## Form 45-106F1 Report of Exempt Distribution (Non-investment fund issuer)

ITEM 1 – REPORT TYPE
✓ New report
Amended report If amended, provide Submission ID of report that is being amended: (Example: EDR1234567890-123)
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.
ITEM 3 – ISSUER NAME AND OTHER IDENTIFIERS
Provide the following information about the issuer, or if the issuer is an investment fund, about the fund. Full legal name
GoldHaven Resources Corp.
Previous full legal name If the issuer's name changed in the last 12 months, provide most recent previous legal name.
Website (if applicable)
If the issuer has a legal entity identifier, provide below. Refer to Part B of the Instructions for the definition of "legal entity identifier". Legal entity identifier
Did two or more co-issuers distribute a single security? 🔽 No 🗌 Yes
If two or more issuers distributed a single security, provide the full legal name(s) of the co-issuer(s) other than the issuer named above. Full legal name(s) of co-issuer(s)

# ITEM 4 – UNDERWRITER INFORMATION

If an underwriter is completing the report, µ Full legal name	provide the underw	writer's full leg	gal name and firm NRD number.	
Does the Underwriter's Firm have an NRD		Firm NRD n		derwriter
Street address	Municipality		Province/State	Postal/ZIP code
Country	Telephone numb	ber	Website <i>(if applicable)</i>	

ITEM 5 – ISSUER INFORMATION			
a) Primary industry			
Provide the issuer's North American Indus corresponds to the issuer's primary busine		NICS) code (6 digits only) that i	n your reasonable judgment most closely
NAICS industry code			
212220			
If the issuer is in the <b>mining industry</b> . ind	icate the stage of operations.	This does not apply to issuers	that provide services to issuers operating in
the mining industry. Select the category the ✓ Exploration □ Development □ Produc	at best describes the issuer's		
Is the issuer's primary business to invest a Mortgages Real estate Commerce		ets in any of the following? If y her debt Private companies	
b) Number of employees			
<b>√</b> 0 - 49 <b>50</b> - 99 <b>100</b> - 499 <b>500</b>	or more		
c) SEDAR profile number			
Does the issuer have a <u>SEDAR</u> profile ?	If yes, provide SEDAR profile	numper	EDAR profile is a "private" profile, please provide a ne issuer's profile by e-mail to
No 🗸 Yes	00048794		lings@osc.gov.on.ca
d) Head office address			have a SEDAR profile, complete Item 5(d) – (h).
Street address	Municipality	Province/State	Postal/ZIP code
Country	Telephone number		
e) Date of formation and financial year	r-end		
Date of formation	Financial year-end		
f) Reporting issuer status			
Is the issuer a reporting issuer in any juriso	liction of Canada?		
If yes, select the jurisdictions of Canada in	which the issuer is a reporting	g issuer.	
g) Public listing status			
Does the issuer have a CUSIP number?	CUSIP number (provide first	t 6 digits only)	
If the issuer is publicly listed, provide the n exchange and not a trading facility such as	÷		orimarily trade. Provide only the name of an
Exchange name:	nto Stock Exchange	TSX Venture Exchange	Canadian Securities Exchange
Aequitas Neo Exchange	tralian Securities Exchange	Deutsche Boerse	Euronext
London Stock Exchange	daq	New York Stock Exchange	Shanghai Stock Exchange
Shenzhen Stock Exchange	k Exchange Of Hong Kong	Tokyo Stock Exchange	OTHER
If other, describe:			
h) Size of issuer's assets			
financial statements for its first financial ye	-		Canadian \$). If the issuer has not prepared annual end date.
	DM to under \$1B	\$1B or over	

