FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

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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

Name and Address of Reporting Person* Faraut Philippe		2. Date of Event Requiring Statement (Month/Day/Year) 12/24/2024	l .	3. Issuer Name and Ticker or Trading Symbol Lowell Farms Inc. [LOWLF]				
(Last)	(First)	(Middle)		Relationship of Reporting Person(s) to Issuer (Check all applicable)			If Amendment, Date of Original Filed (Month/Day/Year) Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person	
C/O LOWELL FARMS INC. 19 QUAIL RUN CIRCLE, SUITE B			X	Director Officer (give title below) Chief Financial O	10% Owner Other (specify below)			
(Street) SALINAS	CA	93907					Form filed by More than One Reporting Person	
(City)	(State)	(Zip)						

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or	4. Nature of Indirect Beneficial Ownership (Instr. 5)
		Indirect (I) (Instr. 5)	

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	I I		Derivative Security (Instr. 4)		Conversion or Exercise	Form: Direct (D) or	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Price of Derivative Security Indirect (I) (Instr. 5)		
Stock Options (right to buy)	(1)	12/20/2029	Subordinate Voting Shares	500,000	0.01	D	

Explanation of Responses:

 $1.\,25\% \ of the \ options \ vest \ and \ become \ exercisable \ on \ each \ of the \ first \ four \ anniversaries \ of the \ date \ of \ grant, \ December \ 20, \ 2024.$

<u>/s/ Philippe Faraut</u> <u>12/30/2024</u>

** Signature of Reporting Person Date

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

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.

^{*} 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).