FORM 2

Disclosure of Owners and Other Interest Holders

Name of Applicant/Licensee: RISE Warwick

Part I: Owners and Other Interest Holders

A. LIST ALL PERSONS AND/OR ENTITIES WITH ANY OWNERSHIP INTEREST IN THE APPLICANT/LICENSEE (including corporation stockholders; LLC members; and partners if a partnership; this includes parent companies if the applicant/licensee is a subsidiary of another entity).

•		
Business Name CanWell Processing (RI), LLC	City Chicago	State Illinois
Zip 60654	Business Associated with (Applicant, parent Applicant	business or sub-entity)
Business Name Mobley Pain Mgmt & Wellness Cntr	City Chicago	State Illinois
Zip 60654	Business Associated with (Applicant, parent Applicant	business or sub-entity)
Business Name	City	State
GTI Rhode Island, LLC	Chicago	Illinois
Zip 60654	Business Associated with (Applicant, parent business or sub-entity) Mobley Pain Management and Wellness Center (DE), LLC and CanWell Processing (Rhode Island), LLC	
Business Name	City	State
VCP23, LLC	Chicago	Illinois
Zip	Business Associated with (Applicant, parent business or sub-entity)	
60654	GTI Core, LLC	
Business Name	City	State
GTI Core, LLC	Chicago	Illinois
Zip	Business Associated with (Applicant, parent business or sub-entity)	
60654	GTI Rhode Island, LLC	
Business Name	City	State
GTI23, Inc.	Chicago	Illinois
Zip 60654	Business Associated with (Applicant, parent VCP23, LLC	business or sub-entity)
Business Name	City	State
Green Thumb Industries Inc.	Chicago	Illinois

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Zip	Business Associated with (Applicant, parent business or sub-entity)
60654	GTI23, Inc.

B. LIST ALL OFFICERS, DIRECTORS, MANAGERS, MEMBERS OR AGENTS OF THE APPLICANT/LICENSEE AND ANY OTHER ENTITIES DESCRIBED IN SECTION A.

individual person ieve		
First Name James	Last Name Harrington	Title Director
City Wakefield	State Rhode Island	Zip 02879
Business Associated wit Applicant	h (Applicant, parer	nt business or sub-entity)
First Name Emily	Last Name O'Rourke	Title Market Manager, APS Operational Compliance
City Chicago	State Illinois	Zip 60654
Business Associated wit Applicant	h (Applicant, parer	nt business or sub-entity)
First Name Andrew	Last Name Grossman	Title Manager of GTI Core, LLC and VCP23, LLC; Director of GTI23, Inc.
City Baltimore	State Maryland	Zip 21208
		nt business or sub-entity) C; Director of GTI23, Inc.
First Name Anthony	Last Name Georgiadis	Title Manager of GTI Core, LLC and VCP23, LLC; Director of GTI23, Inc. & Green Thumb Industries Inc.
City Chicago	State Illinois	Zip 60654
		nt business or sub-entity) C; Director of GTI23, Inc. & Green Thumb Industries Inc.
First Name Benjamin	Last Name Kovler	Title Manager of GTI Core, LLC and VCP23, LLC; Director of GTI23, Inc. & Green Thumb Industries Inc.
City Chicago	State Illinois	Zip 60611
		nt business or sub-entity) C; Director of GTI23, Inc. & Green Thumb Industries Inc.
First Name Richard	Last Name Reisin	Title Board Member, Green Thumb Industries Inc
City Palm Beach Gardens	State Florida	Zip 33418