ITEM 7 – INFORMATION ABOUT T	HE DISTRIBUTI	ON			
If an issuer located outside of Canada comp resident in that jurisdiction of Canada only. I distribution, which must be disclosed in Item	o not include in Item	7 securities issued	as payment of com	missions or finder's fe	ees in connection with the
a) Currency					
Select the currency or currencies in which th Canadian dollar US dollar Euro		ade. All dollar amoui	nts provided in the re	port must be in Cana	adian dollars.
b) Distribution date(s)					
State the distribution start and end dates. If date as both the start and end dates. If the the distribution period covered by the report.Start DateEnd Date2020-10-292020-11-04					
c) Detailed surpheses information					
<ul> <li>c) Detailed purchaser information</li> <li>Complete <u>Schedule 1</u> of this form for each 45-106F1 Schedule 1 - Oct 29 and 1</li> <li>d) Types of securities distributed</li> </ul>	•		the completed rep	ort.	
d) Types of securities distributed					
Provide the following information for all distr. code. If providing the CUSIP number, indica					<sup>r</sup> how to indicate the security
				Canadian \$	
Security code	CUSIP number	Number of securities	Single or lowest price	Highest price	Total amount
UBS		12,247,500.0000	0.2000	0.2000	2,449,500.0000
Description of security: common shares an	d common share pur	chase warrants			
e) Details of rights and convertible/exch	angeable securitie	3			
If any rights (e.g. warrants, options) were dis securities were distributed, provide the conv Not Applicable					
convolubio, chart, ng	cise price nadian \$) Highest	Expiry date (YYYY-MM-DD)	)	Conversion rati	0
WNT CMS 0.30	0.300	0 2023-10-29	1:1		
Describe other terms: 11,307,500 warrants (if applicable) 940,000 warrants exp					
f) Summary of the distribution by jurisd	ction and exemptio	'n			
State the total dollar amount of securities dis purchaser resides and for each exemption re distribution in a jurisdiction of Canada, inclue This table requires a separate line item for (i resides, if a purchaser resides in a jurisdiction For jurisdictions within of Canada, state the	lied on in Canada for le distributions to pur each jurisdiction wh n of Canada, and (iii)	r that distribution. H rchasers resident in ere a purchaser res ) each exemption re	owever, if an issuer I that jurisdiction of C ides (ii) each exempt lied on in Canada, if	located outside of Ca canada only. tion relied on in the ju	nada completes a Irisdiction where a purchaser
Province or country	Exe	emption relied on		No. of unique purchasers <sup>2a</sup>	Total amount (Canadian \$)
British Columbia NI 45-10	6 2.3 [Accredited inv	estor]		30	1,716,500.0000
British Columbia NI 45-10	6 2.5 [Family, friends	s and business asso	ociates]	5	133,000.0000
Alberta NI 45-10	6 2.3 [Accredited inv	estor]		2	50,000.0000
Ontario NI 45-10	io NI 45-106 2.3 [Accredited investor] 1 100,000.0000				
United States Other –	lescribe			2	180,000.0000
Other exemption: Distribution outside of log	al jurisdiction BC, Al	B, NS			
Belgium Other –	describe			1	5,000.0000
Other exemption: Distribution outside of log	al jurisdiction BC, Al	B, NS			

Switzerland	Other – describe	1	20,000.0000
Other exemption:	Distribution outside of local jurisdiction BC, AB, NS		
Peru	Other – describe	1	75,000.0000
Other exemption:	Distribution outside of local jurisdiction BC, AB, NS		
United Kingdom	Other – describe	1	20,000.0000
Other exemption:	Distribution outside of local jurisdiction BC, AB, NS		
Cayman Islands	Other – describe	1	150,000.0000
Other exemption:	Distribution outside of local jurisdiction BC, AB, NS		
	Total dollar amount of securitie	es distributed	2,449,500.0000
	Total number of unique purchasers <sup>2b</sup>	45	
<sup>2a</sup> In calculating the	number of unique nurchasers per row, count each nurchaser only once. Joint nurchasers	may be counter	d as one nurchaser

<sup>2a</sup>In calculating the number of unique purchasers per row, count each purchaser only once. Joint purchasers may be counted as one purchaser. <sup>2b</sup>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.

#### **ITEM 7 – INFORMATION ABOUT THE DISTRIBUTION**

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.

