
Full legal name	
Firm NRD Number	(if applicable)
If the investment fund manage	er 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 investme	ent fund
Type of investment fund that i	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.
	in other investment fund issuers
Is a UCITs Fund	
collective investment schemes to op	stment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) directives that allow perate throughout the EU on a passport basis on authorization from one member state.
c) Date of formation	n and financial year-end of the investment fund
Date of formation	YYYY MM DD Financial year-end MM DD
d) Reporting issuer	status of the investment fund
Is the investment fund a repor	ting issuer in any jurisdiction of Canada? No Yes
If yes, select the jurisdictions o	f Canada in which the investment fund is a reporting issuer.
All	AB BC MB NB NL NT
NS 🗌	NU ON PE QC SK YT
e) Public listing stat	us of the investment fund
	USIP number, provide below (first 6 digits only).
CUSIP number	
	cly listed, provide the names of all exchanges on which its securities are listed. Include only the names of exchanges I has applied for and received a listing, which excludes, for example, automated trading systems.
Exchange names	
f) Net asset value ((NAV) of the investment fund
Select the NAV range of the in	nvestment 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 \$500N	M \$500M to under \$1B \$1B or over Date of NAV calculation: YYYY MM DD

ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION

If an issuer located outside of C purchasers resident in that juris should be disclosed in Item 8. T	diction of Canada	only. Do not ir	nclude in Item 7 se	curities is	ssued as	payment of c	ommissions	or finder's fees, which	
a) Currency									
Select the currency or currencie	s in which the distr		7	ounts pro ner (des		the report m	ust be in Ca	nadian dollars.	
b) Distribution date(s)								
State the distribution start and date as both the start and end of the distribution period covered	lates. If the report								
Start date 2017 05 05 End date 2017 05 05 YYYY MM DD YYYY MM DD									
c) Detailed purchase	r information								
Complete Schedule 1 of th	is form for eac	h purchaser	and attach the	schedu	le to t	he complete	ed report.		
 d) Types of securities 	s distributed								
Provide the following informati Instructions for how to indicate being distributed.							number assig	ned to the security	
						Single or	Canadian	\$	
Security CUSIP numb code (if applicabl		Description of s	ecurity		ber of urities	lowest	Highest price	Total amount	
U B S	one transfera warrant exer	able share purch	mmon share and ase warrant, each common share at a May 5, 2019.	9,00	9,814	0.23		2,072,257.00	
e) Details of rights ar	nd convertible/ex	changeable	securities						
If any rights (e.g. warrants, opti securities were distributed, prov	ons) were distribut ide the conversion	ed, provide the ratio and desc	e exercise price and						
Security code Underlyin security code	ng (Cana	se price idian \$) Highest	Expiry date (YYYY-MM-DD)	Conve rat	Liescripe other terms (it applicable)		(if applicable)		
W N T C M	S 0.4000		2019-05-05						
f) Summary of the d	stribution by juri	sdiction and	exemption						
State the total dollar amount of purchaser resides and for each distribution in a jurisdiction of C This table requires a separate li purchaser resides, if a purchase jurisdiction.	exemption relied o Canada, include dis ne item for: (i) each r resides in a jurisa	n in Canada fo stributions to p h jurisdiction w liction of Cana	or that distribution burchasers resident vhere a purchaser da, and (iii) each e	. Howeve t in that j resides, (i exemption	r, if an i urisdicti ii) each e	ssuer located on of Canada exemption reli	outside of C only. ied on in the	anada completes a jurisdiction where a	
For jurisdictions within Canada,	state the province	or territory, o	therwise state the	country.					
Province or country	Exe	emption relied or	ı			mber of chasers	Total amou	unt (Canadian \$)	
Alberta	NI 45-106 2.	3 (Accredite	d Investor)		3			\$138,000.00	
British Columbia	NI 45-106 2.	3 (Accredite	d Investor)			29		\$863,721.00	
Britich	06 2.5 (Family,	friends and	business associ	ates)	1			\$2,300.00	
Hong Kong	NI 45-106 2.	3 (Accredite	d Investor)			1		\$161,000.00	
Monaco	NI 45-106 2.		,			1		\$23,000.00	
New Brunswick	NI 45-106 2.	,	,			1		\$23,000.00	
Quebec	NI 45-106 2.	3 (Accredite	d Investor)			1		\$5,060.00	
Ontario	NI 45-106 2.					22		\$813,176.00	
Z:\WPDOCS\SEDAR\Rise\ROE			,	I					

