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 amended 	d, provide filing date	of report that is being am	ended 2018 06 15	(YYYY-MM-DD)
ITEM 2 - PARTY CERTIFYING THE RI	EPORT			
Indicate the party certifying the report (select o National Instrument 81-106 Investment Fund (-		on 1.1 of
Investment fund issuer				
✓ Issuer (other than an investm)	ent fund)			
Underwriter				
ITEM 3 - ISSUER NAME AND OTHER				
Provide the following information about the iss		vestment fund, about the fund		
	D Platinum Global P			
Previous full legal name	last 12 months provide m	oct recent provious logal name		
Website	tast 12 months, provide ma	ost recent previous legal nume.	(if applicable)	
If the issuer has a legal entity identifier, provide Legal entity identifier 52	49300S1HF3INDXVI		of "legal entity identifier".	
ITEM 4 - UNDERWRITER INFORMAT	ION			
If an underwriter is completing the report, prov	ide the underwriter's full le	gal 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 NRD nu	Imber, provide the head off	ice contact information of the un	nderwriter.	
Street address				1
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 code526989
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 4 5 3 6 7 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 publicly 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						

TEM 7 - INFORMATION A	BOUT THE DISTRIBUTION				
purchasers resident in that jurisdict	da completes a distribution in a jurisdict ion of Canada only. Do not include in Ite nformation provided in Item 7 must reco	em 7 securities issued as	payment of con	nmissions or find	ler's fees, which
a) Currency					
Select the currency or currencies in	which the distribution was made. All dol	lar amounts provided in	the report must	t be in Canadian	dollars.
Canadian dollar 🗸	US dollar Euro	Other (describe)			
b) Distribution date(s)					
	d dates. If the report is being filed for sec the report is being filed for securities dis report.				
Start d	ate 2018 06 06 YYYY MM DD	End date		06 06	
c) Detailed purchaser inform	nation				
Complete Schedule 1 of this f	orm for each purchaser and attac	h the schedule to th	e completed	report.	
d) Types of securities distri	outed				
Instructions for how to indicate t	n for all distributions that take place in a he security code. If providing the CUSIP n Ided in item 7d must reconcile to item 7f	number, indicate the full	9-digit CUSIP n	umber assigned	to the security being
				Canadian \$	
Security code CUSIP number (if applicable)	Description of security	Number of securities	Single or lowest price	Highest price	Total amount
O T H	nited Partnership Interests	1,005.00	32,027.500 0	9,864,470. 0000	132,371,258.88
e) Details of rights and con-	vertible/exchangeable securities				
	ns) were distributed, provide the exercise version ratio and describe any other tern				changeable securities
Security Underlying	Exercise price Expi	ry date Conversio			
code security code		- MM-DD) ratio	Descril	be other items (if a	applicable)
f) Summary of the distributi	on by jurisdiction and exemption	ł	ł		
purchaser resides and for each ex distribution in a jurisdiction of Co This table requires a separate line purchaser resides, if a purchaser i jurisdiction.	ecurities distributed and the number of p emption relied on in Canada for that dis mada, include distributions to purchasers e item for: (i) each jurisdiction where a pu resides in a jurisdiction of Canada, and (i tate the province or territory, otherwise s	tribution. However, if an resident in that jurisdic ırchaser resides, (ii) each ii) each exemption reliec	issuer located o tion of Canada o n exemption relie	outside of Canad only. ed on in the juris	a completes a diction where a
Province or country	Exemption relied on		Number of purchasers	Total amou	nt (Canadian \$)
Alberta	NI 45-106 2.3 [Accredited inve	estor]	105		15,674,258.50
British Columbia	NI 45-106 2.3 [Accredited inve	estor]	185		30,137,877.50
Manitoba	NI 45-106 2.3 [Accredited inve	estor]	23		2,792,798.00
New Brunswick	NI 45-106 2.3 [Accredited inve	estor]	22		2,690,310.00
Newfoundland and Labrador	NI 45-106 2.3 [Accredited inve	estor]	22		1,623,153.70
Nova Scotia	NI 45-106 2.3 [Accredited inve	estor]	48		4,382,643.10
Ontario	NI 45-106 2.3 [Accredited inve	estor]	371		53,146,753.78
Prince Edward Island	NI 45-106 2.3 [Accredited inve	estor]	11		1,332,344.00
Québec	NI 45-106 2.3 [Accredited inve	estorl	149		15,389,854.30

Saskatchewan	NI 45-106 2.3 [Accredited investor]	69	5,201,266.00			
	132,371,258.88					
	Total number of unique purchasers ²	1,005				
n calculating the total number of unique nurchacore to which the issuer distributed securities, count each nurchaser only once, regardless of whether						

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.

