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	Grounded People Apparel Inc. / Groun	nded People Apparel Inc.
Previous full legal name		
If the issuer's name changed in	the last 12 months, provide most recent p	previous legal name.
Website	www.groundedpeople.ca ((if applicable)
If the issuer has a legal entity identifier, p	rovide below. Refer to Part B of the Instru	ctions 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	f the co-issuer(s) other than the issuer named
Full legal name(s) of co-issuer(s)		(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 454110
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
Provide the issuer's SEDAR+ profile number
000053094

ITEM 6 - INVESTMENT I	UND ISSUER INI	FORMATION		
If the issuer is an investment j	fund, provide the follo	wing information.		
a) Investment fund m	anager information	l		
Full legal name				
Firm NRD number		(if applicable))	
SEDAR+ profile number				
b) Type of investment	fund			
Type of investment fund that mo	ost accurately identifies t	he issuer (select only one).		
🗌 Money market	Equity	E Fixed income	Balanced	
Alternative strategies	Cryptoasset	Other (describe)		

Indicate whether one or l	both of the following apply to the investm	ent fund.			
🗌 Invest primarily in c	ther investment fund issuers				
Is a UCITs Fund ¹					
	re Investment of Transferable Securities funds (UC				Union (EU) directives
that allow collective investmer	nt schemes to operate throughout the EU on a pa	ssport basis on autnoriza	tion from one men	nber state.	
c) Net asset valu	ue (NAV) of the investment fund				
Select the NAV range of t	he investment fund as of the date of the r	nost recent NAV calcı	ılation (Canadia	an \$).	
Under \$5M	\$5M to under \$25M	Second se		Date of NAV	calculation:
s100M to under \$5	00M 🗌 \$500M to under \$1B	S1B or over	L	YYYY	MM DD
ITEM 7 - INFORMA	ATION ABOUT THE DISTRIBL	JTION			
If an issuer located outsi	de of Canada completes a distribution in	a iurisdiction of Can	ada. include in l	tem 7 and Scl	hedule 1
information about purch	asers resident in that jurisdiction of Can	ada only. Do not inclu	ıde in Item 7 seo	curities issued	as payment of
	fees, in connection with the distribution, v th the information provided in Schedule 1		ed in Item 8. Th	e information	n provided in
		oj the report.			
a) Currency					
Select the currency or cu dollars.	rrencies in which the distribution was ma	ide. All dollar amoun	ts provided in th	ne report mus	t be in Canadian
🖌 Canadian dollar	🗌 US dollar 🗌 Euro Other (describe)]
					J
h) Distribution	datas				
b) Distribution o	Jates				
	rt and end dates. If the report is being file				
	both the start and end dates. If the report I dates for the distribution period covered	•••••	urities distribue	d on a continu	ious basis,
Start date		End date	2024	08 12	
	YYYY MM DD		YYYY	MM DD	
c) Detailed purc	haser information				
Complete Schedule 1 oj	f this form for each purchaser and atte	ach the schedule to	the completed	report.	
d) Types of secu	urities distributed				
Provide the following inf	ormation for all distributions reported on	a par security basis	Defer to Dart M	(12) of the last	ructions for how
	ode. If providing the CUSIP number, indic				
distributed.				-	
				Canadian \$	
Security CUSIP		Number of	Single or	Highest	
code number (if applicable)	Description of security	securities	lowest price	price	Total amount
UBS	Each unit consists of one commo	1,016,667.0000	0.600	0	610,000.0000
		,,/.0000			.,