Claige	\$2.027.257.00		
States	NI 45-106 2.5 (Accredited Investor)	Z	φ43,000.00
United	NI 45-106 2.3 (Accredited Investor)	2	\$43.000.00

 Total number of unique purchasers²
 61

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)
1.				
2.				
3.				
5.				

Item 8 – Compensation Information							
Provide information for each person (as defined in NI 45-106) to whom the issuer directly provides, or will provide, any compensation in connection with the distribution. Complete additional copies of this page if more than one person was, or will be, compensated.							
Indicate whether any compensation was paid, or will be paid, in connection with the distribution.							
No Yes If yes, indicate number of persons compensated.							
a) Name of person compensated and registration status							
Indicate whether the person compensated is a registrant. Image: Strange of the set of t							
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 Skanderbeg Capital Advisors 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 Suite 488 – 1090 West Georgia Street							
Municipality Vancouver Province/State BC							
Country Canada Postal code/Zip code V6E 3V7							
Email address mario@skanderbegcapital.com Telephone number 604-687-7130							
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. Connected with the issuer or investment fund manager Insider of the issuer (other than an investment fund) Director or officer of the investment fund or investment fund manager Employee of the issuer or investment fund manager None of the above							
d) Compensation details							
Provide details of all compensation paid, or to be paid, to the person identified in Item 8(a) in connection with the distribution. Provide all amounts in Canadian dollars. Include cash commissions, securities-based compensation, gifts, discounts or other compensation. Do not report payments for services incidental to the distribution, such as clerical, printing, legal or accounting services. An issuer is not required to ask for details about, or report on, internal allocation arrangements with the directors, officers or employees of a non-individual compensated by the issuer. Cash commissions paid 97,332.00							
Value of all securities distributed as compensation ⁴ Security codes Security code 1 Security code 2 Security code 3							
Describe terms of warrants, options or other rights Describe terms of warrants, options or other rights Describe terms of warrants, options or other rights							
Other compensation ⁵ Describe							
Total compensation paid 97,332.00							
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, <u>including</u> options, warrants or other rights exercisable to acquire additional securities of the issuer. ⁵ Do not include deferred compensation.							

ITEM 8 – COMPENSATION INFORMATION							
Provide information for each person (as defined in NI 45-106) to whom the issuer directly provides, or will provide, any compensation in connect with the distribution. Complete additional copies of this page if more than one person was, or will be, compensated.	ction						
Indicate whether any compensation was paid, or will be paid, in connection with the distribution. No Yes If yes, indicate number of persons compensated. 2							
 a) Name of person compensated and registration status b) 							
Indicate whether the person compensated is a registrant.							
If the person compensated is an individual, provide the name of the individual. Full legal name of individual Slusarchuk Bryan Family name First given name Secondary given names If the person compensated is not an individual, provide the following information. Secondary given names							
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. Image: State of the image of the im							
c) 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 Suite 488 – 1090 West Georgia Street	٦						
Municipality Vancouver Province/State British Columbia	_ 						
Country Canada Postal code/Zip code V6E 3V7	L T						
Email address bslusarchuk@k92mining.com Telephone number 604308652	L T						
d) 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. Connected with the issuer or investment fund manager Insider of the issuer (other than an investment fund) Director or officer of the investment fund or investment fund manager Employee of the issuer or investment fund manager							
✓ None of the above							
e) 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 amout in Canadian dollars. Include cash commissions, securities-based compensation, gifts, discounts or other compensation. Do not report payments services incidental to the distribution, such as clerical, printing, legal or accounting services. An issuer is not required to ask for details about, or report on, internal allocation arrangements with the directors, officers or employees of a non-individual compensated by the issuer. Cash commissions paid 4,440.00	for						
Value of all securities distributed as compensation ⁴ Security codes Security code 1 Security code 2 Security code 3							
Describe terms of warrants, options or other rights Each of the 19,304 warrants is exercisable into one common share at a price of \$0.40 per share until May 5, 2019.							
Other compensation ⁵ Describe]						
Total compensation paid 4,440.00							
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 issues Indicate the security codes for all securities distributed as compensation, <u>including</u> options, warrants or other rights exercisable to acquire additional securities of the issues ⁵ Do not include deferred compensation.							

