# Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 9367094

ITEM 1 - REPORT TYPE								
✓ New report								
☐ Amended report If ame	nded, 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								
✓ Issuer (other than an investment 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 security, provide the full legal name(s) of the co-issuer(s) other than the issuer named above.							
				ove.				
Full legal name(s) of co-issuer(s)		(it app	licable)					
ITEM 4 - UNDERWRITER INFORM	MATION							
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 <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.
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					
<sup>1</sup> Undertaking for the Collective Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) directives that allow 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	s 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					
-	AV) of the investment fund				
	investment fund as of the date of the most recent NAV calculation (Canadian \$).				
\$0 to under \$5M	s5M to under \$25M s25M 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) Currency
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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 2021 01 28

End date 2021 02 04

#### 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 \$	
	ecuri code	,	CUSIP number (if applicable)	I Description of security		Single or lowest price	Highest price	Total amount
Р	R	s		Class A Preferred Non-Voting Shares.	249,464.00	1.0000		249,464.00
Р	R	s		Class B Series 'B' Preferred Non-Voting Shares.	1,609,674.00	1.0000		1,609,674.00
Р	R	s		Class B Series 'C' Preferred Non-Voting Shares.	5,933,475.00	1.0000		5,933,475.00

#### 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.

exc	Convertible / exchangeable Underlying security code security code		e Underlying Exercise price (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 <sup>28</sup> purchasers	Total amount (Canadian \$)
British Columbia	NI 45-106 2.3 [Accredited investor]	11	2,018,512.00
British Columbia	NI 45-106 2.9(1) [Offering memorandum] (BC, NL)	37	2,063,354.00
Ontario	NI 45-106 2.3 [Accredited investor]	7	1,792,372.00
Ontario	NI 45-106 2.9(2.1) [Offering memorandum] (AB, SK, ON, QC, NB, NS)	6	103,000.00

	7,792,613.00		
Québec	NI 45-106 2.3 [Accredited investor]	2	168,775.00
New Brunswick	NI 45-106 2.9(2.1) [Offering memorandum] (AB, SK, ON, QC, NB, NS)	4	50,000.00
New Brunswick	NI 45-106 2.3 [Accredited investor]	6	240,000.00
Manitoba	NI 45-106 2.3 [Accredited investor]	1	1,356,600.00

<sup>&</sup>lt;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.

#### 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	

<sup>&</sup>lt;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	2020-10-23	Y	2020-10-23	

<sup>&</sup>lt;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.

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	pensated and reg	stration status						
Indicate whether the person co	mpensated is a regis	trant.	☐ No		✓ Ye	es		
If the person compensated is a	n individual, provide	the name of the indiv	idual.					
Full legal name of indiv	vidual							
		Family name	I	First giv	ven name	e	Secondary (	given names
If the person compensated is no	ot an individual, pro	vide the following info	rmation.					
Full legal name	of non-individual	Fidelity Clearing	Canada U	_C				
F	irm NRD number	2 8 8	8	0		(if app	olicable)	
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.  No   Yes								
b) Business contact info	rmation							
If a firm NRD number is not pro	ovided in Item 8 (a),	provide the business o	contact info	mation of	the per	son being cor	mpensated.	
Street address								
Municipality					Prov	vince/State		
Country				Pos	stal cod	le/Zip code		
Email address			1	Te	elepho	ne number		
c) Relationship to issuer	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)								
<u> </u>		-				,		•
<u> </u>	the investment fund	or investment fund m	anager	L Em	nployee	of the issuer	or investment fun	d manager
✓ None of the above								
d) Compensation details								
Provide details of all compensations of all compensations and compensations. Include cash a incidental to the distribution, sure allocation arrangements with the Cash commissions page 1.	commissions, securit uch as clerical, printi ne directors, officers	ies-based compensati ng, legal or accounting	on, gifts, dis 7 services. A	counts or o	other co not requ	mpensation. uired to ask fo	Do not report pay	ments for services
Casii commissions pe	alu	1.37			Sec	curity code 1	Security code 2	Security code 3
Value of all securitie distributed as compensation			Security co	des				
Describe	terms of warrants, o	ptions or other rights						
Other compensation	n <sup>5</sup>	Describe						
Total compensation pa	aid	1.37						
Check box if the person will or may receive any deferred compensation (describe the terms below)								
	es, 1% on Class E	receive an annual t 3 Series 'B' Preferre						
<sup>4</sup> Provide the aggregate value additional securities of the issinghts exercisable to acquire a <sup>5</sup> Do not include deferred comp	uer. Indicate the sec additional securities	curity codes for all sec						

