Form 45-106F1 Report of Exempt Distribution

ITEM 1 - REPORT TYPE

✓ New report

Amended report

If amended, provide filing date of report that is being amended.

(YYYY-MM-DD)

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 (in Québec, Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement Fund Continuous Disclosure).

Investment fund issuer

✓ Issuer (other than an investment fund)

Underwriter

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	SWMBRD Sports Inc. / SWMBRD Spor	ts Inc.
Previous full legal name		
If the issuer's name changed in	the last 12 months, provide most recent	previous legal name.
Website	www.swmbrd.com	(if applicable)
If the issuer has a legal entity identifier, p	rovide below. Refer to Part B of the Instr	uctions for the definition of "legal entity identifier".
Legal entity identifier		
lf two or more issuers distributed a single above.	e security, provide the full legal name(s) c	of the co-issuer(s) other than the issuer named
Full legal name(s) of co-issuer(s)		(if applicable)

ITEM 4 - UNDERWRITER INFORMATION If an underwriter is completing the report, provide the underwriter's full legal name, firm NRD number, and SEDAR+ profile number. Full legal name Firm NRD number Firm NRD number SEDAR+ profile number

ITEM 5 - ISSUER INFORMATION

TEWI 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 in your reasonable judgment nost closely corresponds to the issuer's primary business activity.								
NAICS industry code 339920								
f the issuer is in the mining industry , indicate the stage of operations. This does not apply to issuers that provide services to issuer operating in the mining industry. Select the category that best describes the issuer's stage of operations.								
Exploration Development Production s 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.								
🗌 Mortgages 🛛 Real estate 🔄 Commercial/business debt 📄 Consumer debt 🗌 Private companies								
Cryptoassets								
b) Number of employees								
Number of employees: 🗹 0 - 49 🗌 50 - 99 🗌 100 - 499 🗌 500 or more								
c) SEDAR+ profile number								
Provide the issuer's SEDAR+ profile number								
000053485								

ITEM 6 - INVESTMENT FUND ISSUER INFORMATION										
If the issuer is an investment fund, provide the following information.										
a) Investment fund m	a) Investment fund manager information									
Full legal name]						
Firm NRD number		(if applicable)							
SEDAR+ profile number										
b) Type of investment	t fund									
Type of investment fund that mo	ost accurately identifies t	he issuer (select only one).								
🗌 Money market	Equity	Fixed income	Balanced							
Alternative strategies	Cryptoasset	Other (describe)								

Indicate whether one or b	ooth of the following apply to the investm	ent fund.						
🗌 Invest primarily in o	ther investment fund issuers							
Is a UCITs Fund ¹								
— Is a OCTTS Fund Undertaking for the Collective Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) directives hat allow collective investment schemes to operate throughout the EU on a passport basis on authorization from one member state.								
that allow collective investmen	i schemes to operate throughout the EO on a pas	ssport basis on authoriza	uon from one men	iber state.				
c) Net asset valu	ue (NAV) of the investment fund							
Select the NAV range of th	ne investment fund as of the date of the r	nost recent NAV calcı	lation (Canadia	an \$).				
Under \$5M	\$5M to under \$25M	🗌 \$25M to unde	er \$100M	Date of NAV	calculation:			
\$100M to under \$50	00M	S1B or over		YYYY	MM DD			
ITEM 7 - INFORMA	TION ABOUT THE DISTRIBU	JTION						
If an issuer located outsid	de of Canada completes a distribution in	a jurisdiction of Cano	ada, include in l	tem 7 and Sch	edule 1			
	asers resident in that jurisdiction of Cano							
, j	fees, in connection with the distribution, v h the information provided in Schedule 1		ed in Item 8. Th	e information	provided in			
a) Currency								
Select the currency or cur dollars.	rrencies in which the distribution was ma	ıde. All dollar amount	s provided in th	ne report must	be in Canadian			
🖌 Canadian dollar	US dollar Euro Other (describe)						
b) Distribution o	lates							
·								
	rt and end dates. If the report is being file oth the start and end dates. If the report							
	dates for the distribution period covered				Jus Dusis,			
Start date	2024 02 08	End date	2024	02 08				
Start date	YYYY MM DD	End date	<u> </u>	MM DD				
c) Detailed purc	haser information							
Complete Schedule 1 of	this form for each purchaser and atto	ach the schedule to	the completed	report.				
d) Types of secu	irities distributed							
Provide the following info	ormation for all distributions reported on	a ner security hasis	Refer to Part Al	(12) of the Instr	uctions for how			
	ode. If providing the CUSIP number, indic							
distributed.								
				Canadian \$				
Security CUSIP		Number of	Single or	Highest	Total			
code number (if applicable)	Description of security	securities	lowest price	price	amount			
UBS	Units. Each Unit consists of one c	6,232,106.0000	0.015	0.0150	93,481.5900			
					·			