First Name	Last Name	Title
Hannah	Ross	Board Member, Green Thumb Industries Inc.
City	State	Zip
Santa Monica	California	90401
Business Associated with (Applicant, paren	t business or sub-entity)
First Name	Last Name	Title
Ethan	Nadelmann	Board Member, Green Thumb Industries Inc.
City	State	Zip
New York	New York	10023
Business Associated with (Applicant, paren	t business or sub-entity)
First Name	Last Name	Title
Jeffrey	Goldman	Board Member, Green Thumb Industries Inc.
City	State	Zip
Deerfield	Illinois	60015-2219
Business Associated with (Applicant, paren	t business or sub-entity)
First Name	Last Name	Title
Jeffrey	Armstrong	Director
City	State	Zip
Cohasset	Massachusetts	02025
Business Associated with (Summit Medical Compassion		t business or sub-entity)
First Name	Last Name	Title
Dawn	Barnes	Officer
City	State	Zip
Atlanta	Georgia	30327
Business Associated with (Summit Medical Compassion		t business or sub-entity)
First Name	Last Name	Title
Melanie	Bowdish	Board Member
City	State	Zip
Providence	Rhode Island	02908
Business Associated with (Summit Medical Compassio		t business or sub-entity)
First Name	Last Name	Title
Arthur	Bowdish	Board Member
City	State	Zip
Providence	Rhode Island	02906-2910
Business Associated with (Summit Medical Compassion		t business or sub-entity)
Business Name	City	State
CanWell Processing (RI),	Chicago	Illinois

Zip 60654	Business Assoc Applicant	ciated with (Applicant, parent business or sub-entity)
Business Name Mobley Pain Mgmt & Wellness Cntr	City Chicago	State Illinois
Zip 60654	Business Assoc Applicant	ciated with (Applicant, parent business or sub-entity)

C. LIST ALL PERSONS OR ENTITIES WHO HAVE MANAGING OR OPERATIONAL CONTROL WITH RESPECT TO THE APPLICANT/LICENSEE, ANY OTHER ENTITIES DESCRIBED IN SECTIONS A OR B, ITS OPERATIONS, THE LICENSE, AND/OR LICENSED FACILITIES (WHETHER THEY HAVE AN OWNERSHIP INTEREST OR NOT).

First Name Emily	Last Name O'Rourke	Title Market Manager, APS Operational Compliance
City	State	Zip
Chicago Business Associated with sub-entity) Applicant	Illinois (Applicant, parent business or	60654 Role, interest, etc.
First Name Anthony	Last Name Georgiadis	Title Manager of GTI Core, LLC and VCP23, LLC; Director of GTI23, Inc. & Green Thumb Industries Inc.
City Chicago	State Illinois	Zip 60654
sub-entity)	(Applicant, parent business or C and VCP23, LLC; Director of b Industries Inc.	Role, interest, etc.
First Name Benjamin	Last Name Kovler	Title Manager of GTI Core, LLC and VCP23, LLC; Director of GTI23, Inc. & Green Thumb Industries Inc.
City Chicago	State Illinois	Zip 60611
sub-entity)	(Applicant, parent business or C and VCP23, LLC; Director of b Industries Inc.	Role, interest, etc.
First Name Andrew	Last Name Grossman	Title Manager of GTI Core, LLC and VCP23, LLC; Director of GTI23, Inc.
City Baltimore	State Maryland	Zip 21208
sub-entity)	(Applicant, parent business or C and VCP23, LLC; Director of	Role, interest, etc.
First Name James	Last Name Harrington	Title Director
City	State	Zip

