# Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 9411347

ITEM 1 - REPORT TYPE														
✓ New report														
Amended report	lf amer	ided, pro	vide fi	iling date	e of r	eport	that is	being ame	ended		(YYYY-MM-DD)			
ITEM 2 - PARTY CERTIF	YING THE	REPOR	ſ											
Indicate the party certifying the Instrument 81-106 Investment		-	-	-	-	-			estment fund	l, refer to	section 1.1 of National			
Investment fund i					<b>F</b>	r J								
✓ Issuer (other than	n an inves	tment fur	nd)											
ITEM 3 - ISSUER NAME	AND OT	HER IDEI	NTIFIE	RS										
Provide the following informat	ion about th	e issuer, or	if the is	suer is an	invest	ment fu	nd, abou	ut the fund.						
Full legal name Antrim Balanced Mortgage Fund Ltd.														
Previous full legal 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 i	dentifier <u>,</u> pro	vide below	. Refer t	o Part B o	f the li	nstructi	ons for ti	he definition o	of "legal entit	ty identifie	er".			
Legal entity	identifier													
If two or more issuers distribute	ed a single se	ecurity, pro	vide the	full legal	name	(s) of th	e co-issu	ıer(s) other th	an the issuer	named a	bove.			
Full legal name(s) of co	-issuer(s)							(if applicable)						
ITEM 4 - UNDERWRITER	R INFORM	ATION												
If an underwriter is completing	the report, p	provide the	underw	riter's full	legal i	name a	nd firm I	NRD number.						
Full legal name														
Firm NRD number							(if app	olicable)						
If the underwriter does not have a firm NRD number, provide the head office contact information of the underwriter.														
Street address														
Municipality							Prov	ince/State						
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 <b>mining industry</b> , indicate the stage of operations. This does not apply to issuers that provide services to issuers operating in the mining industry. Select the category that best describes the issuer's stage of operations.
Is the issuer's primary business to invest all or substantially all of its assets in any of the following? If yes, select all that apply.
🖌 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. Investing in the investment fund issuers Is a UCIT's Fund's) Understaining for the Collective Investment of Transferable Securities funds (UCIT's Funds) are investment funds regulated by the European Union It of the collective Investment of the investment fund. YNYY Mu DD
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
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Money market       Equity       Fixed income       Balanced         Alternative strategies       Cryptoasset       Other (describe)
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Date of formation Financial year-end   YYYY MM   Financial year-end MM MM DD  MM DD MM Pes MB
d) Reporting issuer status of the investment fund     Is the investment fund a reporting issuer in any jurisdication of Canada?     No   Yes     If yes, select the jurisdictions of Canada in which the investment fund is a reporting issuer.     All   AB   BC   MB   NB   NL   NS   NU   ON   PE   QC   SK   YT      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
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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

