# Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 8349613

ITEM 1 - REPORT TYPE							
☐ New report							
✓ Amended report If ame	·						
ITEM 2 - PARTY CERTIFYING THI	REPORT						
Indicate the party certifying the report (sell Instrument 81-106 Investment Fund Conti		_	nvestment fund, refer to secti	on 1.1 of National			
☐ Investment fund issuer	naous Disclosure and the comp	amon policy to the or too.					
✓ Issuer (other than an investment of the state of th	stment fund)						
Underwriter	,						
TEM 2 ICCUED NAME AND OT	LIED IDENTIFIEDS						
ITEM 3 - ISSUER NAME AND OT							
Provide the following information about the							
Full legal name	Antrim Balanced Mortg	age Fund Ltd.					
Previous full legal name							
If the issuer's name changed in the last 12 months, provide most recent previous legal name.							
Website	www.antriminvestment	s.com (if applica	ole)				
If the issuer has a legal entity identifier. provide below. Refer to Part B of the Instructions for the definition of "legal entity identifier".							
Legal entity identifier							
If two or more issuers distributed a single s	ecurity, provide the full legal no	ame(s) of the co-issuer(s) other	than the issuer named above	:			
Full legal name(s) of co-issuer(s)		(if applica	ole)				
ITEM 4 - UNDERWRITER INFORM	MATION						
If an underwriter is completing the report,	provide the underwriter's full le	gal name and firm NRD numbe	er.	1			
Full legal name							
Firm NRD number (if applicable)							
If the underwriter does not have a firm NRD number, provide the head office contact information of the underwriter.							
Street address							
Municipality		Province/State					
Country		Postal code/Zip code					
Telephone number		Website		(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:
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
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 name
h) Size of issuer's assets
11) 6120 01 100001 0 000010

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					
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)					
Indicate whether one or bot	h of the following apply to the investment fund .					
Invests primarily in	n other investment fund issuers					
☐ Is a UCITs Fund¹						
<sup>1</sup> Undertaking for the Collec (EU) directives that allow c	tive Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union collective investment schemes to operate throughout the EU on a passport basis on authorization from one member state.					
c) Date of formation and financial year-end of the investment fund						
Date of formation Financial year-end MM DD MM DD						
d) Reporting issuer status of the investment fund						
Is the investment fund a reporting 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 YT					
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						
If the investment fund is publicly listed, provide the name of the exchange on which the investment fund's securities primarily trade. Provide only the						
name of an exchange and not a trading facility such as, for example, an automated trading system.  Exchange name						
-	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 \$500M to under \$1B \$1B 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.

,	` ~	
a'	) Curre	ncv

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 2017 11 07

End date 2017 11 15

#### 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 \$			
	ecuri code	,	CUSIP number (if applicable)	Description of security	Number of securities	Single or lowest Highest price Total amou price		Total amount	
Р	R	s		Class A Preferred Non-Voting Shares	982,000.00	1.0000	1.0000	982,000.00	
Р	R	s		Class B Series 'B' Preferred Non-Voting Shares	1,041,120.00	1.0000	1.0000	1,041,120.00	
Р	R	s		Class B Series 'C' Preferred Non- Voting Shares	3,921,104.00	1.0000	1.0000	3,921,104.00	

#### 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.

exc	changeable Underlying		changeable		Convertible / exchangeable security code		ngeable Underlying		-		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 \$)
British Columbia	NI 45-106 2.9(1) [Offering memorandum] (BC, NL)	107	4,047,587.00
British Columbia	NI 45-106 2.5 [Family, friends and business associates]	1	600,000.00
Alberta	NI 45-106 2.9(2.1) [Offering memorandum] (AB, SK, ON, QC, NB, NS)	9	46,000.00

Ontario	NI 45-106 2.9(2.1) [Offering memorandum] (AB, SK, ON, QC, NB, NS)	34	1,189,037.00
Saskatchewan	NI 45-106 2.9(2.1) [Offering memorandum] (AB, SK, ON, QC, NB, NS)	1	38,600.00
British Columbia	NI 45-106 2.3 [Accredited investor]	1	23,000.00
	5,944,224.00		

<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. 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 V 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. 4