#### ✓ Not Applicable

	Description	Date of document or other material	Previously filed with or delivered to regulator?	Previously filed Submission ID	Filename
1.			Y N		

<b>ITEM 8 – COMPENSATION INFORMATION</b>

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.

## PERSON 1

a) Name of person compensat	ted and registratio	n status							
Indicate whether the person com	pensated is a regist	rant.							
If the person compensated is an	individual, provide t	he full legal name of	the individual.						
Family name First given name Secondary given names									
If the person compensated is not Full legal name of non-individual	If the person compensated is not an individual, provide the following information. Full legal name of non-individual Firm NRD number (if applicable)								
Canaccord Genuity Corp.			900						
Indicate whether the person comp	pensated facilitated	the distribution throu	gh a funding portal or an internet-b	pased portal.					
b) Business contact information	on								
If a firm NRD number is not prov	ided in Item 8(a), pr	ovide the business c	ontact information of the person be	eing compensated.					
Street address	Municip	ality	Province/State	Postal/ZIP code					
Country	Telepho	ne number	Email address						
c) Relationship to issuer or in	vestment fund ma	nager							
Part B(2) of the Instructions and Connected with the issuer or in Insider of the issuer (other that	<i>the meaning of "con</i> nvestment fund mar n an investment fun	ntrol" in section 1.4 of nager d)	eger (select all that apply). Refer to f NI 45-106 for the purposes of cor ☐ Employee of the issuer or ☑ None of the above	npleting this section	).				
Director or officer of the invest	ment fund or investr	nent fund manager							
d) Compensation details									
in Canadian dollars. Include cash for services incidental to the dist about, or report on, internal alloca	h commissions, sec ribution, such as cle ation arrangements	urities-based compenerical, printing, legal o	tified in Item 8(a) in connection wi nsation, gifts, discounts or other co or accounting services. An issuer i ficers or employees of a non-indivi	ompensation. Do noi s not required to asi	t report payments k for details				
Cash commissions paid	30,590.0000								
Value of all securities $\checkmark$ distributed as	45,885.0000	Security code1 WN		Security code	3				
✓ distributed as compensation <sup>4</sup>			arrants, options or other rights						
		Warrants are non-tra	ansferable, exercisable at \$0.30 fo	r 3 years expiring Oo	x 29/23				
$\checkmark$ Other compensation <sup>5</sup>	100.0000	Describe							
		Wire transfer fee.							
Total compensation Paid	76,575.0000								
Check box if the person will o	or may receive any o	leferred compensatio	n (describe the terms below)						

<sup>4</sup> Provide the aggregate value of securities of the issuer. Indicate to acquire additional securities o	the security codes i f the issuer.	•				-		
<sup>5</sup> Do not include deferred compe	nsation.							
PERSON 2								
a) Name of person compensa	ted and registratio	on status						
Indicate whether the person com	pensated is a regist	trant.						
If the person compensated is an individual, provide the full legal name of the individual. Family name First given name Secondary given names								
		en name		y given names				
If the person compensated is not	t an individual provi	de the following infor	mation					
Full legal name of non-individual	, <b>_</b> , <b>_</b>	g		irm NRD number	(if applicable)			
Haywood Securities Inc.			1	630				
Indicate whether the person com √No  Yes	pensated facilitated	the distribution throu	igh a funding pol	rtal or an internet-	based portal.			
b) Business contact information	on							
If a firm NRD number is not prov	ided in Item 8(a), pi	rovide the business c	ontact informatio	on of the person b	eing compensated.			
Street address	Municip	ality	Province/State		Postal/ZIP code	_		
Country	Telepho	ne number	Email address			7		
c) Relationship to issuer or in	vestment fund ma	inager						
Indicate the person's relationship Part B(2) of the Instructions and	with the issuer or i the meaning of "col	nvestment fund mana ntrol" in section 1.4 of	f NI 45-106 for th	he purposes of co	-	on.		
Insider of the issuer (other tha	in an investment fun	d)	✓ None of	the above				
Director or officer of the invest	ment fund or investr	ment fund manager						
d) Compensation details								
Provide details of all compensati in Canadian dollars. Include cash for services incidental to the dist about, or report on, internal alloc	h commissions, sec tribution, such as cle	urities-based compenerical, printing, legal o	nsation, gifts, dis or accounting se	scounts or other convices. An issuer	ompensation. Do n is not required to a	not report payments isk for details		
✓ Cash commissions paid	10,500.0000							
Value of all securities	15,750.0000	Security code1 WN	T Secur	ity code2	Security cod	Je3		
✓ distributed as compensation <sup>4</sup>		Describe terms of wa	arrants, options	or other rights				
		Warrants are non-tra	ansferable, exer	cisable at \$0.30 fo	r 3 years expiring (	Dct 29/23		
Other compensation <sup>5</sup>		Describe						
Total compensation Paid	26,250.0000							
Check box if the person will c	or may receive any o	deferred compensatio	n (describe the t	terms below)				
<sup>4</sup> Provide the aggregate value of securities of the issuer. Indicate								
to acquire additional securities o					-passis, narrano (			