purc conr	has iect	ers r ion v	esident in that j	iurisdict	ion of Canado	a only. Do	not include	isdiction of Canada, inc in Item 7 securities issu e information provided	ied as	payment of	commi	ssions or fi	inder's fees in		
a)	С	urre	ency												
Selea	ct tł	пе си	irrency or currei	ncies in	which the dis	tribution	was made. A	ll dollar amounts provi	ded in	the report n	nust be	in Canadi	an dollars.		
<ul><li>✓ (</li></ul>	Car	nadi	an dollar	🗌 U	IS dollar		Euro	Other (describ	be)						
b)	D	istri	bution date(s)												
as b	oth	the		ates. If t	he report is b			r securities distributed o s distributed on a contir							
			Sta	art date	2021	03	11	End da	ate	2021	03	18			
					YYYY	MM	DD								
c)			led purchaser												
Con	-					ch purcl	haser and	attach the schedule	e to t	he comple	ted re	port.			
d)	Ţ	ype	s of securities	distrib	outed										
	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 \$														
	curit ode	y	CUSIP number (if applicable)		Descriptio	on of secur	ity	Number of securities		Single or lowest H price		nest price	Total amount		
Ρ	R	s		Class Share	s A Preferre es	ed Non-	Voting	21,000.0	00	0 1.0000			21,000.00		
Ρ	R	s			s B Series ' g Shares	B' Prefe	erred Non	- 1,076,382.0	00	0 1.0000			1,076,382.00		
Ρ	R	s			s B Series ' g Shares	B Series 'C' Preferred Non- 1,993,737.00 1.0000 Shares									
e)	D	etai	ls of rights an	d conv	vertible/exch	angeabl	e securitie	S							
were	e dis	strib	uted, provide th					ise price and expiry dat terms for each convertil					exchangeable securities		
exc	han	rtible geab y coo			(Car	cise price nadian \$)		Expiry date (YYYY- MM-DD)		version ratio	Des	items (if applicable)			
_	1				Lowest	Hi	ghest								
f)	<u>с</u> ,		nary of the dis	tributi-	n hy juriadi	tion or i	d overnetie	n							
f)			•						iuricdi	ction of Can	ada an	d foreian ii	urisdiction where a		
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.															
		F	Province or country			Exe	emption relied	on	Nur	mber of unique purchasers	9 <sup>2<u>a</u></sup>	Total a	mount (Canadian \$)		
			Alberta		NI 45-106 2 AB, SK, O			memorandum]		puronaccio	1	104,882.00			
	В	ritis	h Columbia		NI 45-106 2		,	vestor]			9		1,051,872.00	)	
			h Columbia	1		-		emorandum] (BC,			16		1,281,000.00	-	
		N	lanitoba		NI 45-106 2	2.3 [Acc	redited in	vestor]			2		146,500.00	)	

Ontario	NI 45-106 2.3 [Accredited investor]	4	296,365.00
Ontario	NI 45-106 2.9(2.1) [Offering memorandum] (AB, SK, ON, QC, NB, NS)	5	71,000.00
Québec	NI 45-106 2.3 [Accredited investor]	1	139,500.00
	Total dollar amount of se	curities distributed	3,091,119.00
	Total number of unique purchasers <sup>2b</sup>	38	

<sup>2a</sup> In calculating the number of unique purchasers per row, count each purchaser only once. Joint purchasers may be counted as one purchaser.

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

### g) Net proceeds to the investment fund by jurisdiction

If the issuer is an investment fund, provide the net proceeds to the investment fund for each jurisdiction of Canada and foreign jurisdiction where a purchaser resides.<sup>3</sup> If an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include net proceeds for that jurisdiction of Canada only. For jurisdictions within Canada, state the province or territory, otherwise state the country.

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

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

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

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

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

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

<b>ITEM 8 - COMPENSATION</b>	INFORMATION
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•		(as defined in NI 45-106) to whom the issuer directly provides, or v nal copies of this page if more than one person was, or will be		
Indicate wheth	ner any compensation	was paid, or will be paid, in connection with the distribution.		
No No	✓ Yes	If yes, indicate number of persons compensated.	6	

