# 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	Vireo Growth Inc. / Vireo Growth Inc.	
Previous full legal name	GOODNESS GROWTH HOLDINGS, IN	С.
If the issuer's name changed in	the last 12 months, provide most recent	previous legal name.
Website	www.vireogrowth.com	(if applicable)
If the issuer has a legal entity identifier, p	rovide below. Refer to Part B of the Inst	ructions for the definition of "legal entity identifier".
Legal entity identifier		]
If two or more issuers distributed a single above.	e security, provide the full legal name(s)	of the co-issuer(s) other than the issuer named
Full legal name(s) of co-issuer(s)		(if applicable)

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# **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 y most closely corresponds to the issuer's primary business activity.	/our reasonable judgment
NAICS industry code 325410	
If the issuer is in the <b>mining industry</b> , indicate the stage of operations. This does not apply to issuers th 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	
Provide the issuer's SEDAR+ profile number	
000021753	

ITEM 6 - INVESTMENT F	UND ISSUER INF	ORMATION		
If the issuer is an investment f	und, provide the follow	ving information.		
a) Investment fund ma	anager information			
Full legal name				]
Firm NRD number		(if applicable)	1	
SEDAR+ profile number [				
b) Type of investment	fund			
Type of investment fund that mo	st accurately identifies th	he issuer (select only one).		
Money market	Equity	Eixed income	Balanced	
Alternative strategies	Cryptoasset	Other (describe)		

Indicate whether one or b	oth of the following ap	ply to the investme	ent fund.			
🗌 Invest primarily in o	ther investment fund	issuers				
Is a UCITs Fund <sup>1</sup>						
<sup>1</sup> Undertaking for the Collective that allow collective investmen						pean Union (EU) directives
that anow conective investmen	t schemes to operate throa	gnout the EO on a pass	sport basis on authoriza	uon from one me	ember slute.	
c) Net asset valu	ie (NAV) of the inve	estment fund				
Select the NAV range of th	ne investment fund as c	of the date of the m	nost recent NAV calcu	ılation (Canad	lian \$).	
Under \$5M	_	to under \$25M	🗌 \$25M to unde			NAV calculation:
s100M to under \$50	)0M	0M to under \$1B	s1B or over		YYYY	MM DD
ITEM 7 - INFORMA	TION ABOUT T	HE DISTRIBU	TION			
If an issuer located outsic	le of Canada complete	s a distribution in a	a jurisdiction of Can	nda include in	ltem 7 an	d Schedule 1
information about purch			• •			
commissions or finder's f				ed in Item 8. 1	The inform	ation provided in
Item 7 must reconcile wit	n the information prov		oj the report.			
a) Currency						
Select the currency or cur dollars.	rencies in which the di	stribution was mac	de. All dollar amount	s provided in	the report	must be in Canadian
🗌 Canadian dollar	✓ US dollar	Euro Other (d	escribe)			
h) Distribution o						
b) Distribution c	lates					
State the distribution star						
the distribution date as b include the start and end		• •		irities distribu	ed on a co	ntinuous basis,
	-	·		2024		
Start date	2024 12	30	End date	2024		30
	ΥΥΥΥ ΜΜ	DD		YYYY	MM	OD
c) Detailed purc	haser information					
Complete Schedule 1 of	this form for each pu	ırchaser and atta	ch the schedule to	the complete	d report.	
d) Types of secu	irities distributed					
				Defende Dent	A(12) - f + h	, ha show shi su su fa su ha su s
Provide the following info to indicate the security co						
distributed.		- · · · <b>,</b> · · ·			0	, and the second s
					Canadi	an \$
Security CUSIP			Number of	Single or	Highest	
code number (if applicable)	Description of	security	securities	lowest price	price	Total amount
	Subordinate Voting	Shares	129,536,875.0000			116,413,170.3500
				0.0507		

### e) Details of rights and convertible/exchangeable securities

If 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.

e	Convertible / xchangeable	Underlying security code		se price dian \$)	Expiry date (YYYY-MM- DD)	Conversion ratio	Describe other terms (if applicable)
s	ecurity code	security code	Lowest	Highest			applicable)

f) Summary of the distribution 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.

