Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 9480293

| ITEM 1 - REPORT TYPE | | | | | | | | | | |
|---|--|---------------|----------|--------------|---------|------------|------------|-----------------|-------------------------------|---------------------|
| New report | | | | | | | | | | |
| Amended report | If amen | ded, prov | vide fi | ling dat | e of I | report | that is I | being ame | ended 2021 05 12 | (YYYY-MM-DD) |
| ITEM 2 - PARTY CERTIFY | YING THE | REPORT | - | | | | | | | |
| Indicate the party certifying the Instrument 81-106 Investment | | | | | | | | | restment fund, refer to sect | ion 1.1 of National |
| Investment fund is | ssuer | | | | | | | | | |
| ✓ Issuer (other than | ı an invest | ment fun | nd) | | | | | | | |
| | | | | | | | | | | |
| | | | | _ | | | | | | |
| ITEM 3 - ISSUER NAME | | | | | | | | | | |
| Provide the following informati | | r | | | | | ınd, abou | t the fund. | | |
| | I legal name 4 Touchdowns Capital Inc. | | | | | | | | | |
| Previous full le | gal name | | | | | | | | | |
| If the issuer's name cho | anged in the | last 12 mo | nths, pr | ovide mo | st rece | ent previ | ious legal | l name. | | |
| | Website | | | | | | | (if applicabl | e) | |
| If the issuer has a legal entity in | dentifier <u>,</u> pro | vide below. | Refer t | o Part B c | f the I | Instructio | ons for th | ne definition o | of "legal entity identifier". | |
| Legal entity | identifier | | | | | | | | | |
| If two or more issuers distribute | ed a single se | ecurity, prov | vide the | full legal | name | e(s) of th | e co-issue | er(s) other th | an the issuer named abov | е. |
| Full legal name(s) of co | -issuer(s) | | | | | | | (if applicabl | e) | |
| | | | | | | | | | | |
| ITEM 4 - UNDERWRITER | INFORM | ATION | | | | | | | | |
| If an underwriter is completing | the report, p | rovide the i | underw | riter's full | legal | name a | nd firm N | NRD number. | | _ |
| Full legal name | | | | | | | | | | |
| Firm NRD number | | | | | | | (if appl | licable) | | |
| If the underwriter does not hav | e a firm NRE |) number, p | orovide | the head | office | contact | informati | ion of the un | derwriter. | |
| Street address | | | | | | | | | |] |
| Municipality | | | | | | | Provi | nce/State | | Ĩ |
| Country | | | | | | Pos | tal 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 in your reasonable judgment most closely corresponds to the issuer's primary business activity. |
| NAICS industry code 5 5 1 1 1 3 |
| 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. |
| 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 |
| Does the issuer have a SEDAR profile? |
| □ No ✓ Yes If yes, provide SEDAR profile number 0 0 0 3 8 3 2 0 |
| 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 Financial year-end YYYY MM DD MM |
| 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. |
| AII AB BC MB NB NL NT |
| 🗌 NS 🗌 NU 🗌 ON 🗌 PE 🗌 QC 🔲 SK 🗌 YT |
| 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 name of the exchange on which the issuer's equity securities primarily trade. Provide only the name of an exchange and not a trading facility such as, for example, an automated trading system. |
| Exchange name |
| h) Size of issuer's assets |
| Select the size of the issuer's assets based on its most recently available annual financial statements (Canadian \$). If the issuer has not prepared annual financial statements for its first 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 | S1B or over |

| ITEM 6 - INVESTMENT | FUND ISSUER INFORMATION |
|------------------------------|--|
| If the issuer is an inves | tment fund, provide the following information. |
| a) Investment fund ma | anager information |
| Full legal name | |
| Firm NRD number | (if applicable) |
| If the investment fund mane | 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 | t fund |
| Type of investment fund the | nt most accurately identifies the issuer (select only one) . |
| Money market | Equity Fixed income Balanced |
| Alternative strateg | jies Cryptoasset 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 | |
| | tive Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union ollective investment schemes to operate throughout the EU on a passport basis on authorization from one member state. |
| c) Date of formation a | nd financial year-end of the investment fund |
| Date of forma | tion Financial year-end |
| d) Departing issues at | YYYY MM DD MM DD |
| | atus of the investment fund |
| | porting issuer in any jurisdication of Canada? No Yes |
| | s of Canada in which the investment fund is a reporting issuer. |
| | |
| | NU ON PE QC SK YT |
| e) Public listing status | s of the investment fund |
| If the investment fund has a | CUSIP number, provide below (first 6 digits only) |
| | CUSIP number |
| | blicly listed, provide the name of the exchange on which the investment fund's securities primarily trade. Provide only the not a trading facility such as, for example, an automated trading system. |
| Exchange n | ame |
| f) Net asset value (NA | AV) 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 | S5M to under \$25M \$25M to under \$100M |
| \$100M to under \$50 | 0M S500M to under \$1B \$1B or over Date of NAV calculation: |
| | YYYY MM DD |

ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION

| purchasers resident in that jurisdie | nada completes a distribution in a jurisa ction of Canada only. Do not include in which must be disclosed in Item 8. The i | ltem 7 securities issued | d as payment of co | ommissions or fi | nder's fees in | | | | |
|--|---|---------------------------------|--|-----------------------|--------------------------------------|--|--|--|--|
| a) Currency | | | | | | | | | |
| Select the currency or currencies in | n which the distribution was made. All | dollar amounts provide | ed in the report mu | ust be in Canadi | an dollars. | | | | |
| ✓ Canadian dollar | US dollar | Other (describe) | ;) | | | | | | |
| b) Distribution date(s) | | | | | | | | | |
| as both the start and end dates. If distribution period covered by the | 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 2021 05 04 | | | | | | | | |
| | YYYY MM DD | | YYYY N | MM DD | | | | | |
| c) Detailed purchaser infor | mation | | | | | | | | |
| Complete Schedule 1 of this | s form for each purchaser and at | ttach the schedule t | to the complete | ed report. | | | | | |
| d) Types of securities distr | ibuted | | | | | | | | |
| | n for all distributions reported on a per s SIP number, indicate the full 9-digit CU | 3 | | | ow to indicate the | | | | |
| | | | | Canadian \$ | | | | | |
| Security CUSIP number (if applicable) | Description of security | Number of securities | Single or lowest price | Highest price | Total amount | | | | |
| CMS 90214K Com | nmon Shares | 21,062,260.00 | 0.0500 | | 1,053,113.00 | | | | |
| e) Details of rights and cor | nvertible/exchangeable securities | | | | | | | | |
| were distributed, provide the con- | ns) were distributed, provide the exercise version ratio and describe any other ter | | | | xchangeable securities | | | | |
| Convertible / exchangeable security code Underlying security code | Exercise price (Canadian \$) Lowest Highest | Expiry date (YYYY- MM-DD) | Conversion ratio | Describe other i | Describe other items (if applicable) | | | | |
| | | | | | | | | | |
| f) Summary of the distribut | tion 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 Canada, state the province or territory, otherwise state the country. | | | | | | | | | |
| Province or country | Exemption relied or | 1 | Number of unique ²⁶ purchasers | ^a Total ar | mount (Canadian \$) | | | | |
| Québec | NI 45-106 2.3 [Accredited inve | estor] | | 6 | 665,000.00 | | | | |
| British Columbia | NI 45-106 2.3 [Accredited inve | estor] | | 1 | 50,000.00 | | | | |
| British Columbia | NI 45-106 2.5 [Family, friends associates] | and business | | 1 | 80,613.00 | | | | |
| Ontario | NI 45-106 2.3 [Accredited inve | estor] | | 4 | 92,500.00 | | | | |
| Alberta | NI 45-106 2.3 [Accredited inve | estor] | | 1 | 65,000.00 | | | | |
| Newfoundland and Labrador | NI 45-106 2.3 [Accredited inve | əstor] | | 1 | 100,000.00 | | | | |
| | Total | dollar amount of sec | urities distribute | ed | 1,053,113.00 | | | | |
| | Total number of u | inique purchasers ^{2b} | 1 | 4 | | | | | |

^{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 | |

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 I | NFORMATION | | | | | | | |
|--|--|---------------------------------|---|---------------------|---------------------------------------|--------------|--------------------|----------|
| Provide information for each person the distribution. Complete addition | | | | | | | nsation in connect | ion with |
| Indicate whether any compensation | on was paid, or will be po | aid, in connecti | on with the distri | bution. | | | | |
| 🗌 No 🗹 Yes | If yes, indicate nun | nber of perso | ns compensat | ed. | 1 | | | |
| a) Name of person compens | sated and registration | status | | | | | | |
| Indicate whether the person compe | nsated is a registrant. | | No No | \checkmark | Yes | | | |
| If the person compensated is an inc | lividual, provide the nam | ne of the individ | lual. | | | | | |
| Full legal name of individu | al | | | | | | | |
| | Family n | ame | Firs | st given i | name | Sec | ondary given names |] \$ |
| If the person compensated is not ar | n individual, provide the | following infor | nation. | | | | | |
| Full legal name of | non-individual Hayw | ood Securitie | s Inc. | | | | | |
| Firm | NRD number 1 | 6 3 | 0 | | (if ap | plicable) | | |
| Indicate whether the person compe | nsated facilitated the dis | tribution throu | gh a funding por | tal or a | n internet-basea | l portal. | ✓ No [| Yes |
| b) Business contact informa | tion | | | | | | | |
| If a firm NRD number is not provid | ed in Item 8 (a), provide | the business co | ntact informatio | n of the | person being co | mpensated. | | |
| Street address | | | | | | | | |
| Municipality | | | | F | Province/State | | | |
| Country | | | F | Postal | code/Zip code | · [| | |
| Email address | | | | | ohone number | | | |
| c) Relationship to issuer or i | nvestment fund mana | ager | | | | | | |
| Indicate the person's relationship w | | | ger (select all tha | t apply) |). Refer to the m | eaning of "c | onnected" in Part | B(2) of |
| the Instructions and the meaning o | | | or the purposes o | | 0 | | | |
| Connect with the issuer of | or investment fund mana | ager | | Insider | of the issuer (o | ther than ar | n investment fund |) |
| Director or officer of the i | nvestment fund or inves | tment fund ma | nager | Employ | yee of the issue | r or investm | ent fund manage | r |
| \checkmark None of the above | | | | | | | | |
| d) Compensation details | | | | | | | | |
| Provide details of all compensation Canadian dollars. Include cash com incidental to the distribution, such a allocation arrangements with the di | missions, securities-base s clerical, printing, legal rectors, officers or emplo | d compensation or accounting | n, gifts, discounts services. An issue | or othe r is not | er compensation. required to ask ; | Do not repo | ort payments for s | services |
| Cash commissions paid | 3,500.00 | | | F | Security code 1 | Security of | ode 2 Security of | ode 3 |
| Value of all securities distributed as compensation ⁴ | | S | ecurity codes | | | | | |
| Describe term | s of warrants, options o | r other rights | | | | | | |
| Other compensation ⁵ | | Describe | | | | | | |
| Total compensation paid | 3,500.00 | | | | | | | |
| Check box if the person | n will or may receive any | y deferred com | pensation (desc | ribe the | terms below) | | | |
| | | | | | | | | |
| ⁴ Provide the aggregate value of al | l securities distributed a | s comnensatio | n excluding ont | ions w | arrants or other | riahts ever | isable to acquire | |
| additional securities of the issuer. | Indicate the security cod | des for all secu | | | | | | ier |
| rights exercisable to acquire addit. ⁵ Do not include deferred compens | | Sucl. | | | | | | |

