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

ITEM 1 – REPOR	T TYPE					
TIEW I - KEI OK						
✓ New report						
Amended report	Amended report If amended, provide Submission ID of report that is being amended: (Example: EDR1234567890-123)					
			-			
ITEM 2 – PARTY	CERTIFYING TH	IE REPORT				
			parding whether an issuer is an inve the companion policy to NI 81-106.	estment fund, refer to section 1.1 of		
✓ Issuer (Other than			, , ,			
Underwriter						
ITEM 3 – ISSUER	NAME AND OT	HER IDENTIFIERS				
1121113 100021	MAME AND OT	HER IBENTII IERO				
-	information about the	issuer, or if the issuer is an ir	nvestment fund, about the fund.			
Full legal name	O.F.D.					
Gunpowder Capital C						
Previous full legal nar	ne If the issuer's nam	e changed in the last 12 mon	ths, provide most recent previous le	egal name.		
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	.					
Website (if applicable)					
If the inquest has a los	ual antitu idantifian mua	vida halaw Dafar ta Dart D at	Etha laatuvationa for the definition o	f "logal antity identific"		
_	iai eniny idenimer, pro	vide below. Relei to Part B of	the Instructions for the definition o	r legal entity identifier .		
Legal entity identifier						
Did two or more co-is	suers distribute a sing	le security? ✓ No ☐ Yes				
If two or more issuers	distributed a single se	ecurity, provide the full legal na	ame(s) of the co-issuer(s) other tha	in the issuer named above.		
Full legal name(s) of c	o-issuer(s)					
ITEM 4 – UNDER	WRITER INFOR	MATION				
If an underwriter is co	mpleting the report of	rovide the underwriter's full lea	gal name and firm NRD number			
If an underwriter is completing the report, provide the underwriter's full legal name and firm NRD number. Full legal name						
Does the Underwriter	Does the Underwriter's Firm have an NRD Number? Firm NRD number					
□ No □ Yes						
If the underwriter doe	If the underwriter does not have a firm NRD number, provide the head office contact information of the underwriter.					
Street address		Municipality	Province/State	Postal/ZIP code		
Country		Telephone number	Website (if applicable)			

ITEM 5 – ISSUER INFORMATION					
a) Primary industry					
Provide the issuer's North American Industry Classification Standard (NAICS) code (6 digits only) that in your reasonable judgment most closely corresponds to the issuer's primary business activity.					
NAICS industry code					
523990					
	licate the stage of operations. This does not apply to issuers at best describes the issuer's stage of operations.	that provide services to issuers operating in			
	all or substantially all of its assets in any of the following? If y cial/business debt Consumer debt Private companies				
b) Number of employees					
✓0 - 49	or more				
c) SEDAR profile number					
Does the issuer have a <u>SEDAR</u> profile? ☐ No ☑ Yes	screenshot of th	EDAR profile is a "private" profile, please provide a ne issuer's profile by e-mail to lings@osc.gov.on.ca			
d) Head office address	If the issuer does not	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	diction of Canada?				
If yes, select the jurisdictions of Canada in					
LAII LAB LBC LMB	NB NL NT				
NS NU ON PE	UQC USK UYT				
g) Public listing status					
Does the issuer have a CUSIP number?	CUSIP number (provide first 6 digits only)				
	name of the exchange on which the issuer's equity securities ps, for example, an automated trading system.	orimarily trade. Provide only the name of an			
Exchange name: Not Applicable Toro	onto 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 Stoc	ck Exchange Of Hong Kong 🗌 Tokyo Stock Exchange	OTHER			
If other, describe:					
h) Size of issuer's assets					
financial statements for its first financial ye	d on its most recently available annual financial statements (ear, provide the size of the issuer's assets at the distribution	· · ·			
	I to under \$25M\$25M to under \$100M OM to under \$1B\$1B or over				

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 in connection with the distribution, which must be disclosed in Item 8. The information provided in Item 7 must reconcile with the information provided in Schedule 1 of the report. 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 US dollar Euro Other (describe): b) Distribution date(s) 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 **End Date** 2019-01-02 2019-01-02 c) Detailed purchaser information Complete Schedule 1 of this form for each purchaser and attach the schedule to the completed report. Schedule 1 to Form 45-106F1-gpc-jan-2nd-2019.xlsx - 49 KB d) Types of securities distributed Provide the following information for all distributions reported on a per security basis. Refer to Part A(12) of the Instructions for how to indicate the security code. If providing the CUSIP number, indicate the full 9-digit CUSIP number assigned to the security being distributed.

