Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 9323508

ITEM 1 - REPORT TYPE								
✓ New report	✓ New report							
Amended report If amended, provide filing date of report that is being amended (YYYY-MM-DD)								
ITEM 2 - PARTY CERTIFYING TH	e 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	naous Disclosure and the comp	umon policy to the or Too.						
✓ Issuer (other than an investment of the state of th	stment fund)							
Underwriter	······································							
ITEM 3 - ISSUER NAME AND OT	THE DENTIFIED							
Provide the following information about the		vertment fund, about the fi	und					
Full legal name			ma.					
Previous full legal name	7 thin Balancea World							
If the issuer's name changed in th	a last 12 months, provide most	recent provious logal name						
Website			licable)					
If the issuer has a legal entity identifier, pr	ovide below. Refer to Part B of t	he Instructions for the defir	ition of "legal entity identifie	r".				
Legal entity identifier								
If two or more issuers distributed a single				ove.				
Full legal name(s) of co-issuer(s)		(it app	licable)					
ITEM 4 - UNDERWRITER INFORM	Item 4 - Underwriter Information							
If an underwriter is completing the report,	provide the underwriter's full le	gal name and firm NRD nu	mber.					
Full legal name								
Firm NRD number (if applicable)								
If the underwriter does not have a firm NRD number, provide the head office contact information of the underwriter.								
Street address								
Municipality		Province/S	tate	$\overline{}$				
Country		Postal code/Zip c	ode	一				
Telephone number		Web	site	(if applicable)				

ITEM 5 - ISSUER INFORMATION					
If the issuer is an investment fund, do not complete Item 5. Proceed to Item 6.					
a) Primary industry					
Provide the issuer's North American Industry Classification Standard (NAICS) code (6 digits only) that in your reasonable judgment most closely corresponds to the issuer's primary business activity.					
NAICS industry code 5 2 2 9 9					
If the issuer is in the mining industry , indicate the stage of operations. This does not apply to issuers that provide services to issuers operating in the mining industry. Select the category that best describes the issuer's stage of operations.					
Exploration Development Production					
Is the issuer's primary business to invest all or substantially all of its assets in any of the following? If yes, select all that apply.					
✓ Mortgages ☐ Real estate ☐ Commercial/business debt ☐ Consumer debt ☐ Private companies					
☐ Cryptoassets					
b) Number of employees					
Number of employees:					
c) SEDAR profile number					
Does the issuer have a SEDAR profile?					
No ✓ Yes If yes, provide SEDAR profile number 0 0 0 3 8 5 6 8					
If the issuer does not have SEDAR profile complete item 5(d) - (h).					
d) Head office address					
Street address Province/State					
Municipality Postal code/Zip code					
Country Telephone number					
e) Date of formation and financial year-end					
Date of formation Financial year-end MM DD					
f) Reporting issuer status					
Is the issuer a reporting issuer in any jurisdication of Canada? No Yes					
If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer.					
AII AB BC MB NB NL NT					
NS NU ON PE QC SK YT					
g) Public listing status					
If the issuer has a CUSIP number, provide below (first 6 digits only)					
CUSIP number					
If the issuer is publicly listed, provide the name of the exchange on which the issuer's equity securities primarily trade. Provide only the name of an					
exchange and not a trading facility such as, for example, an automated trading system. Exchange name					
h) Size of issuer's assets					
11) 6120 01 100001 0 000010					

Select the size of the issuer's assets based on its most recently available annual financial statements (Canadian \$). If the issuer has not prepared annual financial statements for its first financial year, provide the size of the issuer's assets at the distribution end date.

☐ \$0 to under \$5M	☐ \$5M to under \$25M	☐ \$25M to under \$100M
\$100M to under \$500M	☐ \$500M to under \$1B	\$1B or over