sub-entity) Applicant	(Applicant, parent business or	Role, interest, etc.
First Name	Last Name	Title
Richard	Reisin	Board Member, Green Thumb Industries Inc
City	State	Zip
Palm Beach Gardens	Florida	33418
Business Associated with sub-entity)	(Applicant, parent business or	Role, interest, etc.
First Name	Last Name	Title
Hannah	Ross	Board Member, Green Thumb Industries Inc.
City	State	Zip
Santa Monica	California	90401
Business Associated with sub-entity)	(Applicant, parent business or	Role, interest, etc.
First Name	Last Name	Title
Ethan	Nadelmann	Board Member, Green Thumb Industries Inc.
City	State	Zip
New York	New York	10023
Business Associated with sub-entity)	(Applicant, parent business or	Role, interest, etc.
First Name	Last Name	Title
Jeffrey	Goldman	Board Member, Green Thumb Industries Inc.
City	State	Zip
Deerfield	Illinois	60015-2219
Business Associated with sub-entity)	(Applicant, parent business or	Role, interest, etc.
First Name	Last Name	Title
Melanie	Bowdish	Board Member
City	State	Zip
Providence	Rhode Island	02908
Business Associated with sub-entity) Summit Compassion Cent	(Applicant, parent business or er, LLC	Role, interest, etc.
First Name	Last Name	Title
Arthur	Bowdish	Board Member
City	State	Zip
Providence	Rhode Island	02906-2910
Business Associated with sub-entity) Summit Compassion Cent	(Applicant, parent business or er, LLC	Role, interest, etc.
First Name	Last Name	Title
Jeffrey	Armstrong	Director

City Cohasset	State Massachusetts	Zip 02025
Business Associated with sub-entity) Summi	(Applicant, parent business or	Role, interest, etc.
First Name Dawn	Last Name Barnes	Title Officer
City Atlanta	State Georgia	Zip 30327
Business Associated with sub-entity) Summit Medical Compass	(Applicant, parent business or sion Center, Inc	Role, interest, etc.
First Name Melanie	Last Name Bowdish	Title Board Member
City Providence	State Rhode Island	Zip 02908
Business Associated with sub-entity) Summit Medical Compass	(Applicant, parent business or sion Center, Inc	Role, interest, etc.
First Name Arthur	Last Name Bowdish	Title Board Member
City Providence	State Rhode Island	Zip 02906-2910
Business Associated with sub-entity) Summit Medical Compass	(Applicant, parent business or sion Center, Inc	Role, interest, etc.
	Last Name	Title
First Name Diana	Vecchio	Manager
	Vecchio State Rhode Island	Manager Zip 02886
Diana City Warwick	State Rhode Island (Applicant, parent business or	Zip
Diana City Warwick Business Associated with sub-entity)	State Rhode Island (Applicant, parent business or sion Center, Inc	Zip 02886 Role, interest, etc.
Diana City Warwick Business Associated with sub-entity) Summit Medical Compass Business Name	State Rhode Island (Applicant, parent business or sion Center, Inc	Zip 02886 Role, interest, etc. Ops Manager City
Diana City Warwick Business Associated with sub-entity) Summit Medical Compass Business Name CanWell Processing (RI), State Illinois	State Rhode Island (Applicant, parent business or sion Center, Inc LLC Zip	Zip 02886 Role, interest, etc. Ops Manager City Chicago Role, interest, etc.
Diana City Warwick Business Associated with sub-entity) Summit Medical Compass Business Name CanWell Processing (RI), State Illinois Business Associated with	State Rhode Island a (Applicant, parent business or sion Center, Inc LLC Zip 60654 a (Applicant, parent business or state)	Zip 02886 Role, interest, etc. Ops Manager City Chicago Role, interest, etc.

Applicant		
Business Name GTI23, Inc.		City Chicago
State Illinois	Zip 60654	Role, interest, etc.
Business Associated with (Applie VCP23, LLC	cant, parent business or a	sub-entity)
Business Name GTI Core, LLC		City Chicago
StateZipIllinois60654		Role, interest, etc.
Business Associated with (Applied GTI Rhode Island, LLC	cant, parent business or a	sub-entity)
Business Name GTI Rhode Island, LLC		City Chicago
State Illinois	Zip 60654	Role, interest, etc.
Business Associated with (Applie Mobley Pain Management and We		sub-entity) and CanWell Processing (Rhode Island), LLC
Business Name Green Thumb Industries Inc.		City Chicago
State Illinois	Zip 60654	Role, interest, etc.
Business Associated with (Appli GTI23, Inc.	cant, parent business or a	sub-entity)

D. LIST ALL INVESTORS OR OTHER PERSONS OR ENTITIES WHO HAVE ANY FINANCIAL INTEREST WITH RESPECT TO THE APPLICANT/LICENSEE, ANY OTHER ENTITIES DESCRIBED IN SECTIONS A, B OR C, ITS OPERATIONS, THE LICENSE, AND/OR LICENSED FACILITIES (WHETHER THEY HAVE AN OWNERSHIP INTEREST OR NOT).

