# Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 8657874

ITEM 1 - REPORT TYPE						
✓ New report						
☐ Amended report If ame	nded, provide filing date	of report that is being	amended	(YYYY-MM-DD)		
ITEM 2 - PARTY CERTIFYING TH	e Report					
Indicate the party certifying the report (see Instrument 81-106 Investment Fund Cont			an investment fund, refer to	section 1.1 of National		
☐ Investment fund issuer	indous Disclosure and the comp	umon policy to 141 of 100.				
✓ Issuer (other than an investigation)	stment fund)					
Underwriter	, , , , , , , , , , , , , , , , , , ,					
Item 3 - Issuer Name and O	THE IDENTIFIED					
Provide the following information about to		vestment fund, about the f	und			
Full legal name			ma.			
Full legal name Antrim Balanced Mortgage Fund Ltd.  Previous full legal name						
If the issuer's name changed in th						
Website www.antriminvestments.com (if applicable)						
If the issuer has a legal entity identifier. pr	rovide below. Refer to Part B of t	he Instructions for the defi	nition of "legal entity identific	er".		
Legal entity identifier						
If two or more issuers distributed a single	security, provide the full legal no	ame(s) of the co-issuer(s) or	her than the issuer named a	bove.		
Full legal name(s) of co-issuer(s)		(if app	olicable)			
Item 4 - Underwriter Information						
If an underwriter is completing the report,	provide the underwriter's full le	gal name and firm NRD nu	mber.			
Full legal name						
Firm NRD number (if applicable)						
If the underwriter does not have a firm NF	RD number, provide the head off	ice contact information of	the underwriter.			
Street address						
Municipality	unicipality Province/State					
Country		Postal code/Zip o	ode	_		
Telephone number		Web	esite	(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 5 2 2 9 9
If the issuer is in the <b>mining industry</b> , 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
c) SEDAR profile number
Does the issuer have a SEDAR profile?
No Yes If yes, provide SEDAR profile number 0 0 0 3 8 5 6 8
If the issuer does not have SEDAR profile complete item 5(d) - (h).
d) Head office address
Street address Province/State
Municipality Postal code/Zip code
Country Telephone number
e) Date of formation and financial year-end
Date of formation Financial year-end MM DD MM DD
f) Reporting issuer status
Is the issuer a reporting issuer in any jurisdication of Canada? No Yes
If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer.
AII AB BC MB NB NL NT
□ NS         □ NU         □ ON         □ PE         □ QC         □ SK         □ YT
g) Public listing status
If the issuer has a CUSIP number, provide below (first 6 digits only)
CUSIP number
If the issuer is publicly listed, provide the name of the exchange on which the issuer's equity securities primarily trade. Provide only the name of an exchange and not a trading facility such as for example, an automated trading system.
exchange and not a trading facility such as, for example, an automated trading system.  Exchange name
h) Size of issuer's assets
, , , , , , , , , , , , , , , , , , , ,

Select the size of the issuer's assets based on its most recently available annual financial statements (Canadian \$). If the issuer has not prepared annual financial statements for its first financial year, provide the size of the issuer's assets at the distribution end date.

☐ \$0 to under \$5M	☐ \$5M to under \$25M	☐ \$25M to under \$100M
\$100M to under \$500M	☐ \$500M to under \$1B	\$1B or over