Item 6 - Investment Fund Issuer Information						
If the issuer is an inves	tment fund, provide the following information.					
a) Investment fund ma	anager information					
Full legal name						
Firm NRD number	(if applicable)					
If the investment fund mand	ager does not have a firm NRD number, provide the head office contact information of the investment fund manager.					
Street address						
Municipality	Province/State					
Country	Postal code/Zip code					
Telephone number	Website (if applicable)					
b) Type of investment	fund					
Type of investment fund tha	nt most accurately identifies the issuer (select only one) .					
Money market	☐ Equity ☐ Fixed income ☐ Balanced					
Alternative strateg	gies Cryptoasset Other (describe)					
Indicate whether one or bot	h of the following apply to the investment fund .					
Invests primarily in	n other investment fund issuers					
☐ Is a UCITs Fund¹						
¹ Undertaking for the Collec (EU) directives that allow c	tive Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union collective investment schemes to operate throughout the EU on a passport basis on authorization from one member state.					
c) Date of formation a	and financial year-end of the investment fund					
Date of forma	tion Financial year-end MM DD MM DD					
d) Reporting issuer st	atus of the investment fund					
Is the investment fund a rep	orting issuer in any jurisdication of Canada? No Yes					
If yes, select the jurisdictions of Canada in which the investment fund is a reporting issuer.						
☐ AII ☐	AB BC MB NB NL NT					
□ NS □	NU ON PE QC SK YT					
e) Public listing status of the investment fund						
If the investment fund has a CUSIP number, provide below (first 6 digits only)						
CUSIP number						
If the investment fund is publicly listed, provide the name of the exchange on which the investment fund's securities primarily trade. Provide only the name of an exchange and not a trading facility such as, for example, an automated trading system.						
Exchange name						
f) Net asset value (NAV) of the investment fund						
	investment fund as of the date of the most recent NAV calculation (Canadian \$).					
\$0 to under \$5M	\$5M to under \$25M \$25M to under \$100M					
\$100M to under \$500	DM \$500M to under \$1B \$1B or over Date of NAV calculation: YYYY MM DD					

ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION

If an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include in Item 7 and Schedule 1 information about purchasers resident in that jurisdiction of Canada only. Do not include in Item 7 securities issued as payment of commissions or finder's fees in connection with the distribution, which must be disclosed in Item 8. The information provided in Item 7 must reconcile with the information provided in Schedule 1 of the report.

a) Curren	CV
-----------	----

Select the currency or currencies in which the distribution was made. All dollar amounts provided in the report must be in Canadian dollars.

✓ Canadian dollar US dollar Euro Other (describe)

b) Distribution date(s)

State the distribution start and end dates. If the report is being filed for securities distributed on only one distribution date, provide the distribution date as both the start and end dates. If the report is being filed for securities distributed on a continuous basis, include the start and end dates for the distribution period covered by the report.

Start date 2020 12 03

End date 2020 12 10

c) Detailed purchaser information

Complete Schedule 1 of this form for each purchaser and attach the schedule to the completed report.

d) Types of securities distributed

Provide the following information for all distributions reported on a per security basis. Refer to Part A(12) of the Instructions for how to indicate the security code. If providing the CUSIP number, indicate the full 9-digit CUSIP number assigned to the security being distributed.

			Canadian \$				
Security CUSIP number (if applicable)		 Description of security Number of securities		Single or lowest price	Highest price	Total amount	
Р	R	s	Class A Preferred Non-Voting Shares	48,233.00	1.0000		48,233.00
Р	R	s	Class B Series 'B' Preferred Non-Voting Shares 1,983,457.00 1.0000			1,983,457.00	
Р	R	s	Class B Series 'C' Preferred Non- Voting Shares	10,162,185.00	1.0000		10,162,185.00

e) Details of rights and convertible/exchangeable securities

If any rights (e.g. warrants, options) were distributed, provide the exercise price and expiry date for each right. If any convertible/exchangeable securities were distributed, provide the conversion ratio and describe any other terms for each convertible/exchangeable security.

Convertible / exchangeable security code	Underlying security code		(Canadian %)		Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other items (if applicable)
			Lowest	Highest			

f) Summary of the distribution by jurisdiction and exemption

State the total dollar amount of securities distributed and the number of purchasers for each jurisdiction of Canada and foreign jurisdiction where a purchaser resides and for each exemption relied on in Canada for that distribution. However, if an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include distributions to purchasers resident in that jurisdiction of Canada only.

This table requires a separate line item for: (i) each jurisdiction where a purchaser resides, (ii) each exemption relied on in the jurisdiction where a purchaser resides, if a purchaser resides in a jurisdiction of Canada, and (iii) each exemption relied on in Canada, if a purchaser resides in a foreign jurisdiction.

For jurisdictions within Canada, state the province or territory, otherwise state the country.