<sup>5</sup> Do not include deferred compensation.

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<sup>5</sup> Do not include	deferred	compensation.
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<sup>5</sup> Do not include deferred comper	nsation.					
PERSON 3						
a) Name of person compensat	ted and registratio	on status				
Indicate whether the person com ☐ No  ✓ Yes	pensated is a regist	trant.				
If the person compensated is an Family name	•	he full legal name of en name		ary given names		
If the person compensated is not Full legal name of non-individual	an individual, provi	de the following infor		Firm NRD number <i>(i</i>	f applicable)	
PI Financial Corp.				5290		
Indicate whether the person com	pensated facilitated	the distribution throu	ıgh a funding p	ortal or an internet-b	ased portal.	
b) Business contact information	on					
If a firm NRD number is not provi Street address	ided in Item 8(a), pr Municip		contact informat	-	ing compensated. Postal/ZIP code	
		5				
Country	Telepho	ne number	Email address	3		
c) Relationship to issuer or in	vestment fund ma	inager				
Connected with the issuer or in Insider of the issuer (other tha Director or officer of the invest	n an investment fun	d)		yee of the issuer or	investment fund man	ager
d) Compensation details						
Provide details of all compensation in Canadian dollars. Include cash for services incidental to the dist about, or report on, internal alloc	h commissions, sec ribution, such as cle	urities-based competerical, printing, legal	nsation, gifts, c or accounting s	iscounts or other co ervices. An issuer is	mpensation. Do not i s not required to ask	report payments for details
Cash commissions paid	3,360.0000					
Value of all securities $\checkmark$ distributed as	5,040.0000	Security code1 WN	IT Secu	Irity code2	Security code3	
✓ distributed as compensation <sup>4</sup>		Describe terms of w		0		
		Warrants are non-tra	ansferable, exe	rcisable at \$0.30 for	3 years expiring Oct	29/23
Other compensation <sup>5</sup>		Describe				
Total compensation Paid	8,400.0000	<u> </u>				
Check box if the person will c	or may receive any o	deferred compensatio	on (describe the	terms below)		
<sup>4</sup> Provide the aggregate value of securities of the issuer. Indicate to acquire additional securities of	the security codes f					

<sup>5</sup> Do not include deferred compensation.

