Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 9893735

ITEM 1 - REPORT TYPE												
✓ New report												
Amended report	If amer	nded, pro	vide fi	ling date	e of r	report	that is	being ame	ended		(YYYY-MM-DD)	
ITEM 2 - PARTY CERTIFY	YING THE	REPOR	Г									
Indicate the party certifying the Instrument 81-106 Investment									restment fun	d, refer to se	ection 1.1 of National	
Investment fund is	ssuer											
✓ Issuer (other than an investment fund)												
ITEM 3 - ISSUER NAME	AND OT	HER IDE	NTIFIE	RS								
Provide the following information	ion about th	e issuer, or	if the is	suer is an i	invest	ment fu	nd, abou	ut the fund.				
Full le	egal name	al name Antrim Balanced Mortgage Fund Ltd.										
Previous full le	egal name											
If the issuer's name changed in the last 12 months, provide most recent previous legal name.												
	Website	www.ar	ntrimin	vestmer	nts.co	om		(if applicabl	e)			
If the issuer has a legal entity is	dentifier <u>,</u> pro	vide below	. Refer t	o Part B o	f the I	nstructi	ons for t	he definition	of "legal ent	ity identifier	<i>"</i> .	
Legal entity	identifier											
If two or more issuers distribute	ed a single s	ecurity, pro	vide the	full legal	name	(s) of th	e co-issu	uer(s) other th	an the issue	r named abc	ove.	
Full legal name(s) of co	- issuer(s)			-				(if applicabl	e)			
ITEM 4 - UNDERWRITER	R INFORM	1ATION										
If an underwriter is completing	the report,	provide the	underw	riter's full	legal	name a	nd firm l	NRD number.				
Full legal name												
Firm NRD number							(if app	olicable)				
If the underwriter does not hav	re a firm NR	D number,	orovide	the head c	office o	contact	informat	tion of the un	derwriter.			
Street address												
Municipality							Prov	rince/State			\exists	
Country					Ī	Pos	tal code	e/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 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.											
Is the issuer's primary business to invest all or substantially all of its assets in any of the following? If yes, select all that apply.											
🖌 Mortgages 🗌 Real estate 🔄 Commercial/business debt 📄 Consumer debt 📄 Private companies											
Cryptoassets											
b) Number of employees											
Number of employees: 🔽 0 - 49 🗌 50 - 99 🗌 100 - 499 🗌 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 Financial year-end YYYY 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											
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
S100M to under \$500M	S500M to under \$1B	S1B or over

If the issue is an investment fund, provide the following information: a) Investment fund manager information Full legal name Furn NRD number If the investment fund manager does not have a firm NRD number, provide the head office contact information of the investment fund manager. Street address Municipality Province/State Guntry Postal code/Zip code Telephone number D Type of investment fund Tree of investment fund that most accurately identifies the issuer (select only one). Alternative strategies Cryptoasset Other (describe) Indicate whether one or both of the following apply to the investment fund. Investment fund that most accurately identifies the issuer (select only one). Alternative strategies Cryptoasset Other (describe) Indicate whether one or both of the following apply to the investment fund. Investment fund that most accurately identifies the issuer (select only one). Indicate whether one or both of the following apply to the investment fund. Investment fund issuers Is a UCIT's Fund' 'understaining for the Collective Investment fund issuers Is a UCIT's Fund' 'understaining for the Collective Investment of Transferable Securities funds (UCIT's Funds) are investment funds regulated by the European Union (C) Date of formation and financial year-end of the investment fund Suppresent fund a reporting issuer in any jurisdication of Canada? No Yes It he investment fund a reporting issuer in any jurisdication of Canada? No Yes It he investment fund hars a CUSP number, provide below (first 6 digits only) CUSP number On O Public listing status of the investment fund is a reporting issuer. All All All </th
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Firm NRD number (if applicable) If the investment fund manager does not have a firm NRD number, provide the head office contact information of the investment fund manager. Street address Municipality Province/State
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CUSIP number
name of an exchange and not a trading facility such as, for example, an automated trading system
Exchange name
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 \$).
L L \$\the under \$\mathbf{S}M \qquad L \qquad \mathbf{S}M \text{ to under \$\mathbf{S}M \qquad to
\$0 to under \$5M \$5M to under \$25M \$25M to under \$100M \$100M to under \$500M \$500M to under \$1B \$1B or over Date of NAV calculation:

ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION

purchasers connection	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.												
	rency												
Select the o	currency or curre	ncies ii	n which the dis	stribution	was made. All	dollar amounts provi	ded i	in the report	must b	e in Canadi	an dollars.		
🖌 Canad	dian dollar		US dollar		Euro	Other (describ	ce)						
b) Dist	tribution date(s))											
as both the	e start and end de n period covered	ates. If	the report is b report.			securities distributed c distributed on a conti End d	nuou. Г				e the distribution date d dates for the		
			YYYY	MM	DD		L	YYYY	MM	DD			
c) Deta	c) Detailed purchaser information												
Complet	Complete Schedule 1 of this form for each purchaser and attach the schedule to the completed report.												
d) Type	es of securities	distr	ibuted										
						security basis. Refer to					ow to indicate the		
security co	security code. If providing the CUSIP number, indicate the full 9-digit CUSIP number assigned to the security being distributed.												
		Canadian \$											
Security code	CUSIP number (if applicable)		Description	on of secur	ity	Number of securities		lowest price	Hig	hest price	Total amount		
P R S		Clas Shai	s A Preferr res	ed Non-	Voting	257,000.0	00	1.000	0		257,000.00		
P R S			s B Series ng Shares	'B' Prefe	erred Non-	364,123.0	00	1.000	0		364,123.00		
P R S			s B Series ng Shares	'C' Prefe	erred Non-	2,845,044.0	00	1.000	0		2,845,044.00		
e) Deta	ails of rights an	d con	vertible/excl	nangeab	le securities	1	ł						
		•				e price and expiry dat erms for each converti		0			xchangeable securities		
Convertibl exchangea security co	able Underlyin			rcise price nadian \$) Hi	ghest	Expiry date (YYYY- MM-DD)				Describe other items (if applicable)			
					<u> </u>								
f) Sum	mary of the dis	stribut	ion by jurisdi	ction and	d exemption			· · · ·					
 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 Exemption relied on							umber of uniqu purchasers	le ^{2<u>ē</u>}	Total a	mount (Canadian \$)		
Briti	ish Columbia		NI 45-106	2.3 [Acc	credited inv	estor]			13		2,289,664.00		
Briti	ish Columbia		NI 45-106 2 NL)	2.9(1) [(Offering me	emorandum] (BC	'		15		651,623.00		
	Ontario		NI 45-106	2.3 [Acc	redited inv	estor]			3		209,330.00		
	Ontario		NI 45-106 2 (AB, SK, C			nemorandum]			1		10,000.00		

Manitoba	NI 45-106 2.3 [Accredited investor]	1	64,050.00						
Québec	NI 45-106 2.3 [Accredited investor]	2	241,500.00						
	Total dollar amount of securities distributed								
	Total number of unique purchasers ^{2b}	35							

^{2a} In calculating the number of unique purchasers per row, count each purchaser only once. Joint purchasers may be counted as one purchaser.

^{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.

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.³ 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)
1.	Offering Memorandum	2021-10-20	Y	2021-10-20

Ітем 8 - Сс	OMPENSATIO	N INFORMATION	
		rson (as defined in NI 45-106) to whom the issuer directly provides, litional copies of this page if more than one person was, or wil	
Indicate when	ther any compens	ation was paid, or will be paid, in connection with the distribution.	
🗌 No	✓ Yes	If yes, indicate number of persons compensated.	5