a) Name of person compe	ensated and regis	stration	status													
Indicate whether the person com	pensated is a regist	rant.			🗌 No		$\checkmark$	Yes								
If the person compensated is an i	individual, provide i	the nam	e of the i	ndivid	lual.											
Full legal name of individ	dual															
		Family na	ame			First	given n	name				Seco	ondary g	jiven na	ames	
If the person compensated is not	an individual, prov	ide the f	following	inforn	nation.											
Full legal name of non-individual Fidelity Clearing Canada ULC																
Fir	m NRD number	2	8	8	8	0				(if app	licable)					
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. No 🗸 Yes																
b) Business contact inform	nation															
If a firm NRD number is not prov	ided in Item 8 (a), p	orovide t	the busine	ess co	ntact infor	mation	of the	persor	n bei	ng con	npensa	ted.				
Street address																
Municipality							F	Provin	ice/S	State						
Country						P	ostal o	code/	Zip d	code						
Email address							Telep	hone	nur	nber						
c) Relationship to issuer o	r investment fun	d mana	ager								L					]
Indicate the person's relationship the Instructions and the meaning												f "cc	onnecte	d″ in F	ort B	8(2) of
Connect with the issue	r or investment fun	d mana	ger				Insider	of the	issu	ier (oth	her tha	n an	invest	ment f	und)	
Director or officer of the	e investment fund o	or invest	tment fun	nd ma	nager		Employ	yee of	the i	ssuer	or inve	stme	ent fun	d man	ager	
$\checkmark$ None of the above																
d) Compensation details																
Provide details of all compensatic Canadian dollars. Include cash co incidental to the distribution, such allocation arrangements with the	mmissions, securiti n as clerical, printin	es-based g, legal (	d compen or accour	satior nting s	n, gifts, dis services. Ai	counts o n issuer	or othe is not i	r com requir	benso ed to	ation. I ask fo	Do not	repo	rt payı	nents (	for se	rvices
Cash commissions paid	t t	24.66					Г	Secur	itv co	de 1	Secu	itv co	ode 2	Secu	rity co	de 3
Value of all securities				6	o ourity oo	doo	- E		,			,			,	
distributed as compensation	4			3	ecurity co	ues	L									
Describe te	rms of warrants, or	otions or	r other rig	ghts												
Other compensation	5		Desci	ribe												
Total compensation paid	: : : : : : : : : : : : : : : : : : :	24.66														
✓ Check box if the pers	Check box if the person will or may receive any deferred compensation (describe the terms below)															
Fidelity Clearing Ca Non-Voting Shares Non-Voting Shares	, 1% on Class B															rred
<sup>4</sup> Provide the aggregate value of additional securities of the issue rights exercisable to acquire add <sup>5</sup> Do not include deferred compe	er. Indicate the secu ditional securities d	urity coa	les for all													er

a) Name of person compens	ated and regis	tration	status													
Indicate whether the person compe	nsated is a registi	rant.			🗌 No		$\checkmark$	Yes	6							
If the person compensated is an ind	ividual, provide t	he nam	e of the i	individ	ual.											
Full legal name of individua	al															
	ŀ	amily na	ame			First	t given n	name				Sec	ondary g	given na	ames	]
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 app	plical	ble)				
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.																
b) Business contact informat	ion															
If a firm NRD number is not provide	ed in Item 8 (a), p	rovide t	the busin	ess coi	ntact info	rmation	of the	perso	n be	ing co	mpei	nsated.				
Street address																
Municipality							F	Provir	nce/	State						
Country						Р	ostal o	code/	/Zip	code						
Email address							Telep	hone	e nu	mber						
c) Relationship to issuer or in	nvestment fund	d mana	ager													
the Instructions and the meaning of	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.															
Director or officer of the ir	vestment fund c	or invest	tment fur	nd mai	nager		Employ	vee of	f the	issuer	r or ii	ovestm	ent fun	nd mar	nager	
$\checkmark$ None of the above					age:		p.o)	,						a man	age.	
d) Compensation details																
Provide details of all compensation p Canadian dollars. Include cash comr incidental to the distribution, such a allocation arrangements with the di	nissions, securitie s clerical, printing rectors, officers of	es-based g, legal d r employ	d comper or accoui	nsation nting s	n, gifts, dis services. A	counts n issuer	or othe is not i	r com requir	pens red to	sation. o ask f	Do r	not rep	ort payl	ments	for se	ervices
Cash commissions paid	Ę	50.52						Secu	rity co	ode 1	Se	ecurity c	ode 2	Secu	rity co	ode 3
Value of all securities distributed as compensation <sup>4</sup>				S	ecurity co	des										
Describe term	s of warrants, op	tions or	r other riç	ghts												
Other compensation <sup>5</sup>			Desc	ribe												
Total compensation paid	5	50.52		l												
Check box if the person	will or may rece	eive any	/ deferred	d com	pensation	(descr	ibe the	terms	s bel	ow)						
Raymond James Ltd. Voting Shares, 1% or Voting Shares.																
<sup>4</sup> Provide the aggregate value of all additional securities of the issuer. rights exercisable to acquire additi <sup>5</sup> Do not include deferred compensation.	Indicate the secu onal securities of	irity coa	ies for al													ər

