Form 45-106F1 Report of Exempt Distribution

IT IS AN OFFENCE TO MAKE A MISREPRESENTATION IN THIS REPORT

ITEM 1 - REPORT TYPE				
New reportAmended reportIf amer	nded, provide filing date of	f report that is being am	ended	(YYYY-MM-DD)
ITEM 2 - PARTY CERTIFYING THE	Report			
Indicate the party certifying the report (sele National Instrument 81-106 Investment Fu				ion 1.1 of
Investment fund issuer				
Issuer (other than an inves	stment fund)			
Item 3 - Issuer Name and Oti				
Provide the following information about th		stment fund, about the fund		
Full legal name	Waterfront Capital Corpo	· · ·		
Previous full legal name				
	the last 12 months, provide most	t recent previous legal name		
Website	http://waterfrontcapitalco		(if applicable)	
If the issuer has a legal entity identifier, pro				
Legal entity identifier			of legal entry aentifier .	
ITEM 4 - UNDERWRITER INFORM	ATION			
If an underwriter is completing the report, p	provide the underwriter's full lega	al name and firm National Reg	istration Database (NRD) n	umber.
Full legal name]
Firm NRD number		(if applicable)		
If the underwriter does not have a firm NRI	O number, provide the head office	e contact information of the ur	nderwriter.	
Street address]
Municipality		Province/State]
Country		Postal code/Zip code		1

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 code52399
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. 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: 🔽 0 - 49 🗌 50 - 99 🗌 100 - 499 🔲 500 or more
c) SEDAR profile number
Does the issuer have a SEDAR profile? No Yes If yes, provide SEDAR profile number 0 0 0 0 3 9 7 5 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 - INVESTMENT	Fund Issuer Information
If the issuer is an investi	ment fund, provide the following information.
a) Investment fund ma	inager information
Full legal name	
Firm NRD number	(if applicable)
If the investment fund man	ager 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 investment	fund
Type of investment fund that	most accurately identifies the issuer (select only one) .
Money market	Equity Fixed income
Balanced	Alternative strategies Other (describe)
Indicate whether one or both	of the following apply to the investment fund .
Invests primarily in	other investment fund issuers
Is a UCITs Fund ¹	
¹ Undertaking for the Collectiv directives that allow collective	re Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) e investment schemes to operate throughout the EU on a passport basis on authorization from one member state.
	nd financial year-end of the investment fund
Date of formati	
	YYYY MM DD MM DD
d) Reporting issuer sta	atus of the investment fund
	orting issuer in any jurisdication 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 NL NT
e) Public listing status	NU ON PE QC SK YT of the investment fund
	CUSIP number, provide below (first 6 digits only)
.,	CUSIP number
If the investment fund is pub	licly listed, provide the names of all exchanges on which its securities are listed. Include only the names of exchanges for
	for and received a listing, which excludes, for example, automated trading systems.
Exchange name	
f) Net asset value (NA	V) of the investment fund
-	nvestment fund as of the date of the most recent NAV calculation (Canadian \$).
\$0 to under \$5M	S5M to under \$25M \$25M to under \$100M
\$100M to under \$500	
	YYYY MM DD

ITEM 7 - INFORMATION A	BOUT THE DISTRIBUTIC	ON					
If an issuer located outside of Cana purchasers resident in that jurisdict should be disclosed in Item 8. The i	tion of Canada only. Do not inc	lude in Ite	em 7 securitie	es issued as	s payment of con	nmissions or find	der's fees, which
a) Currency							
Select the currency or currencies in	which the distribution was mad	de. All dol	llar amounts	provided ii	n the report mus	t be in Canadiar	n dollars.
✓ Canadian dollar	US dollar	0	Other	(describe))		
b) Distribution date(s)							
State the distribution start and en as both the start and end dates. If distribution period covered by the Start d	the report is being filed for sec report.	urities dis			e 2017		
c) Detailed purchaser inform	nation						
Complete Schedule 1 of this f	orm for each purchaser a	nd attac	h the sche	dule to tl	he completed	report.	
d) Types of securities distri							
Provide the following information Instructions for how to indicate to distributed. The information inclu <u>Asked Questions.</u>	he security code. If providing th	e CUSIP n	, number, indic	ate the ful	l 9-digit CUSIP n	number assigned	to the security being ee our <u>Frequently</u>
Security code CUSIP number (if applicable)	Description of security		Numbe		Single or lowest price	Highest price	Total amount
UBS94154L209wa adIss	its, with each unit consis e common share and on are purchase warrant. E irrant is exercisable into ditional common share c suer, at a price of \$0.10 p are until October 13, 201	e Each one of the oer	14,410	0,000.00	0.0500	0.0500	720,500.00
e) Details of rights and con-	vertible/exchangeable secu	urities					
If any rights (e.g. warrants, option were distributed, provide the con	ns) were distributed, provide the	e exercise					xchangeable securities
Security Underlying	Exercise price (Canadian \$) Lowest Highest		ry date - MM-DD)	Conversi ratio		ibe other items (if a	applicable)
W N T C M S	0.1000 0.1000	2019	9-10-13	1 for 1			
f) Summary of the distributi	on by jurisdiction and exem	nption		•			
State the total dollar amount of s purchaser resides and for each ex distribution in a jurisdiction of Co This table requires a separate line purchaser resides, if a purchaser jurisdiction. For jurisdictions within Canada, s	remption relied on in Canada fo nada, include distributions to p e item for: (i) each jurisdiction w resides in a jurisdiction of Cana	or that dis ourchasers where a pu da, and (i	tribution. Ho s resident in t ırchaser resid ii) each exen	wever, if an that jurisdid des, (ii) each nption relie	n issuer located o ction of Canada h exemption reli	outside of Canad only. ed on in the juris	la completes a sdiction where a
Province or country	Exemption	n relied on			Number of purchasers	Total amou	nt (Canadian \$)
British Columbia	NI 45-106 2.5 [Family, associates]	friends	and busir	ness	2		67,500.00
British Columbia	NI 45-106 2.3 [Accredi	ted inve	estor]		27		604,250.00
Alberta	NI 45-106 2.3 [Accredi	ted inve	estor]		1		10,000.00
Ontario	NI 45-106 2.3 [Accredi	ted inve	estor]		2		13,750.00

