Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 9063095

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 CERTIFY	YING THE	REPOR	Γ									
Indicate the party certifying the Instrument 81-106 Investment		-	-		-	-			restment fund	l, refer to	sectio	n 1.1 of National
Investment fund i					,	, ,						
✓ Issuer (other than	n an inves	tment fui	nd)									
Underwriter			,									
ITEM 3 - ISSUER NAME												
Provide the following informat		-	-					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.antriminvestments.com (if applicable)												
If the issuer has a legal entity i	dentifier <u>,</u> prc	vide below	. Refer t	to Part B of	the li	nstructi	ons for t	the definition of	of "legal enti	ty identifi	ier".	
Legal entity	identifier											
If two or more issuers distribute	ed a single s	ecurity, pro	vide the	full legal	name	(s) of th	e co-issı	uer(s) other th	an the issuer	named a	ibove.	
Full legal name(s) of co	-issuer(s)							(if applicable	e)			
ITEM 4 - UNDERWRITER	INFORM	IATION										
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	Firm NRD number (if applicable)											
If the underwriter does not hav	If the underwriter does not have a firm NRD number, provide the head office contact information of the underwriter.											
Street address												
Municipality					1		Prov	vince/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 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
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 Ves 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. All AB BC MB NL NT
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

ib close is an investment fund, provide the following information: iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii
Full legal name
Firm 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 Country Postal code/Zjp code Telephone number Website (if applicable) D Type of investment fund Type of investment fund fund that most accurately identifies the issuer (select only one). Money market Country Postal code/Zjp code Indicate whether one or both of the following apply to the investment fund. Invests primarily in other investment fund issuers Country Indicate whether one or both of the following apply to the investment fund. Invests primarily in other investment fund issuers Indicate whether one or both of the following apply to the investment fund. Invests primarily in other investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) directives that allow collective investment fund Date of formation and financial year-end of the investment fund YYYY MM DD MM DD
Street address Municipality Province/State Country Postal code/Zip code Telephone number Website (if applicable) b Type of investment fund b Type of investment fund b Type 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. Invests primarily in other investment fund issuers Is a UCITs Fund b Type of formation and financial year-end of the investment funds is on authorization from one member state. c Date of formation and financial year-end of the investment fund is a reporting issuer. c All All All All All All All All All Al
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If the investment fund has a CUSIP number, provide below (first 6 digits only) CUSIP number
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
Select the NAV range of the 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 \$500M \$500M to under \$1B \$1B or over Date of NAV calculation:

ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION

purchas connect	ers tion	resident in that	jurisdi	ction of Canad	a only. Do	o not include	sdiction of Canada, incl in Item 7 securities issue e information provided i	ed as payr	ment of	commi	issions or f	inder's fees in		
a) C	urr	ency												
Select th	he c	urrency or curre	ncies i	n which the dis	tribution	was made. A	ll dollar amounts provia	led in the	report n	nust be	in Canad	ian dollars.		
🖌 Car	nad	lian dollar		US dollar] Euro	Other (describ	e)						
b) D	listr	ibution date(s)											
State th as both	ne di the	istribution start	and en ates. If	f the report is b			securities distributed or distributed on a contin							
01311100		-	art da		03	12	End da	te 202	20	03	19			
				<u> </u>	 	DD				MM				
c) D	eta	iled nurchase	r infor											
-	 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													
								Daut 4/12		1	-+: (
							r security basis. Refer to CUSIP number assigned					iow to indicate the		
	security code. If providing the CUSIP number, indicate the full 9-digit CUSIP number assigned to the security being distributed. Canadian \$													
								Sing	le or	1	Canadian			
Securit code		CUSIP number (if applicable)	Description of security Number of securities Single or lowest price Highest price Total amount Class A Preferred Non-Voting 163,661.00 1.0000 163,661.00											
PR	s		Clas Sha		ed Non	-Voting	163,661.0	0 1	0000.1			163,661.00		
PR	s			ss B Series	B Series 'B' Preferred Non- g Shares 0 1.0000 0									
PR	s			ss B Series ng Shares	'C' Pref	erred Non	- 1,479,763.0	0 1	0000.1			1,479,763.00		
e) D	eta	ils of rights ar	nd cor	nvertible/excl	nangeab	le securities	3							
							ise price and expiry date erms for each convertib					exchangeable securities		
Conve exchan securit	geal	ble Underlyir		(Ca	cise price nadian \$)		Expiry date (YYYY- MM-DD)	Conversio ratio	on	Des	cribe other	items (if applicable)		
				Lowest	Hi	ghest								
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 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			Exe	emption relied	on	Number purc	of unique hasers	2 ²	Total a	mount (Canadian \$)		
В	Britis	sh Columbia		NI 45-106	2.3 [Acc	credited in	vestor]			8		662,763.00		
В	Briti	sh Columbia		NI 45-106 : NL)	2.9(1) [0	Offering m	emorandum] (BC,			12		563,564.00		
		Ontario		, NI 45-106	2.3 [Acc	credited in	vestor]			4		947,000.00		
		Ontario		NI 45-106 (AB, SK, C	2.9(2.1) N, QC,	[Offering NB, NS)	memorandum]			10		145,300.00		

Québec	NI 45-106 2.3 [Accredited investor]	1	10,000.00
	Total dollar amount of se	curities distributed	2,328,627.00
	Total number of unique purchasers ^{2b}	35	

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

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

g) Net proceeds to the investment fund by jurisdiction

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

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

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

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

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

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

Description	Date of document or other material (YYYY-MM-DD)	Previously filed with or delivered to regulator? (Y/N)	Date previously filed or delivered (YYYY-MM-DD)
1. Offering Memorandum	2019-10-24	Y	2019-11-01

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

a) Name of person compo	ensated and regis	stration	status											
Indicate whether the person con	npensated is a regist	rant.			🗌 No		\checkmark	Yes						
If the person compensated is an	individual, provide	the name	e of the i	individ	lual.									
Full legal name of indivi	dual													
		Family na	ame			First	t given n	ame		Seco	ondary g	given nan	nes	
If the person compensated is not	t an individual, prov	ide the f	ollowing	inforn	mation.									
Full legal name	of non-individual	Indust	rielle Al	lliance	e Valeurs	s Mobil	liers In	С.						
Fi	rm NRD number	1	5	4	0	0			(if app	licable)				
Indicate whether the person con	npensated facilitated	l the dist	ribution	throug	gh a fundi	ng port	al or an	interne	et-based p	oortal.	\checkmark] No		Yes
b) Business contact inform	mation													
If a firm NRD number is not pro	vided in Item 8 (a), J	orovide t	he busin	ess co	ntact infor	mation	of the p	person l	being con	npensated.				
Street address														
Municipality							Р	rovince	e/State					
Country						Ρ	ostal c	ode/Zi	p code					
Email address							Telep	hone r	number					
c) Relationship to issuer of	or investment fun	d mana	ger											
Indicate the person's relationshi the Instructions and the meanin										ning of "co	onnecte	d″ in Pc	art B(2) of
Connect with the issue	-			100 10				-		ner than an	invest	ment fu	nd)	
				nd ma	nogor								,	
Director or officer of the		JIIIVest	mentiu	nu ma	nager		Епрюу		le issuei	or investm		umana	gei	
✓ 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	es-basea g, legal d	l comper or accou	nsatior nting s	n, gifts, dis services. Al	counts n issuer	or other ⁻ is not r	· compe equired	nsation. I to ask fo	Do not repo	ort payr	nents fo	or serv	ices
Cash commissions pai		13.91					_							-
							-	Security	code 1	Security c	ode 2	Securit	y code	: 3
Value of all securitie distributed as compensatior	-			S	ecurity co	des								
Describe te	erms of warrants, or	otions or	other rig	ghts										
Other compensation	15		Desc	ribe										
Total compensation pai	id	13.91												
✓ Check box if the per	son will or may rec	eive any	deferre	d com	pensation	(descr	ibe the	terms b	elow)					
Industrielle Allianc Preferred Non-Vot Preferred Non-Vot	ing Shares, 1% o													
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 d	urity cod	les for al											