ITEM 6 - INVESTMENT	FUND ISSUER INFORMATION
If the issuer is an inves	tment fund, provide the following information.
a) Investment fund ma	anager information
Full legal name	
Firm NRD number	(if applicable)
If the investment fund mand	ager does not have a firm NRD number, provide the head office contact information of the investment fund manager.
Street address	
Municipality	Province/State Province/State
Country	Postal code/Zip code
Telephone number	Website (if applicable)
b) Type of investment	fund
Type of investment fund tha	nt most accurately identifies the issuer (select only one) .
Money market	☐ Equity ☐ Fixed income ☐ Balanced
Alternative strateg	gies Cryptoasset Other (describe)
	h of the following apply to the investment fund .
	n other investment fund issuers
☐ Is a UCITs Fund¹	
<sup>1</sup> Undertaking for the Collec (EU) directives that allow co	tive Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union ollective investment schemes to operate throughout the EU on a passport basis on authorization from one member state.
c) Date of formation a	nd financial year-end of the investment fund
Date of format	tion Financial year-end MM DD
d) Reporting issuer st	atus of the investment fund
Is the investment fund a rep	orting issuer in any jurisdication of Canada? No Yes
If yes, select the jurisdictions	s of Canada in which the investment fund is a reporting issuer.
AII	AB BC MB NB NL NT
□ NS □	NU ON PE QC SK T
e) Public listing status	s of the investment fund
If the investment fund has a	CUSIP number, provide below (first 6 digits only)
	CUSIP number
	blicly listed, provide the name of the exchange on which the investment fund's securities primarily trade. Provide only the oot a trading facility such as, for example, an automated trading system.
Exchange n	
f) Net asset value (NA	AV) of the investment fund
Select the NAV range of the	investment fund as of the date of the most recent NAV calculation (Canadian \$).
\$0 to under \$5M	\$5M to under \$25M \$25M to under \$100M
\$100M to under \$500	DM S500M to under \$1B S1B or over Date of NAV calculation:  YYYY MM DD

## ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION

If an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include in Item 7 and Schedule 1 information about purchasers resident in that jurisdiction of Canada only. Do not include in Item 7 securities issued as payment of commissions or finder's fees in connection with the distribution, which must be disclosed in Item 8. The information provided in Item 7 must reconcile with the information provided in Schedule 1 of the report.

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Select the currency or currencies in which the distribution was made. All dollar amounts provided in the report must be in Canadian dollars.

✓ Canadian dollar US dollar Euro Other (describe)

## b) Distribution date(s)

State the distribution start and end dates. If the report is being filed for securities distributed on only one distribution date, provide the distribution date as both the start and end dates. If the report is being filed for securities distributed on a continuous basis, include the start and end dates for the distribution period covered by the report.

Start date 2018 11 07

End date 2018 11 14

#### c) Detailed purchaser information

Complete Schedule 1 of this form for each purchaser and attach the schedule to the completed report.

## d) Types of securities distributed

Provide the following information for all distributions reported on a per security basis. Refer to Part A(12) of the Instructions for how to indicate the security code. If providing the CUSIP number, indicate the full 9-digit CUSIP number assigned to the security being distributed.

					Canadian \$			
Security code (if applicable)		 Description of security	Number of securities	Single or lowest price	Highest price	Total amount		
Р	R	s	Class A Preferred Non-Voting Shares	1,196,755.00	1.0000	1.0000	1,196,755.00	
Р	R	s	Class B Series 'B' Preferred Non- Voting Shares	1,413,039.00	1.0000	1.0000	1,413,039.00	
Р	R	s	Class B Series 'C' Preferred Non- Voting Shares	2,649,392.00	1.0000	1.0000	2,649,392.00	

## 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	Conver xchang ecurity	geab	le	Underlying E			ise price adian \$)	Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other items (if applicable)	
							Lowest	Highest			

# 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.

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

Province or country	Exemption relied on	Number of unique <sup>28</sup> purchasers	Total amount (Canadian \$)
Alberta	NI 45-106 2.9(2.1) [Offering memorandum] (AB, SK, ON, QC, NB, NS)	12	354,000.00
British Columbia	NI 45-106 2.5 [Family, friends and business associates]	1	500,000.00
British Columbia	NI 45-106 2.9(1) [Offering memorandum] (BC, NL)	72	3,054,764.00

Ontario	NI 45-106 2.9(2.1) [Offering memorandum] (AB, SK, ON, QC, NB, NS)	40	1,145,222.00
Québec	NI 45-106 2.9(2.1) [Offering memorandum] (AB, SK, ON, QC, NB, NS)	3	205,200.00
	Total dollar amount of se	curities distributed	5,259,186.00
	Total number of unique purchasers <sup>2b</sup>	118	

<sup>&</sup>lt;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.