ITEM 9 – DIRECTORS, EXEC If the issuer is an investment fund,				SUER			
Indicate whether the issuer is any of th Reporting issuer in any jurisd Foreign public issuer Wholly owned subsidiary of a Provide name	iction of Canada		f Canada ⁶				
Wholly owned subsidiary of a foreign public issuer ⁶ Provide name of foreign public issuer Issuer distributing eligible foreign securities only to permitted clients ⁷ If the issuer is at least one of the above, do not complete Item 9(a) – (c). Proceed to Item 10. ⁶ An issuer is a wholly owned subsidiary of a reporting issuer or a foreign public issuer if all of the issuer's outstanding voting securities, other than securities that are required by							
law to be owned by its directors, are beneficia ⁷ Check this box if it applies to the current dist of "eligible foreign security" and "permitted cli If the issuer is none of the a a) Directors, executive office	ribution even if the issue ent" in Part B(1) of the In bove, check this bo	r made previous dis ostructions. ••• and complete	tributions of other types of Item 9(a) – (c).	•	lients. Re	efer to the	definitions
Provide the following information for e territory, otherwise state the country. F	each director, executi	ive officer and pr	omoter of the issuer. F		da, stat	e the pr	ovince or
Organization or company name	First given Secondary given Business location of non-individual or residential Relationship to issuer						
				Province or country	D	0	Р
b) Promoter information							
If the promoter listed above is not an i locations within Canada, state the pro Officer.							

Organization or company name	Family name	Family name First given name	Secondary given	Residential jurisdiction of individual	Relationship (select one or b	o to promoter oth if applicable)
		name names		Province or country	D	0
c) Residential address of e	ach 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 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 A	N OFFENCE TO MAKE A MISE	REPRESENTATIO	N IN THIS I	REPORT			
By completing the information be	elow, I certify to the securities re	gulatory authority of	or regulator	that:			
 I have read and unders 	stand this report; and						
 all of the information pr 	ovided in this report is true.						
•		Colo					
Full legal name	Thomas	Cale					
	Family name	First given name	9	Secondary giv	ven names		
Title	CFO						
The	010						
Name of issuer/underwriter/	Rise Gold Inc.						
investment fund manager							
Telephone number	604-209-0034	Email address	calet	homas@gm	ail com		
	004 203 0004		calci	nomasegin			
Signature	"Cale Thomas"	Date	2017	05	15		
		_	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 indi	vidual certifying the rep				
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 Schedule 1 or 2, that this information is being collected by the securities regulatory authority or regulator under the authority granted in securities legislation, that this information is being collected for the purposes of the administration and enforcement of the securities legislation of the local jurisdiction, and of the title, business address and business telephone number of the public official in the local jurisdiction, as set out in this form, who can answer questions about the security regulatory authority's or regulator's indirect collection of the information, and
- b) has authorized the indirect collection of the information by the securities regulatory authority or regulator.