### PERSON 4

Indicate whether the person com	pensated is a regist	trant.			
If the person compensated is an Family name	-	the full legal name of en name	the individual. Secondary given nar	nes	
If the person compensated is not Full legal name of non-individual Mackie Research Capital Corpora		de the following infor		mber <i>(if applicable)</i>	
Indicate whether the person com		l the distribution throu	igh a funding portal or an in	ternet-based portal.	
b) Business contact information	on				
If a firm NRD number is not prove Street address	ided in Item 8(a), pi Municip		ontact information of the pe Province/State	rson being compensated. Postal/ZIP code	
Country	Telepho	ne number	Email address		
c) Relationship to issuer or in	vestment fund ma	anager			
Indicate the person's relationship Part B(2) of the Instructions and Connected with the issuer or in Insider of the issuer (other tha	the meaning of "col nvestment fund mar n an investment fun	ntrol" in section 1.4 or nager Id)	f NI 45-106 for the purpose	Refer to the meaning of "connected" in s of completing this section. suer or investment fund manager	
d) Compensation details					
in Canadian dollars. Include cash for services incidental to the dist	n commissions, sec ribution, such as cle	curities-based competerical, printing, legal o	nsation, gifts, discounts or o or accounting services. An	tion with the distribution. Provide all amou other compensation. Do not report paymen issuer is not required to ask for details n-individual compensated by the issuer.	
$\checkmark$ Cash commissions paid	8,890.0000				
Value of all securities	13,335.0000	Security code1 WN	T Security code2	Security code3	
✓ distributed as compensation <sup>4</sup>			arrants, options or other rig ansferable, exercisable at \$	0.30 for 3 years expiring Oct 29/23	
Other compensation <sup>5</sup>		Describe			
Total compensation Paid	22,225.0000				
Check box if the person will c	or may receive any o	deferred compensatio	n (describe the terms below	/)	
	the security codes i f the issuer.			nts or other rights exercisable to acquire ac cluding options, warrants or other rights ex	
PERSON 5					
a) Name of person compensat	-				
✓ No  Yes					
If the person compensated is an Eamily name	-	-		202	
Family name	First giv	en name	Secondary given nan	1100	

Family name	First giv	en name	Secondary given names		
If the person compensated is not	an individual, provi	de the following informatio	)n.		
Full legal name of non-individual	an manada, prom	ao aro renorma gi mormado	Firm NRD number <i>(i</i>	f applicable)	
MJP Justus Inc.					
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.					
b) Business contact information	on				
If a firm NRD number is not provi	ded in Itom 8(a) n	rovide the business contac	et information of the person be	ing companyated	
Street address	. , .		vince/State	Postal/ZIP code	
	Municip	, ,			
2203 - 699 Cardero Street	Vancouv		ish Columbia	V6G 3H7	
Country	Telepho	ne number Ema	ail address		
Canada	(604) 36	3-2885 mpc	ound@wealthminerals.com		
c) Relationship to issuer or in	vestment fund ma	inager			
Indicate the person's relationship Part B(2) of the Instructions and a Connected with the issuer or ir	the meaning of "col	ntrol" in section 1.4 of NI 4		npleting this section.	
Insider of the issuer (other than	n an investment fun	d)	$\checkmark$ None of the above		
Director or officer of the investr	ment fund or investr	ment fund manager			
d) Compensation details					
Provide details of all compensation in Canadian dollars. Include cash for services incidental to the distr about, or report on, internal alloca	n commissions, sec ribution, such as cle	urities-based compensation erical, printing, legal or ac	on, gifts, discounts or other co counting services. An issuer is	mpensation. Do not s not required to ask	report payments for details
✓ Cash commissions paid	3,675.0000				
Value of all securities	5.512.5000	Security code1 WNT	Security code2	Security code3	3
distributed as	0,01210000		its, options or other rights		
compensation <sup>4</sup>		Non transferable warrant	s, exercisable at \$0.30 expirin	g on October 29, 202	20.
Other compensation <sup>5</sup>		Describe			
Total compensation Paid	9,187.5000				
Check box if the person will o	r may receive any o	deferred compensation (de	escribe the terms below)		
<sup>4</sup> Provide the aggregate value of a securities of the issuer. Indicate t					
to acquire additional securities of <sup>5</sup> Do not include deferred compen					-
PERSON 6					
a) Name of person compensat	ed and registratio	on status			
ndicate whether the person comµ ☑No      Yes	pensated is a regist	trant.			
f the person compensated is an i	ndividual, provide t	he full legal name of the in	ndividual.		
amily name		en name	Secondary given names		
kani	Priscilla				
	an individual i	de the fell-with a '	J [		
If the person compensated is not Full legal name of non-individual	arı marviaual, provi	ue the lonowing informatio	<i>n.</i> Firm NRD number <i>(i</i>	f applicable)	

Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.								
b) Business contact information	on							
If a firm NRD number is not prov Street address 1876 Eureka Avenue Country	Municip Port Co	ality	contact infol Province/s British Co Email add	State	Post	mpensated. al/ZIP code 5C1		
Canada	604-259	-7707	pi@ebcin	t.com				
c) Relationship to issuer or in	vestment fund ma	inager						
Part B(2) of the Instructions and	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)  None of the above  Director or officer of the investment fund or investment fund manager							
d) Compensation details								
Provide details of all compensati in Canadian dollars. Include cash for services incidental to the dist about, or report on, internal alloc	h commissions, sec tribution, such as cle	urities-based comp erical, printing, lega	ensation, gif I or accounti	ts, discounts or ot ng services. An is	ther compens ssuer is not re	sation. Do not equired to ask	report paymer for details	
Cash commissions paid	12,600.0000							
Value of all securities distributed as compensation <sup>4</sup>	18,900.0000	Security code1 W Describe terms of 1 56,000 non transfer 7,000 non transfer	warrants, opt	ts exercisable at	ts \$0.30 expirin		29, 2023	
Other compensation <sup>5</sup>		Describe						
Total compensation Paid	31,500.0000							
	Check box if the person will or may receive any deferred compensation (describe the terms below)							
to acquire additional securities of <sup>5</sup> Do not include deferred competence	f the issuer.	or an securities dist	nduleu as c	Simperisation, incl	uaing options	s, warrants or	other rights ex	ercisable
PERSON 7								
a) Name of person compensa	ted and registratic	on status						
Indicate whether the person compensated is a registrant. ✓ No □ Yes If the person compensated is an individual, provide the full legal name of the individual.								
Family name	First giv	en name	Seco	ondary given nam	es			
If the person compensated is not an individual, provide the following information.         Full legal name of non-individual         Hurricane Corporate Services Inc.								
Indicate whether the person com ✓No □ Yes	pensated facilitated	the distribution thro	ough a fundir	ng portal or an inte	ernet-based p	oortal.		

b) Business contact informati	on							
If a firm NRD number is not prov	vided in Item 8(a). p	rovide the business o	contact information of t	he person beina comper	nsated.			
Street address	Municip		Province/State	Postal/ZIF				
610 - 700 West Pender Street	Vancou	•	British Columbia	V6C 1G8				
Country	Telenho	ne number	Email address					
Canada	604-669		kulwant.sandher@gr	nail.com				
Canada								
c) Relationship to issuer or ir	nvestment fund ma	anager						
Indicate the person's relationship Part B(2) of the Instructions and Connected with the issuer or Insider of the issuer (other the	the meaning of "co investment fund ma an an investment fur	ntrol" in section 1.4 o nager Id)	f NI 45-106 for the pu	poses of completing this the issuer or investment	section.			
Director or officer of the invest	tment fund of invest	ment fund manager						
d) Compensation details								
Provide details of all compensation in Canadian dollars. Include cass for services incidental to the dis- about, or report on, internal alloc	h commissions, sec tribution, such as cl cation arrangements	eurities-based compe erical, printing, legal with the directors, or	nsation, gifts, discoun or accounting services	ts or other compensation a. An issuer is not require	n. Do not report payments ed to ask for details			
Cash commissions paid	35,700.0000							
Value of all securities ✓ distributed as	53,550.0000	Security code1 WN	IT Security co	de2 Secu	rity code3			
compensation <sup>4</sup>			arrants, options or oth	-				
				able at \$0.30 expiring Oo le at \$0.30 expiring on N	-			
Other compensation <sup>5</sup>		Describe						
	L							
Total compensation Paid	89,250.0000	<u> </u>						
			, deceribe the terms	halaw				
Check box if the person will or may receive any deferred compensation (describe the terms below)  Check box if the person will or may receive any deferred compensation (describe the terms below)  A Provide the aggregate value of all securities distributed as compensation, excluding options, warrants or other rights exercisable to acquire additional securities of the issuer. Indicate the security codes for all securities distributed as compensation, including options, warrants or other rights exercisable to acquire additional securities of the issuer.  5 Do not include deferred compensation.								
PERSON 8								
a) Name of person compensa	ted and registration	on status						
u)								
Indicate whether the person con √No Yes	Indicate whether the person compensated is a registrant. ☑No □Yes							
If the person compensated is an	•	•	the individual.					
Family name		en name	Secondary give	n names				
Stern	Gerald							
If the person compensated is not	t an individual, provi	ide the following infor	mation.					
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.								
b) Business contact informati	on							
If a firm NRD number is not prov	vided in Item 9(a)	rovide the husiness a	contact information of t	he person being compo	nsated			
Street address	Maea in item 8(a), p Municip		Province/State	ne person being comper Postal/ZIF				
8225 Tidewater Place	Vancou		British Columbia	V6P 6R3				