Province or country Exemption relied on		Number of unique ²⁸ purchasers	Total amount (Canadian \$)
British Columbia NI 45-106 2.3 [Accredited investor]		10	1,410,398.00
British Columbia NI 45-106 2.9(1) [Offering memorandum] (BC, NL)		40	4,536,940.00
Ontario NI 45-106 2.3 [Accredited investor]		7	2,627,887.00
Ontario NI 45-106 2.9(2.1) [Offering memorandum] (AB, SK, ON, QC, NB, NS)		10	84,250.00

Manitoba	Manitoba NI 45-106 2.3 [Accredited investor]		3,464,400.00
Québec	NI 45-106 2.3 [Accredited investor]	2	70,000.00
	12,193,875.00		
	Total number of unique purchasers ^{2b}	70	

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

g) Net proceeds to the investment fund by jurisdiction

If the issuer is an investment fund, provide the net proceeds to the investment fund for each jurisdiction of Canada and foreign jurisdiction where a purchaser resides. If an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include net proceeds for that jurisdiction of Canada only. For jurisdictions within Canada, state the province or territory, otherwise state the country.

Province or country	Net proceeds (Canadian \$)
Total net proceeds to the investment fund	

³"Net proceeds" means the gross proceeds realized in the jurisdiction from the distributions for which the report is being filed, less the gross redemptions that occurred during the distribution period covered by the report.

h) Offering materials - This section applies only in Saskatchewan, Ontario, Québec, New Brunswick and Nova Scotia.

If a distribution has occurred in Saskatchewan, Ontario, Québec, New Brunswick or Nova Scotia, complete the table below by listing the offering materials that are required under the prospectus exemption relied on to be filed with or delivered to the securities regulatory authority or regulator in those jurisdictions.

In Ontario, if the offering materials listed in the table are required to be filed with or delivered to the Ontario Securities Commission (OSC), attach an electronic version of the offering materials that have not been previously filed with or delivered to the OSC.

	Description	Date of document or other material (YYYY-MM-DD)	Previously filed with or delivered to regulator? (Y/N)	Date previously filed or delivered (YYYY-MM-DD)
1.	Offering Memorandum	2020-10-19	Y	2020-10-23

^{2b} In calculating the total number of unique purchasers to which the issuer distributed securities, count each purchaser only once, regardless of whether the issuer distributed multiple types of securities to, and relied on multiple exemptions for, that purchaser.

Provide information for each person (as defined in NI 45-106) to whom the issuer directly provides, or will provide, any compensation in connection with the distribution. Complete additional copies of this page if more than one person was, or will be, compensated. Indicate whether any compensation was paid, or will be paid, in connection with the distribution. No V Yes If yes, indicate number of persons compensated.	ITEM 8 - COMPENSATION INFORMATION					
No ✓ Yes If yes, indicate number of persons compensated.	Indicate whether any compensation was paid, or will be paid, in connection with the distribution.					
	No ✓ Yes If yes, indicate number of persons compensated. 5					

a) Name of person comp	ensated and regi	stration status							
Indicate whether the person co	mpensated is a regis	strant.	☐ No		✓ Yes				
If the person compensated is ar	individual, provide	the name of the indiv	ridual.						
Full legal name of indiv	ridual								
		Family name		First give	en name		Secondary (given names	
If the person compensated is no	ot an individual, pro	vide the following info	rmation.						
Full legal name	of non-individual	PI Financial Corp).						
F	irm NRD number	5 2 9	0			(if app	licable)		
Indicate whether the person co	npensated facilitate	d the distribution thro	ugh a fund	ing portal o	r an interne	t-based _l	portal.	No ✓ Ye	es
b) Business contact infor	mation								
If a firm NRD number is not pro	ovided in Item 8 (a),	provide the business o	contact info	rmation of t	the person b	eing con	npensated.		
Street address									
Municipality					Province	e/State			٦
Country				Post	al code/Zi _l	p code			Ī
Email address				Te	lephone n	umber			Ī
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 t	he investment fund	or investment fund m	nanager	☐ Emr	olovee of th	e issuer	or investment fun	d manager	
✓ None of the above			ger		,				
d) Compensation details									
Provide details of all compensate Canadian dollars. Include cash concidental to the distribution, surallocation arrangements with the	commissions, securit ch as clerical, printing the directors, officers	ties-based compensations, legal or accounting or employees of a nor	on, gifts, dis 7 services. A	scounts or o n issuer is r	ther compe not required	nsation. I to ask fo	Do not report payı	ments for service	
Cash commissions pa		26.96			Security	code 1	Security code 2	Security code 3	
Value of all securitie distributed as compensation	-		Security co	odes					
Describe t	erms of warrants, o	pptions or other rights							
Other compensatio	n ⁵	Describe							
Total compensation pa	id	26.96							
✓ Check box if the pe	rson will or may red	ceive any deferred co	mpensatior	describe	the terms b	elow)			
		nnual trailer fee pa Preferred Non-Votir							
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 additional securities	curity codes for all sec	ion, <u>excludi</u> curities disti	i <u>ng</u> options, ributed as c	warrants o	r other ri _i on, <u>includ</u>	ights exercisable i ding options, warr	o acquire ants or other	

