Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 8644428

ITEM 1 - REPORT TYPE					
☐ New report					
·	nded, provide filing date	of report that is beir	ng ame	ended 2018 11 02	(YYYY-MM-DD)
Amended report If amended, provide filing date of report that is being amended 2018 11 02 (YYYY-MM-DD)					
ITEM 2 - PARTY CERTIFYING TH	E REPORT				
Indicate the party certifying the report (sel Instrument 81-106 Investment Fund Conti				estment fund, refer to section	on 1.1 of National
☐ Investment fund issuer					
✓ Issuer (other than an investigation)	stment fund)				
Underwriter					
ITEM 3 - ISSUER NAME AND OT	HER IDENTIFIERS				
Provide the following information about the	he issuer, or if the issuer is an in	vestment fund, about the	fund.		
Full legal name	Antrim Balanced Mortg	age Fund Ltd.			
Previous full legal name					
If the issuer's name changed in th	e last 12 months, provide most	recent previous legal nan	ne.		
Website www.antriminvestments.com (if applicable)					
If the issuer has a legal entity identifier. pr	ovide below. Refer to Part B of t	he Instructions for the de	efinition o	of "legal entity identifier".	
Legal entity identifier					
If two or more issuers distributed a single	security, provide the full legal no	me(s) of the co-issuer(s)	other th	an the issuer named above.	
Full legal name(s) of co-issuer(s)		(if a	pplicable	e)	
ITEM 4 - UNDERWRITER INFORM	MATION				
If an underwriter is completing the report,		gal name and firm NRD i	number.		
Full legal name					
Firm NRD number		(if applicab	ole)		l
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		We	ebsite		(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 mining industry , indicate the stage of operations. This does not apply to issuers that provide services to issuers operating in the mining industry. Select the category that best describes the issuer's stage of operations.
Exploration Development Production
Is the issuer's primary business to invest all or substantially all of its assets in any of the following? If yes, select all that apply.
✓ Mortgages ☐ Real estate ☐ Commercial/business debt ☐ Consumer debt ☐ Private companies
☐ Cryptoassets
b) Number of employees
Number of employees:
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				
¹ 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 a	and financial year-end of the investment fund			
Date of forma	tion Financial year-end MM DD MM DD			
d) Reporting issuer status 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 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			
	blicly listed, provide the name of the exchange on which the investment fund's securities primarily trade. Provide only the not a trading facility such as, for example, an automated trading system.			
Exchange on an exchange and h				
-	AV) of the investment fund			
	investment fund as of the date of the most recent NAV calculation (Canadian \$).			
\$0 to under \$5M	s5M to under \$25M s25M 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.

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2)		п	rr	Δ	n	C١	1

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 Dther (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 10 24

YYYY MM DD

End date 2018 10 31

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 price	Highest price	Total amount	
Р	R	S		Class A Preferred Non-Voting Shares	1,110,500.00	1.0000	1.0000	1,110,500.00	
Р	R	S		Class B Series 'B' Preferred Non- Voting Shares	1,278,250.00	1.0000	1.0000	1,278,250.00	
Р	R	S		Class B Series 'C' Preferred Non- Voting Shares	4,355,912.00	1.0000	1.0000	4,355,912.00	

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	Convertible / exchangeable security code		Underlying security code		-	Exercise price (Canadian \$)		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 ²⁸ purchasers	Total amount (Canadian \$)
Alberta	NI 45-106 2.9(2.1) [Offering memorandum] (AB, SK, ON, QC, NB, NS)	154	2,955,331.00
British Columbia	NI 45-106 2.9(1) [Offering memorandum] (BC, NL)	59	2,768,890.00
New Brunswick	NI 45-106 2.9(2.1) [Offering memorandum] (AB, SK, ON, QC, NB, NS)	1	26,000.00

Ontario	NI 45-106 2.9(2.1) [Offering memorandum] (AB, SK, ON, QC, NB, NS)	31	664,400.00
Québec	NI 45-106 2.9(2.1) [Offering memorandum] (AB, SK, ON, QC, NB, NS)	3	121,700.00
Saskatchewan	NI 45-106 2.9(2.1) [Offering memorandum] (AB, SK, ON, QC, NB, NS)	3	17,229.00
Alberta	NI 45-106 2.3 [Accredited investor]	29	191,112.00
	Total dollar amount of se	curities distributed	6,744,662.00

^{2a} 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	

³"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)

^{2b} 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. 5

a) Name of person compe	nsated and regis	tration s	status								
Indicate whether the person com	pensated is a regist	rant.		N)	√	Yes				
If the person compensated is an i	ndividual, provide t	he name	of the inc	dividual.							
Full legal name of individ	dual										
		Family nar	ne	I	Firs	t given n	ame		Secondary	given names	
If the person compensated is not	an individual, prov	ide the fo	llowing in	formation.							
Full legal name o	f non-individual	Raymo	nd Jame	es Ltd.							
Fire	m NRD number	8	2	4 0				(if app	licable)		
Indicate whether the person com	pensated facilitated	the distr	ibution th	rough a fur	ding port	al or ar	internet	t-based _l	portal.] No ✓	Yes
b) Business contact inform	nation										
If a firm NRD number is not provided in Item 8 (a), provide the business contact information of the person being compensated.											
Street address											
Municipality						Р	rovince	/State			
Country					P	ostal c	code/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 Employee of the issuer or investment fund manager											
<u> </u>	e investment fund t	n investi	nent idild	manager	Ш	шпрю	ee or trie	, issuei	or investment to	iu manager	
✓ None of the above											
d) Compensation details											
Provide details of all compensation 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 or r employe	compenso r accounti	ation, gifts, o ing services.	liscounts An issuei	or othei is not i	r compen required	nsation. I to ask fo	Do not report pay	ments for se	ervices
Cash commissions paid	1	51.32					Security of	code 1	Security code 2	Security co	ode 3
Value of all securities distributed as compensation				Security	codes						
Describe ter	rms of warrants, op	otions or o	other righ	ts							
Other compensation ⁵	5		Describ	pe							
Total compensation paid	15	51.32		\ <u></u>							
✓ Check box if the pers	son will or may rece	eive any o	deferred o	compensati	on (descr	ibe the	terms be	elow)			
Raymond James Li Voting Shares, 1% Voting Shares.	td. will receive ar on Class B Serie	n annual es 'B' Pre	trailer fe eferred N	ee paid mo	onthly in Shares	the an	nount of 9% on C	1/2% (lass B	on Class A Pre Series 'C' Pref	ferred Non- erred Non-)-
⁴ Provide the aggregate value of additional securities of the issue rights exercisable to acquire add ⁵ Do not include deferred compe	r. Indicate the secu ditional securities o	ırity code	s for all s								er

a) Name of person compo	ensated and regis	stration sta	tus								
Indicate whether the person con	npensated is a regist	rant.		☐ No		√ Y	⁄es				
If the person compensated is an	individual, provide	the name of	the indivi	dual.							
Full legal name of indivi	dual										
		Family name			First giv	ven nam	ne		Secondary (jiven names	
If the person compensated is no	t an individual, prov	ide the follo	wing infor	rmation.							
Full legal name	of non-individual	Industriell	e Alliand	ce Valeurs	Mobilie	rs					
Fi	rm NRD number	1 (5 4	0	0		(it	f applic	cable)		
Indicate whether the person con	npensated facilitated	the distribu	ıtion throu	ıgh a fundi	ng portal (or an ir	nternet-bo	ased po	ortal.	No ✓] Yes
b) Business contact inform	mation										
If a firm NRD number is not provided in Item 8 (a), provide the business contact information of the person being compensated.											
Street address											
Municipality						Pro	ovince/St	tate			
Country					Pos	stal cod	de/Zip co	ode			
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											
✓ None of the above	ie investment rund (or investmei	nt tuna ma	anager		пріоуеє	e or the is	suer o	r investment fun	a manager	
d) Compensation details											
Provide details of all compensati Canadian dollars. Include cash co incidental to the distribution, suc allocation arrangements with the	ommissions, securiti h as clerical, printin e directors, officers o	es-based con g, legal or a r employees	mpensatic ccounting	on, gifts, dis services. A	counts or a	other co	ompensat quired to d	tion. Do ask for	o not report payı	ments for se	ervices
Cash commissions pa	Id	11.03				Se	ecurity cod	e 1	Security code 2	Security co	ode 3
Value of all securities distributed as compensation			;	Security co	des						
Describe te	erms of warrants, op	otions or oth	er rights								
Other compensation	₁ 5		Describe								
Total compensation pai	d -	11.03									
✓ Check box if the per	son will or may rec	eive any def	erred con	npensation	(describe	the te	rms belov	w)			
Industrielle Allianc Preferred Non-Vot Preferred Non-Vot	ing Shares, 1% o										s A
⁴ Provide the aggregate value o additional securities of the issu- rights exercisable to acquire ad ⁵ Do not include deferred compe	er. Indicate the secu Iditional securities o	urity codes f	or all secu								er

a) Name of person compe	nsated and regis	stration statu	ıs								
Indicate whether the person comp	pensated is a regist	rant.		☐ No		\checkmark	Yes				
If the person compensated is an i	ndividual, provide t	the name of th	he individ	dual.							
Full legal name of individ	lual										
		Family name			First	given n	ame		Secondary (given names	
If the person compensated is not	an individual, prov	ide the follow	ing infor	mation.							
Full legal name o	f non-individual	PI Financia	al								
Firr	n NRD number	5 2	9	0				(if app	licable)		
Indicate whether the person comp	oensated facilitated	the distributi	ion throu	igh a fund	ling porto	al or ar	interne	t-based _l	portal.	No ✓	Yes
b) Business contact inform	ation										
If a firm NRD number is not provided in Item 8 (a), provide the business contact information of the person being compensated.											
Street address											
Municipality						Р	rovince	/State			
Country		Postal code/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 Employee of the issuer or investment fund manager Employee of the issuer or investment fund manager											
✓ None of the above				a. iago:	Ш-	po,				a manage.	
d) Compensation details										.,	
Provide details of all compensation Canadian dollars. Include cash con incidental to the distribution, such allocation arrangements with the	mmissions, securition as clerical, printing	es-based com g, legal or acc	pensatio counting	n, gifts, di services. A	scounts c An issuer	or othei is not i	r comper required	nsation. to ask fo	Do not report pay	ments for se	ervices
Cash commissions paid	·	93.50					Security	code 1	Security code 2	Security co	ode 3
Value of all securities distributed as compensation ⁴			5	Security c	odes						
•	ms of warrants, or	 otions or othe	r rights								
Other compensation ⁵		De	escribe								
Total compensation paid		93.50									
✓ Check box if the pers			rred com	nensatio	n (descri	he the	terms be	elow)			
									^ Duefensed New		
PI Financial will receive an annual trailer fee paid monthly in the amount of 1/2% on Class A Preferred Non-Voting Shares, 1% on Class B Series 'B' Preferred Non-Voting Shares and 0% on Class B Series 'C' Preferred Non-Voting Shares.											
⁴ Provide the aggregate value of additional securities of the issue rights exercisable to acquire add ⁵ Do not include deferred comper	r. Indicate the secu litional securities o	urity codes for	pensation r all secu	on, <u>exclua</u> urities dist	l <u>ing</u> optio ributed a	ons, wa as com _i	rrants or pensatio	r other ri en, <u>includ</u>	ights exercisable i ding options, warr	o acquire ants or othe	er

a) Name of person comp	ensated and regi	stration status								
Indicate whether the person co	mpensated is a regis	trant.	☐ No		√	Yes				
If the person compensated is ar	n individual, provide	the name of the indiv	vidual.							
Full legal name of indiv	ridual									
		Family name		First g	iven na	me		Secondary (jiven name	es
If the person compensated is no	ot an individual, pro	vide the following info	ormation.							
Full legal name	of non-individual	Echelon Wealth I	Partners In	C.						
F	irm NRD number	3 2 4	2	0			(if appl	icable)		
Indicate whether the person co	mpensated facilitate	d the distribution thro	ough a fundi	ng portal	or an	internet-	based p	oortal.	No [✓ Yes
b) Business contact infor	mation									
If a firm NRD number is not provided in Item 8 (a), provide the business contact information of the person being compensated.										
Street address										
Municipality				Pr	ovince/	State				
Country			Pos	stal co	ode/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 Employee of the issuer or investment fund manager										
None of the above		or invocanion rand n	anagor	ш <u>-</u> -	прюус	,0 01 1110	100001		a manage	
d) Compensation details										
Provide details of all compensate Canadian dollars. Include cash of incidental to the distribution, sur allocation arrangements with the	commissions, securit ch as clerical, printi ne directors, officers	ies-based compensations, legal or accounting or employees of a nor	ion, gifts, dis g services. A	counts or n issuer is	other o	compens equired to	ation. L o ask fo	Do not report payı	nents for :	services
Cash commissions pa		9.48			S	Security co	ode 1	Security code 2	Security (code 3
Value of all securitie distributed as compensation			Security co	des						
Describe t	erms of warrants, o	ptions or other rights								
Other compensatio	n ⁵	Describe								
Total compensation pa	id	9.48								
✓ Check box if the pe	rson will or may red	ceive any deferred co	mpensation	(describe	e the te	erms bel	ow)			
Echelon Wealth Partners Inc. will receive an annual trailer fee paid monthly in the amount of 1/2% on Class A Preferred Non-Voting Shares, 1% on Class B Series 'B' Preferred Non-Voting Shares and 0% on Class B Series 'C' Preferred Non-Voting Shares.										
⁴ Provide the aggregate value of additional securities of the issurights exercisable to acquire a ⁵ Do not include deferred comp	uer. Indicate the sec dditional securities	curity codes for all sec	ion, <u>excludi</u> curities distr	<u>ng</u> option ibuted as	s, wari compe	rants or o ensation	other rig , <u>inclua</u>	ghts exercisable t l <u>ing</u> options, warr	o acquire ants or oti	her

a) Name of person comp	ensated and regis	tration	status								
Indicate whether the person con	npensated is a registi	rant.		□ N	ס	\checkmark	Yes				
If the person compensated is an	individual, provide t	he name	of the ind	lividual.							
Full legal name of indivi	idual										
	ſ	amily na	me		First	given i	name		Secondary	given names	5
If the person compensated is no	t an individual, provi	de the fo	ollowing in	formation.							
Full legal name	of non-individual	Gravita	as Securi	ties Inc.							
Fi	rm NRD number	2	6	2 6	0			(if app	licable)		
Indicate whether the person con	npensated facilitated	the dist	ribution th	rough a fur	ding port	al or a	n interne	t-based _l	portal.	No 🔽	Yes
b) Business contact information											
If a firm NRD number is not provided in Item 8 (a), provide the business contact information of the person being compensated.											
Street address	Street address										
Municipality						F	Province	e/State			
Country					Р	ostal	code/Zi _l	o 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	ne investment fund c	r investr	ment fund	manager		Emplo	yee of th	e issuer	or investment fur	ıd manage	r
None of the above											
d) Compensation details											
Provide details of all compensations and compensations. Include cash control incidental to the distribution, such allocation arrangements with the Cash commissions pa	ommissions, securitie th as clerical, printing e directors, officers of	es-based g, legal o	compensa r accounti	tion, gifts, on	discounts o An issuer	or othe is not	er compei required	nsation. to ask fo	Do not report pay	ments for s	services
Cash commissions pa		1.92				-	Security	code 1	Security code 2	Security of	code 3
Value of all securitie distributed as compensation	-			Security	codes						
Describe te	erms of warrants, op	tions or	other right	s							
Other compensation	1 ⁵		Describ	е							
Total compensation pai	id	1.92									
✓ Check box if the per	rson will or may rece	eive any	deferred o	ompensati	on (descri	ibe the	terms b	elow)			
Gravitas Securities Inc. will receive an annual trailer fee paid monthly in the amount of 1/2% on Class A Preferred Non-Voting Shares, 1% on Class B Series 'B' Preferred Non-Voting Shares and 0% on Class B Series 'C' Preferred Non-Voting Shares.											
⁴ Provide the aggregate value of additional securities of the issurights exercisable to acquire ac ⁵ Do not include deferred compe	er. Indicate the secu Iditional securities of	ırity code	es for all s								ner

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 ⁶				
Provide nar	me of reporting issue	er					
Wholly owned subsidiary o	f a foreign public iss	uer ⁶					
	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	Item 9(a) - (c). 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	Item 9(a) - (c). moter of the issuer. For	r locations within Canada, s	Relatio	province onship 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	Family name First given name Secondary given names	Residential jurisdiction of individual	Relationship to promoter (select one or both if applicable)		
	T diffiny fiding			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 Fu	Antrim Balanced Mortgage Fund Ltd.										
Full legal name	Granleese	William	F	R.								
	Family name	First given name		Seconda	ary given names							
Title	Portfolio Manager											
Telephone number	6045302301	Email address	will@a	vill@antriminvestments.com								
Signature	"William Granleese"	Date	2019	09	04							
			YYYY	MM	DD							

Item 11- Contact Person										
Provide the following business contact information for the individual that the securities regulatory authority or regulator may contact with any questions regarding the contents of this report, if different than the individual certifying the report in Item 10.										
Same as individual 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.