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, provide filing date of report that is being amended 2017 11	09 (YYYY-MM-DD)						
ITEM 2 - PARTY CERTIFYING THE REPORT	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.							
Investment fund issuer							
☑ Issuer (other than an investment fund)							
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 Skyline Private Opportunities 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)	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 identifie	er".						
Legal entity identifier							
ITEM 4 - UNDERWRITER INFORMATION							
If an underwriter is completing the report, provide the underwriter's full legal name and firm National Registration Database (NR	D) number.						
Full legal name							
Firm NRD number (if applicable)	(if applicable)						
If the underwriter does not have a firm NRD number, provide the head office contact information of the underwriter.							
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 2 2 1 1 9 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. 9 Image: Development in the mining industry business to invest all or substantially all of its assets in any of the following? If yes, select all that apply. 9							
Mortgages Real estate Commerial/business debt Consumer debt Private companies							
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? Image: No If yes, provide SEDAR profile number If the issuer does not have SEDAR profile complete item 5(d) - (h).							
d) Head office address							
Street address 301 - 5 Douglas St. Province/State Ontario							
Municipality Guelph Postal code/Zip code N1H 2S8							
Country Canada Telephone number 5198260439							
e) Date of formation and financial year-end							
Date of formation 2017 04 25 Financial year-end 12 31 YYYY MM DD MM DD							
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 investment fund, provide the following information.							
a) Investment fund manager 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 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 which the issuer has applied for and received a listing, which excludes, for example, automated trading systems.							
Exchange nam	les						
f) Net asset value (NAV) of the investment fund							
Select the NAV range of the 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 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, which should 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 ma	de. All doi	llar amounts	provided i	in the re	eport mus	st be in Car	nadian	dollars.	
✓ Canadian dollar	US dollar 🛛 🗌 Eur	0	Other	(describe	e) [
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 2017 10 30 End date 2017 11 07										
	YYYY MM DE)			YY	YY I	MM E	DD		
c) Detailed purchaser inform	mation									
Complete Schedule 1 of this f	form for each purchaser a	nd attac	the sche	dule to t	the con	npleted	report.			
d) Types of securities distri	buted									
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 r	, number, indic	ate the ful	Il 9-digi	t CUSIP n	number ass	signed	to the security being	
							Cana	adian \$		
Security CUSIP number (if applicable)	Description of security		Numbe securi		lov	gle or west rrice	Highest p	orice	Total amount	
UNT			11	,750.00	10	0.0000	100.0	00.0000 1,175,000.00		
e) Details of rights and con-	vertible/exchangeable secu	urities								
If any rights (e.g. warrants, option were distributed, provide the con	-			-		-	•	tible/e>	changeable securities	
Security Underlying security code	Exercise price (Canadian \$)	Expi	ry date - MM-DD)	Convers	sion	-	ibe other ite	ems (if a	applicable)	
	Lowest Highest									
· · ·	on by jurisdiction and exem	•								
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 the jurisdiction where a purchaser resides, if a purchaser resides in a foreign 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.										
Province or country	Exemption relied on Number of purchasers Total amount (Canadian \$)									
Ontario	NI 45-106 2.3 [Accredi	ted inve	estor]			13	3 1,075,000.0		1,075,000.00	
British Columbia	NI 45-106 2.3 [Accredited investor]			1			100,000.00			
	Total dollar amount of securities distributed 1,175,000						1,175,000.00			
	Total num	ber of un	ique purcha	asers ²		14				
² In calculating the total number	of unique purchasers to which a	the issuer	distributed se	ecurities, c	count ea	ich purcha	aser only o	once, re	aardless of whether	

'In calculating the total number of unique purchasers to which the issuer distributed securities, count each purchaser only once, regardless of wheth 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 \$)
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.						
a) Name of person compensated and registration status						
Indicate whether the person compensated is a registrant. 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 Skyline Wealth Management Inc.						
Firm NRD number 3 3 4 4 0 (if applicable)						
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. Ves						
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 23,500.00 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						
Check box if the person will or may receive any deferred compensation (describe the terms below)						
⁴ Dravida the approach value of all approximation distributed on companyation, avaluating antions, warrants as other rights avarate to a series						
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. ⁵Do not include deferred compensation.						

ITEM	ITEM 9 - DIRECTORS, EXECUTIVE OFFICERS AND PROMOTERS OF THE ISSUER									
lf t	If the issuer is an investment fund, do not complete Item 9. Procced to Item 10.									
Ind	Indicate whether the issuer is any of the following (select all that apply).									
[Reporting issuer in any jurisdiction 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 f	oreign public issu	ər ⁶							
	Provide name of for	eign public issuer								
[Issuer distributing eligible forei	gn securities only	to permitted clien	ts ⁷						
lf t	the issuer is at least one of the ab	ove, do not comp	olete Item 9(a) –	(c). Proceed to Ite	m 10.					
seci 7 Ch	issuer is a wholly owned subsidiary urities that are required by law to be eck this box if it applies to the currents. Refer to the definitions of "eligit	e owned by its dire nt distribution eve	ectors, are benefic n if the issuer ma	cially owned by the de previous distrib	reporting issuer utions of other ty	or the foreign pes of securiti	publi	ic issue	er, respec	an ctively.
[\checkmark If the issuer is none of the ab	ove, check this bo	ox and complete	ltem 9(a) - (c).						
a)	Directors, executive officers a	and promoters o	f the issuer							
	rovide the following information for rritory; otherwise state the country.						ı, stat	te the p	province o	or
	Organization or company nameFamily nameFirst given nameSecondary given nameBusiness location of non-individual or residentail jurisdiction of individualRelationship to issuer (select all that apply)									
					Province of	r country	D	0	Р	
		Ashdown	Jason	Roy	Ontario		✓	✓		
		Byrd	Wayne	Brian	Ontario			✓		
		Castellan	Jason	Scott	Ontario		✓	✓		
		Castellan	Martin	Julian	Ontario		✓	✓		
b)	b) Promoter information									
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 company name Family name Family name Residential name name name Residential purisdiction of individual Relationship to promoter (select one or both if applicable)									
					Province or country	D		C)	

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	Byrd	Wayne		Bria	n		
	Family name		Secondary give	en names			
Title	Chief Financial Officer	Chief Financial Officer					
Name of issuer/underwriter/ investment fund manager	Skyline Private Opportunities Corporation						
Telephone number	5198260439	Email address	wbyrd@sk	ylineonline.ca	a		
Signature	Wayne Byrd	Date	2017	11	22		
		-	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.

 \checkmark Same as individual certifying the report

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.