## 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>&</sup>lt;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.

# h) Offering materials - This section applies only in Saskatchewan, Ontario, Québec, New Brunswick and Nova Scotia.

If a distribution has occurred in Saskatchewan, Ontario, Québec, New Brunswick or Nova Scotia, complete the table below by listing the offering materials that are required under the prospectus exemption relied on to be filed with or delivered to the securities regulatory authority or regulator in those jurisdictions.

In Ontario, if the offering materials listed in the table are required to be filed with or delivered to the Ontario Securities Commission (OSC), attach an electronic version of the offering materials that have not been previously filed with or delivered to the OSC.

Description	Date of document or other material (YYYY-MM-DD)	Previously filed with or delivered to regulator? (Y/N)	Date previously filed or delivered (YYYY-MM-DD)

<sup>&</sup>lt;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.

Provide information for each person (as defined in NI 45-106) to whom the issuer directly provides, or will provide, any compensation in connection with the distribution.  Complete additional copies of this page if more than one person was, or will be, compensated.  Indicate whether any compensation was paid, or will be paid, in connection with the distribution.  No Yes If yes, indicate number of persons compensated.	ITEM 8 - COMPENSATION INFORMATION					
No ✓ Yes If yes, indicate number of persons compensated.	Indicate whether any compensation was paid, or will be paid, in connection with the distribution.					
	No ✓ Yes If yes, indicate number of persons compensated. 6					

a) Name of person compe	nsated and regis	tration	status										
Indicate whether the person comp	pensated is a regist	rant.			☐ No		<b>√</b>	Yes					
If the person compensated is an i	ndividual, provide t	he name	e of the i	ndivid	dual.								
Full legal name of individ	lual												
		Family na	ıme			First	t given r	name		Secon	dary giv	en names	
If the person compensated is not	an individual, prov	ide the fo	ollowing	infor	mation.								
Full legal name o	f non-individual	Raymo	ond Jan	nes L	_td.								
Firm	m NRD number	8	2	4	0				(if app	olicable)			
Indicate whether the person comp	pensated facilitated	the dist	ribution	throu	ıgh a fund	ing port	al or a	n interne	rt-based	portal.		No 🔽	Yes
b) Business contact inform	nation												
If a firm NRD number is not prov	ided in Item 8 (a), բ	orovide ti	he busin	ess co	ontact info	rmation	of the	person l	peing cor	mpensated.			
Street address													
Municipality							F	Province	e/State				
Country						Р	ostal	code/Zi	p code				
Email address	Email address Telephone number												
c) Relationship to issuer or investment fund manager													
Indicate the person's relationship the Instructions and the meaning  Connect with the issuel	of "control" in sect	ion 1.4 c	of NI 45			ooses of	compl	eting thi	s section.				
Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund)  Director or officer of the investment fund or investment fund manager Employee of the issuer or investment fund manager													
<u> </u>	e investment iuna t	or investi	mentiur	iu ilia	anagei	Ш'	Embio	yee or tr	e issuer	or investmen	it iuria	managei	
✓ None of the above													
d) Compensation details													
Provide details of all compensatio Canadian dollars. Include cash co- incidental to the distribution, such allocation arrangements with the	mmissions, securition as clerical, printing directors, officers o	es-based g, legal o r employ	compen or accour	nsatio nting	n, gifts, dis services. A	scounts ( In issuer	or othe is not	r compe requirea	nsation. ' to ask fo	Do not report	paym	ents for se	ervices
Cash commissions paid	2	39.59						Security	code 1	Security cod	e 2	Security co	ode 3
Value of all securities distributed as compensation	1			5	Security co	odes							
Describe ter	ms of warrants, op	otions or	other rig	ghts									
Other compensation <sup>5</sup>	;		Desc	ribe									
Total compensation paid	23	39.59											
✓ Check box if the pers	on will or may rece	eive any	deferred	d com	npensatior	n (descri	ibe the	terms b	elow)				
Raymond James Lt Voting Shares, 1% Voting Shares.	d. will receive ar on Class B Serie	annua es 'B' Pi	ıl trailer referrec	fee   d Nor	paid mor n-Voting	nthly in Shares	the ar	mount o	of 1/2% Class B	on Class A Series 'C' F	Prefe referr	rred Nor ed Non-	)-
<sup>4</sup> Provide the aggregate value of additional securities of the issue rights exercisable to acquire add <sup>5</sup> Do not include deferred compet	r. Indicate the secu ditional securities o	ırity cod	es for all										er