5

a) Name of person comp	ensated and regis	stration	status											
Indicate whether the person con	npensated is a regist	rant.			No		\checkmark	Yes						
If the person compensated is an	individual, provide	the nam	e of the i	individ	ual.									
Full legal name of indiv	idual													
		Family n	ame			Firs	t given n	ame	I	Seco	ondary g	iven nar	nes	
If the person compensated is no	t an individual, prov	ide the f	following	inforn	nation.									
Full legal name	of non-individual	iA Priv	vate We	alth I	nc./iA Ge	estion	privée	de pat	rimoine					
Fi	rm NRD number	1	5	4	0	0			(if appl	icable)				
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 pro	vided in Item 8 (a), J	provide t	the busin	ess coi	ntact infor	mation	of the	person l	being com	pensated.				
Street address														
Municipality							Р	rovince	e/State					
Country						Р	ostal c	code/Zi	p code					
Email address							Telep	hone r	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 compensati Canadian dollars. Include cash c incidental to the distribution, suc allocation arrangements with the	ommissions, securiti ch as clerical, printin	es-baseo g, legal	d comper or accoui	nsation nting s	n, gifts, dis services. A	counts n issuer	or othei r is not i	r compe requirea	nsation. L to ask fo	Do not repo	ort payn	nents fo	or serv	ices
Cash commissions pa	id	1.33						Security	code 1	Security c	ode 2	Securit	tv code	3
Value of all securitie	s [0		مامم							.y couc	, 0
distributed as compensation	-			5	ecurity co	des								
Describe te	erms of warrants, or	otions o	r other rio	ghts										
Other compensation	۱ ⁵		Desc	ribe										
Total compensation pai	id	1.33												
Check box if the per	rson will or may rec	eive any	/ deferre	d com	pensation	(descr	ibe the	terms b	elow)					
IA Private Wealth Voting Shares, 1% Voting Shares.														
⁴ Provide the aggregate value of additional securities of the issu rights exercisable to acquire ac ⁵ Do not include deferred compo- ⁵ Do not include deferred compo- action of the security of the secu	er. Indicate the secu Iditional securities c	urity cod	les for al											

a) Name of person comp	ensated and regis	stration	status												
Indicate whether the person cor	npensated is a regist	trant.		[No		\checkmark	Yes							
If the person compensated is an	individual, provide	the nam	e of the	individı	ual.										
Full legal name of indiv	idual														
		Family na	ame			Firs	t given r	name			Se	condary	given na	ames	
If the person compensated is no	nt an individual, prov	ide the f	following	g inform	nation.										
Full legal name	of non-individual	PI Fin	ancial (Corp./C	Corpora	tion Fi	nanciè	re Pl							
F	irm NRD number	5	2	9	0				(if	fappl	icable)				
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.															
b) Business contact infor	mation														
If a firm NRD number is not pro	ovided in Item 8 (a),	provide t	the busir	ness cor	ntact info	rmatior	n of the	person	being	g com	pensated	!			
Street address															
Municipality							F	Provine	ce/St	ate					
Country						F	Postal	code/Z	Zip co	ode					
Email address							Telep	hone	num	ber					
c) Relationship to issuer or investment fund manager															
Indicate the person's relationsh											ning of "	connect	ed" in F	Part B	(2) of
the Instructions and the meanir	-			-106 foi	r the purp		-	•							
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	✓ None of the above														
d) Compensation details															
Provide details of all compensat Canadian dollars. Include cash c incidental to the distribution, su allocation arrangements with th	commissions, securiti ch as clerical, printin	es-based g, legal	d compe or accou	nsation, Inting se	, gifts, dis ervices. A	counts n issue	or othe r is not	r comp require	ensat d to d	tion. E ask fo	Do not rep	oort pay	ments ;	for se	rvices
Cash commissions pa	id	19.86					Γ	Securi	ty code	e 1	Security	code 2	Secu	rity co	de 3
Value of all securitie	es			S	ecurity co	dee								,	
distributed as compensatio	n ⁴			5		Jues									
Describe t	erms of warrants, o	otions or	r other ri	ights											
Other compensation	n ⁵		Desc	cribe											
Total compensation pa	id	19.86													
Check box if the pe	rson will or may rec	eive any	/ deferre	ed comp	ensatior	ı (desci	ribe the	terms	belov	N)					
PI Financial Corp. Shares, 1% on Cl Shares.															ting
⁴ Provide the aggregate value of additional securities of the issu- rights exercisable to acquire and ⁵ Do not include deferred comp	er. Indicate the sec dditional securities o	urity cod	les for a												er