a) Name of person compe	nsated and regis	tration s	status								
Indicate whether the person com	Indicate whether the person compensated is a registrant.  No  Ves										
If the person compensated is an individual, provide the name of the individual.											
Full legal name of individ	dual										
		Family na	me		Firs	t given n	iame		Secondary	given names	;
If the person compensated is not	If the person compensated is not an individual, provide the following information.										
Full legal name o	f non-individual	Raymo	nd Jame	es Ltd.							
Fin	m NRD number	8	2	4 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 information											
If a firm NRD number is not prov	ided in Item 8 (a), p	orovide th	e busines	s contact ir	formation	of the	person b	eing con	npensated.		
Street address											
Municipality						P	rovince	/State			
Country					F	Postal o	code/Zip	code			
Email address						Telep	hone n	umber			
c) Relationship to issuer or investment fund manager											
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.  Connect with the issuer or investment fund manager  Insider of the issuer (other than an investment fund)											
Director or officer of the	investment fund (	or investr	nent fund	manager	_	Employ	vee of the	issuar	or investment fu	nd manage	•
✓ None of the above	o investment rana c	71 1110001	nont rana	manager	Ш	Lilipioy	or the	7 100001	or investment to	na managei	
d) Compensation details				t'.C' - J ' I	O(-) :			l- 4l di-	ibii	!!	4- !
Provide details of all compensation Canadian dollars. Include cash co- incidental to the distribution, such allocation arrangements with the	mmissions, securition as clerical, printing	es-based g, legal o	compenso r accounti	ation, gifts, ing services	discounts . An issuei	or othe r is not i	r comper required	nsation. I to ask fo	Do not report pay	ments for s	ervices
Cash commissions paid	1	12.57					Security	code 1	Security code 2	Security c	ode 3
Value of all securities distributed as compensation				Security	codes						
·	rms of warrants, op	otions or	other righ	ts							
Other compensation <sup>5</sup>	;		Describ	pe							
Total compensation paid	1	12.57									
Check box if the person will or may receive any deferred compensation (describe the terms below)											
Raymond James L Voting Shares, 1% Voting Shares.	td. will receive ar on Class B Serie	annual es 'B' Pr	l trailer fe eferred N	ee paid m Non-Votin	onthly in g Shares	the ans and 0	nount of 0% on C	1/2% ( lass B	on Class A Pre Series 'C' Pref	ferred Nor erred Non-	ì-
<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	r. Indicate the secu ditional securities o	ırity code	es for all s								er

a) Name of person compo	ensated and regis	tration statu	ıs								
Indicate whether the person con	Indicate whether the person compensated is a registrant.    No   Yes										
If the person compensated is an individual, provide the name of the individual.											
Full legal name of indivi	dual										
		Family name		<b> </b>	First gi	iven nam	ne		Secondary g	jiven names	
If the person compensated is not an individual, provide the following information.											
Full legal name	of non-individual	Industrielle	Alliand	e Valeurs	Mobilie	res Inc	).				
Firm NRD number 1 5 4 0 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 pro	vided in Item 8 (a), p	provide the bu	siness co	ontact infor	mation of	f the per	rson being	compen	sated.		
Street address											
Municipality						Pro	vince/Sta	ite			
Country					Pos	stal cod	de/Zip co	de			
Email address					Т	elepho	one numb	er			
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 investment	fund ma	anager	☐ En	nployee	of the iss	uer or in	nvestment 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, securitions of the commissions, securitions of the commissions of the commission of the commi	es-based comp g, legal or acc r employees o	pensatio ounting	n, gifts, dis services. Ai	counts or n issuer is	other co	ompensati Juired to a	on. Do n	ot report payr	ments for se	ervices
Cash commissions pai	id ;	32.19				Se	ecurity code	1 Se	curity code 2	Security co	ode 3
Value of all securities distributed as compensation	-		9	Security co	des						
Describe to	erms of warrants, op	otions or other	rights								
Other compensation	<b>1</b> <sup>5</sup>	De	scribe								
Total compensation pai	d 3	32.19									
✓ Check box if the person will or may receive any deferred compensation (describe the terms below)											
Industrielle Allianc Preferred Non-Vot Preferred Non-Vot	ing Shares, 1% o										s A
<sup>4</sup> Provide the aggregate value o additional securities of the issu- rights exercisable to acquire ad <sup>5</sup> Do not include deferred compe	er. Indicate the secu Iditional securities o	ırity codes for									er