a) Name of person compe	ensated and regis	tration status	i								
Indicate whether the person com	npensated is a registr	ant.		☐ No		✓	Yes				
If the person compensated is an	individual, provide ti	he name of the	individ	dual.							
Full legal name of indivi	idual										
	F	amily name			First g	iven nar	me		Secondary	given names	
If the person compensated is not	t an individual, provi	de the followin	g infori	mation.							
Full legal name	of non-individual	Industrielle A	Allianc	e Valeurs	Mobilie	ers					
Fi	rm NRD number	1 5	4	0	0			(if appl	icable)		
Indicate whether the person com	י npensated facilitated	the distribution	n throu	gh a fundi	ng portal	or an i	internet-	based p	oortal.	No ✓	Yes
b) Business contact information											
If a firm NRD number is not pro	vided in Item 8 (a), p	rovide the busi	ness co	ntact infor	mation o	f the pe	erson be	ing com	pensated.		
Street address											
Municipality						Pro	ovince/	State			
Country					Pos	stal co	de/Zip	code			
Email address		Telephone number									
c) Relationship to issuer or investment fund manager											
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.  Connect with the issuer or investment fund manager  Insider of the issuer (other than an investment fund)											
Director or officer of the investment fund or investment fund manager											
✓ None of the above				ago.	Ш -		0 01 11.10			a manage.	
Provide details of all compensations of all compensations and compensations are considered as the compensation of the distribution, such allocation arrangements with the	ommissions, securitie th as clerical, printing e directors, officers on	es-based compe g, legal or accou cemployees of	ensatio unting	n, gifts, dis services. Ai	counts or n issuer is	other o	compens quired to	sation. L o ask fo	Do not report pay	ments for s	ervices
Cash commissions pai	id	1.36				S	Security co	ode 1	Security code 2	Security c	ode 3
Value of all securities distributed as compensation			5	Security co	des						
·	erms of warrants, op	tions or other r	rights								
Other compensation	n <sup>5</sup>	Des	cribe								
Total compensation pai	d	1.36									
✓ Check box if the per	rson will or may rece	ive any deferre	ed com	npensation	(describ	e the te	erms bel	low)			
Industrielle Allianc Preferred Non-Vot Preferred Non-Vot	ing Shares, 1% or										s A
<sup>4</sup> Provide the aggregate value o additional securities of the issue rights exercisable to acquire ad <sup>5</sup> Do not include deferred compe	er. Indicate the secu Iditional securities of	rity codes for a									er