		n share and one s varrant.	hare pur							
e) Details	e) Details of rights and convertible/exchangeable securities									
convertible/exchai	f 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.									
Convertible / exchangeable security code	Underlying security code	Exercise price (Canadian \$) Lowest Highest	Expiry date (YYYY-MM DD)	IM- Conversion ratio		scribe other terms (if applicable)				
WNT	CMS	0.0500 0.0500	2026-02-08	1:1						
· · ·										
f) Summa	ry of the distr	ribution by juriso	diction and exempt	tion						
jurisdiction of Can This table requires jurisdiction where Canada, if a purch	nada only. s a separate line a purchaser res haser resides in d	e item for: (i) each ju sides, if a purchaser a foreign jurisdictioi	risdiction where a purc resides in a jurisdictior	haser resides, (ii) each (n of Canada, and (iii) ea	exempt					
Province or cour	ıtry	Exemption reli	ed on	Number of unique purchasers ^{2a}	2	Total amount (Canadian \$)				
British Columbi	a NI 45-106	2.3 [Accredited in	nvestor]		4	10,080.0000				
British Columbi	a NI 45-106 associates	5 2.5 [Family, frien s]	ds and business		2	3,000.0000				
British Columbi		2.14 [Securities f			2	29,401.5900				
Ontario		2.3 [Accredited in	_		2	30,000.0000				
Ontario	NI 45-106 associates	5 2.5 [Family, frien s]	ds and business		1	15,000.0000				
Alberta	NI 45-106 associates	5 2.5 [Family, frien s]	ds and business		1	3,000.0000				
Northwest Territories	NI 45-106	2.3 [Accredited i	nvestor]		1	3,000.0000				
			Total dollar amou	unt of securities distrik	outed	\$93,481.5900				
		Total number of u	inique purchasers ^{2b}		13					

^{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.

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		
,	s the gross proceeds realized in the jurisdiction from the distributions for stributions for the distributions for the stribution period covered by the report.	or which the report is being filed, le	ss the gross redemptions that

ITEM 8 - COMPENSATION INFORMATION

Provide information for each person (as defined in NI 45-106) (in Québec, Regulation 45-106 respecting Prospectus Exemptions) 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 compen	sation was paid, or will be If yes, indicate num						
a) Name of person	compensated and reg	gistration stat	us				
Indicate whether the person c	ompensated is a registran	nt.					
🗌 No 🗹 Yes							
If the person compensated is	an individual, provide the	name of the indi	vidual.				
Full legal name of indivi	dual						
If the person compensated is	Family nam not an individual, provide		First given name Drmation.		Secondary give	en names	
Full legal name of non-	individual Canaccord G	enuity Corp./Co	rporation Canaco	cord Genui	ty		
Firm NRI	D number 900		(if appl	icable)			
Indicate whether the person c	ompensated facilitated th	e distribution thr	ough a funding p	ortal or an l	internet-based p	portal	
✓ No □ Yes							
b) Business contact	information						
If a firm NRD number is not p	rovided in Item 8(a), provi	de the business c	ontact informatic	on of the pe	rson being comp	pensated.	
Street address							
Municipality			Province/State				
Country		Postal	code/Zip code				
Email address		 Tele	phone number				
c) Relationship to is	suer or investment fu	und manager					
Indicate the person's relations 'connected' in Part B(2) of the respecting Prospectus Exempt	ship with the issuer or inve Instructions and the mear	estment fund mar ning of 'control' in	n section 1.4 of NI				
Connected with the issuer or investment fund manager							
	ner than an investment f						
	e investment fund or inve or investment fund mana		anager				
✓ None of the above		2001					
	ataila						
d) Compensation de	etalls						