Switzerland	NI 45-106 2.3 [Accredited investor]	1	25,000.00
	Total dollar amount of securities distributed		720,500.00
	Total number of unique purchasers ²	33	
n adapting the total number	of unique nurchasers to which the issuer distributed securitie	a accurate a sale incurate	

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 \$)
Fotal 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	N INFORMATION				
Provide information for each pe with the distribution. Complet					any compensation in connection ensated.
Indicate whether any compensa	tion was paid, or will be po	aid, in connectio	on with the distribu	ition.	
🗌 No 🗹 Yes	If yes, indicate nur	mber of perso	ons compensated	d. 2	
a) Name of person compo	ensated and registratio	n status			
Indicate whether the person	compensated is a registra	nt.	✓ No	Yes	
If the person compensated is a	n individual, provide the n	ame of the indi	vidual.		
Full legal name of indivi	dual				
	Family nam	ne	First given	name Seco	ndary given names
If the person compensated is	not an individual, provide	the following in	formation.		
Full legal name of	of non-individual Sutto	n Ventures L	TD		
Fir	m NRD number			(if appl	icable)
Indicate whether the person o	compensated facilitated the	e distribution th	rough a funding po		
b) Business contact inform	nation				
If a firm NRD number is not pr	rovided in Item 8 (a), provid	de the business	contact informatio	n of the person being co	ompensated.
Street address	4486 Monte Vista Driv	e			
Municipality	Chilliwack			Province/State	British Columbia
Country	Canada		Po	ostal code/Zip code	V2R5T2
Email address	orayden@suttonventure	es.ca		Telephone number	6049979007
c) Relationship to issuer of	or investment fund man	ager			
Indicate the person's relations B(2) of the Instructions and the					
	er or investment fund man				er than an investment fund)
Director or officer of th	e investment fund or inves	stment fund ma	inager 🗌 E	Employee of the issuer of	or investment fund manager
None of the above					
d) Compensation details					
Provide details of all compensa Canadian dollars. Include cash	commissions, securities-bo oution, such as clerical, prir	nsed compensat nting, legal or a	ion, gifts, discounts ccounting services.	s or other compensation An issuer is not require	d to ask for details about, or report
Cash commissions pai	d 8,985.00	S	Security codes	Security code 1	Security code 2 Security code 3
Value of all securities distributed as compensation	35,940.00			U B S	
Describe te	rms of warrants, options of	or other rights	consists of one	common share and nto one additional co	60.05 per unit. Each unit one warrant. Each warrant mmon share at a price of
Other compensation	5	Describe			
Total compensation paid	d 44,925.00				
Check box if the per	son will or may receive an	y deferred com	pensation (descrit	be the terms below)	
⁴ Provide the aggregate value additional securities of the iss					rights exercisable to acquire uding options, warrants or other

rights exercisable to acquire additional securities of the issuer. ⁵Do not include deferred compensation.

a) Name of person compensated and registration status
Indicate whether the person compensated is a registrant. 🔲 No 📝 Yes
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 PI Financial Corp.
Firm NRD number 5 2 9 0 (if applicable)
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. Vo Yes
b) Business contact information
If a firm NRD number is not provided in Item 8 (a), provide the business contact information of the person being compensated.
Street address
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.
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 10,375.00 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 Describe
Total compensation paid 10,375.00
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 - DIRECTC	RS, EXECUTI	VE OFFICERS A	ND PROMO	TERS OF THE I	SSUER				
If the issuer is an in	vestment fund,	do not complete It	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 a	iny jurisdiction of	f 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 within Canada, state	l above is not an		-						
Organization or	company name	Family name	First given name	Secondary given names	Residential jurisdiction of individual	Relatio (select one			
					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	Mason	Douglas		L.			
	Family name	First given name		Secondary give	en names		
Title	President and Chief Executive	Officer					
Name of issuer/underwriter/ investment fund manager	Waterfront Capital Corporation						
Telephone number	6049222030	Email address	lmason@	waterfrontgro	oup.com		
Signature	"Douglas L. Mason"	Date	2017	10	13		
			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 individual certifying the report

 Full legal name
 Burgess
 Shanna
 Title
 Paralegal

 Family name
 First given name
 Secondary given names
 Title
 Paralegal

 Name of company
 McCullough O'Connor Irwin LLP
 Email address
 sburgess@moisolicitors.com

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.