н

8225 Tidewater Place	Vancouv	ver	British Columbia	V6P 6R3	
Country	Telepho	ne number	Email address		
Canada	604-669	-1717	sgstern@shaw.ca		
c) Relationship to issuer or in	vestment fund ma	inager			
	the meaning of "con investment fund mar in an investment fun	ntrol" in section 1.4 o nager d)	nager (select all that apply). Refer to of NI 45-106 for the purposes of con ☐ Employee of the issuer or ✓ None of the above	mpleting this section	า.
	intent fund of investi	nent fund manager			
d) Compensation details					
in Canadian dollars. Include cash for services incidental to the dist	h commissions, sec tribution, such as cle	urities-based compe erical, printing, legal	ntified in Item 8(a) in connection wit ensation, gifts, discounts or other cc I or accounting services. An issuer is fficers or employees of a non-indivio	ompensation. Do no s not required to as	ot report payments sk for details
✓ Cash commissions paid	700.0000				
Value of all securities	1,050.0000	Security code1 WI	NT Security code2	Security code	e3
✓ distributed as		Describe terms of v	warrants, options or other rights		
compensation <sup>4</sup>		Non-transferable w	arrants exercisable at \$0.30 expiring	g October 29, 2023	
Other compensation <sup>5</sup>		Describe			
☐ Other compensation <sup>5</sup>		Describe			
	4 750 0000				
Total compensation Paid	1,750.0000 or may receive any c	deferred compensati	on (describe the terms below)		
Check box if the person will o Check box if the person will o	or may receive any of may receive any of all securities distribution the security codes f	uted as compensatio	on (describe the terms below) on, excluding options, warrants or ot ributed as compensation, including		
Check box if the person will o Check box if the person will o	or may receive any of all securities distribu- the security codes f of the issuer.	uted as compensatio	on, excluding options, warrants or ot		
Check box if the person will o Check box if the person will o	or may receive any of all securities distribu- the security codes f of the issuer.	uted as compensatio	on, excluding options, warrants or ot		
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□       Check box if the person will of <sup>4</sup> Provide the aggregate value of         securities of the issuer. Indicate         to acquire additional securities of <sup>5</sup> Do not include deferred comper <b>PERSON 9</b> a) Name of person compensate         Indicate whether the person com         ✓ No       Yes         If the person compensated is an         Family name         If the person compensated is not         Full legal name of non-individual         Euromerica Capital Group Inc.         Indicate whether the person com         ✓ No       Yes         b) Business contact information         If a firm NRD number is not prov         Street address         404 - 999 Canada Place	all securities distributes distributes ecurity codes for the issuer. Insation. Ited and registration Ited and Item 8(a), provide Ited Ited and Item 8(a), provide Ited and Ited a	uted as compensation for all securities distribu- on status trant. the full legal name of en name de the following infor- de the following infor- de the business of ality ver ne number	on, excluding options, warrants or of ributed as compensation, including f the individual. Secondary given names mation. Firm NRD number (i ugh a funding portal or an internet-b contact information of the person be Province/State British Columbia	options, warrants of if applicable) based portal. eing compensated. Postal/ZIP code	