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	450.0000			
Value of all securities distributed as compensation ⁴				
Security codes	Security code 1	Security code 2	Security code 3	
Describe terms of warrants, options or other rights]
Other compensation ⁵				
Describe				
			_	
Total compensation paid	450.00			
Check box if the person will or may receive any def	erred compensation	on (describe the te	erms below)	
⁴ Provide the aggregate value of all securities distributed as compensa securities of the issuer. Indicate the security codes for all securities dis acquire additional securities of the issuer. ⁵ Do not include deferred compensation.				
ITEM 9 – DIRECTORS, EXECUTIVE OFFICE	RS AND PROM	IOTERS OF T		
If the issuer is an investment fund, do not complete It				

Indicate whether the issuer is any of the following (select the one that applies – if more than one applies, select only one).

\checkmark	Reporting	issuer	in a	jurisc	liction	of	Canad	la
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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 foreign public issuer ⁶

Provide name of foreign public issuer

□ Issuer distributing only eligible foreign securities and the distribution is to permitted clients only ⁷.

If the issuer is at least one of the above, do not complete Item 9(a) - (c). Proceed to Item 10.

⁶ An issuer is a wholly owned subsidiary of a reporting issuer or a foreign public issuer if all of the issuer's outstanding voting securities, other than securities that are required by law to be owned by its directors, are beneficially owned by the reporting issuer or the foreign public issuer, respectively.

⁷ Check this box if it applies to the current distribution even if the issuer made previous distributions of other types of securities to

non-permitted clients. Refer to the definitions of "eligible foreign security" and "permitted client" in Part B(1) of the Instructions.

□ If the issuer is none of the above, check this box and complete Item 9(a) – (c).

a) Directors, executive officers and promoters of the issuer

Provide the following information for each director, executive officer and promoter of the issuer. For locations within Canada, state the province or territory, otherwise state the country. For "Relationship to issuer", "D" – Director, "O" – Executive Officer, "P" – Promoter.

Organization or company name	Family name	First given	Secondary given names	Business location of non-individual or residential jurisdiction of individual	Relationship to issuer (select all that apply)		
		name ^{area}		Province or country	D	0	Р

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	Family	First given	, , ,	Residential jurisdiction of individual	Relationship to one or both i	-
company name	name name	name	names	Province or country	D	0

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, 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.

securities regulatory aut	hority or regulator, as applica	ible, that I have r	eviewed this r	nvestment fund manager, to the report and to my knowledge, having to the extent required, complete.	5
Name of lssuer/ investment fund	SWMBRD Sports Inc.				
manager/agent					
Full legal name	SCHROENN	Jus	tin		
	Family name	First give	n name	Secondary given names	
Title	Chief Executive Officer and E	Director			
Telephone number	+1 (778) 870-1497	Email address	justin.schroe	nn@swmbrd.com	
Signature	"Justin Schroenn"	Date	2024	02 20	
			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	DINGWALL	Denise	
	Family name	First given name	Secondary given names
Title	itle Director		
Name of company	SYNERGY CORPORATE SOLUTIONS INC.		
Telephone number		Email address DE	NISE@SYNERGYCORP.CA

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.

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.