| ITEM 9 - DIRECTORS, EXECU | TIVE OFFICERS | AND PROMOT | ERS OF THE ISS | UER | | | | |
|--|--|---|---|---|--|-----------|---|----|
| If the issuer is an investment fund | l, do not complete l | tem 9. Procced to | Item 10. | | | | | |
| Indicate whether the issuer is any o | f the following (select | t the one that appli | es - if more than one | applies, select onl | y one). | | | |
| Reporting issuer in any juris | diction of Canada | | | | | | | |
| Foreign public issuer | | | | | | | | |
| Wholly owned subsidiary of | a reporting issuer in | any jurisdiction of | Canada ⁶ | | | | | |
| Provide nan | ne of reporting issue | r | | | | | |] |
| Wholly owned subsidiary of | a foreign public issu | ier ⁶ | | | | | | |
| Provide name of | foreign public issue | r | | | | | |] |
| Issuer distributing only eligi | ole foreign securities | and the distributio | n is to permitted clie | ents only ⁷ | | | | |
| If the issuer is at least one of the | above, do not comp | olete Item 9(a) – (d | c). Proceed to Item | 10. | | | | |
| ⁶ An issuer is a wholly owned subsid securities that are required by law to respectively. ⁷ Check this box if it applies to the cu clients. Refer to the definitions of "e | be owned by its dir urrent distribution eve | ectors, are benefic en if the issuer mad | ially owned by the re de previous distributi | eporting issuer or i ions of other types | the foreign | public is | suer, | |
| If the issuer is none of the | | | . , | | | | | |
| | | | | | | | | |
| a) Directors, executive officer | | | | | <u> </u> | | | |
| Provide the following information for territory; otherwise state the country. | | | | | | tate the | province | or |
| Organization or company name | Family name | First given name | Secondary given names | Business location of non-individual or residentail jurisdiction of individual | | | Relationship to issuer (select all that apply) | |
| | | | | Province or country | | D | 0 | Р |
| | | | | | | | | |
| b) Promoter information | | | | | | | | |
| If the promoter listed above is not an within Canada, state the province or | | | | | | | | |
| Organization or company name | Family name | First given name | Secondary given _ | Residential jurisdiction of individual | Relationship to promote (select one or both if applic | | oter icable) | |
| | | | | Province or country | D | | С | |
| | | | | | | | | |
| c) Residential address of eac | | ., | , , | 111 1 11 11 - | | | | |
| Complete Schedule 2 of this form completed report. Schedule 2 also | | | | | (a) and (b) | and at | ach to ti | 1e |

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 exemt distribution.

By completing the information below, I certify, on behalf of the issuer/underwriter/investment fund manager, 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/ investment fund manager/agent | 4 Touchdowns Inc. | | | | | | | |
|--|-------------------|-----------------------|----------------------|----|----|--|--|--|
| Full legal name | Rosner | Robert | | | | | | |
| | Family name | Secondary given names | | | | | | |
| Title | President & CEO | | | | | | | |
| Telephone number | 3104350435 | Email address | info@4touchdowns.com | | | | | |
| Signature | Robert Rosner | Date | 2021 | 05 | 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 individual certifying the report

| Full legal name | Marchesan | Dario | | | | Title | Lawyer | |
|------------------|----------------------|----------------|-----|-------------|-------------|---------|----------------|--|
| | Family name | First given na | me | Secondary | given names | | | |
| Name of company | Dunton Rainville LLP | | | | | | | |
| Telephone number | 5148666743 | | Ema | ail address | dmarchesar | @duntor | nrainville.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.