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 amend	led, provide filing date	of report that is being am	ended (YYYY-MM-DD)					
TEM 2 - PARTY CERTIFYING THE REPORT								
Indicate the party certifying the report (select National Instrument 81-106 Investment Fund								
Investment fund issuer								
✓ Issuer (other than an investr	ment fund)							
ITEM 3 - ISSUER NAME AND OTHE	ER IDENTIFIERS							
Provide the following information about the is		vestment fund, about the fund.						
Full legal name	Gunpowder Capital Co	rp.						
Previous full legal name								
If the issuer's name changed in th	ne last 12 months, provide mo	ost recent previous legal name.						
Website	www.gunpowdercapita	lcorp.com	(if applicable)					
If the issuer has a legal entity identifier, provid	ide below. Refer to Part B of t	he Instructions for the definition	of "legal entity identifier".					
Legal entity identifier								
Item 4 - Underwriter Informa	TION							
If an underwriter is completing the report, pro	ovide the underwriter's full le	gal name and firm National Reg	istration Database (NRD) number.					
Full legal name								
Firm NRD number		(if applicable)						
If the underwriter does not have a firm NRD r	number, provide the head off	ice contact information of the ur	nderwriter.					
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 5 2 3 9 9 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.
☐ Mortgages ☑ Real estate ☑ Commerial/business debt ☐ Consumer debt ☑ Private companies
b) Number of employees
Number of employees: Image: O - 49 Image: 50 - 99 Image: 100 - 499 Image: 500 or more
c) SEDAR profile number
Does the issuer have a SEDAR profile? No Yes If yes, provide SEDAR profile number 0 0 0 2 4 7 7 3 If the issuer does not have SEDAR profile complete item 5(d) - (h).
d) Head office address
Street address Province/State
Municipality Postal code/Zip code
Country Telephone number
e) Date of formation and financial year-end
Date of formation
f) Reporting issuer status
Is the issuer a reporting issuer in any jurisdication of Canada? No Yes
If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer.
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 name(s):
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
S100M to under \$500M S500M to under \$1B \$1B or over

ITEM 6 - INVESTMEN	t Fund Issuer Information
If the issuer is an invest	tment fund, provide the following information.
a) Investment fund m	anager information
Full legal name	
Firm NRD number	(if applicable)
If the investment fund ma	nager 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 investmen	t fund
Type of investment fund the	at most accurately identifies the issuer (select only one) .
Money market	Equity Fixed income
Balanced	Alternative strategies Other (describe)
Indicate whether one or bot	h of the following apply to the investment fund .
Invests primarily in	n other investment fund issuers
Is a UCITs Fund ¹	ive Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU)
directives that allow collecti	ve investment of transferable securities tands (och's runds) are investment tands regulated by the European onion (EO) ve investment schemes to operate throughout the EU on a passport basis on authorization from one member state.
c) Date of formation a	and financial year-end of the investment fund
Date of forma	tion Financial year-end MM DD MM DD
d) Reporting issuer s	tatus of the investment fund
Is the investment fund a rep	porting issuer in any jurisdication of Canada? 🔲 No 🗌 Yes
If yes, select the jurisdictions	of Canada in which the investment fund is a reporting issuer. AB BC MB NB NL NT
	s of the investment fund
If the investment fund has a	a CUSIP number, provide below (first 6 digits only)
	CUSIP number
	blicly listed, provide the names of all exchanges on which its securities are listed. Include only the names of exchanges for I for and received a listing, which excludes, for example, automated trading systems.
Exchange nam	les
f) Net asset value (NA	AV) of the investment fund
-	investment 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 \$50	
	YYYY MM DD