c) Relationship to issuer of h		inagei						
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.								
Insider of the issuer (other than an investment fund)								
Director or officer of the investment fund or investment fund manager								
d) Compensation details								
Provide details of all compensati in Canadian dollars. Include cas for services incidental to the disi about, or report on, internal alloc	h commissions, sec tribution, such as cl	curities-based con erical, printing, le	mpensation, g egal or accou	nifts, discounts or on the services. An interview of the services of the servi	other compe issuer is not	nsation. Do not re required to ask f	eport payme or details	
✓ Cash commissions paid	10,500.0000							
Value of all securities	15,750.0000	Security code1	WNT	Security code2		Security code3		
distributed as compensation <sup>4</sup>		Describe terms	of warrants, o	ptions or other rig	nts	-		-
		Non-transferabl	e warrants ex	ercisable at \$0.30	expiring on I	November 4, 2023	i.	
Other compensation <sup>5</sup>		Describe						
Total compensation Paid	26,250.0000							
Check box if the person will or may receive any deferred compensation (describe the terms below)								
<sup>4</sup> Provide the aggregate value of securities of the issuer. Indicate		•		• •		•	•	
to acquire additional securities o	of the issuer.						-	

<sup>5</sup> Do not include deferred compensation.

	IRECTORS, EXECUTIVE OFFICERS	S AND PROMOTERS OF TH	HE ISSUER					
	her the issuer is any of the following (select the issuer in any jurisdiction of Canada	one that applies - if more than one	applies, select only one).					
	Foreign public issuer							
U Wholly ow	ned subsidiary of a reporting issuer in any juris me of reporting issuer	diction of Canada <sup>6</sup>						
	Wholly owned subsidiary of a foreign public issuer <sup>6</sup> Provide name of foreign public issuer							
	ributing only eligible foreign securities and the	distribution is to parmitted alignts a	nly <sup>7</sup>					
<b>If the issu</b> <sup>6</sup> An issue securities <sup>7</sup> Check th	<b>The second seco</b>	plete Item 9(a) – (c). Proceed to I suer or a foreign public issuer if all o ectors, are beneficially owned by the ren if the issuer made previous distr	tem 10. of the issuer's outstanding voting se e reporting issuer or the foreign pub ibutions of other types of securities	lic issuer, respectively.				
└ If the iss	uer is none of the above, check this box an	d complete Item 9(a) – (c).						
a) Directors	executive officers and promoters of the is	suer						
	llowing information for each director, executive wise state the country. For "Relationship to iss			he province or				
Individual?	Organization or company name	Family name First given name Secondary given name	Business location of non-individual or residential jurisdiction of individual	Relationship to issuer (select all that apply)				
Y N				D O P				
			L					
b) Promoter	information			·				
	r listed above is not an individual, provide the t a, state the province or territory, otherwise state							
	Organization or company name       Family name       Residential jurisdiction of individual       Relationship to promoter (select one or both if applicable)							
c) Resident	al address of each individual							
Complete <u>Sc</u> attach to the	hedule 2 of this form providing the full resid completed report. Schedule 2 also requires	lential address for each individua information to be provided about	l listed in Item 9(a) and (b) and 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 exempt distribution.

By completing the information below, I certify, on behalf of the issuer/underwriter, 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/agent	GoldHaven Resources Corp.					
Full legal name - Family name	First given na	ame		Secondary given names		
Ritchie	Marla					
Title		Telepho	one number	Email address		
Corporate Secretary		604-638	3-5938	marla@goldhavenresources.com		
Signature Marla K. Ritchie		Date	2020-11-06			

## 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 - Family name	First given name	Secondary given names	Title
Name of company		Telephone number	Email 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 regulatory authority or regulator.

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.

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Submission ID	Date