Form 45-106F1 Report of Exempt Distribution

IT IS AN OFFENCE TO MAKE A MISREPRESENTATION IN THIS REPORT

ITEM 1 - REPORT T	ITEM 1 – REPORT TYPE					
X New report Amended report If amended, provide filing date of report that is being amended.						
ITEM 2 – PARTY CE	RTIFYING THE REP	ORT				
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 fu	nd issuer					
X Issuer (other t	than an investment fund	l)				
Underwriter						
ITEM 3 – ISSUER N	ame and Other I	DENTIFIER	S			
Provide the following inform	nation about the issuer, or if	f the issuer is an	investment fund, about tl	he fund.		
Full le	egal name WINSTON		NG CORP.			
Previous full l	egal name					
	ne changed in the last 12 m	onths, provide n	nost recent previous legal	name.		
	Website		(if ap	oplicable)		
If the issuer has a legal entit	v identifier, provide below	Refer to Part B c	of the Instructions for the	definition of "legal entity identifi	or"	
	ty identifier					
Item 4 – Underwi	riter Informatic)N				
If an underwriter is completi	ing the report, provide the ι	ınderwriter's full	l legal name and firm Nat	ional Registration Database (NR	ک) number.	
Full legal name						
Firm NRD number	number (if applicable)					
If the underwriter does not have a firm NRD number, provide the head office contact information of the underwriter.						
Street address	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 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. X 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
b) Number of employees
Number of employees: X 0 - 49 50 - 99 100 - 499 500 or more
c) SEDAR profile number
Does the issuer have a SEDAR profile? No X Yes If yes, provide SEDAR profile number 0 0 3 7 5 8 9 If the issuer does not have a 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
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.
AII AB BC MB NB NL NT
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 names
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
\$100M to under \$500M \$500M to under \$1B \$1B or over

ITEM 6 - INVESTMENT FUND ISSUER INFORMATION

If the issuer is an invest	nent fund, provide the following information.
a) Investment fund	manager information
Full legal name	
Firm NRD Number	(if applicable)
If the investment fund manag	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 Money market Balanced	most accurately identifies the issuer (select only one). Equity Fixed income Alternative strategies Other (describe)
Invests primarily Is a UCITs Fund	of the following apply to the investment fund. in other investment fund issuers ¹ estment 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 formatio	n and financial year-end of the investment fund
Date of formation	YYYY MM DD MM DD
d) Reporting issuer	status of the investment fund
Is the investment fund a repo	rting issuer in any jurisdiction 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 NB NL NT NU ON PE QC SK YT
e) Public listing sta	tus of the investment fund
If the investment fund has a CUSIP number	CUSIP number, provide below (first 6 digits only).
for which the investment fund	icly 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 is \$0 to under \$5M \$100M to under \$500	Important fund as of the date of the most recent NAV calculation (Canadian \$). \$5M to under \$25M \$25M to under \$100M 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 Canac purchasers resident in that jurisdicti should be disclosed in Item 8. The ir	on of Canada only. Do not ii	nclude in Item 7 se	curities issued o	as payment of o	commissions	or finder's fees, which
a) Currency						
Select the currency or currencies in x Canadian dollar	which the distribution was m	7	ounts provided ner (describe)	-	nust be in Ca	nadian dollars.
b) Distribution date(s)						
State the distribution start and end date as both the start and end dates the distribution period covered by th	s. If the report is being filed f					
Start date	e 2016 08 03 YYYY MM DD		End date	2016 YYYY	08 03 MM DI	
c) Detailed purchaser inf	ormation					
Complete Schedule 1 of this f	-	and attach the	schedule to	the complet	ed report.	
 d) Types of securities dis 						
Provide the following information for Instructions for how to indicate the s being distributed.						
being distributed.					Canadian	\$
Security CUSIP number (if applicable)	Description of s		Number of securities	Single or lowest price	Highest price	Total amount
U B S	Common Share at a pure \$0.10 per share with one common share purchase	Units, with each unit one Class A Common Share at a purchase price of \$0.10 per share with one two year Class A common share purchase warrant at \$0.20 per warrant share in both first and second vear				\$100,000.00
e) Details of rights and c	onvertible/exchangeable	securities				
If any rights (e.g. warrants, options) securities were distributed, provide t						
Security code Underlying security code	Exercise price (Canadian \$) Lowest Highest	Expiry date (YYYY-MM-DD)	Conversion ratio	Describ	e other terms	(if applicable)
U B S W N T	\$0.20 \$0.20	2018-08-03		one Class	A Common rice of \$0.20	ble to purchase Share at an in both first and
f) Summary of the distrib	oution by jurisdiction and	exemption				
State the total dollar amount of sect purchaser resides and for each exen distribution in a jurisdiction of Canc This table requires a separate line it purchaser resides, if a purchaser res jurisdiction.	nption relied on in Canada fo Ida, include distributions to p em for: (i) each jurisdiction v ides in a jurisdiction of Cana	or that d ⁱ stribution. ourchasers resident vhere a purchaser i ida, and (iii) each e	However, if an in that jurisdic resides, (ii) each xemption relied	issuer located tion of Canada exemption rel	outside of C only. lied on in the	anada completes a jurisdiction where a
For jurisdictions within Canada, stat	· · · ·			umber of		
country	· .	Exemption relied on				unt (Canadian \$)
	2.5 [Family, friends and business associates]			1		5,000.00
	2.5 [Family, friends and	atesj	1		6,000.00	
	NI 45-106 2.3 [Accredite NI 45-106 2.3 [Accredite		1),000.00),000.00	
	NI 45-106 2.3 [Accredite			3		,000.00
		tal dollar amount	of securities	-	Ψ20	,
		of unique purcha		7	\$10	0,000.00
						4