Item 7 - Information A	BOUT THE DISTRIBUTIO	ON								
If an issuer located outside of Can purchasers resident in that jurisdic should be disclosed in Item 8. The	tion of Canada only. Do not inc	lude in Ite	em 7 securitie	es issued a	as payn	nent of c	ommissi	ons or fine	der's fees, whic	h
a) Currency										
Select the currency or currencies in which the distribution was made. All dollar amounts provided in the report must be in Canadian dollars.										
✓ Canadian dollar	✓ Canadian dollar US dollar □ Euro □ Other (describe)									
b) Distribution date(s)										
as both the start and end dates. I distribution period covered by th	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 distribution period covered by the report.									on date
Start (date 2017 12 22 YYYY MM DE			End dat		017	12 MM	22 DD		
c) Detailed purchaser infor	mation									
Complete Schedule 1 of this	form for each purchaser a	nd attac	h the schee	dule to t	the co	mplete	d repor	t.		
d) Types of securities distr	ibuted									
Provide the following informatic Instructions for how to indicate distributed. The information incl <u>Asked Questions.</u>	the security code. If providing th	e CUSIP r	umber, indic	ate the fu	ull 9-dig	it CUSIP	number	assigned	to the security	
							(Canadian \$	3	
Security CUSIP number (if applicable)	Description of security		Numbe securi		lo	ngle or owest price	High	est price	Total amo	unt
P R S 403072200 C	ass - A Preferred Shares	6	15	,000.00	0 1	0.000	0		150,0	00.00
e) Details of rights and cor	vertible/exchangeable secu	urities								
If any rights (e.g. warrants, optio were distributed, provide the co								vertible/e	xchangeable s	ecurities
Security Underlying code security code	Exercise price (Canadian \$)	Expi	ry date - MM-DD)	Conver	rsion	-		er items (if	applicable)	
	Lowest Highest									
f) Summary of the distribut	ion by jurisdiction and even	ntion]
 f) Summary of the distribution by jurisdiction and exemption State the total dollar amount of securities distributed and the number of purchasers for each jurisdiction of Canada and foreign jurisdiction where a purchaser resides and for each exemption relied on in Canada for that distribution. However, if an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include distributions to purchasers resident in that jurisdiction of Canada only. This table requires a separate line item for: (i) each jurisdiction where a purchaser resides, (ii) each exemption relied on in the jurisdiction where a purchaser resides, if a purchaser resides in a jurisdiction of Canada, and (iii) each exemption relied on in Canada, if a purchaser resides in a foreign jurisdiction. For jurisdictions within Canada, state the province or territory, otherwise state the country. 							а			
Province or country	Exemption	n relied on				ber of hasers	-	Fotal amou	int (Canadian \$)	
British Columbia	NI 45-106 2.3 [Accredi	ted inve	estor]				2		150,000	0.00
		Total dol	lar amount o	of securi	ities di	stribute	d		150,000	0.00
	Total num	ber of un	ique purcha	asers ²			2			
² In calculating the total number the issuer distributed multiple ty							haser or	ly once, r	egardless of w	hether

g) Net proceeds to the investment fund by jurisdiction

If the issuer is an investment fund, provide the net proceeds to the investment fund for each jurisdiction of Canada and foreign jurisdiction where a purchaser resides.³ If an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include net proceeds for that jurisdiction of Canada only. For jurisdictions within Canada, state the province or territory, otherwise state the country.

Province or country	Net proceeds (Canadian \$)
Total net proceeds to the investment fund	

³"Net proceeds" means the gross proceeds realized in the jurisdiction from the distributions for which the report is being filed, less the gross redemptions that occurred during the distribution period covered by the report.

h) Offering materials - This section applies only in Saskatchewan, Ontario, Québec, New Brunswick and Nova Scotia.

If a distribution has occurred in Saskatchewan, Ontario, Québec, New Brunswick or Nova Scotia, complete the table below by listing the offering materials that are required under the prospectus exemption relied on to be filed with or delivered to the securities regulatory authority or regulator in those jurisdictions.

In Ontario, if the offering materials listed in the table are required to be filed with or delivered to the Ontario Securities Commission (OSC), attach an electronic version of the offering materials that have not been previously filed with or delivered to the OSC.

