Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 9530562

ITEM 1 - REPORT TYPE											
✓ New report											
Amended report	lf amer	nded, pro	vide f	iling da	te of	report	that is	being ame	ended) (YYYY-MM-DD)
ITEM 2 - PARTY CERTIFYING THE REPORT											
Indicate the party certifying th Instrument 81-106 Investment									estment fund,	refer to secti	on 1.1 of National
Investment fund issuer											
✓ Issuer (other than an investment fund)											
			,								
ITEM 3 - ISSUER NAME	AND OT	HER IDE	NTIFIE	RS							
Provide the following informat	ion about th	e issuer, or	if the is	suer is ai	n invest	tment fu	nd, abou	it the fund.			
Full le	Full legal name Antrim Balanced Mortgage Fund Ltd.										
Previous full legal name											
If the issuer's name ch	If the issuer's name changed in the last 12 months, provide most recent previous legal name.										
	Website www.antriminvestments.com (if applicable)										
If the issuer has a legal entity i	dentifier <u>,</u> pro	ovide below	. Refer t	to Part B	of the	Instructio	ons for th	he definition o	of "legal entity	v identifier".	
Legal entity	identifier										
If two or more issuers distribut	ed a single s	ecurity, pro	vide the	e full lega	ıl name	e(s) of th	e co-issu	er(s) other th	an the issuer	named above	2.
Full legal name(s) of co	o-issuer(s)							(if applicable	e)		
ITEM 4 - UNDERWRITER	R INFORM	1ATION									
If an underwriter is completing	the report,	provide the	underw	vriter's fu	ll legal	name a	nd firm N	NRD number.			_
Full legal name											
Firm NRD number							(if app	licable)			
If the underwriter does not hav	ve a firm NR	D number,	provide	the head	office	contact	informat	tion of the un	derwriter.		
Street address]
Municipality							Provi	ince/State]
Country						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
Full legal name
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
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 County Postal code/Zip code County Telephone number Postal code/Zip code Do Type of investment fund Type of investment fund Type of investment fund that most accurately identifies the issuer (select only one). Do Type of investment fund that most accurately identifies the issuer (select only one). Do Money market De Quity De County De C
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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 \text{ to under \$\mathbf{S}M \qquad \text{to under \$\mathbf{S}M
\$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

purch conne	If an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include in Item 7 and Schedule 1 information about purchasers resident in that jurisdiction of Canada only. Do not include in Item 7 securities issued as payment of commissions or finder's fees in connection with the distribution, which must be disclosed in Item 8. The information provided in Item 7 must reconcile with the information provided in Schedule 1 of the report.											
a)	a) Currency											
Select	Select the currency or currencies in which the distribution was made. All dollar amounts provided in the report must be in Canadian dollars.											
✓ C	✓ Canadian dollar US dollar Euro Other (describe)											
b)	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 2021 06 17 YYYY MM DD YYYY MM												
c)	Deta	ailed purchase	er info	rmation								
Com	plete	e Schedule 1	of thi	s form for ea	ch purchaser and	attach the schedule	to the com	pleted	report.			
d)	Туре	es of securitie	s dist	ributed								
						r security basis. Refer to CUSIP number assigned				ow to indicate the		
									Canadian \$	3		
Secu		CUSIP number (if applicable)		Descriptio	n of security	Number of securities	Single or lowest price			Total amount		
PF	r s		Clas Sha		ed Non-Voting	1,016,454.0	0 1.00	000		1,016,454.00		
ΡF	r s			ss B Series ' ng Shares	B' Preferred Non	- 2,563,420.0	0 1.00	000		2,563,420.00		
							0 1.00	000		4,826,142.00		
e)	Deta	ails of rights a	nd co	nvertible/exch	angeable securities	3	·	•		••		
						ise price and expiry date terms for each convertib				exchangeable securities		
Con exch		e / ble Underlyi	ng	Exerc	cise price adian \$) Highest	Expiry date (YYYY- MM-DD)	Conversion ratio		Describe other items (if applicable)			
f)	Sumi	mary of the di	stribu	tion by jurisdic	tion and exemptio	n						
purch distril This t purch jurisd	 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 un purchase		Total a	mount (Canadian \$)		
	Briti	sh Columbia	à	NI 45-106 2	2.3 [Accredited in	vestor]		10		2,633,682.00		
	Briti	sh Columbia	a	NI 45-106 2 NL)	2.9(1) [Offering m	emorandum] (BC,		24		4,019,274.00		
		Ontario		NI 45-106 2	2.3 [Accredited in	vestor]		4		451,035.00		
		Ontario			2.9(2.1) [Offering N, QC, NB, NS)	memorandum]		3		178,000.00		

Manitoba	NI 45-106 2.3 [Accredited investor]	1	877,325.00
Québec	NI 45-106 2.3 [Accredited investor]	2	216,700.00
Québec	NI 45-106 2.9(2.1) [Offering memorandum] (AB, SK, ON, QC, NB, NS)	2	20,000.00
New Brunswick	NI 45-106 2.3 [Accredited investor]	1	10,000.00
	Total dollar amount of se	curities distributed	8,406,016.00
	Total number of unique purchasers ^{2b}	47	