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First Name Andrew	Last Name Grossman	Title Manager of GTI Core, LLC and VCP23, LLC; Director of GTI23, Inc.
City Baltimore	State Maryland	Zip 21208
Business Associated with Manager of GTI Core, LLC		rent business or sub-entity) LC; Director of GTI23, Inc.
First Name Anthony	Last Name Georgiadis	Title Manager of GTI Core, LLC and VCP23, LLC; Director of GTI23, Inc. & Green Thumb Industries Inc.
City Chicago	State Illinois	Zip 60654
		rent business or sub-entity) LC; Director of GTI23, Inc. & Green Thumb Industries Inc.
First Name Benjamin	Last Name Kovler	Title Manager of GTI Core, LLC and VCP23, LLC; Director of GTI23, Inc. & Green Thumb Industries Inc.
City Chicago	State Illinois	Zip 60611
		rent business or sub-entity) LC; Director of GTI23, Inc. & Green Thumb Industries Inc.
First Name Richard	Last Name Reisin	Title Board Member, Green Thumb Industries Inc
City Palm Beach Gardens	State Florida	Zip 33418
Business Associated with	(Applicant, par	rent business or sub-entity)
First Name Hannah	Last Name Ross	Title Board Member, Green Thumb Industries Inc.
City Santa Monica	State California	Zip 90401
Business Associated with	(Applicant, par	rent business or sub-entity)
First Name Ethan	Last Name Nadelmann	Title Board Member, Green Thumb Industries Inc.

City New York	State New York	Zip 10023	
Business Associated with (A	Applicant, par	ent business or sub-entity)	
First Name Jeffrey	Last Name Goldman	Title Board Member, Green Thumb Industries Inc.	
City Deerfield	State Illinois	Zip 60015-2219	
Business Associated with (A	Applicant, par	ent business or sub-entity)	
Business Name Mobley Pain Mgmt & Wellness Cntr	City Chicago	State Illinois	
Zip 60654	Business As Applicant	sociated with (Applicant, parent business or sub-entity)	
Business Name GTI23, Inc.	City Chicago	State Illinois	
Zip 60654		Business Associated with (Applicant, parent business or sub-entity) VCP23, LLC	
Business Name GTI Rhode Island, LLC	City Chicago	State Illinois	
Zip 60654	Business Associated with (Applicant, parent business or sub-entity) Mobley Pain Management and Wellness Center (DE), LLC and CanWell Processing (Rhode Island), LLC		
Business Name VCP23, LLC	City Chicago	State Illinois	
Zip 60654	Business As GTI Core, L	sociated with (Applicant, parent business or sub-entity) LC	
Business Name CanWell Processing (RI), LLC	City Chicago	State Illinois	
Zip 60654	Business As Applicant	sociated with (Applicant, parent business or sub-entity)	
Business Name GTI Core, LLC	City Chicago	State Illinois	
Zip 60654	Business As GTI Rhode I	sociated with (Applicant, parent business or sub-entity) Island, LLC	
Business Name Green Thumb Industries Inc.	City Chicago	State Illinois	
Zip 60654	Business As GTI23, Inc.	sociated with (Applicant, parent business or sub-entity)	

E. LIST ALL PERSONS OR ENTITIES THAT HOLD INTEREST(S) ARISING UNDER SHARED MANAGEMENT COMPANIES, MANAGEMENT AGREEMENTS, OR OTHER AGREEMENTS THAT AFFORD THIRD-PARTY MANAGEMENT OR OPERATIONAL CONTROL WITH RESPECT TO THE APPLICANT/LICENSEE, ITS OPERATIONS, THE LICENSE AND/OR THE LICENSED FACILITIES.