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	individ	ual.										
Full legal name of indiv	idual														
		Family na	ame		-	Firs	t given n	name			Seco	ondary g	given na	mes	
If the person compensated is not an individual, provide the following information.															
Full legal name	of non-individual	PI Fin	ancial (	Corp.											
Fi	rm NRD number	5	2	9	0				(if a	pplica	ble)				
Indicate whether the person cor	npensated facilitated	the dist	tribution	throug	gh a fund	ing port	al or ar	n intern	et-base	ed port	tal.		] No	$\checkmark$	Yes
b) Business contact infor	mation														
If a firm NRD number is not pro	vided in Item 8 (a), J	provide t	the busir	ness coi	ntact info	rmation	of the	person	being o	compe	nsated.				
Street address															
Municipality							F	Provinc	e/Stat	e					
Country						Ρ	ostal o	code/Z	ip cod	le					
Email address							Telep	hone	numbe	er [					
c) Relationship to issuer	or investment fun	d mana	ager												
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			-			than an	invest	ment fi	und)	
Director or officer of th			-	nd mai	nager						nvestm				
<ul> <li>✓ None of the above</li> </ul>		51 111003	unontra	na mai	lager		Linploy		10 1330		nvestin			iger	
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 compe or accou	nsation Inting s	, gifts, dis ervices. A	counts n issuer	or othe r is not i	r comp require	ensatio d to ask	n. Do l	not repo	ort payı	nents f	or ser	vices
Cash commissions pa		30.14	yees of e		atriadat	compe	-								
		00.14						Securit	y code 1	I S	ecurity co	ode 2	Securi	ity cod	le 3
Value of all securitie distributed as compensatio	-			S	ecurity co	odes									
Describe to	erms of warrants, op	otions or	r other ri	ghts											
Other compensation	اءً		Desc	cribe											
Total compensation pa	id	30.14													
Check box if the pe	rson will or may rec	eive any	/ deferre	d com	pensatior	ı (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.															
<sup>4</sup> Provide the aggregate value of additional securities of the issu- rights exercisable to acquire ad <sup>5</sup> Do not include deferred comp	er. Indicate the sec Iditional securities c	urity coa	les for a												-