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.				

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 X Yes If yes, indicate number of persons compensated. 1							
a) Name of person compensated and registration status							
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							
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 Mackie Research Capital Corporation							
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. Image: Ima							
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							
Municipality Province/State							
Country Postal code/Zip code							
Email address Telephone 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. 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 X 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 \$3,200.00 Value of all securities distributed 0 Security codes Security code 1							
as compensation ⁴							
40,000 Class A common share purchase warrants expiring Describe terms of warrants, options or other rights August 3, 2018 at an exercise price of \$0.20 in both first and second years							
Other compensation ⁵ Describe							
Total compensation paid \$3,200.00							
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 9 – DIRECTORS, EXECUTIVE OFFICERS AND PROMOTERS OF THE ISSUER									
If the issuer is an investment fund,	do not complete Ite	em 9. Proceed t	o Item 10.						
Indicate whether the issuer is any of th	e following (select al	ll that apply).							
X Reporting issuer in any jurisdi	iction of Canada								
Foreign public issuer									
Wholly owned subsidiary of a	reporting issuer in a	any jurisdiction o	of Canada ⁶						
Provide name	of reporting issuer								
Wholly owned subsidiary of a	foreign public issue	r ⁶							
Provide name of fo	oreign public issuer								
Issuer distributing eligible fore	eign securities only t	o permitted clier	nts ⁷						
If the issuer is at least one of the ab ⁶ An issuer is a wholly owned subsidiary of a r law to be owned by its directors, are beneficia ⁷ Check this box if it applies to the current distr of "eligible foreign security" and "permitted clin If the issuer is none of the a	eporting issuer or a foren ally owned by the reportin ribution even if the issue ent" in Part B(1) of the Iri	ign public issuer if a ng issuer or the fore r made previous dis structions.	all of the issuer's eign public issuer stributions of othe	outstandii ; respecti er types o	ng voting secu vely.				, ,
a) Directors, executive offic	cers and promoter	s of the issue	r						
Provide the following information for each director, executive officer and promoter of the issuer. For locations within Canada, state the province or territory, otherwise state the country. For "Relationship to issuer", "D" – Director, "O" – Executive Officer, "P" – Promoter. Organization or company name Family name First given name Secondary given names Business location of non-individual or residential jurisdiction of names Relationship to issuer (select all that apply)									
						vidual 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 First given name Secondary given name Residential jurisdiction of individual Relationship to promoter (select one or both if applicable)									
			names	-	vince or ountry	D		0	

c) Residential address of each 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 delegate completing and filing the report is dig	•							
The signature on the report must be name of the signatory is also in type	51	n form. The report m	ay include an	electronic sigr	nature provided the			
IT IS A	N OFFENCE TO MAKE A MISI	REPRESENTATIO	N IN THIS F	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	Polinsky	Max						
	Family name	First given nam	e	Secondary gi	ven names			
Title	Chief Financial Officer							
Name of issuer/underwriter/ investment fund manager WINSTON GOLD MINING CORP.								
Telephone number	204-989-2434 Email address max@winstongold.com							
Signature	(s) Max Polinsky	Date 2016 08 09						
	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.

X 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 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.