a) Name of person compe	ensated and regis	tration st	tatus								
Indicate whether the person com	Indicate whether the person compensated is a registrant.    No   Yes										
If the person compensated is an individual, provide the name of the individual.											
Full legal name of indivi	dual										
		Family nam	e		First g	iven nan	ne		Secondary	given names	
If the person compensated is not	If the person compensated is not an individual, provide the following information.										
Full legal name of	of non-individual	PI Finar	cial Corp	).							
Fir	m NRD number	5	2 9	0			(i	f appli	cable)		
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	provide the	business o	contact info	rmation o	f the pe	rson bein	g com	pensated.		
Street address											
Municipality						Pro	ovince/S	tate			
Country					Po	stal co	de/Zip c	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 investment fund or investment fund manager  Employee of the issuer or investment fund manager											
None of the above											
d) Compensation details											
Provide details of all compensation Canadian dollars. Include cash control incidental to the distribution, such allocation arrangements with the	ommissions, securitien h as clerical, printing e directors, officers o	es-based c g, legal or r employe	ompensati accounting	ion, gifts, di g services. A	scounts or An issuer is	other c	ompensa quired to	tion. D ask for	o not report pay	ments for se	ervices
Cash commissions pai	a 1,	71.23				Se	ecurity cod	le 1	Security code 2	Security co	ode 3
Value of all securities distributed as compensation				Security c	odes						
Describe te	erms of warrants, op	otions or o	ther rights								
Other compensation	5		Describe								
Total compensation pai	d 17	71.23									
✓ Check box if the per	Check box if the person will or may receive any deferred compensation (describe the terms below)										
PI Financial Corp. Shares, 1% on Cla Shares.											oting
<sup>4</sup> Provide the aggregate value of additional securities of the issue rights exercisable to acquire ad <sup>5</sup> Do not include deferred compe	er. Indicate the secu Iditional securities o	ırity codes	s for all sed								er

a) Name of person compo	ensated and regis	stration sta	atus								
Indicate whether the person con	Indicate whether the person compensated is a registrant.  No  Ves										
If the person compensated is an individual, provide the name of the individual.											
Full legal name of indivi	dual										
		Family name	)		First gi	ven nam	ne		Secondary g	iven names	
If the person compensated is no	t an individual, prov	ide the follo	owing info	rmation.							
Full legal name	of non-individual	National	Bank Fin	ancial Inc							
Fi	rm NRD number	1	9 6	0			(if	applica	ble)		
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 pro	vided in Item 8 (a), ¡	provide the	business c	ontact info	mation of	f the per	rson being	compe	nsated.		
Street address											
Municipality						Pro	vince/Sta	ate			
Country				]	Pos	stal cod	de/Zip co	de			
Email address					T	elepho	one numb	oer [			
c) Relationship to issuer or investment fund manager											
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.  Connect with the issuer or investment fund manager  Insider of the issuer (other than an investment fund)  Director or officer of the investment fund or investment fund manager  Employee of the issuer or investment fund manager											
None of the above											
d) Compensation details											
Provide details of all compensati Canadian dollars. Include cash co incidental to the distribution, suc allocation arrangements with the	ommissions, securiti h as clerical, printin e directors, officers o	es-based co g, legal or a r employee	mpensatio accounting	on, gifts, dis services. A	counts or n issuer is	other co	ompensati Juired to a	ion. Do i	not report payr	ments for se	ervices
Cash commissions pa	Id	6.31				Se	ecurity code	1 S	ecurity code 2	Security co	ode 3
Value of all securities distributed as compensation			;	Security co	des						
Describe to	erms of warrants, op	otions or oth	her rights								
Other compensation	<sub>1</sub> 5		Describe								
Total compensation pai	d	6.31									
✓ Check box if the per	Check box if the person will or may receive any deferred compensation (describe the terms below)										
National Bank Fina Non-Voting Share: Non-Voting Share:	s, 1% on Class B										ed
<sup>4</sup> Provide the aggregate value o additional securities of the issu- rights exercisable to acquire ad <sup>5</sup> Do not include deferred compe	er. Indicate the secu Iditional securities d	urity codes	for all sec								ər

TEM 9 - DIRECTORS, EXECU				UER					
If the issuer is an investment fun	d, do not complete l	Item 9. Procced to	Item 10.						
Indicate whether the issuer is any o	f the following (select	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	f a reporting issuer in	n any jurisdiction of	Canada <sup>6</sup>						
Provide nar	me of reporting issue	r							
Wholly owned subsidiary of	f a foreign public issu	uer <sup>6</sup>							
Provide name o	f foreign public issue	r							
Issuer distributing only eligi	ble foreign securities	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 comp	olete Item 9(a) – (d	c). Proceed to Item	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".	<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, respectively. <sup>7</sup> 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	ial or ail n of		onship to et all that		
				Province or o	country	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		itionship			

# 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	Antrim Balanced Mortgage Fund Ltd.									
Full legal name	Granleese	William		R.						
	Family name	First given name	•	Seconda	ary given names					
Title	Portfolio Manager									
Telephone number	6045302301	Email address	will@a	ıntriminvestı	ments.com					
Signature	"William Granleese"	Date	202	1 02	05					
		-	YYYY	/ MM	DD					

ITEM 11- CONTACT F	PERSON				
	ness contact information for this report, if different than t		3 ,	regulator m	ay 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	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.