a) Name of person compensate	ed and registratio	n status											
Indicate whether the person compensa	ited is a registrant.		[	No		$\checkmark$	Yes						
If the person compensated is an individ	dual, provide the na	me of the i	individı	ıal.									
Full legal name of individual													
	Family	name			First	given n	ame		Sec	ondary g	jiven na	mes	
If the person compensated is not an in	dividual, provide the	e following	inform	nation.									
Full legal name of nor	n-individual Nation	onal Banl	k Finar	ncial Inc	•								
Firm NF	RD number 1	9	6	0				(if app	licable)				
Indicate whether the person compensa	ited facilitated the d	istribution	throug	h a fundi	ng porte	al or an	interne	et-based	portal.		] No	$\checkmark$	Yes
b) Business contact information	n												
If a firm NRD number is not provided i	in Item 8 (a), provid	e the busin	ess con	ntact infor	mation	of the	person l	peing cor	npensated.				
Street address													
Municipality						Р	rovince	e/State					
Country					P	ostal c	ode/Zi	p code					
Email address						Telep	hone n	umber					
c) Relationship to issuer or inve	estment fund mai	nager											
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				
Director or officer of the inve	estment fund or inve	estment fui	nd man	ager		Employ	ee of th	e issuer	or investm	ent fun	d mana	ager	
✓ None of the above													
d) Compensation details													
Provide details of all compensation pai Canadian dollars. Include cash commis incidental to the distribution, such as cl allocation arrangements with the dire	sions, securities-bas lerical, printing, lego	ed comper al or accou	nsation, nting se	, gifts, dis ervices. A	counts o n issuer	or othei is not i	r compe required	nsation. ' to ask fo	Do not rep	ort payr	nents f	or ser	vices
Cash commissions paid	27.40						Security	code 1	Security of	ode 2	Securi	ity cod	le 3
Value of all securities distributed as compensation <sup>4</sup>			Se	ecurity co	des								
· _	f warrants, options	] or other ri	ghts										
Other compensation <sup>5</sup>		Desc	ribe										
Total compensation paid	27.40	]	L										
Check box if the person w	ill or may receive a	ny deferre	d comp	ensation	(descri	ibe the	terms b	elow)					
National Bank Financial Inc. will receive an annual trailer fee paid monthly in the amount of 1/2% on Class A Preferred Non-Voting Shares, 1% on Class B Series 'B' Preferred Non-Voting Shares and 0% on Class B Series 'C' Preferred Non-Voting Shares.													
<sup>4</sup> Provide the aggregate value of all se additional securities of the issuer. Ind rights exercisable to acquire additiona <sup>5</sup> Do not include deferred compensations.	licate the security c al securities of the i	odes 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	IA Priv	vate We	alth I	nc.									
Fi	rm NRD number	1	5	4	0	0			(if app	licable)				
Indicate whether the person cor	npensated facilitated	the dist	tribution	throug	gh a fundi	ng porte	al or an	interne	t-based p	oortal.		] No	✓	Yes
b) Business contact infor	mation													
If a firm NRD number is not provided in Item 8 (a), provide the business contact information of the person being compensated.														
Street address														
Municipality							Р	rovince	e/State					
Country						Ρ	ostal c	ode/Zi	p code					
Email address							Telep	hone n	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.									) of					
Connect with the issu	-			100 10	n the purp			•		ner than an	investi	ment fu	nd)	
Director or officer of th			-	nd may	nagor								,	
<ul> <li>✓ None of the above</li> </ul>				iu mai	nager	LJ '	Linpidy		e issuel	or investm		u manaj	yei	
d) Compensation details	,					<u> </u>					,			
Provide details of all compensati 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	l comper or accoui	nsation nting s	n, gifts, dis services. Al	counts o n issuer	or other is not r	r compe required	nsation. I to ask fo	Do not repo	ort payn	nents fo	r servi	ices
Cash commissions pa		3.03	, ccs of a			compen	.54104 5							
		0.00					_	Security	code 1	Security c	ode 2	Securit	y code	3
Value of all securitie distributed as compensatio	-			S	ecurity co	des								
Describe to	erms of warrants, op	otions or	other rig	ghts										
Other compensation	٦ <sup>5</sup>		Desc	ribe										
Total compensation pa	id	3.03												
Check box if the pe	rson will or may rec	eive any	deferre	d com	pensation	(descri	ibe the	terms b	elow)					
IA Private Wealth Inc. will receive an annual trailer fee paid monthly in the amount of 1/2% on Class A Preferred Non- Voting Shares, 1% on Class B Series 'B' Preferred Non-Voting Shares and 0% on Class B Series 'C' Preferred Non- Voting Shares.														
<sup>4</sup> Provide the aggregate value of additional securities of the issu- rights exercisable to acquire ad <sup>5</sup> Do not include deferred comp	er. Indicate the sec Iditional securities of	urity coa	les for al											