a) Name of person comp	ensated and regis	stration s	tatus								
Indicate whether the person con	npensated is a regist	rant.		☐ No		√ Y	⁄es				
If the person compensated is an	individual, provide	the name	of the indiv	vidual.							
Full legal name of indivi	idual										
		Family nam	ne		First gi	iven nan	ne		Secondary (jiven names	
If the person compensated is no	t an individual, prov	ide the fol	lowing info	ormation.							
Full legal name	of non-individual	Fidelity	Clearing	Canada U	_C						
Fi	rm NRD number	2	8 8	8	0		(in	f applic	cable)		
Indicate whether the person con	npensated facilitated	the distri	bution thro	ough a fundi	ng portal	or an ii	nternet-bo	ased po	ortal.	No ✓	Yes
b) Business contact inform	mation										
If a firm NRD number is not pro	vided in Item 8 (a), ¡	provide the	e business o	contact infor	mation o	f the pe	erson bein	д сотр	ensated.		
Street address											
Municipality						Pro	ovince/St	tate			
Country					Pos	stal co	de/Zip co	ode			
Email address					Т	elepho	one num	ber			
c) Relationship to issuer or investment fund manager											
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section. Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund)											
Director or officer of the	ne investment fund o	or investm	ent fund m	nanager	En	nployee	e of the is	suer o	r investment fun	d manager	
None of the above											
d) Compensation details											
Provide details of all compensati Canadian dollars. Include cash co incidental to the distribution, suc allocation arrangements with the	ommissions, securiti ch as clerical, printin e directors, officers o	es-based og g, legal or r employe	compensati accounting	ion, gifts, dis g services. A	counts or n issuer is	other c	compensat quired to d	tion. Do ask for	o not report payı	ments for se	ervices
Cash commissions pa	10	18.49				Se	ecurity cod	le 1	Security code 2	Security co	ode 3
Value of all securitie distributed as compensation	-			Security co	des						
Describe to	erms of warrants, op	otions or o	ther rights								
Other compensation	1 ⁵		Describe								
Total compensation pai	id	18.49									
✓ Check box if the per	rson will or may reco	eive any d	leferred co	mpensation	(describe	e the te	rms belov	w)			
Fidelity Clearing C Non-Voting Share Non-Voting Share	s, 1% on Class B										rred
⁴ Provide the aggregate value of additional securities of the issurights exercisable to acquire ac ⁵ Do not include deferred compa	er. Indicate the secu Iditional securities o	urity code:	s for all sed								er