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	ime		-	First	t given r	name		Secon	dary giv	en names	
If the person compensated is not an individual, provide the following information.													
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 compensated facilitated the distribution through a funding portal or an internet-based portal.  No Ves													
b) Business contact inform	ation												
If a firm NRD number is not prov	ided in Item 8 (a), p	orovide ti	he busin	ess co	ontact info	rmation	of the	person l	eing cor	mpensated.			
Street address													
Municipality							F	Province	e/State				
Country						Р	ostal	code/Zi	p code				
Email address							Telep	hone n	umber				
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													
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	comper or accoui	nsatio nting	n, gifts, dis services. A	scounts ( In issuer	or othe is not	r compe required	nsation. ' to ask fo	Do not report	paym	ents for se	ervices
Cash commissions paid	1	70.00						Security	code 1	Security cod	e 2	Security co	ode 3
Value of all securities distributed as compensation	1			5	Security co	odes	L						
Describe ter	ms of warrants, op	otions or	other riç	ghts									
Other compensation <sup>5</sup>			Desc	ribe									
Total compensation paid	17	70.00											
✓ 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	paid mor n-Voting	nthly in Shares	the ar	nount 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 litional securities o	ırity cod	es for all										er

a) Name of person compe	nsated and regis	stration statu	ıs								
Indicate whether the person comp	ensated is a regist	rant.		☐ No		$\checkmark$	Yes				
If the person compensated is an i	ndividual, provide i	the name of th	he individ	dual.							
Full legal name of individ	ual										
		Family name			First	given n	ame		Secondary (	given names	
If the person compensated is not an individual, provide the following information.											
Full legal name or	f non-individual	PI Financia	al								
Firr	n NRD number	5 2	9	0				(if app	licable)		
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.											
b) Business contact inform	ation										
If a firm NRD number is not provi	ded in Item 8 (a), p	provide the bu	ısiness co	ntact info	rmation	of the	person b	eing con	npensated.		
Street address											
Municipality						Р	rovince	/State			
Country					Po	ostal c	code/Zip	code			
Email address						Telep	hone n	umber			
c) Relationship to issuer or	investment fun	d 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											
✓ None of the above				ger							
d) Compensation details				<i>c.</i>	04.11					.,	
Provide details of all compensation Canadian dollars. Include cash con incidental to the distribution, such allocation arrangements with the	nmissions, securiti as clerical, printin	es-based com <sub>l</sub> g, legal or acc	pensatio counting	n, gifts, di. services. A	scounts c An issuer	or othei is not i	r compei required	nsation. I to ask fo	Do not report payı	ments for se	ervices
Cash commissions paid		24.66					Security	code 1	Security code 2	Security co	ode 3
Value of all securities			9	Security co	odes						
distributed as compensation <sup>4</sup> Describe ter	ms of warrants, or	 otions or other	r riahts								
			escribe								
Other compensation <sup>5</sup> Total compensation paid			SSCIIDC								
		24.66			- (d"	h - 11 -		-1			
✓ Check box if the pers											
PI Financial will rec Shares, 1% on Clas Shares.	eive an annual t ss B Series 'B' P	railer fee pa referred Nor	id mont n-Voting	hly in the g Shares	e amour and 0%	nt of 1 % on C	/2% on Class B	Class / Series	A Preferred Nor 'C' Preferred No	ı-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 compen	r. Indicate the secu litional securities o	urity codes for	pensation r all secu	on, <u>exclud</u> urities dist	<u>ling</u> optio ributed a	ns, wa as com	rrants oi pensatic	r other ri <sub>i</sub> on, <u>includ</u>	ights exercisable i ding options, warr	o acquire ants or oth	er