-			
Province or country	Exemption relied on	Number of unique purchasers <sup>2a</sup>	Total amount (Canadian \$)
United States of America	other - BC Instrument 72-503	31	107,354,400.3500
Italy	other - BC Instrument 72-503	1	359,475.0000
Greece	other - BC Instrument 72-503	1	359,475.0000
Hong Kong	other - BC Instrument 72-503	1	1,294,110.0000
Singapore	other - BC Instrument 72-503	1	1,150,320.0000
United Kingdom	other - BC Instrument 72-503	2	1,437,900.0000
Virgin Islands British	other - BC Instrument 72-503	1	862,740.0000
Malta	other - BC Instrument 72-503	1	718,950.0000
Cyprus	other - BC Instrument 72-503	1	1,437,900.0000
China	other - BC Instrument 72-503	1	1,437,900.0000
	Total dolla	r amount of securities distributed	\$116,413,170.3500
Tota	al number of unique purchasers <sup>2b</sup>	41	

For jurisdictions within Canada, state the province or territory, otherwise state the country.

<sup>2a</sup> In calculating the number of unique purchasers per row, count each purchaser only once. Joint purchasers may be counted as one purchaser.

<sup>2b</sup>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.*<sup>3</sup>*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	

<sup>3</sup>"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.

# **ITEM 8 - COMPENSATION INFORMATION**

whom the issuer directly		ompensation in connection with t	06 respecting Prospectus Exemptions)) to he distribution. <b>Complete additional</b>
Indicate whether any co □ No ☑ Yes		<i>paid, in connection with the disti</i> per of persons compensated.	ribution. 1
a) Name of per	rson compensated and reg	sistration status	
✓ No	rson compensated is a registrant ted is an individual, provide the r		
Full legal name of	individual		
If the person compensat	Family name ted is not an individual, provide t	0	e Secondary given names
Full legal name of	f non-individual Lineage Merc	hant Partners, LLC	
Firm	n NRD number	(if app	licable)
Indicate whether the pe	rson compensated facilitated the	distribution through a funding r	oortal or an internet-based portal
🖌 No 🗌 Yes			· · · · · · · · · · · · · · · · · · ·
b) Business coi	ntact information		
lf a firm NRD number is	not provided in Item 8(a), provid	le the business contact informati	on of the person being compensated.
Street address	115 Bayview Dr		
Municipality	Manhattan Beach	Province/State	California
Country	United States of America	Postal code/Zip code	90266
Email address	michael@lineagemerchantp artners.com	Telephone number	1 (215) 694-2298
c) Relationship	to issuer or investment fu	nd manager	
'connected' in Part B(2)		ing of 'control' in section 1.4 of N	hat apply). Refer to the meaning of I 45-106 (in Québec, Regulation 45-106
Connected with th	e issuer or investment fund ma	anager	
🗌 Insider of the issue	er (other than an investment fu	ind)	
Director or officer	of the investment fund or inve	stment fund manager	
Employee of the is	suer or investment fund mana	ger	
✓ 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	\$1,164,131.0300		
Value of all securities distributed as compensation <sup>4</sup>			
Security codes	Security code 1	Security code 2	Security code 3
Describe terms of warrants, options or other rights			
Other compensation <sup>5</sup>			
Describe			
Total compensation paid	\$1,164,131.0300		
Check box if the person will or may receive any def	erred compensatio	on (describe the te	erms below)
<sup>4</sup> 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.			

<sup>5</sup>Do not include deferred compensation.

# **ITEM 9 – DIRECTORS, EXECUTIVE OFFICERS AND PROMOTERS OF THE ISSUER**

*If the issuer is an investment fund, do not complete Item 9. Proceed to Item 10.* 

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

Reporting issuer in a jurisdiction of Canada

Foreign public issuer

Wholly owned subsidiary of a reporting issuer in any jurisdiction of Canada <sup>6</sup>

Provide name of reporting issuer

Wholly owned subsidiary of a foreign public issuer <sup>6</sup>

Provide name of foreign public issuer

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

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

<sup>6</sup> 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.

<sup>7</sup> 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		onship to t all that a	
		name		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	promoter (select if applicable)
company 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 to that of a director of 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.

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/ investment fund manager/agent	Vireo Growth Inc.					
manager/agent		i		i		
Full legal name	MACDONALD	Tys	on			
	Family name	First give	en name	Secondary given names		
Title	Chief Financial Officer					
Telephone number	1 (240) 832-2750	Email address	tysonmacdoi	nald@vireohealth.com		
Signature	/s/ Tyson Macdonald	Date	2025	01 08		
			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	GREY	Krystal		
	Family name	First given name	Secondary given names	
Title	Solicitor			
Name of company	Sangra Moller LLP			
Telephone number	+1 (604) 692-3049	Email address kgrey	Email address kgrey@sangra.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.

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.