a) Name of person comp	ensated and regi	stration status						
Indicate whether the person con	npensated is a regis	trant.	☐ No		✓ Yes			
If the person compensated is an	individual, provide	the name of the ind	vidual.					
Full legal name of indivi	idual							
		Family name	I	First giv	ven name		Secondary (given names
If the person compensated is no	t an individual, pro	vide the following inf	formation.					
Full legal name	of non-individual	Raymond James	s Ltd.					
Fi	rm NRD number	8 2	4 0			(if app	olicable)	
Indicate whether the person con	npensated facilitate	d the distribution thr	ough a fund	ling portal	or an intern	et-based	portal.	No ✓ Yes
b) Business contact infor	mation							
If a firm NRD number is not pro	vided in Item 8 (a),	provide the business	contact info	ormation of	f the person	being con	mpensated.	
Street address								
Municipality					Provinc	e/State		
Country				Pos	stal code/Z	ip code		
Email address				T	elephone	number		
c) Relationship to issuer or investment fund manager								
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section. Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund)								
_		-				•		,
Director or officer of th	ne investment fund	or investment fund	manager	∐ Em	nployee of t	ne issuer	or investment fun	d manager
✓ None of the above								
d) Compensation details								
Provide details of all compensations and compensation dollars. Include cash concidental to the distribution, such allocation arrangements with the Cash commissions pa	ommissions, securit th as clerical, printing e directors, officers	ies-based compensa ng, legal or accountir	tion, gifts, d ng services. I	scounts or An issuer is	other comp not require	ensation. d to ask fo	Do not report payı	ments for services
·		171.03			Securit	y code 1	Security code 2	Security code 3
Value of all securitie distributed as compensation	-		Security of	odes				
Describe to	erms of warrants, o	ptions or other right	S					
Other compensation	n ⁵	Describe	9					
Total compensation pai	id 1	71.83						
✓ Check box if the per	rson will or may red	ceive any deferred c	ompensatio	n (describe	e the terms	below)		
Raymond James I Voting Shares, 1% Voting Shares.								
⁴ Provide the aggregate value o additional securities of the issu rights exercisable to acquire ac ⁵ Do not include deferred compo	er. Indicate the sec Iditional securities	curity codes for all se	ntion, <u>exclud</u> ecurities dis	<u>ling</u> options tributed as	s, warrants compensat	or other ri ion, <u>includ</u>	ights exercisable t ding options, warr	o acquire ants or other

a) Name of person compo	ensated and regis	stration st	tatus								
Indicate whether the person con	npensated is a regist	rant.		☐ No		✓ \	Yes				
If the person compensated is an	individual, provide	the name o	of the indiv	vidual.							
Full legal name of indivi	dual										
		Family nam	ie		First g	jiven nar	me		Secondary	given names	i
If the person compensated is no	t an individual, prov	ide the foll	lowing info	ormation.							
Full legal name	of non-individual	Nationa	l Bank Fi	nancial Inc).						
Fi	rm NRD number	1	9 6	0				(if appl	icable)		
Indicate whether the person con	npensated facilitated	the distrii	bution thro	ough a fund	ing portal	l or an i	internet-l	based p	ortal.	No ✓	Yes
b) Business contact inform	mation										
If a firm NRD number is not pro	vided in Item 8 (a), ¡	provide the	e business (contact info	rmation o	of the pe	erson bei	ng com	pensated.		
Street address											
Municipality						Pro	ovince/S	State			
Country					Po	stal co	de/Zip	code			
Email address					٦	Гeleph	one nur	mber			
c) Relationship to issuer or investment fund manager											
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section. Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund)											
Director or officer of the	ne investment fund o	or investm	ent fund m	nanager	Eı	mplove	e of the i	issuer d	or investment fu	nd managei	r
✓ None of the above						1 -7 -					
d) Compensation details											
Provide details of all compensation Canadian dollars. Include cash control incidental to the distribution, such allocation arrangements with the	ommissions, securiti h as clerical, printin e directors, officers o	es-based c g, legal or r employe	ompensati accounting	ion, gifts, dis g services. A	counts or n issuer is	other o	compensi quired to	ation. E ask foi	Do not report pay	ments for se	ervices
Cash commissions pai	d	0.55				S	ecurity co	de 1	Security code 2	Security co	ode 3
Value of all securities distributed as compensation				Security co	odes						
Describe to	erms of warrants, op	otions or o	ther rights								
Other compensation	1 ⁵		Describe								
Total compensation pai	d	0.55									
✓ Check box if the per	son will or may rec	eive any d	eferred co	mpensation	(describ	e the te	erms belo	ow)			
National Bank Fina Non-Voting Share: Non-Voting Share:	s, 1% on Class B										ed
⁴ Provide the aggregate value o additional securities of the issu- rights exercisable to acquire ad ⁵ Do not include deferred compe	er. Indicate the secu Iditional securities o	urity codes	s for all sed								er