First Name Benjamin	Last Name Kovler	Title Manager of GTI Core, LLC and VCP23, LLC; Director of GTI23, Inc. & Green Thumb Industries Inc.
City Chicago	State Illinois	Zip 60611
		e nt business or sub-entity) .C; Director of GTI23, Inc. & Green Thumb Industries Inc.
First Name Andrew	Last Name Grossman	Title Manager of GTI Core, LLC and VCP23, LLC; Director of GTI23, Inc.
City Baltimore	State Maryland	Zip 21208
		ent business or sub-entity) .C; Director of GTI23, Inc.
First Name Anthony	Last Name Georgiadis	Title Manager of GTI Core, LLC and VCP23, LLC; Director of GTI23, Inc. & Green Thumb Industries Inc.
City Chicago	State Illinois	Zip 60654
		ent business or sub-entity) .C; Director of GTI23, Inc. & Green Thumb Industries Inc.
Manager of GTI Core, LL First Name		
Manager of GTI Core, LL First Name Fred City	C and VCP23, LL Last Name	C; Director of GTI23, Inc. & Green Thumb Industries Inc. Title
Manager of GTI Core, LL First Name Fred City East Hampton Business Associated with	C and VCP23, LL Last Name Trinks State Connecticut (Applicant, pare	C; Director of GTI23, Inc. & Green Thumb Industries Inc. Title District Manager - Green Thumb Industries Inc. Zip
Manager of GTI Core, LL First Name Fred City East Hampton Business Associated with Green Thumb Industries In First Name	C and VCP23, LL Last Name Trinks State Connecticut (Applicant, pare	C; Director of GTI23, Inc. & Green Thumb Industries Inc. Title District Manager - Green Thumb Industries Inc. Zip 06424
Manager of GTI Core, LL First Name Fred City East Hampton Business Associated with Green Thumb Industries In First Name Richard City	C and VCP23, LL Last Name Trinks State Connecticut (Applicant, pare nc. Last Name	C; Director of GTI23, Inc. & Green Thumb Industries Inc. Title District Manager - Green Thumb Industries Inc. Zip 06424 ent business or sub-entity)
Manager of GTI Core, LL First Name Fred City East Hampton Business Associated with Green Thumb Industries In First Name Richard City Palm Beach Gardens	C and VCP23, LL Last Name Trinks State Connecticut (Applicant, pare nc. Last Name Reisin State Florida	C; Director of GTI23, Inc. & Green Thumb Industries Inc. Title District Manager - Green Thumb Industries Inc. Zip 06424 ent business or sub-entity) Title Board Member, Green Thumb Industries Inc Zip
Manager of GTI Core, LL First Name Fred City East Hampton Business Associated with Green Thumb Industries In First Name Richard City Palm Beach Gardens	C and VCP23, LL Last Name Trinks State Connecticut (Applicant, pare nc. Last Name Reisin State Florida	C; Director of GTI23, Inc. & Green Thumb Industries Inc. Title District Manager - Green Thumb Industries Inc. Zip 06424 ent business or sub-entity) Title Board Member, Green Thumb Industries Inc Zip 33418