^{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	2020-10-19	Y	2020-10-23

ITEM 8 -	COMPENSATION INFORMATION	
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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	on was paid, or will be paid, in connection with the distribution.							
🗌 No 🗹 Yes	If yes, indicate number of persons compensated.	4						

a) Name of person comp	ensated and regis	stration	status												
Indicate whether the person co	mpensated is a regist	rant.			🗌 No		\checkmark	Yes							
If the person compensated is ar	n individual, provide	the nam	e of the	individ	ual.										
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 PI Financial Corp.															
F	irm NRD number	5	2	9	0				(if a	applio	cable)				
Indicate whether the person co	mpensated facilitated	the dis	tribution	throug	gh a fund	ng port	al or ar	n intern	et-bas	ed po	ortal.] No	\checkmark	Yes
b) Business contact info	mation														
If a firm NRD number is not pro	ovided in Item 8 (a), j	orovide t	he busin	iess coi	ntact info	rmation	of the	person	being	сотр	pensated.				
Street address															
Municipality							F	Provinc	e/Sta	ate					
Country						Ρ	ostal o	code/Z	ip coo	de					
Email address							Telep	hone	numb	er					
c) Relationship to issuer	or investment fun	d mana	iger												
Indicate the person's relationsh the Instructions and the meaning the transmission of the meaning the											ning of "co	onnecte	d″ in Pc	art B(2	2) of
Connect with the issu	-			,	, ,			-			er than an	i invest	ment fu	nd)	
Director or officer of t	he investment fund	or invest	tment fu	nd mai	nager		Employ	vee of t	he issi	uer o	r investm	ent fun	d mana	ner	
✓ None of the above					lager		Linploy	,00 01 1		401 0	, myooun		umunu	goi	
d) Compensation details Provide details of all compensat		id to the	norcon	idontif	iod in Itor	o 8(a) ir		oction u	uith the	o dict	ribution [Provida		unto	in
Canadian dollars. Include cash o incidental to the distribution, su	commissions, securiti ch as clerical, printin	es-based g, legal	d compei or accou	nsation nting s	n, gifts, dis services. A	counts n issuer	or othe r is not i	r comp require	ensatio d to as	on. D	o not repo	ort payı	nents fo	or serv	/ices
allocation arrangements with th			yees of a	i non-u	ndıvıdual	comper	nsated l	by the i	ssuer.						
Cash commissions pa		47.31						Securit	y code	1	Security c	ode 2	Securit	ty cod	e 3
Value of all securitie distributed as compensatio				S	ecurity co	des									
Describe t	erms of warrants, op	otions or	other ri	ghts											
Other compensatio	n ⁵		Desc	ribe											
Total compensation pa	iid .	47.31													
Check box if the pe	erson will or may rec	eive any	deferre	d com	pensatior	(descr	ibe the	terms	below))					
PI Financial Corp. 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 a ⁵ Do not include deferred comp	uer. Indicate the sec dditional securities d	urity cod	les for al												

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 nam	e of the i	individ	lual.									
Full legal name of indiv	idual													
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 cor	npensated facilitated	the dis	tribution	throug	gh a fundi	ng port	al or ar	interne	- et-based p	oortal.] No	\checkmark	Yes
b) Business contact infor	mation													
If a firm NRD number is not pro	vided in Item 8 (a), J	orovide t	the busin	ess coi	ntact info	mation	of the	person l	being con	npensated.				
Street address														
Municipality							Р	rovince	e/State					
Country						Р	ostal c	code/Zi	p code					
Email address							Telep	hone n	umber					
c) Relationship to issuer	or investment fun	d mana	ager											
Indicate the person's relationshi the Instructions and the meanir.										ning of "co	onnecte	d″ in Po	art B(2	2) of
Connect with the issu	-			100 10	n the purp		-	-		ner than an	invest	ment fu	und)	
Director or officer of the			linentiu	iu mai	nagei		Епрюу		le issuel	or investm		umana	ger	
✓ None of the above														
d) Compensation details														
Provide details of all compensation Canadian dollars. Include cash c incidental to the distribution, suc allocation arrangements with th	ommissions, securiti ch as clerical, printin	es-based g, legal	d comper or accou	nsation nting s	n, gifts, dis services. A	counts n issuer	or othei • is not i	r compe required	nsation. L to ask fo	Do not repo	ort payn	nents fo	or serv	rices
Cash commissions pa		20.80	-							O a avaita a		O a avuri	4	
Value of all securitie							-	Security	code 1	Security c	oae∠	Securi	ty code	93
distributed as compensatio	-			S	ecurity co	des								
Describe to	erms of warrants, or	otions or	r other rig	ghts										
Other compensation	1 ⁵		Desc	ribe										
Total compensation pa	id	20.80												
✓ Check box if the pe	rson will or may rec	eive any	deferre	d com	pensation	(descr	ibe the	terms b	elow)					
Raymond James Voting Shares, 1% 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 Iditional securities c	urity cod	les for al											