a) Name of person compe	nsated and regis	stration statu	IS								
Indicate whether the person com	pensated is a regist	rant.		☐ No		<b>√</b>	Yes				
If the person compensated is an i	ndividual, provide i	the name of th	ne individ	dual.							
Full legal name of individ	dual										
		Family name			First	given n	ame		Secondary (	given names	
If the person compensated is not	an individual, prov	ide the followi	ing infori	mation.							
Full legal name o	f non-individual	PI Financia	ıl								
Fire	m NRD number	5 2	9	0				(if app	licable)		
Indicate whether the person com	pensated facilitated	the distributi	on throu	gh a fund	ing port	al or ar	interne	t-based <sub>l</sub>	portal.	No ✓	Yes
b) Business contact inform	b) Business contact information										
If a firm NRD number is not prov	ided in Item 8 (a), ¡	provide the bu	siness co	ntact info	rmation	of the	person b	eing con	npensated.		
Street address											
Municipality							rovince	e/State			
Country					Р	ostal o	ode/Zi <sub>l</sub>	code			
Email address		Telephone number									
c) Relationship to issuer or investment fund manager											
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.  Connect with the issuer or investment fund manager  Insider of the issuer (other than an investment fund)											
Director or officer of the investment fund or investment fund manager    Employee of the issuer or investment fund manager   Employee of the issuer or investment fund manager											
<u> </u>		or investment	Taria ma	mager	Ш,	_mploy	00 01 111	c loodel		a manager	
None of the above											
d) Compensation details				G 11 11						.,	
Provide details of all compensation Canadian dollars. Include cash co- incidental to the distribution, such allocation arrangements with the	mmissions, securiti as clerical, printin	es-based comp g, legal or acc	pensation ounting :	n, gifts, di. services. A	scounts d An issuer	or othe is not i	r compei required	nsation. to ask fo	Do not report pay	ments for se	ervices
Cash commissions paid	d	9.86					Security	code 1	Security code 2	Security co	ode 3
Value of all securities distributed as compensation			S	Security co	odes						
•	rms of warrants, or	tions or other	rights								
Other compensation <sup>5</sup>	;	De	escribe								
Total compensation paid		9.86									
✓ Check box if the pers	on will or may rec	eive any defe	rred com	pensatio	n (descri	be the	terms b	elow)			
PI Financial will red Shares, 1% on Cla Shares.	eive an annual t ss B Series 'B' P	railer fee pa referred Nor	id mont n-Voting	hly in the	amou and 0%	nt of 1 % on C	/2% on Class B	Class A Series	A Preferred Nor 'C' Preferred No	n-Voting on-Voting	
<sup>4</sup> Provide the aggregate value of additional securities of the issue rights exercisable to acquire add <sup>5</sup> Do not include deferred compe	r. Indicate the secu ditional securities o	urity codes for	pensatio all secu	n, <u>exclud</u> urities dist	ing optic ributed a	ons, wa as com	rrants o pensatio	r other ri on, <u>includ</u>	ights exercisable t ding options, warr	o acquire ants or oth	er

a) Name of person comp	ensated and regis	stration sta	itus								
Indicate whether the person cor	npensated is a regist	rant.		☐ No		<b>√</b> \	Yes				
If the person compensated is an	individual, provide	the name of	the indivi	dual.							
Full legal name of indiv	idual										
		Family name			First g	iven nan	me		Secondary (	given names	
If the person compensated is no	t an individual, prov	ide the follo	wing infor	rmation.							
Full legal name	of non-individual	Echelon \	Wealth P	artners In	C.						
F	irm NRD number	3	2 4	2	0		(	if appli	cable)		
Indicate whether the person cor	npensated facilitated	the distribu	ution throu	ugh a fundi	ng portal	or an i	nternet-b	ased po	ortal.	No ✓	Yes
b) Business contact infor	mation										
If a firm NRD number is not pro	ovided in Item 8 (a), ¡	provide the l	business co	ontact infor	mation o	f the pe	erson beir	ng comp	pensated.		
Street address											
Municipality						Pro	ovince/S	tate			
Country					Pos	stal co	de/Zip c	ode			
Email address	nail address Telephone number										
c) Relationship to issuer or investment fund manager											
Indicate the person's relationshing the Instructions and the meaning Connect with the issue.	ng of "control" in sect	tion 1.4 of N			oses of co	ompletii	ng this se	ection.	ning of "connecter or than an invest		
Director or officer of the investment fund or investment fund manager Employee of the issuer or investment fund manager											
None of the above											
d) Compensation details											
Provide details of all compensat Canadian dollars. Include cash of incidental to the distribution, sur allocation arrangements with the	commissions, securiti ch as clerical, printin e directors, officers o	es-based co g, legal or a or employees	mpensatic ccounting	on, gifts, dis services. A	counts or n issuer is	other c	compensa quired to	ition. D ask for	o not report payı	ments for se	ervices
Cash commissions pa		2.47				S	ecurity cod	de 1	Security code 2	Security co	ode 3
Value of all securitie distributed as compensatio	-		;	Security co	des						
Describe t	erms of warrants, or	otions or oth	ner rights								
Other compensation	n <sup>5</sup>	I	Describe								
Total compensation pa	id	2.47									
✓ Check box if the pe	rson will or may rec	eive any de	ferred con	npensation	(describ	e the te	erms belo	w)			
Echelon Wealth P Non-Voting Share Non-Voting Share	s, 1% on Class B										rred
<sup>4</sup> Provide the aggregate value of additional securities of the issu- rights exercisable to acquire and <sup>5</sup> Do not include deferred comp	ier. Indicate the secuditional securities d	urity codes i	for all sect								er