a) Name of person compens	sated and regis	tration	status													
Indicate whether the person compe	nsated is a registi	rant.		[	No		$\checkmark$	Yes	5							
If the person compensated is an inc	lividual, provide t	he name	e of the in	dividı	ual.											
Full legal name of individu	al															
	F	amily na	me			First	t given r	name				Sec	condary	given n	ames	
If the person compensated is not ar	n individual, provi	de the fo	ollowing i	nform	nation.											
Full legal name of	non-individual	Canac	cord Ge	nuity	Corp.											
Firm	NRD number	9	0	0						(if ap	plica	ble)				
Indicate whether the person compe	nsated facilitated	the dist	ribution t	hroug	gh a fundi	ng port	al or ai	n inte	rnet-	based	l por	tal.		] No	$\checkmark$	] Yes
b) Business contact informa	tion															
If a firm NRD number is not provid	ed in Item 8 (a), p	rovide tł	he busine	ss cor	ntact infor	rmation	of the	perso	on be	ing co	тре	nsated				
Street address																
Municipality							F	Provi	nce/	State	;					
Country						P	ostal	code	/Zip	code	, [					
Email address							Telep	ohon	e nu	mber	· [					
c) Relationship to issuer or i	nvestment fund	d manag	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 issuer of	or investment fun	d manag	ger				Insider	of th	e iss	uer (o	other	than a	n inves	tment	fund)	
Director or officer of the i	nvestment fund c	or investr	ment fun	d mar	nager		Employ	yee o	f the	issue	r or i	nvestn	nent fur	nd mar	nager	
✓ None of the above																
d) Compensation details																
Provide details of all compensation Canadian dollars. Include cash com incidental to the distribution, such a allocation arrangements with the di	missions, securitie s clerical, printing	es-based 3, legal o	compens or accoun	ation ting s	, gifts, dis ervices. A	counts n issuer	or othe • is not	er com requi	npens red t	sation. o ask †	. Do	not rep	ort pay	ments	for se	ervices
Cash commissions paid		3.95					Г	Secu	iritv c	ode 1	S	ecurity	code 2	Secu	rity co	ode 3
Value of all securities				6	ocurity co	doc									,	
distributed as compensation <sup>4</sup>				3	ecurity co	ues										
Describe term	s of warrants, op	tions or	other rig	hts												
Other compensation <sup>5</sup>			Descr	ibe												
Total compensation paid		3.95														
Check box if the person	n will or may rece	ive any	deferred	comp	pensation	(descr	ibe the	term	s be	low)						
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.																
<sup>4</sup> Provide the aggregate value of al additional securities of the issuer. rights exercisable to acquire additt <sup>5</sup> Do not include deferred compens	Indicate the secu ional securities of	rity code	es for all													ər

ITEM 9 - DIRECTORS, EXECUTIVE OFFICERS AND PROMOTERS OF THE ISSUER											
If the issuer is an investment fun	d, do not complete	Item 9. Procced to	ltem 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 <sup>6</sup>											
Provide nar	me of reporting issue	ər						]			
Wholly owned subsidiary of a foreign public issuer <sup>6</sup>											
Provide name of foreign public issuer											
Issuer distributing only eligi	ble foreign securitie	s and the distributio	n is to permitted clie	nts only <sup>7</sup>				_			
If the issuer is at least one of the	above, do not com	plete Item 9(a) – (d	c). Proceed to Item	10.							
securities that are required by law t respectively. <sup>7</sup> Check this box if it applies to the c	<sup>6</sup> 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,										
✓ If the issuer is none of the	above, check this	box and complete l	ltem 9(a) - (c).								
a) Directors, executive officer	a) Directors, executive officers and promoters of the issuer										
Provide the following information fo territory; otherwise state the country						tate the j	province	or			
Organization or company name	Family name First given nam		Secondary given names	Business loc non-individe resident jurisdictio individu	ual or ail n of	Relationship to issuer (select all that apply)					
				Province or country		D	0	Р			
	Granleese	William		British Columb	а	~	~				
	Granleese	William	R.	British Columb	a	~					
	Worsnup	Christopher	Gavin	British Columb	а	✓					
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	Residential jurisdiction of individual		itionship one or bo					
				Province or country	D		C	)			
c) Residential address of east											
c) Residential address of eac		racidantial address	for each individua-	listed in Item O	(a) and (L)	and at	ach to t	ha			
Complete Schedule 2 of this form completed report. Schedule 2 also					u) una (D)	, and att	ach to t				

# **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	·	Secondary given names								
Title	President										
Telephone number	6045302301	Email address	bill@antri	pill@antriminvestments.com							
Signature	"William Granleese"	2021	03	19							
			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.