a) Name of person comp	ensated and regis	stration	status											
Indicate whether the person co	npensated is a regist	rant.			No		\checkmark	Yes						
If the person compensated is ar	individual, provide	the nam	e of the	individ	ual.									
Full legal name of indiv	idual													
		Family na	ame			First	t given n	iame		Seco	ondary g	jiven nar	nes	
If the person compensated is not an individual, provide the following information.														
Full legal name	Full legal name of non-individual Canaccord Genuity Corp.													
Firm NRD number 9 0 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	<i>F f</i> 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	e/State					
Country						Р	ostal c	code/Zi	p code					
Email address							Telep	hone r	umber					
c) Relationship to issuer	or investment fun	d mana	iger	1										
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 issu	-			100 10	r the purp		-	•		her than an	i investr	ment fu	ind)	
			•											
Director or officer of t		Jinvesi		nu mai	layei		Епрюу		ie issuei	or investm		uniana	gei	
✓ None of the above														
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.								rices						
Cash commissions pa		0.89						Security		Coourity o		Coouri	tu oo du	
Value of all securitie							F	Security		Security c		Securit	ly code	3
distributed as compensatio	-			S	ecurity co	des								
Describe t	erms of warrants, or	otions or	other ri	ghts										
Other compensatio	n ⁵		Desc	ribe										
Total compensation pa	id	0.89												
Check box if the person will or may receive any deferred compensation (describe the terms below)														
Canaccord Genuity Corp. 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 an ⁵ Do not include deferred comp	ier. Indicate the secu dditional securities d	urity coa	les for al											

a) Name of person compe	ensated and regis	stration	status											
Indicate whether the person com	ppensated is a regist	rant.		[No		\checkmark	Yes						
If the person compensated is an	individual, provide	the name	e of the ii	ndividı	ual.									
Full legal name of indivi	dual]
		Family na	ame			First	t given n	ame		Seco	ondary giv	ven name	es	1
If the person compensated is not an individual, provide the following information.														
Full legal name of	of non-individual	Fidelity	y Cleari	ng Ca	anada U	LC								
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. No 🗸 Yes														
b) Business contact information														
If a firm NRD number is not prov	vided in Item 8 (a), p	orovide t	he busine	ess cor	ntact infor	mation	of the p	person l	being con	npensated.				
Street address														
Municipality							Р	rovince	e/State					
Country						Р	ostal c	ode/Zi	p code					
Email address							Telep	hone r	umber					
c) Relationship to issuer c	or investment fun	d mana	ger											
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 issue	er or investment fun	d manag	ger				Insider	of the is	ssuer (otr	ner than an	investm	ient fun	d)	
Director or officer of th	e investment fund	or invest	ment fun	id mar	nager		Employ	ee of th	ne issuer	or investm	ent fund	manag	er	
✓ None of the above														
d) Compensation details														
Provide details of all compensation Canadian dollars. Include cash co incidental to the distribution, suc allocation arrangements with the	ommissions, securiti h as clerical, printin	es-basea g, legal d	l compen or accour	sation nting s	, gifts, dis ervices. A	counts o n issuer	or other is not r	r compe requirea	nsation. L to ask fo	Do not repo	ort paym	ents for	services	!
Cash commissions pai	d 1	09.59						Security	code 1	Security co	ode 2	Security	code 3	
Value of all securities	3 			6	o ourity oo	doo								
distributed as compensation	1 ⁴			3	ecurity co	ues								
Describe te	erms of warrants, or	otions or	other rig	hts										
Other compensation	5		Descr	ribe										
Total compensation pai	d 10	09.59												
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 issue rights exercisable to acquire ad ⁵ Do not include deferred competing ⁵ Do not include deferred competing ⁵ Do	er. Indicate the secu ditional securities d	urity cod	les 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 o	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	on is to permitted clie	nts only7				-		
If the issuer is at least one of the	above, do not com	plete Item 9(a) – (d	c). Proceed to Item	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.										
✓ If the issuer is none of the	above, check this	box and complete l	ltem 9(a) - (c).							
a) Directors, executive officer	rs 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	Family name	First given name	Secondary given names	Business location of non-individual or residentail jurisdiction of individual			Relationship to issuer (select all that apply)			
				Province or country		D	0	Р		
	Granleese	William		British Columb	а	~	~			
	Granleese	William	R.	British Columb	а	~				
	Worsnup	Christopher	Gavin	British Columb	а	✓				
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 name	Family name	First given name	Secondary given names	Residential jurisdiction of individual		itionship one or bo				
				Province or country	D		C	>		
c) Residential address of one	h individual									
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									
	Family name First given name			Secondary given names						
Title	Director									
Telephone number	6045302301 Email address			bill@antriminvestments.com						
Signature	"William Granleese"	Date	2021	06	25					
			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.