Form 45-106F1 Report of Exempt Distribution

IT IS AN OFFENCE TO MAKE A MISREPRESENTATION IN THIS REPORT

ITEM 1 – REPORT TYPE							
X New report Amended report If amended, provide filing date of report that is being amended. (YYYY-MM-DD)							
ITEM 2 – PARTY CERTIFYING THE REPORT							
Indicate the party certifying the report (select only one). For guidance regarding whether an issuer is an investment fund, refer to section 1.1 of National Instrument 81-106 Investment Fund Continuous Disclosure and the companion policy to NI 81-106.							
Investment fund issuer							
X Issuer (other than an investme	ent fund)						
ITEM 3 - ISSUER NAME AND OT	THER IDENTIFIERS						
Provide the following information about the iss	suer, or if the issuer is an investment fund, about the fund.						
Full legal name WI	NSTON GOLD CORP.						
Previous full legal name WI	NSTON GOLD MINING CORP						
If the issuer's name changed in the l	ast 12 months, provide most recent previous legal name.						
Website wir	nstongoldmining.com (if applicable)						
If the issuer has a legal entity identifier, provide	e below. Refer to Part B of the Instructions for the definition of "legal entity identifier".						
Legal entity identifier							
ITEM 4 – UNDERWRITER INFORI							
	vide the underwriter's full legal name and firm National Registration Database (NRD) number.						
Full legal name							
Firm NRD number (if applicable)							
If the underwriter does not have a firm NRD number, provide the head office contact information of the underwriter.							
Street address							
Municipality	lunicipality Province/State						
Country	Intry Postal code/Zip code						
Telephone number	ber 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 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. Image: Im
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
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 investr	ment fund, provide the following information.	
i) Investment fund	manager information	
Full legal name		7
Firm NRD Number	(if applicable)	
If the investment fund manaa	ger does not have a firm NRD number, provide the head office contact information of the investment fund man	naaer
Street Address		ugen.
Municipality	Province/State	
Country	Postal code/Zip code	
Telephone number	Website (if applicable)	
j) Type of investme		
	most accurately identifies the issuer (select only one).	
Money market	Equity Fixed income	
Balanced	Alternative strategies Other (describe)	
Invests primarily Is a UCITs Fund	of the following apply to the investment fund. / in other investment fund issuers j ¹ restment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) directives that operate throughout the EU on a passport basis on authorization from one member state.	t allow
,	n and financial year-end of the investment fund	
Date of formation	Financial year-end YYYY MM DD	
I) Reporting issuer	r status of the investment fund	
Is the investment fund a repor	rting issuer in any jurisdiction of Canada? No Yes	
If yes, select the jurisdictions o	of Canada in which the investment fund is a reporting issuer. AB BC MB NB NL NT NU ON PE QC SK YT	
 m) Public listing stat 	tus of the investment fund	
If the investment fund has a C CUSIP number	CUSIP number, provide below (first 6 digits only).	
	licly listed, provide the names of all exchanges on which its securities are listed. Include only the names of excha d has applied for and received a listing, which excludes, for example, automated trading systems.	anges
Exchange names		
n) Net asset value ((NAV) of the investment fund	
Select the NAV range of the ir \$0 to under \$5M \$100M to under \$500M	investment 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:]
		DD

ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION

If an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include in Item 7 and Schedule 1 information about purchasers resident in that jurisdiction of Canada only. Do not include in Item 7 securities issued as payment of commissions or finder's fees, which should be disclosed in Item 8. The information provided in Item 7 must reconcile with the information provided in Schedule 1 of the report.								
o) Currency								
Select the currency or currencies in which the distribution was made. All dollar amounts provided in the report must be in Canadian dollars. X Canadian dollar US dollar Euro Other (describe)								
p) Distril	oution date(s)							
date as both the	State the distribution start and end dates. If the report is being filed for securities distributed on only one distribution date, provide the distribution date as both the start and end dates. If the report is being filed for securities distributed on a continuous basis, include the start and end dates for the distribution period covered by the report.							
	Start date	e 2017 11 3	0	End date	2017 YYYY	11 30 MM DE		
q) Detai	led purchaser info		,		1111			
Complete Sch	edule 1 of this fo	orm for each purchaser	and attach the s	schedule to th	ne complete	ed report.		
r) Types	s of securities dis	tributed						
	ow to indicate the s	r all distributions that take _l ecurity code. If providing th	-				ned to the security	
Security code	CUSIP number (if applicable)	Description of	security	Number of securities	Single or lowest price	Highest price	Total amount ■	
D E B		Series 2 Secured Non-Con of the Issuer at close of S November 30	eries 2 Offering on	8	1.00	1.00	605,736	
s) Detai	ls of rights and co	onvertible/exchangeable	securities					
		were distributed, provide the conversion ratio and des						
Security code	Underlying security code	Exercise price (Canadian \$) Lowest Highest	Expiry date (YYYY-MM-DD)	Conversion ratio	Describe	e other terms	(if applicable)	
t) Sumr	nary of the distrib	ution by jurisdiction and	l exemption					
purchaser resides distribution in a This table require purchaser resides jurisdiction.	s and for each exem iurisdiction of Cana es a separate line ite s, if a purchaser resi	rities distributed and the nu ption relied on in Canada f da, include distributions to p em for: (i) each jurisdiction v des in a jurisdiction of Canc	or that distribution. I ourchasers resident i vhere a purchaser re Ida, and (iii) each ex	However, if an is in that jurisdictic esides, (ii) each e emption relied c	suer located on of Canada xemption reli	outside of Co only. ed on in the	anada completes a jurisdiction where a	
Province or		e the province or territory, o			nber of	Total amou	unt (Considion (*)	
country		Exemption relied o			hasers		int (Canadian \$)	
Taiwan	ſ	NI 45-106 2.3 [Accredite To			8 stributed		05,736 05,736	
	Total dollar amount of securities distributed 605,736 Total number of unique purchasers ² 8							
		urchasers to which the issuer dis n multiple exemptions for, that pu	tributed securities, cour		nly once, regar	dless of wheth	er the issuer distributed	

u) Net proceeds to the investment fund by jurisdiction

т

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.

v) 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							
w) Name of person compensated and registration status							
Indicate whether the person compensated is a registrant. X No Yes							
If the person compensated is an individual, provide the name of the individual.							
Full legal name of individual Mok Wai Yue 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							
Firm NRD number (if applicable)							
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.							
x) 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 9F-22, No. 108, Sec. 2, Nanjing E. Rd.							
Municipality Taipei City 104 Province/State Zhongshan Dist.							
Country Tiawan (R.O.C.) Postal code/Zip code							
Email address wynmok@grouphw.com Telephone number +866 (2) 989-963-199							
y) 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							
z) 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 59,624.30							
Value of all securities distributed as compensation ⁴ Security code 1 Security code 2 Security code 3							
Describe terms of warrants, options or other rights							
Other compensation ⁵ Describe							
Total compensation paid 59,624.30							
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.							

I	tem 9 – Directors, Execu	TIVE OFFICERS AI	ND PROMOT	ERS OF THE	Issuer	ł				
lf	the issuer is an investment fund,	do not complete Ite	em 9. Proceed t	to Item 10.						
In	ndicate whether the issuer is any of th	he following (select al	ll that apply).							
	X Reporting issuer in any jurisd	liction of Canada								
	Foreign public issuer									
	Wholly owned subsidiary of a		any jurisdiction	of Canada ⁶						
	Provide name	of reporting issuer								
	Wholly owned subsidiary of a		r ⁶							
		oreign public issuer								
	Issuer distributing eligible for	eign securities only t	o permitted clie	nts ⁷						
6Д Іа 7С	the issuer is at least one of the all An issuer is a wholly owned subsidiary of a w to be owned by its directors, are benefici. Check this box if it applies to the current dis foliable forcing security" and "permitted of	reporting issuer or a foren ally owned by the reportin tribution even if the issue	ign public issuer if a ng issuer or the for r made previous di	all of the issuer's eign public issuer	outstandir , respecti	ng voting secu vely.				, ,
01	f "eligible foreign security" and "permitted cl If the issuer is none of the a			e Item 9(a) –	(c).					
	aa) Directors, executive offi	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 erritory, 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 name Business location of non-individual or residential jurisdiction of non-individual or residential jurisdiction of Relationship to issuer						p to			
					-	individual Province or country		D	apply) O	Р
						TTOVINCE	or country	D		
	bb) Promoter information									
lo	the promoter listed above is not an cations within Canada, state the pro fficer.									
	Organization or company name	Family name	First given name	Secondary given	individual (select one of both if app					
				names	Province or country		D		0	

cc) 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 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 name of the signatory is also in type	51 .	n form. The report m	ay include an	electronic sigi	nature provided the			
IT IS A	N OFFENCE TO MAKE A MISP	REPRESENTATIC	ON IN THIS I	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	ie	Secondary gi	ven names			
Title	Chief Financial Officer							
Name of issuer/underwriter/ investment fund manager Winston Gold Corp.								
Telephone number	Telephone number 204-989-2434 Email address max@winstongold.com							
Signature	(Signed) Max Polinsky Date 2018 01 24							
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 indi	vidual certifying the rep	port			
Full legal name				Title	
L	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.