FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL OMB Number: 32350104 Estimated average burden hours per response: 0.5

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* Leong Yew Poh		2. Date of E Requiring S (Month/Day 12/01/201	tatement /Year)	3. Issuer Name and Ticker or Trading Symbol FingerMotion, Inc. [FNGR]					
(Last) (First) (I	Middle)	12/01/201		Relationship of Reporting Issuer (Check all applicable)	,		5. If Amendment, Date of Original Filed (Month/Day/Year)		
- OT STRINGSIDE VIEW				X Director Officer (give		(specify (C	6. Individual or Joint/Group Filing (Check Applicable Line)		
(Street) SINGAPORE	786060			title below)	below)		X Form filed by One Reporting Person Form filed by More than One Reporting Person		
(City) (State) (2	Zip)								
Table I - Non-Derivative Securities Beneficially Owned									
1. Title of Security (Instr. 4)				2. Amount of Securities Beneficially Owned (Instr.	3. Owner Form: [Direct O	. Nature of Indirect Beneficial Ownership (Instr. 5)		
			4	•)	(I) (Inst				
			erivative	Securities Beneficiants, options, convert	(i) (Inst	r. 5)			
1. Title of Derivative Security (I	(e.g.,		erivative s, warran sisable and	Securities Beneficia	(I) (Insti	r. 5)		6. Nature of Indirect Beneficial Ownership (Instr. 5)	

Explanation of Responses:

No securities are beneficially owned.

/s/ YEW POH LEONG 12/3

12/30/2021

** Signature of Reporting

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 5 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.