Des	scription	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.
a) Name of person compensated and registration status
Indicate whether the person compensated is a registrant.
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
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 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 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
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.

he issuer is an investment fund,	do not complete	Item 9. Procced	to Item 10.					
icate whether the issuer is any of th	ne following (selec	t all that apply).						
Reporting issuer in any jurisdi	ction of Canada							
Foreign public issuer								
Wholly owned subsidiary of a	reporting issuer in	n any jurisdiction	of Canada ⁶					
Provide name	of reporting issue	er						
Wholly owned subsidiary of a	foreign public iss	uer ⁶						
Provide name of fo	reign public issue	er 🗌						
Issuer distributing eligible fore	ign securities only	/ to permitted clie	nts ⁷					
he issuer is at least one of the al	hove do not com	nlete Item 9(a) -	(c) Proceed to Ite	om 10				
issuer is a wholly owned subsidiar irities that are required by law to b eck this box if it applies to the curre its. Refer to the definitions of "eligi	e owned by its dil ent distribution ev	rectors, are benef en if the issuer m	icially owned by the ade previous distrib	e reporting issue putions of other t	r or the foreig ypes of secu	gn pub	lic issu	er, respe
If the issuer is none of the ab	oove, check this l	oox and complete	e Item 9(a) - (c).					
Directors, executive officers	and promoters	of the issuer						
ovide the following information for						ada, sta	te the	province
rritory; otherwise state the country.	For Relationship	to issuer, $D = I$	Director, O – Exect					
Organization or company name	Family name	First given name	Secondary give names	Business I non-indiv reside jurisdic indiv	ridual or entail tion of		ationsh issuer lect all apply	, that
				Province	or country	D	0	Р
	Gassewitz	Mike		Ontario		✓	✓	
	Maddock	Craig		Ontario		✓	✓	
	Thomas	Christine		Ontario			✓	
MD Financial Management Inc.				Ontario				~
Promoter information								
the promoter listed above is not an ithin Canada, state the province or Organization or company name					" – Director,	"O" – E	to pron	re Officer
				Province or D O		С		
MD Financial Management Inc.	Peters	Brian		Ontario	✓		`	/
MD Financial Management Inc.	Riviere	John		Ontario	~		`	/
MD Financial Management Inc.	Masson	Michelle		Ontario	✓		•	/
MD Financial Management Inc.	Labonte	Daniel		Québec	✓		`	/
MD Financial Management Inc.	Gassewitz	Mike		Ontario	~		`	/
	Seymour	Allison		Ontario	✓		,	/
MD Financial Management Inc.								
MD Financial Management Inc. MD Financial Management Inc.	Thomas	Christine		Ontario			``	/

MD Financial Management Inc. Birkett-Martin Sarah	Ontario	\checkmark
---	---------	--------------

c) Residential address of each individual

Complete Schedule 2 of this form providing the full residential address for each individual listed in Item 9(a) and (b) and attach to the completed report. Schedule 2 also requires information to be provided about control persons.

ITEM 10 - CERTIFICATION

Provide the following certification and business contact information of an officer or director of the issuer or underwriter. If the issuer or underwriter is not a company, an individual who performs functions similar to that of a director or officer may certify the report. For example, if the issuer is a trust, the report may be certified by the issuer's trustee. If the issuer is an investment fund, a director or officer of the investment fund manager (or, if the investment fund manager is not a company, an individual who performs similar functions) may certify the report if the director or officer has been authorized to do so by the investment fund.

The certification may not be delegated to an agent or other individual preparing the report on behalf of the issuer or underwriter. If the individual completing and filing the report is different from the individual certifying the report, provide their name and contact details in

Item 11.

The signature on the report must be 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	Woollard	Diane				
	Family name First given name			Secondary give	en names	
Title	VP, Compliance, Legal and G	/P, Compliance, Legal and Governance				
Name of issuer/underwriter/ investment fund manager	MD Financial Management Inc.					
Telephone number	6137314552 Email address Diane.Woollard@cma.ca				са	
Signature	(signed) "Diane Woollard"	Date	2018	06	14	
			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 individ Full legal name	dual certifying the re	eport		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.