a) Name of person comp	ensated and regi	stration status								
Indicate whether the person cor	npensated is a regis	trant.	☐ No		<b>√</b>	Yes				
If the person compensated is an	individual, provide	the name of the indiv	vidual.							
Full legal name of indiv	idual									
		Family name	<b>I</b>	First gi	iven na	me		Secondary (	jiven names	
If the person compensated is no	t an individual, pro	vide the following info	ormation.							
Full legal name	of non-individual	Gravitas Securiti	es Inc.							
F	irm NRD number	2 6 2	6	0			(if appl	icable)		
Indicate whether the person cor	mpensated facilitate	d the distribution thro	ough a fund	ng portal	or an	internet-	based p	oortal.	] No [✓	Yes
b) Business contact infor	mation									
If a firm NRD number is not pro	ovided in Item 8 (a),	provide the business	contact info	mation o	f the p	erson be	ing com	pensated.		
Street address										
Municipality					Pr	ovince/	State			
Country		Postal code/Zip code								
Email address	Telephone number									
c) Relationship to issuer or investment fund manager										
Indicate the person's relationshing the Instructions and the meaning Connect with the issue	ng of "control" in sec	ction 1.4 of NI 45-106	-	oses of co	omplet	ing this s	section.	-		
Connect with the issuer or investment fund manager  Insider of the issuer (other than an investment fund)  Director or officer of the investment fund or investment fund manager  Employee of the issuer or investment fund manager										
✓ None of the above	ne investment tuna	or investment rund in	ianagei		прюуе	e or the	issuei	or investment turi	u manage	ı
d) Compensation details  Provide details of all compensat	ion naid or to be no	aid to the person iden	tified in Item	2 9(a) in a	onnoct	tion with	the dis	tribution Provide	all amoun	ts in
Canadian dollars. Include cash of incidental to the distribution, sur allocation arrangements with the	commissions, securit ch as clerical, printi e directors, officers	ties-based compensating, legal or accounting or employees of a nor	ion, gifts, dis g services. A	counts or n issuer is	other of not re	compens equired to	ation. L o ask fo	Do not report payı	nents for s	ervices
Cash commissions pa		9.86			S	Security co	ode 1	Security code 2	Security c	ode 3
Value of all securitie distributed as compensatio	~		Security co	des						
Describe t	erms of warrants, o	pptions or other rights								
Other compensation	n <sup>5</sup>	Describe								
Total compensation pa	id	9.86								
✓ Check box if the pe	rson will or may red	ceive any deferred co	mpensatior	(describe	e the te	erms bel	ow)			
		e an annual trailer f ies 'B' Preferred No								
<sup>4</sup> Provide the aggregate value of additional securities of the issu- rights exercisable to acquire act <sup>5</sup> Do not include deferred comp	ier. Indicate the sec dditional securities	curity codes for all sec	ion, <u>excludi</u> curities disti	<u>ng</u> option. ibuted as	s, wari compe	rants or o ensation	other rig , <u>includ</u>	ghts exercisable t l <u>ing</u> options, warr	o acquire ants or oth	er