Description	Date of document or other material (YYYY-MM-DD)	Previously filed with or delivered to regulator? (Y/N)	Date previously filed or delivered (YYYY-MM-DD)

ITEM 8 - COMPENSATION 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. 2	
a) Name of person compensated and registration status	
Indicate whether the person compensated is a registrant. No Ves	
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 MD Management Inc.	1
Firm NRD number 2 9 8 3 0 (if applicable)	•
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. 🗹 No 🗌 Ye	es
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	Ī
Country Postal code/Zip code	- T
Email address	Ē
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.	
Connect 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 Security codes Security code 1 Security code 2 Security code 3	
Value of all securities distributed as	
compensation ⁴	
Describe terms of warrants, options or other rights	
Other compensation ⁵ 4,000.00 Describe Finders Fee of 8% on \$50,000.00 raised.	Ī
Total compensation paid 4,000.00	
Check box if the person will or may receive any deferred compensation (describe the terms below)	7
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.	

a) Name of person com	pensated and registration status				
Indicate whether the perso	on compensated is a registrant.	✓ No	Yes		
If the person compensated is	s an individual, provide the name of the in	dividual.			
Full legal name of indi	ividual				
	Family name	First given nam	ne Seco	ondary given names	
If the person compensated	is not an individual, provide the following	information.			
Full legal name	e of non-individual First Mark Invest	ment Corporation			
F	Firm NRD number		(if app	licable)	
Indicate whether the person	n compensated facilitated the distribution	through a funding porta	l or an internet-bas	ed portal. 🗸] No 🔲 Yes
b) Business contact info	ormation				
If a firm NRD number is not	provided in Item 8 (a), provide the busines	s contact information of	f the person being c	ompensated.	
Street address	224-6655 178 St NW				
Municipality	Edmonton	7	Province/State	Alberta	
Country	Canada	– Posta	al code/Zip code	T5T 4J5	
Email address	martyn@firstmarkinvestment	⊐ Tel	ephone number	7802448266	
	.com			1002440200	
c) Relationship to issue	r or investment fund manager				
	nship with the issuer or investment fund m the meaning of "control" in section 1.4 of I				ted" in Part
	uer or investment fund manager		ler of the issuer (ot		ment fund)
Director or officer of	the investment fund or investment fund n	nanager 🗌 Emp	loyee of the issuer	or investment fun	d manager
✓ None of the above					
d) Compensation detail	S				
Canadian dollars. Include cas services incidental to the dist	nsation paid, or to be paid, to the person id sh commissions, securities-based compens tribution, such as clerical, printing, legal or gements with the directors, officers or emp	ation, gifts, discounts or accounting services. An	other compensation issuer is not require	n. Do not report po ed to ask for detail	yments for
Cash commissions p	paid	Security codes	Security code 1	Security code 2	Security code 3
Value of all securiti distributed		,			
compensati					
Describe	terms of warrants, options or other rights				
Other compensation	on ⁵ 8,000.00 Describe	Finders Fee of 8%	on \$100,000.00	raised	
Total compensation p	aid 8,000.00				
Check box if the p	erson will or may receive any deferred co	mpensation (describe t	he terms below)		
	ue of all securities distributed as compens				
	issuer. Indicate the security codes for all s e additional securities of the issuer.	securities distributed as	compensation, <u>inc</u>	l <u>uding</u> options, wa	rrants or other

⁵Do not include deferred compensation.