a) Name of person comp	pensated and regis	stration	status												
Indicate whether the person co	mpensated is a regist	rant.			No		\checkmark	Yes							
If the person compensated is ar	n individual, provide	the nam	e of the i	individ	lual.										
Full legal name of indiv	vidual														
		Family n	ame			First	t given n	ame			Sec	condary	given na	ames	
If the person compensated is no	ot an individual, prov	ide the f	following	inforr	mation.										
Full legal name	of non-individual	Raym	ond Jar	nes L	.td.										
F	irm NRD number	8	2	4	0				(if a	applic	able)				
Indicate whether the person co	mpensated facilitated	l the dis	tribution	throu	gh a fundi	ng port	al or ar	n intern	et-base	ed po	rtal.] No	\checkmark] Yes
b) Business contact info	rmation														
If a firm NRD number is not pro	ovided in Item 8 (a), p	orovide t	the busin	ess co	ntact info	mation	of the	person	being	сотр	ensated				
Street address														-	
Municipality							P	rovino	e/Sta	te					
Country						Р	ostal o	code/Z	ip coc	de					
Email address							Telep	hone	numb	er					
c) Relationship to issuer	or investment fun	d mana	ager								<u> </u>]
Indicate the person's relationsh the Instructions and the meaning the transmission of the meaning the											ing of "o	connect	гd″ in I	Part B	8(2) of
Connect with the issu	ier or investment fur	id mana	ger				Insider	of the	ssuer	(othe	r than a	n inves	tment f	fund)	
Director or officer of t	he investment fund	or inves	tment fur	nd ma	nager		Employ	vee of t	he issi	Jer or	r investn	nent fur	nd mar	ager	
✓ None of the above							,							9	
d) Compensation details															
Provide details of all compensat Canadian dollars. Include cash incidental to the distribution, su allocation arrangements with th	tion paid, or to be pa commissions, securiti ch as clerical, printin	es-baseo g, legal	d comper or accoui	nsatior nting s	n, gifts, dis services. A	counts o n issuer	or othe is not i	r comp require	ensatio d to asi	on. Do	o not rep	ort pay	ments	for se	rvices
Cash commissions pa	aid	23.98						Securit	y code [.]	1	Security	code 2	Secu	rity co	de 3
Value of all securitie distributed as compensatic				S	Security co	des									
•	terms of warrants, or	otions or	r other rig	ghts											
Other compensatio			Desc												
Total compensation pa		23.98													
✓ Check box if the period	erson will or may rec		/ deferred	d com	pensation	(descr	ibe the	terms	below)						
Raymond James Voting Shares, 19 Voting Shares.															-
⁴ Provide the aggregate value of additional securities of the issu- rights exercisable to acquire a ⁵ Do not include deferred comp	uer. Indicate the sec dditional securities d	urity cod	ies for al												er