a) Name of person comp	ensated and reg	istration status								
Indicate whether the person co	mpensated is a regis	strant.	☐ No	[-	✓ Yes					
If the person compensated is an	n individual, provide	the name of the indi	vidual.							
Full legal name of indiv	vidual									
		Family name	I	First give	en name		Secondary (	jiven names		
If the person compensated is not an individual, provide the following information.										
Full legal name	of non-individual	Industrielle Alliar	nce Valeurs	Mobiliere	es					
F	irm NRD number	1 5 4	0	0		(if app	licable)			
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.  □ No ✓ Yes										
b) Business contact info	mation									
If a firm NRD number is not pro	ovided in Item 8 (a),	provide the business	contact info	mation of t	he person b	eing con	npensated.			
Street address										
Municipality					Province	e/State				
Country				Posta	al code/Zi	p code				
Email address				Tel	lephone n	umber				
c) Relationship to issuer	or investment fur	nd manager								
Indicate the person's relationsh	ip with the issuer or	investment fund mar	nager (select	all that app	oly). Refer to	the med	aning of "connecte	ed" in Part B(	(2) of	
the Instructions and the meani	ng of "control" in sec	ction 1.4 of NI 45-106	for the purp	oses of com	npleting thi	s section.				
Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund)										
Director or officer of t	he investment fund	or investment fund n	nanager	Emp	oloyee of th	e issuer	or investment fun	d manager		
✓ None of the above										
d) Compensation details										
Provide details of all compensate Canadian dollars. Include cash a incidental to the distribution, sur allocation arrangements with the	commissions, securit ch as clerical, printi ne directors, officers	ties-based compensating, legal or accounting or employees of a not	ion, gifts, dis g services. A	counts or ot n issuer is n	ther compe ot required	nsation. I to ask fo	Do not report payı	ments for ser	vices	
Cash commissions pa	alu	25.59			Security	code 1	Security code 2	Security cod	le 3	
Value of all securitie distributed as compensation			Security co	des						
Describe t	erms of warrants, o	pptions or other rights	i -							
Other compensatio	n <sup>5</sup>	Describe								
Total compensation pa	id	25.59								
✓ Check box if the pe	erson will or may red	ceive any deferred co	mpensation	(describe t	the terms b	elow)				
	ting Shares, 1%	eres will receive ar on Class B Series							A	
<sup>4</sup> Provide the aggregate value of additional securities of the issuinghts exercisable to acquire a <sup>5</sup> Do not include deferred comp	uer. Indicate the sed dditional securities	curity codes for all se							r	

a) Name of person com	pensated and regist	tration status								
Indicate whether the person co	ompensated is a registr	ant.	✓ No		Yes					
If the person compensated is a	ın individual, provide tl	ne name of the indiv	ridual.							
Full legal name of indi	vidual Johnson		Gordon							
	F	amily name	'	First given r	name		Secondary (	jiven names		
If the person compensated is not an individual, provide the following information.										
Full legal name	e of non-individual [									
F	Firm NRD number					(if appl	icable)			
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.  No Ves										
b) Business contact info	ormation									
If a firm NRD number is not p	rovided in Item 8 (a), p	rovide the business o	contact inform	ation of the	person b	eing com	pensated.			
Street address	#179 - 16080 82nd	l Avenue								
Municipality	Surrey			F	Province	/State	British Colum	bia		
Country	Canada		Ī	Postal	code/Zip	code	V4N 0N6			
Email address	gordjohnson@outl	ook.com	Ī	Telep	hone nu	umber	6045973680			
c) Relationship to issue	r 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 o	r investment fund m	nanager	Employ	ee of the	e issuer o	or investment fun	d manage	r	
None of the above			•	<del></del>						
d) Compensation details	 S									
Provide details of all compensor Canadian dollars. Include cash incidental to the distribution, so allocation arrangements with t	commissions, securitie uch as clerical, printing the directors, officers or	s-based compensati , legal or accounting	on, gifts, disco g services. An i	unts or othe issuer is not	r compen required	isation. E to ask foi	Do not report payı	ments for s	ervices	
Oddii commissions p	, and	0.00		-	Security of	code 1	Security code 2	Security c	ode 3	
Value of all securiti distributed as compensati			Security code	es						
Describe	terms of warrants, op	tions or other rights								
Other compensation	on <sup>5</sup>	Describe								
Total compensation p	aid	0.88								
✓ Check box if the p	erson will or may rece	ive any deferred co	mpensation (d	describe the	terms be	elow)				
	will receive an ann Class B Series 'B' Pr									
<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	suer. Indicate the secu additional securities of	rity codes for all sed	ion, <u>excluding</u> curities distrib	options, wa uted as com	arrants or pensatio	other rig n, <u>includ</u>	ghts exercisable t l <u>ing</u> options, warr	o acquire ants or oth	er	