First Name	Last Name	Title	
Ethan	Nadelmann	Board Member, Green Thumb Industries Inc.	
City	State	Zip	
New York	New York	10023	
Business Associated with	(Applicant, par	ent business or sub-entity)	
First Name	Last Name	Title	
Jeffrey	Goldman	Board Member, Green Thumb Industries Inc.	
City	State	Zip	
Deerfield	Illinois	60015-2219	
Business Associated with	(Applicant, par	ent business or sub-entity)	
Business Name Mobley Pain Mgmt & Wellness Cntr	City Chicago	State Illinois	
Zip	Business Associated with (Applicant, parent business or sub-entity)		
60654	Applicant		
Business Name	City	State	
GTI23, Inc.	Chicago	Illinois	
Zip	Business Associated with (Applicant, parent business or sub-entity)		
60654	VCP23, LLC		
Business Name	City	State	
GTI Rhode Island, LLC	Chicago	Illinois	
Zip 60654	Business Associated with (Applicant, parent business or sub-entity) Mobley Pain Management and Wellness Center (DE), LLC and CanWell Processing (Rhode Island), LLC		
Business Name	City	State	
VCP23, LLC	Chicago	Illinois	
Zip	Business Associated with (Applicant, parent business or sub-entity)		
60654	GTI Core, LLC		
Business Name	City	State	
GTI Core, LLC	Chicago	Illinois	
Zip 60654		Business Associated with (Applicant, parent business or sub-entity) GTI Rhode Island, LLC	
Business Name CanWell Processing (RI), LLC	City Chicago	State Illinois	
Zip 60654	Business Associated with (Applicant, parent business or sub-entity) Applicant		
Business Name Green Thumb Industries Inc.	City Chicago	State Illinois	
Zip	Business Associated with (Applicant, parent business or sub-entity)		
60654	GTI23, Inc.		

Part II: Who, besides the owners and other Interest Holders listed in this Form 2 (including persons, firms, partnerships, corporations, limited liability companies, trusts), will loan, give or otherwise provide money, property interests, equipment, inventory, furniture, licensing or other proprietary rights to or for use in this business, or hold a security interest therein; or who will receive money, profits, proprietary rights or other interests from this business. Attach a separate sheet if necessary. If any such person is an entity, list all persons with any ownership in or control of that entity.

Name

CERTIFICATION AS TO FORM 2

The undersigned duly authorized officer of the applicant/licensee, in his/her capacity as such officer and for and on behalf of the applicant/licensee, after due inquiry, hereby certifies to the Office of Cannabis Regulation of the Department of Business Regulation (the "Department" or "DBR") that it/he/she has disclosed to the Department in this Form 2:

(A) With respect to the applicant/licensee, all persons and entities that:

(i) Are owners, members, officers, directors, managers or agents of the applicant/licensee, and/or

(ii) Have/will have managing or operational control with respect to the applicant/licensee, its operations, the license and/or licensed facilities whether they have an ownership interest or not, and/or

(iii) Are investors or have any other financial interest therein, and/or

(iv) Hold interest(s) arising under shared management companies, management agreements, or other agreements that afford third-party management or operational control with respect to the applicant/licensee, its operations, the proposed license and/or the licensed facilities (any person or entity in the foregoing (i), (ii) and (iii) being herein individually referred to as an "interest holder" and all such persons and entities in the foregoing (i), (ii), (iii) and (iv) being collectively referred to as the "interest holders"), and

(B) To the extent that any interest holder described in (A) above is an entity, all interest holders in that entity until all such interest holders are identified and disclosed down to the individual person level.

The undersigned, after due inquiry, further certifies to the Department that, except for the license that is the subject of this Form 2 and except as permitted under R.I. Gen. Laws § 21-28.6-12(b)(10), no "interest holder" disclosed herein is an "interest holder" with respect to any other license issued by, or license application made to, the Department as to a "marijuana establishment licensee" as defined in R.I. Gen. Laws § 21-28.6-3(17).

The undersigned hereby acknowledges and agrees that the applicant/licensee has a continuing obligation to disclose any changes and shall provide written notice to the Department within thirty (30) days of any change of the persons/entities/interest holders described and the certifications made in this Form 2 and that each such notice shall include an updated Form 2.

Under penalty of perjury, I hereby declare and verify that all statements on and information submitted with this Form 2 are complete, true, correct and accurate.

Keely Hartle

Authorized Signatory

6/25/2025 Date

Robin Taylor Printed Name Print Name of Applicant/Licensee: RISE Warwick Print Officer Title: