# Form 45-106F1 Report of Exempt Distribution

# IT IS AN OFFENCE TO MAKE A MISREPRESENTATION IN THIS REPORT

ITEM 1 - REPORT TYPE								
New report     Amended report If amen								
ITEM 2 - PARTY CERTIFYING THE REPORT								
	Indicate the party certifying the report (select only one). For guidance regarding whether an issuer is an investment fund, refer to section 1.1 of National Instrument 81-106 Investment Fund Continuous Disclosure and the companion policy to NI 81-106.							
Investment fund issuer								
✓ Issuer (other than an invest	stment fund)							
Item 3 - Issuer Name and Ot								
Provide the following information about th		vestment fund, about the fund.						
Full legal name	Antrim Balanced Morte							
Previous full legal name								
	the last 12 months, provide most recent previous legal name.							
Website	www.antriminvestments.com (if applicable)							
	vide below. Refer to Part B of the Instructions for the definition of "legal entity identifier".							
Legal entity identifier	Svide below. Refer to Part B of t		oj legal entity taentifier					
ITEM 4 - UNDERWRITER INFORM	IATION							
If an underwriter is completing the report,	provide the underwriter's full le	gal name and firm National Reg	gistration Database (NRD	) number.				
Full legal name								
Firm NRD number		(if applicable)						
If the underwriter does not have a firm NR.	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 corresponds to the issuer's primary business activity. For more information on finding the NAICS industry code go to <b>Statistics Canada's NAICS industry search tool.</b>							
NAICS industry code522299							
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.							
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.          Image: Select all 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.         Image: Select all 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.         Image: Select all 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.         Image: Select all 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.         Image: Select all 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.         Image: Select all 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.         Image: Select all 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.         Image: Select all 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.         Image: Select all the issuer's primary business to invest all or substantially all of its assets in any of the following?         Image: Select all the issuer's primary business to invest all or substantially all of the following?         Image: Select all the issuery business to invest all or substantially all of the following							
b) Number of employees							
Number of employees:         Image: O - 49         Image: 50 - 99         Image: 100 - 499         Image: 500 or more							
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							
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.							
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 names of all exchanges on which its securities are listed. Include only the names of exchanges for which the issuer has applied for and received a listing, which excludes, for example, automated trading systems.							
Exchange name(s):							
h) Size of issuer's assets							
Select the size of the issuer's assets for its most recent financial year-end (Canadian \$). If the issuer has not existed for a full 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							
S100M to under \$500M S500M to under \$1B \$1B or over							

ITEM 6 - INVESTMENT FUND ISSUER INFORMATION									
If the issuer is an investi	If the issuer is an investment fund, provide the following information.								
a) Investment fund manager information									
Full legal name	Full legal name								
Firm NRD number	NRD number (if applicable)								
If the investment fund man	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 that	most accurately identifies the issuer (select only one) .								
Money market	Equity Fixed income								
Balanced	Alternative strategies Other (describe)								
Indicate whether one or both	of the following apply to the investment fund .								
Invests primarily in	other investment fund issuers								
Is a UCITs Fund <sup>1</sup>									
<sup>1</sup> Undertaking for the Collectiv directives that allow collective	re Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) e investment schemes to operate throughout the EU on a passport basis on authorization from one member state.								
	nd financial year-end of the investment fund								
Date of formati									
	YYYY MM DD MM DD								
d) Reporting issuer sta	atus of the investment fund								
	orting issuer in any jurisdication of Canada? 🔲 No 🗌 Yes								
If yes, select the jurisdictions of All	of Canada in which the investment fund is a reporting issuer.           AB         BC         MB         NL         NT								
e) Public listing status	NU         ON         PE         QC         SK         YT           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 names of all exchanges on which its securities are listed. Include only the names of exchanges for									
which the issuer has applied for and received a listing, which excludes, for example, automated trading systems.									
Exchange names									
f) Net asset value (NAV) 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	S5M to under \$25M \$25M to under \$100M								
\$100M to under \$500									
	YYYY MM DD								

Ιτεν	TEM 7 - INFORMATION ABOUT THE DISTRIBUTION														
purc	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, which														
shou a)	should be disclosed in Item 8. The information provided in Item 7 must reconcile with the information provided in Schedule 1 of the report. a) Currency														
	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)	b) Distribution date(s)														
													tion date, provide		n 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         08         28         End date         2018         09         05														
						YYYY	MM	D	)			YYYY	MM DD		
c)	D	etai	ilec	l purchaser in	forma	tion									
Con	ple	ete S	Sch	edule 1 of th	is for	m for ea	ch purch	aser a	nd attac	ch the sche	dule to t	he complete	d report.		
d)				of securities di											
			-	0					•			•	ty basis. Refer to F number assigned		heina
di	strib	outed	d. T	he information									ertible securities, se		
<u>As</u>	ked	Qu	esti	<u>ons.</u>									Canadian \$		
	Se	curit	v	CUSIP number		_				Numbe	er of	Single or			
		code		(if applicable)			cription of se			secur	ities	lowest price	Highest price	Total amo	
	Ρ	R	s		Class Shar		ferred No	on-Vo	ting	385,000.00		1.0000	1.0000	1.0000 385,000.	
	Р	R	s			s B Seri g Share	es 'B' Pre es	eferre	ed Non- 1,368,315.0		3,315.00	1.0000	1.0000	1,368,315.00	
	Р	R	s			s B Seri g Share	es 'C' Pr	eferre	ed Non-	2,832	2,386.00	1.0000	1.0000	2,832,386.00	
e)	D	eta	ils	of rights and o	convei	tible/exc	changeabl	e seci	urities						
				e.g. warrants, op ed, provide the									any convertible/e.	xchangeable se	ecurities
~~~		Secu		Underlying	conver		ise price	be uny		iry date	Convers	_			
		cod		security code		(Cana owest	adian \$) Highe			- MM-DD)	ratio	Describe other items (if		applicable)	
		Τ	Т			west	Thylic	31							
f)	Sı	umr	nar	y of the distrib	oution	bv iuriso	diction and	d exer	nption						
,				-					-	ourchasers fo	r each juris	sdiction of Can	ada and foreign ju	risdiction whe	re a
				ides and for eac a jurisdiction o									l outside of Canaa a only	la completes a	
Th	is to	ible	req	uires a separate	line it	em for: (i)	each jurisd	iction v	where a pi	urchaser resid	des, (ii) eac	h exemption re	lied on in the juris		
-		aser ctior		ides, if a purcha	ser resi	des in a ji	urisdiction o	of Cano	ada, and (i	ii) each exen	nption relie	ed on in Canad	a, if a purchaser re	esides in a fore	ign
				ns within Canad	la, stat	e the prov	vince or terr	itory, c	otherwise s	tate the cou	ntry.				
			F	Province or country			E	kemptio	n relied on			Number of purchasers	Total amou	nt (Canadian \$)	
				Alberta			)6 2.9(2.′ , ON, QC			emorandu	um]		7	157,900	).00
		Br	itis	h Columbia		NI 45-10 BC, NL	• • •	[Offe	ring me	morandun	n]	58	3	2,318,601	00.1
			Nc	ova Scotia			)6 2.9(2.′ , ON, QC			emorandu	um]		4	8,100	).00
				Ontario	۲ (	NI 45-10 AB, SK	)6 2.9(2.′ , ON, QC	1) [Of , NB,	fering m , NS)	emorandu	um]	39	7	1,930,600	).00

Québec	NI 45-106 2.9(2.1) [Offering memorandum] (AB, SK, ON, QC, NB, NS)	22	162,600.00
Saskatchewan	NI 45-106 2.9(2.1) [Offering memorandum] (AB, SK, ON, QC, NB, NS)	1	7,900.00
	4,585,701.00		
	Total number of unique purchasers <sup>2</sup>	329	

<sup>2</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.

#### 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>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)

ITEM 8 - COMPENSATION INFORMATION						
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. <b>Complete additional copies of this page if more than one person was, or will be, compensated.</b>						
Indicate whether any compensation was paid, or will be paid, in connection with the distribution.						
No Ves If yes, indicate number of persons compensated.						
a) Name of person compensated and registration status						
Indicate whether the person compensated is a registrant. No Ves						
If the person compensated is an individual, provide the name of the individual.						
Full legal name of individual						
Family name First given name Secondary given names						
If the person compensated is not an individual, provide the following information.						
Full legal name of non-individual Raymond James Ltd.						
Firm NRD number 8 2 4 0 (if applicable)						
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.						
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						
Municipality Province/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 I section I have a sect						
<ul> <li>Director or officer of the investment fund or investment fund manager</li> <li>■ Employee of the issuer or investment fund manager</li> <li>■ None of the above</li> </ul>						
d) Compensation details						
Provide details of all compensation paid, or to be paid, to the person identified in Item 8(a) in connection with the distribution. Provide all amounts in Canadian dollars. Include cash commissions, securities-based compensation, gifts, discounts or other compensation. Do not report payments for services incidental to the distribution, such as clerical, printing, legal or accounting services. An issuer is not required to ask for details about, or report on, internal allocation arrangements with the directors, officers or employees of a non-individual compensated by the issuer.						
Cash commissions paid       66.12         Security codes       Security code 1         Security code 2       Security code 3						
Value of all securities distributed as compensation <sup>4</sup>						
Describe terms of warrants, options or other rights						
Other compensation <sup>5</sup> Describe						
Total compensation paid 66.12						
Check box if the person will or may receive any deferred compensation (describe the terms below)						
Raymond James Ltd. 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.						
<sup>4</sup> Provide the aggregate value of all securities distributed as compensation, <u>excluding</u> options, warrants or other rights exercisable to acquire additional securities of the issuer. Indicate the security codes for all securities distributed as compensation, <u>including</u> options, warrants or other rights exercisable to acquire additional securities of the issuer.						

<sup>5</sup>Do not include deferred compensation.

a) Name of person com	a) Name of person compensated and registration status								
Indicate whether the person compensated is a registrant. 🔲 No 📝 Yes									
If the person compensated is an individual, provide the name of the individual.									
Full legal name of individual									
	Family name First given name	Secondary given names							
If the person compensated	If the person compensated is not an individual, provide the following information.								
Full legal name of non-individual PI Financial									
F	Firm NRD number 5 2 9 0 (if applicable)								
Indicate whether the persor	npensated facilitated the distribution through a funding portal or an inter-	net-based portal. 🗌 No 🗹 Yes							
b) Business contact info	tion								
If a firm NRD number is not	ided in Item 8 (a), provide the business contact information of the person	being compensated.							
Street address									
Municipality	Province/	State							
Country	Postal code/Zip	code							
Email address	Telephone nu	Imber							
c) Relationship to issue	investment fund manager								
Indicate the person's relation	with the issuer or investment fund manager (select all that apply). Refer t								
	neaning of "control" in section 1.4 of NI 45-106 for the purposes of comple	-							
		uer (other than an investment fund)							
Director or officer of	nvestment fund or investment fund manager Employee of the	issuer or investment fund manager							
✓ None of the above									
d) Compensation details									
	n paid, or to be paid, to the person identified in Item 8(a) in connection w mmissions, securities-based compensation, gifts, discounts or other compe								
services incidental to the dist	ion, such as clerical, printing, legal or accounting services. An issuer is not	required to ask for details about, or report							
on, internal allocation arrang	nts with the directors, officers or employees of a non-individual compensa	ited by the issuer.							
Cash commissions p	41.64 Security codes Security c	code 1   Security code 2   Security code 3							
Value of all securiti distributed									
compensatio									
Describe	s of warrants, options or other rights								
Other compensation	Describe								
Total compensation pa	41.64								
Check box if the person will or may receive any deferred compensation (describe the terms below)									
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.									
<sup>4</sup> Provide the aggregate value of all securities distributed as compensation, <u>excluding</u> options, warrants or other rights exercisable to acquire additional securities of the issuer. Indicate the security codes for all securities distributed as compensation, <u>including</u> options, warrants or other rights exercisable to acquire additional securities of the issuer. S <sup>5</sup> Do not include deferred compensation.									

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 all that apply).									
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 fo	oreign public issuer								
Issuer distributing eligible fore	ign securities only t	o permitted clier	nts <sup>7</sup>						
If the issuer is at least one of the a	bove, do not comp	lete Item 9(a) –	(c). Proceed to Ite	m 10.					
<sup>6</sup> An issuer is a wholly owned subsidial securities that are required by law to b <sup>7</sup> Check this box if it applies to the curr clients. Refer to the definitions of "elig ↓ If the issuer is none of the all	e owned by its dire ent distribution even ible foreign security	ctors, are benefit n if the issuer ma " and "permitted"	cially owned by the ade previous distrib client" in Part B(1)	reporting issuer utions of other ty	or the foreig	n publ	ic issue	er, respectively.	
a) Directors, executive officers		-	nem 3(u) - (c).						
Provide the following information for territory; otherwise state the country.				tive Officer, "P" -	- Promoter.	da, sta	te the p	province or	
Organization or company name	Family name	First given name	Secondary give names	Business lo non-indivi reside jurisdict indivio	dual or ntail ion of		ationsh issuer ect all apply)	that	
				Province o	or country	D	0	Р	
	Granleese	William		British Colun	nbia	✓	✓		
	Granleese	William	R.	British Colun	nbia	$\checkmark$			
	Dyck	Victor		British Colun	nbia	✓			
	Worsnup	Christopher	Gavin	British Colun	nbia	✓			
b) 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 nameFamily nameFirst given nameSecondary given nameResidential jurisdiction of individualRelationship to promoter (select one or both if applicable)									
				Province or country D O					
c) Residential address of each									
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 or director 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 not be delegated to an agent or other individual preparing the report on behalf of the issuer or underwriter. If the individual completing and filing the report is different from the individual certifying the report, provide their name and contact details 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.

#### IT IS AN OFFENCE TO MAKE A MISREPRESENTATION IN THIS REPORT

By completing the information below, I certify to the securities regulatory authority or regulator that:

- I have read and understand this report; and
- all of the information provided in this report is true.

Full legal name	Granleese	William		R.	
	Family name	First given name		Secondary give	en names
Title	Portfolio Manager				
Name of issuer/underwriter/ investment fund manager	Antrim Balanced Mortgage Fund Ltd.				
Telephone number	6045302301	Email address wi	ill@antrim	ninvestments	.com
Signature	William R. Granleese	Date	2018	09	07
			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.

 $\checkmark$  Same as individual certifying the report

Full legal name				Title
	Family name	First given name	Secondary given names	
Name of company				
Telephone number		E	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.