a) Name of person comp	ensated and regis	stration	status											
Indicate whether the person cor	npensated is a regist	rant.			No		\checkmark	Yes						
If the person compensated is an	individual, provide	the name	e of the i	individ	lual.									
Full legal name of indiv	idual													
		Family na	ame			First	given na	ame		Seco	ondary g	given nan	nes	
If the person compensated is no	t an individual, prov	ide the f	ollowing	inforr	mation.									
Full legal name	of non-individual	Crede	ntial Qt	rade	Securitie	s Inc./\	Valeurs	s Mobil	lieres Ci	redential	Qtrade) Inc.		
Fi	rm NRD number	6	1	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 infor	mation													
If a firm NRD number is not pro	ovided in Item 8 (a), j	orovide t	he busin	ess co	ntact infor	rmation	of the p	person b	oeing con	npensated.				
Street address														
Municipality							Р	rovince	e/State					
Country						P	ostal c	ode/Zi	p code					
Email address							Telepl	hone n	umber					
c) Relationship to issuer	or investment fun	d mana	ger											
Indicate the person's relationshi the Instructions and the meanir										ning of "co	onnecte	d″ in Pc	art B(2)) of
	-			100 /0	n the purp		-	-		ner than an	invest	ment fu	nd)	
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 compensat Canadian dollars. Include cash c incidental to the distribution, su allocation arrangements with th	ommissions, securiti ch as clerical, printin	es-based g, legal d	l comper or accou	nsatior nting s	n, gifts, dis services. A	counts o n issuer	or other is not r	· compe equired	nsation. I to ask fo	Do not repo	ort payr	nents fo	r servi	ces
Cash commissions pa	id	0.55						Security	ando 1	Security c	odo 2	Securit	voodo	2
Value of all securitie	.e							Security		Security c		Securit	y code	3
distributed as compensatio	-			S	Security co	des	L							
Describe t	erms of warrants, op	otions or	other rig	ghts										
Other compensation	n ⁵		Desc	ribe										
Total compensation pa	id	0.55												
Check box if the pe	rson will or may rec	eive any	deferre	d com	pensation	(descri	be the	terms b	elow)					
Credential Qtrade Preferred Non-Vo Preferred Non-Vo	ting Shares, 1% c													
⁴ Provide the aggregate value of additional securities of the issu- rights exercisable to acquire ad ⁵ Do not include deferred comp	er. Indicate the sec dditional securities d	urity cod	les for al											

a) Name of person compe	ensated and regis	tration	status												
Indicate whether the person com	pensated is a regist	rant.			No		\checkmark	Yes							
If the person compensated is an	individual, provide t	he nam	e of the ii	ndivid	lual.										
Full legal name of indivi	dual														
		Family na	ame		_	Firs	t given n	name			Seco	ondary (given na	mes	
If the person compensated is not an individual, provide the following information.															
Full legal name	of non-individual	RETH	INK AN	D DIV	VERSIFY	SEC	URITIE	ES INC	C.						
Fi	Firm NRD number47250(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							F	Provinc	ce/Stat	te					
Country						Р	ostal o	code/Z	ip cod	le [
Email address							Telep	hone	numbe	er [
c) Relationship to issuer of	or investment fund	d mana	ger							L]
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.									(2) of						
Connect with the issue				100 /0	n the purp			-			than an	invest	ment f	und)	
			-			_								,	
Director or officer of th	e investment fund c	or invest	ment fun	ia ma	nager		Employ	/ee of t	ne issu	ler or	investm	ent tun	a mana	ager	
✓ None of the above															
d) Compensation details															
Provide details of all compensati Canadian dollars. Include cash ca incidental to the distribution, suc allocation arrangements with the	ommissions, securitie h as clerical, printing	es-based g, legal d	l compen or accour	satior nting s	n, gifts, dis services. A	counts n issuer	or othe r is not i	r comp require	ensatio d to ask	n. Do	not repo	ort payı	ments f	for ser	vices
Cash commissions pai	d	3.96						Coourit	v aada 1				Coour	ity	
Value of all securities								Securi	y code 1		Security co		Secur		le 3
distributed as compensation				S	ecurity co	des	L								
Describe te	erms of warrants, op	tions or	other rig	hts											
Other compensation	5		Descr	ribe											
Total compensation pai	d	3.96													
Check box if the person will or may receive any deferred compensation (describe the terms below)															
Rethink and Diversify 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															
⁴ Provide the aggregate value o additional securities of the issue rights exercisable to acquire ad ⁵ Do not include deferred compe-	er. Indicate the secu Iditional securities o	irity cod	les for all												r