					and one						
		commo	n snare	purchas	e warrant						
e) Detai	ls of ri	ghts and	convert	ible/exc	hangeable	e securities					
If any rights (e.ɛ convertible/exc convertible/exc	g. warra hangeai	ints, options ble securitie	s) were di es were di	stributed,	provide the	exercise price	and ex				
Convertible / exchangeable security code	e Un	derlying urity code	(Cana	se price dian \$)		e (YYYY-MM- DD)	Conve	ersion ratio	De		her terms (if cable)
-		CNIC		Highest	202/	00.20		1.1			
WNT		CMS	0.7500		2024	-08-29		1:1			
f) Summ	hary of	f the distr	ibution	hy juris	diction an	d exemptio	'n				
State the total of jurisdiction whe located outside jurisdiction of C This table requi jurisdiction whe Canada, if a pu	ere a pu of Cano Canada Tres a se ere a pu rchaser	rchaser res ada comple only. parate line rchaser res resides in c	ides and j tes a dist item for: ides, if a j a foreign j	for each e ribution ir (i) each ju ourchaser iurisdictio	xemption re n a jurisdiction risdiction wa resides in a n.	lied on in Can on of Canada, here a purcha jurisdiction o	nada for include user resi f Canac	that distribu e distribution: des, (ii) each la, and (iii) ec	ition. He s to pur exempt	owever, if cchasers r ion relied	^c an issuer resident in that l on in the
For jurisdiction	s within	Canada, st	ate the pi	rovince or	territory, ot	herwise state	the cou	ntry.			
Province or co	-		-	n relied o		Number of	unique	purchasers ²	a Tot	al amou	nt (Canadian \$
British Colum	ıbia	NI 45-106							1		100,000.000
Ontario		NI 45-106	o 2.3 [AC	credited	-	r amount of	socuriti	ios distribute	2		510,000.000 \$610,000.000
		Total nu	mber of u	unique pu	rchasers ^{2b}		securit		3		4010,000.000
^{2a} In calculating th	e numbe					iser only once. Jo	oint purch	nasers may be c	-	s one purci	haser.
^{2b} In calculating th issuer distributed I								each purchaser	only onc	e, regardle:	ss of whether the
g) Net p	rocee	ds to the i	investm	ent fun	d by jurisc	liction					
If the issuer is a jurisdiction whe include net pro state the count	ere a pu ceeds fo	rchaser res	ides. ³ lf ai	n issuer lo	cated outsia	e of Canada d	complet	es a distribut	rion in c	a jurisdict	ion of Canada,
			Provi	ince or co	untry		Net pro	oceeds (Cana	dian \$)		
		T	otal net i	oroceeds	to the inves	tment fund				-	
³ "Net proceeds" m occurred during th		gross proceed	ls realized i	in the jurisd			r which th	he report is bein	g filed, le	⊥ ess the gros	s redemptions the

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ITEM 8 - COMPENSATION INFORMATION

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Provide information for whom the issuer directly copies of this page if n	/ provides, or will	provide, any cor	mpensation in connect				
Indicate whether any co □ No ☑ Yes		-	<i>paid, in connection wit</i> er of persons comper	Г	ribution. 1		
a) Name of per	rson compensa	ated and regi	stration status				
Indicate whether the pe	rson compensated	l is a registrant.					
If the person compensat	ted is an individua	al, provide the no	ame of the individual.				
Full legal name of	individual						
lf the person compensa	ted is not an indivi	Family name idual, provide th		st given nam O n.	ne	Secondary give	en names
Full legal name of	f non-individual	Amalfi Corpora	ate Services Ltd.]
Firi	m NRD number			(if app	licable)		
Indicate whether the pe	۱ rson compensated	l facilitated the	distribution through a	 funding i	portal or a	n internet-based r	oortal
✓ No ☐ Yes		,				,	
	- + + :- 6 +:						
b) Business co							
lf a firm NRD number is	not provided in It	em 8(a), provide	e the business contact	informati	ion of the p	person being com	pensated.
Street address	800-1199 West I	Hastings Street					
Municipality	Vancouver		Provin	ce/State	British C	olumbia	
Country	Canada		Postal code/	Zip code	V6E 3T5		
Email address	gb@amalficorp.	ca	Telephone	number	+1 (236)	521-0626	
c) Relationship	to issuer or in	vestment fur	nd manager				
Indicate the person's rel 'connected' in Part B(2) respecting Prospectus E	lationship with the of the Instructions	e issuer or invest and the meanir	ment fund manager (g of 'control' in sectio				
Connected with th	e issuer or invest	ment fund ma	nager				
✓ Insider of the issue	-		-				
			tment fund manager				
 Employee of the is None of the above 		nt fund manag	er				
d) Compensati	on 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			
/alue of all securities distributed as compensation ⁴	\$6,100.2000		
Security codes	Security code 1	Security code 2	Security code 3
Security codes	CMS		
Describe terms of warrants, options or other rights			
Other compensation ⁵			
		ued 10,167 shares	
	at a deemed valu share of the Com	pany to Amalfi	
	Corporate Service administrative se	es Ltd., for rvices rendered in	
Describe	connection with t Placement.	he Private	
Describe			
Total compensation paid	\$6,100.2000		7
] Check box if the person will or may receive any def	erred compensation	on (describe the te	erms below)
ovide the aggregate value of all securities distributed as compensa	tion, <u>excluding</u> options,	warrants or other righ	 ts exercisable to acqu

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 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
U 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		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 name	First given name	Secondary given names	Residential jurisdiction of individual	Relationship to one or both i	•
company name	name	name	names	Province or country	D	Ο

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.

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	Grounded People Apparel Inc.							
manager/agent		1		1				
Full legal name	JUSTUS	Maximilian						
	Family name	First give	en name	Secondary given names				
Title	CEO							
Telephone number	+1 (236) 521-0626	Email address	max@ground	ledpeople.com				
Signature	"Maximilian Justus"	Date	2024	08 13				
			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 c	ertifying the report		
Full legal name	WONG	Jennifer	
	Family name	First given name	Secondary given names
Title	CORPORATE ADMINISTRATOR		
Name of company	AMALFI CORPORATE SERVICES I	_TD.	
Telephone number		Email address jw@	Damalficorp.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.