a) Name of person comp	ensated and regis	stration statu	S								
Indicate whether the person cor	npensated is a regist	rant.		☐ No		√	Yes				
If the person compensated is an	individual, provide t	the name of th	e individ	ual.							
Full legal name of indiv	idual										
		Family name			First	given n	ame		Secondary	given name	s
If the person compensated is no	et an individual, prov	ide the followi	ng inforn	nation.							
Full legal name	of non-individual	Industrielle	Alliance	e Valeurs	Mobil	ieres I	nc.				
Fi	irm NRD number	1 5	4	0	0			(if app	licable)		
Indicate whether the person cor	mpensated facilitated	the distributi	on throug	gh a fundi	ng port	al or an	internet	-based _l	portal.] No [✓ Yes
b) Business contact infor	mation										
If a firm NRD number is not pro	ovided in Item 8 (a), p	provide the bu	siness co	ntact infor	mation	of the p	person be	eing con	npensated.		
Street address											
Municipality						Р	rovince	/State			
Country					Р	ostal c	ode/Zip	code			
Email address						Telep	hone nu	umber			
c) Relationship to issuer											
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	er or investment fun	d manager			Ш'	insider	of the iss	suer (otr	ner than an inves	ment tund	1)
Director or officer of the	he investment fund o	or investment	fund mai	nager		Employ	ee of the	sissuer	or investment fur	d manage	er
None of the above											
d) Compensation details											
Provide details of all compensate Canadian dollars. Include cash concidental to the distribution, surallocation arrangements with the	commissions, securitions of the commissions, securitions of the commissions of the commission of the commissions of the commission of the commis	es-based comp g, legal or acc r employees o	oensation ounting s	n, gifts, dis services. A	counts (n issuer	or other is not r	compen equired	sation. I to ask fo	Do not report pay	ments for	services
Cash commissions pa		12.63					Security of	code 1	Security code 2	Security	code 3
Value of all securitie distributed as compensatio	-		S	ecurity co	des						
Describe to	erms of warrants, op	otions or other	rights								
Other compensation	n ⁵	De	scribe								
Total compensation pa	id	12.63									
✓ Check box if the pe	rson will or may rece	eive any defer	red com	pensation	(descri	ibe the	terms be	elow)			
Industrielle Alliand Preferred Non-Vo Preferred Non-Vo	ting Shares, 1% o										
⁴ Provide the aggregate value of additional securities of the issu- rights exercisable to acquire ac ⁵ Do not include deferred comp	ier. Indicate the secu Idditional securities o	urity codes for									her

TEM 9 - DIRECTORS, EXECU				UER						
If the issuer is an investment fun	d, do not complete	Item 9. Procced to	Item 10.							
Indicate whether the issuer is any o	f the following (selec	t the one that applie	es - if more than one	applies, select only	one).					
Reporting issuer in any juris	sdiction of Canada									
Foreign public issuer										
Wholly owned subsidiary of	a reporting issuer ir	n any jurisdiction of	Canada ⁶							
Provide nar	Provide name of reporting issuer									
Wholly owned subsidiary of	a foreign public issu	uer ⁶								
Provide name of	f foreign public issue	r								
Issuer distributing only eligi	ble foreign securities	s and the distributio	n is to permitted clie	nts only ⁷				_		
If the issuer is at least one of the	above, do not comp	olete Item 9(a) – (c). Proceed to Item 1	10.						
securities that are required by law to respectively. The Check this box if it applies to the conclients. Refer to the definitions of "elements".	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 Item 9(a) - (c).									
a) Directors, executive officer	rs and promoters of	of the issuer								
Provide the following information fo territory; otherwise state the country.						tate the p	rovince	or		
Organization or company name	Family name	First given name	Secondary given names	Business loca non-individu residenta jurisdictior individu	al or ail n of		onship to t all that			
				Province or o	ountry	D	0	Р		
	Granleese	William		British Columbia	a	✓	✓			
	Granleese	William	R.	British Columbia	a	✓				
	Worsnup	Christopher	Gavin	British Columbia	a	✓				
b) Promoter information										
If the promoter listed above is not ar within Canada, state the province or										
			Secondary given	Residential jurisdiction of individual		tionship				

Residential address of each individual

Organization or company name

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.

names

First given name

Family name

individual

Province or

country

D

0

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	Intrim Balanced Mortgage Fund Ltd.										
Full legal name	Granleese										
	Family name	First given name	•	Seconda	ry given names						
Title	Portfolio Manager										
Telephone number	6045302301	Email address	will@a	ntriminvestr	ments.com						
Signature	"William Granleese"	Date	2020	0 12	11						
			YYYY	Y MM	DD						

ITEM 11- CONTACT F	PERSON				
		r the individual that the secu the individual certifying the	ırities regulatory authority or report in Item 10.	regulator may	y contact with any questions
Same as individua	al certifying the report				
Full legal name				Title	
	Family name	First given name	Secondary given names	_	
Name of company					
Telephone number		Er	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.