a) Name of person comp	ensated and regis	stration	status											
Indicate whether the person cor	npensated is a regist	rant.] No		\checkmark	Yes						
If the person compensated is an	individual, provide	the name	e of the in	dividud	al.									
Full legal name of indiv	idual													
		Family na	ame			First	t given n	ame		Seco	ondary g	iven nam	ies	
If the person compensated is not an individual, provide the following information.														
Full legal name	of non-individual	FIDEL	ITY CLE	ARIN	G CAN	ADA L	JLC / C	COMPE	ENSATIO	ON FIDEI	LITY C	ANAD	A	
Fi	Firm NRD number 2 8 8 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 pro	ovided in Item 8 (a), _I	orovide ti	he busine	ss cont	act infor	mation	of the	person b	peing com	pensated.				
Street address	Street address]				
Municipality							Р	rovince	e/State					1
Country						Р	ostal c	ode/Zi	p code					Ī
Email address	Email address Telephone number									ĺ				
c) Relationship to issuer	or investment fun	d mana	ger]						L				J
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.								f						
Connect with the issu	-			00 101	une purp		-	-		er than an	n investi	ment fur	nd)	
Director or officer of th	ne investment fund (or invest	ment fun	d mana	aar		Employ	ee of th		or investm	ont fun	d manaı	nor	
✓ None of the above					gei		Employ					2 mana	J O1	
d) Compensation details														
Provide details of all compensate Canadian dollars. Include cash c incidental to the distribution, suc allocation arrangements with th	ommissions, securiti ch as clerical, printin	es-based g, legal c	compens or accoun	ation, g ting ser	gifts, dis vices. Al	counts n issuer	or othei • is not i	r compe required	nsation. L to ask fo	Do not repo	ort payn	nents fo	r services	
Cash commissions pa	id	0.41						Security	code 1	Security c	ode 2	Securit	y code 3	1
Value of all securitie	-			Sec	curity co	des							\top	1
distributed as compensatio				_										-
	erms of warrants, or	otions or	-											
Other compensation			Descri	be										
Total compensation pa	id	0.41												
Check box if the person will or may receive any deferred compensation (describe the terms below)														
Fidelity Clearing Canada ULC 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 issu- rights exercisable to acquire ad ⁵ Do not include deferred comp	er. Indicate the secu dditional securities c	urity cod	es for all											

ITEM 9 - DIRECTORS, EXECUTIVE OFFICERS AND PROMOTERS OF THE ISSUER											
If the issuer is an investment fund, do not complete Item 9. Procced to Item 10.											
Indicate whether the issuer is any of the following (select the one that applies - if more than one applies, select only one).											
Reporting issuer in any jurisdiction of Canada											
Foreign public issuer											
Wholly owned subsidiary of a reporting issuer in any jurisdiction of Canada ⁶											
Provide name of reporting issuer											
Wholly owned subsidiary of a foreign public issuer ⁶											
Provide name o	f foreign public issue	er]			
Issuer distributing only eligi	ble foreign securitie	s and the distributio	n is to permitted clie	nts only ⁷							
If the issuer is at least one of the	above, do not com	plete Item 9(a) – (d	c). Proceed to Item i	10.							
⁶ An issuer is a wholly owned subsidiary of a reporting issuer or a foreign public issuer if all of the issuer's outstanding voting securities, other than securities that are required by law to be owned by its directors, are beneficially owned by the reporting issuer or the foreign public issuer, respectively. ⁷ Check this box if it applies to the current distribution even if the issuer made previous distributions of other types of securities to non-permitted clients. Refer to the definitions of "eligible foreign security" and "permitted client" in Part B(1) of the Instructions.											
 a) Directors, executive officers and promoters of the issuer Provide the following information for each director, executive officer and promoter of the issuer. For locations within Canada, state the province or territory; otherwise state the country. For "Relationship to issuer", "D" – Director, "O" – Executive Officer, "P" – Promoter. 											
Organization or company name	Secondary given Secondary given Relationship										
				Province or	country	D	0	Р			
	Granleese	William		British Columb	ia	~					
	Granleese	William	R.	British Columb	ia	✓	✓				
	Worsnup	Christopher	Gavin	British Columb	ia	✓					
b) Promoter information											
If the promoter listed above is not ar within Canada, state the province or											
Organization or company name	Family name	First given name	Secondary given names	Residential jurisdiction of individual			to promo oth if app				
				Province or country	D		C)			
c) 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	F								
	Family name	Secondary given names								
Title	Portfolio Manager									
Telephone number	6045302301	Email address	will@antriminvestments.co			om				
Signature	"William Granleese"	Date	2022	07	08					
			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		Er	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.