ITEM 9 - DIRECTC	RS, EXECUTI	VE OFFICERS A	ND PROMO	TERS OF THE I	SSUER				
If the issuer is an in	vestment fund,	do not complete Ite	em 9. Procced to	o Item 10.					
Indicate whether the	issuer is any of th	e following (select a	ll that apply).						
Reporting issu	ier in any jurisdio	ction of Canada							
Foreign public issuer									
Wholly owned subsidiary of a reporting issuer in any jurisdiction of Canada ⁶									
Provide name of reporting issuer									
Wholly owned	subsidiary of a	oreign public issue	r ⁶						
Pro	ovide name of fo	reign public issuer							
Issuer distribu	ting eligible forei	gn securities only to	o permitted clien	ts ⁷					
If the issuer is at lea	ist one of the al	oove, do not compl	ete Item 9(a) –	(c). Proceed to Ite	<i>m 10</i> .				
⁶ An issuer is a wholly securities that are req ⁷ Check this box if it ap clients. Refer to the de	uired by law to b plies to the curre finitions of "eligi	e owned by its direc ent distribution even	ctors, are benefic of the issuer ma and "permitted	cially owned by the de previous distrib client" in Part B(1)	reporting issuer utions of other ty	or the foreig pes of secu	n publ	ic issue	er, respectively.
a) Directors, exe	cutive officers a	and promoters of	the issuer						
Provide the following territory; otherwise s							da, sta	te the p	province or
Organization or	company name	Family name	First given name	Secondary give names	n Business lo non-indivi resider jurisdict indivio	dual or ntail ion of		ationshi issuer ect all apply)	that
					Province o	r country	D	0	Р
b) Promoter infor	mation								
If the promoter listed	If the promoter listed above is not an individual, provide the following information for each director and executive officer of the promoter. For locations within Canada, state the province or territory; otherwise state the country. For "Relationship to promoter", "D" – Director, "O" – Executive Officer.								
Organization or	Organization or company nameFamily nameFirst given nameSecondary given nameResidential jurisdiction of individualRelationship to promoter (select one or both if applicable)								
					Province or country	D		C	>
c) Residential ad	dress of each i	ndividual							
Complete Schedule	? of this form pr	oviding the full re	sidential addre	ss for each individ	lual listed in Ite	m 9(a) and	(b) an	d attac	ch 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 AN OFFENCE TO MAKE A MISREPRESENTATION IN THIS 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	Kordy	Frank			
	Family name	First given name		Secondary given	
Title	CEO, Secretary & Director				
Name of issuer/underwriter/ investment fund manager	Gunpowder Capital Corp.				
Telephone number	6474664037 Email address frank.kordy@gunpowderca			ercapitalcor	
Signature	/s/ Frank Kordy	Date	2017	12	24
		1	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 indiv	idual certifying the repo	ort			
Full legal name				Title	
-	Family name	First given name	Secondary given names		
Name of company					
Telephone number		E	mail address		

Notice - Collection and use of personal information

The personal information required under this form is collected on behalf of and used by the securities regulatory authority or regulator under the authority granted in securities legislation for the purposes of the administration and enforcement of the securities legislation.

If you have any questions about the collection and use of this information, contact the securities regulatory authority or regulator in the local jurisdiction(s) where the report is filed, at the address(es) listed at the end of this form.

The attached Schedules 1 and 2 may contain personal information of individuals and details of the distribution(s). The information in Schedules 1 and 2 will not be placed on the public file of any securities regulatory authority or regulator. However, freedom of information legislation may require the securities regulatory authority or regulator to make this information available if requested.

By signing this report, the issuer/underwriter confirms that each individual listed in Schedule 1 or 2 of the report who is resident in a jurisdiction of Canada:

- a) has been notified by the issuer/underwriter of the delivery to the securities regulatory authority or regulator of the information pertaining to the individual as set out in Schedules 1 or 2, that this information is being collected by the securities regulatory authority or regulator under the authority granted in securities legislation, that this information is being collected for the purposes of the administration and enforcement of the securities legislation of the local jurisdiction, and of the title, business address and business telephone number of the public official in the local jurisdiction, as set out in this form, who can answer questions about the security regulatory authority's or regulator's indirect collection of the information, and
- b) has authorized the indirect collection of the information by the securities regulatory authority or regulator.