a) Name of person com	pensated and regis	stration status								
Indicate whether the person co	ompensated is a regist	rant.	☐ No	<b>√</b>	Yes					
If the person compensated is a	n individual, provide i	the name of the indivi	dual.							
Full legal name of indi	vidual McArthur		Peter			la	an			
		Family name	<u> </u>	First given	name		Secondary	given names		
If the person compensated is n	ot an individual, prov	ide the following infor	mation.							
Full legal name	e of non-individual									
F	Firm NRD number					(if appl	icable)			
Indicate whether the person co	ompensated facilitated	the distribution throu	ıgh a fundir	g portal or	an internet	t-based p	oortal.	No ✓	Yes	
b) Business contact info	rmation									
If a firm NRD number is not pr	rovided in Item 8 (a), p	provide the business co	ontact inform	nation of th	e person b	eing com	pensated.			
Street address	970 Laval Cresce	nt								
Municipality	Kamloops				Province	/State	British Colum	bia		
Country	Canada			Postal	code/Zip	code	V2C 5P5			
Email address	ian@plazafinancia	al.ca		Tele	phone n	2503747772				
c) Relationship to issuer or investment fund manager										
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.  Connect with the issuer or investment fund manager  Insider of the issuer (other than an investment fund)										
<u> </u>	Director or officer of the investment fund or investment fund manager Employee of the issuer or investment fund manager									
✓ None of the above										
d) Compensation details										
Provide details of all compensa Canadian dollars. Include cash incidental to the distribution, su allocation arrangements with t	commissions, securiti uch as clerical, printin he directors, officers o	es-based compensatio g, legal or accounting r employees of a non-	n, gifts, disc services. An	ounts or oth issuer is no	er comper t required	nsation. L to ask fo	Do not report pay	ments for ser	rvices	
Cash commissions p	aid	0.54			Security	code 1	Security code 2	Security cod	de 3	
Value of all securiti distributed as compensation		\$	Security cod	les						
Describe	terms of warrants, or	otions or other rights								
Other compensation	on <sup>5</sup>	Describe								
Total compensation p	aid	0.54								
✓ Check box if the p	erson will or may reco	eive any deferred con	npensation	(describe th	e terms be	elow)				
		nnual trailer fee pa es 'B' Preferred Nor								
<sup>4</sup> Provide the aggregate value additional securities of the iss rights exercisable to acquire a <sup>5</sup> Do not include deferred com,	ruer. Indicate the secu additional securities o	urity codes for all secu							r	

## ITEM 9 - DIRECTORS, EXECUTIVE OFFICERS AND PROMOTERS OF THE ISSUER If the issuer is an investment fund, do not complete Item 9. Procced 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 any 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 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). Directors, executive officers and promoters of the issuer a) 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. Business location of non-individual or Relationship to issuer residentail Secondary given (select all that apply) jurisdiction of Organization or company name Family name First given name names individual D 0 Ρ Province or country / **√** Granleese William British Columbia R. William British Columbia Granleese ✓ Victor British Columbia Dyck Gavin Worsnup Christopher British Columbia 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 company name	Family name	First given name	Secondary given names	Residential jurisdiction of individual	Relationship to promoter (select one or both if applicable)		
				Province or country	D	0	

## 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 exemt 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/underwriter/ investment fund manager/agent	Intrim Balanced Mortgage Fund Ltd.									
Full legal name	Granleese	R.								
	Family name	First given name	'	Secondary given names						
Title	Portfolio Manager									
Telephone number	6045302301	Email address	will@antriminvestments.com			om				
Signature	William R. Granleese	Date	2018	3 11	16					
			YYYY	/ MM	DD	-				

ITEM 11- CONTACT	PERSON				
. 3		r the individual that the sect the individual certifying the	3 , ,	regulator m	ay contact with any questions
Same as individua	al certifying the report				
Full legal name				Title	
	Family name	First given name	Secondary given names		
Name of company					
Telephone number		Er	mail address		

## 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.

The attached 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 Schedules 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.