f the issuer is an investment fun	d, do not complete	Item 9. Procced to	Item 10.				
Indicate whether the issuer is any c	of the following (selec	t the one that applie	es - if more than one a	applies, select only one).			
Reporting issuer in any juri	sdiction of Canada						
Foreign public issuer							
Wholly owned subsidiary o	f a reporting issuer i	n any jurisdiction of	Canada <sup>6</sup>				
Provide nar	me of reporting issue	er					
Wholly owned subsidiary o	f a foreign public iss	uer <sup>6</sup>					
	f foreign public issue						7
				4			
Issuer distributing only eligi	bie foreign securitie	s and the distributio	n is to permitted clien	ts only			
ents. Refer to the definitions of "e	eliaible foreian secui						
✓ If the issuer is none of the	-		. ,	he Instructions.			
If the issuer is none of the	above, check this	box and complete I	. ,	he Instructions.			
If the issuer is none of the a) Directors, executive officer rovide the following information for	rs and promoters	box and complete I of the issuer utive officer and pro	<b>Item 9(a) - (c).</b> moter of the issuer. For	r locations within Canada, s	state the p	province	or
✓ If the issuer is none of the	rs and promoters	box and complete I of the issuer utive officer and pro	<b>Item 9(a) - (c).</b> moter of the issuer. For	r locations within Canada, s	Relatio	province ponship to	) issue
If the issuer is none of the a) Directors, executive officerovide the following information for erritory; otherwise state the country	rs and promoters r each director, exect r. For "Relationship to	box and complete I  of the issuer  utive officer and proposissuer", "D" – Direct	moter of the issuer. For tor, "O" – Executive O	r locations within Canada, s fficer, "P" – Promoter. Business location of non-individual or residentail jurisdiction of	Relatio	onship to	) issue
If the issuer is none of the Directors, executive officer rovide the following information for the price of the state the country of the state the country is a state the country of the state the country is a state the country of the state the country is a state the country of the state the country is a state the country of the state the country is a state the country of the state the state the country is a state the country of the state the state the country is a state the country of the state the sta	rs and promoters r each director, exect r. For "Relationship to	box and complete I  of the issuer  utive officer and proposissuer", "D" – Direct	moter of the issuer. For tor, "O" – Executive O	r locations within Canada, s fficer, "P" – Promoter. Business location of non-individual or residentail jurisdiction of individual	Relatio	onship to	issue apply)
If the issuer is none of the Directors, executive officer rovide the following information for the price of the state the country of the state the country is a state the country of the state the country is a state the country of the state the country is a state the country of the state the country is a state the country of the state the country is a state the country of the state the state the country is a state the country of the state the state the country is a state the country of the state the sta	rs and promoters r each director, exect r. For "Relationship to	box and complete In the issuer  of the issuer  utive officer and proposition issuer", "D" – Direct	moter of the issuer. For tor, "O" – Executive O	r locations within Canada, s fficer, "P" – Promoter.  Business location of non-individual or residentail jurisdiction of individual  Province or country	Relation (selection D	onship to	issue apply)
If the issuer is none of the Directors, executive officer rovide the following information for the price of the state the country of the state the country is a state the country of the state the country is a state the country of the state the country is a state the country of the state the country is a state the country of the state the country is a state the country of the state the state the country is a state the country of the state the state the country is a state the country of the state the sta	rs and promoters r each director, exect For "Relationship to Family name Granleese	box and complete In the issuer  of the issuer  or issuer", "D" – Direct  First given name  William	moter of the issuer. For ctor, "O" – Executive O Secondary given names	r locations within Canada, s fficer, "P" – Promoter.  Business location of non-individual or residentail jurisdiction of individual  Province or country  British Columbia	Relation (selection	onship to	issue apply

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	Antrim Balanced Mortgage Fund Ltd.									
Full legal name	Granleese William									
	Family name	First given name	S	Secondary given names						
Title	Portfolio Manager									
Telephone number	6045302301	Email address	will@antrimi	nvestments.com						
Signature	"William Granleese"	2019	09 18							
			YYYY	MM DD						

ITEM 11- CONTACT F	PERSON				
, ,	· · · · ·	r the individual that the secu the individual certifying the	rities regulatory authority or report in Item 10.	regulator may	contact with any questions
Same as individua	I certifying the report				
Full legal name				Title	
	Family name	First given name	Secondary given names		
Name of company					
Telephone number		En	nail 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.