				Canadian \$	
Security code	CUSIP number	Number of securities	Single or lowest price	Highest price	Total amount
UBS	403072101	2,500,000.0000	0.0500		125,000.0000
Description of security: 2,500,000 Units issued a	at \$0.05 CDN p	er unit. Units consis	t of 1 Common Shar	e and 1 Full Purcha	se Warrant

e) Details of rights and convertible/exchangeable securities

If any rights (e.g. warrants, options) were distributed, provide the exercise price and expiry date for each right. If any convertible/exchangeable securities were distributed, provide the conversion ratio and describe any other terms for each convertible/exchangeable security.

Not Applicable

Convertible / exchangeable	Underlying security		se price dian \$)	Expiry date (YYYY-MM-DD)	Conversion ratio
security code	code	Lowest	Highest	(TTTT-WWW-DD)	
WNT	CMS	0.1200	0.1200	2020-01-02	1 to 1 1:1
Describe other terms: Each Full Warrant entitles the holder the ability to purchase 1 additional Common Share for a price of \$0.12 CDN. The (if applicable) Warrants if not exercised, will expire on January 2nd, 2020 which is one year after the issuance date.					

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 of Canada, state the province or territory, otherwise state country.

Province or country	Exemption relied on	No. of unique purchasers ^{2a}	Total amount (Canadian \$)	
Turks and Caicos Islands	NI 45-106 2.12 [Asset acquisition]	1	125,000.0000	
	Total dollar amount of securities distributed			

^{2a}In calculating the number of unique purchasers per row, count each purchaser only once. Joint purchasers may be counted as one purchaser. ^{2b}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?	,	Filename
1.			\square Y \square N		

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							
PERSON 1							
a) Name of person compensat	ted and registration	on status					
Indicate whether the person com ☐ No ☐ Yes	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 given name Secondary given names							
If the person compensated is not Full legal name of non-individual	an individual, prov	ide the following inform	nation.	Firm NRD number (if a	applicable)		
Indicate whether the person com	pensated facilitated	I the distribution throu	gh a funding	cortal or an internet-bas	sed portal.		
b) Business contact information	on						
If a firm NRD number is not provi	ided in Item 8(a), p	rovide the business co	ontact informa	ation of the person beir	ng compensated.		
Street address	Municip		Province/Sta	•	Postal/ZIP code		
Country	Telepho	one number	Email addres	3S			
			<u></u>				
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	the meaning of "co	ntrol" in section 1.4 of	f NI 45-106 fo		pleting this section	1.	
Insider of the issuer (other tha	n an investment fur	nd)	None	e of the above			
Director or officer of the invest	ment fund or invest	ment fund manager					
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							
Value of all securities		Security code1	Sec	curity code2	Security code	3	
☐ distributed as compensation ⁴		Describe terms of wa	arrants, optior	ns or other rights			
Other compensation ⁵		Describe					
Total compensation Paid	0.0000	J					
Check box if the person will o	or may receive any	deferred compensation	n (describe th	e terms below)			

⁴ 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.

 $^{5}\,\mathrm{Do}$ not include deferred compensation.

ITEM 9 – D	IRECTORS, EXECUTIVE OFFICERS	S AND PROMOTERS OF	THE ISSUER			
Indicate whet	her the issuer is any of the following (select the	one that applies - if more than or	ne applies, select only one).			
Reporting	issuer in any jurisdiction of Canada					
☐ Foreign p	ublic issuer					
•	Wholly owned subsidiary of a reporting issuer in any jurisdiction of Canada ⁶ Provide name of reporting issuer					
Wholly ow	ned subsidiary of a foreign public issuer ⁶					
-	ame of foreign public issuer					
	tributing only eligible foreign securities and the	·	•			
⁶ An issue securities ⁷ Check th	uer is at least one of the above, do not com r is a wholly owned subsidiary of a reporting is that are required by law to be owned by its dire his box if it applies to the current distribution eve efer to the definitions of "eligible foreign securit	suer or a foreign public issuer if al ectors, are beneficially owned by t ren if the issuer made previous dis	ll of the issuer's outstanding voting se the reporting issuer or the foreign pub stributions of other types of securities	olic 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 iss	suer				
	ollowing information for each director, executive rwise 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		
b) Promoter	information					
	er listed above is not an individual, provide the f a, state the province or territory, otherwise state					
	Organization or company name	Family name First given name Secondary given name	Residential jurisdiction of individual	Relationship to promoter (select one or both if applicable)		
				□ D □ O		
c) Resident	al address of each individual					
Complete <u>Schedule 2</u> 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, 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	Gunpowder Capital Corp				
Full legal name - Family name First given na		name	Secondary given names		
Kordy	Frank				
Title		Telephone number	Email address		
CEO, Secretary & Director		(647) 466-4037	frank.kordy@gunpowdercapitalcorp.com		
Signature /s/ Frank Kordy		Date 2019-01-02			

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 Ema	il 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.

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