a) Name of person comp	pensated and regis	stration	status													
Indicate whether the person co	mpensated is a regist	rant.			No		\checkmark	Yes								
If the person compensated is a	n individual, provide	the nam	e of the	individ	ual.											
Full legal name of indiv	/idual															
		Family na	ame			First	t given r	name				Sec	ondary	given na	ames	
If the person compensated is no	ot an individual, prov	ide the f	following	ı inforn	nation.											
Full legal name	of non-individual	Genes	sis Wea	alth Ma	anageme	ent Co	rporati	ion								
F	irm NRD number	6	4	5	7	0			((if app	olicab	le)				
Indicate whether the person co	mpensated facilitated	the dist	tribution	throug	ih a fundi	ng port	tal or ai	n interr	net-b	oased	porta	l.	\checkmark] No] Yes
b) Business contact info	rmation															
If a firm NRD number is not pr	ovided in Item 8 (a), µ	orovide t	the busin	ness cor	ntact info	mation	n of the	person	beir	ng coi	mpen	sated.				
Street address																
Municipality							F	Provino	ce/S	State						
Country						P	ostal	code/Z	Zip c	code						
Email address							Telep	ohone	nur	nber						
c) Relationship to issuer	or investment fun	d mana	ager													
Indicate the person's relationsh the Instructions and the meani												of "co	onnect	ed" in F	Part E	3(2) of
Connect with the issu	-						Insider	-				nan ar	inves	ment f	und)	
Director or officer of t	be investment fund	or invest	tmont fu	nd mar	ager		Employ	vee of t	tha i	eeuor	orin	vostm	ont fur	d man	agar	
\checkmark None of the above				nu mai	lagei			yee of t		33001	01111	vesun	entiu	uman	ayei	
d) Compensation details		id to the		idantifi	ad in Itan			ation	uith.	the di	istribu	tion 1	Drawida	all and		a in
Provide details of all compensation Canadian dollars. Include cash incidental to the distribution, su	commissions, securiti ch as clerical, printin	es-based g, legal (d compei or accou	nsation nting s	, gifts, dis ervices. A	counts n issuer	or othe r is not	er comp require	enso ed to	ation. ask f	Do no	ot repo	ort pay	ments (for se	ervices
allocation arrangements with th			yees of a	i non-ù	ndividual	comper	nsated	by the i	issue	er.						
Cash commissions pa		36.99						Securit	ty co	de 1	Sec	curity c	ode 2	Secu	rity co	ode 3
Value of all securiti distributed as compensatio				S	ecurity co	des										
	terms of warrants, or	otions or	r other ri	ghts												
Other compensatio	n ⁵		Desc	ribe												
Total compensation pa	aid :	36.99		l												
Check box if the pe	erson will or may rec	eive any	/ deferre	d com	pensation	(descr	ibe the	terms	belc	ow)						
	Management Corp I Non-Voting Shar -Voting															eries
⁴ Provide the aggregate value additional securities of the iss rights exercisable to acquire a ⁵ Do not include deferred comp	uer. Indicate the seco additional securities of	urity coa	les for al													er

a) Name of person comp	pensated and regis	stration	status											
Indicate whether the person co	mpensated is a regist	rant.			No		\checkmark	Yes						
If the person compensated is a	If the person compensated is an individual, provide the name of the individual.													
Full legal name of individual														
	Family name First given name Secondary given names													
If the person compensated is not an individual, provide the following information.														
Full legal name	Full legal name of non-individual National Bank Financial Inc.													
F	irm NRD number	1	9	6	0				(if ap	plicable)				
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. No 🗸 Yes														
b) Business contact info	b) Business contact information													
If a firm NRD number is not pro	ovided in Item 8 (a), p	orovide t	the busine	ess coi	ntact infor	mation	of the	person	being co	mpensat	ed.			
Street address														
Municipality							P	rovinc	e/State					
Country						Р	ostal o	code/Z	p code	· [
Email address							Telep	hone i	numbei	,				
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.														
			-											
Director or officer of t	he investment fund	or invest	tment fun	id mai	nager		Employ	vee of th	ne issue	r or inve	stment fu	nd mar	nager	
✓ None of the above														
d) Compensation details														
Provide details of all compensat Canadian dollars. Include cash incidental to the distribution, su allocation arrangements with th	commissions, securiti ch as clerical, printin	es-based g, legal (d compen or accour	sation nting s	n, gifts, dis services. Al	counts o n issuer	or othe is not i	r compe required	ensation. I to ask j	Do not	eport pa	yments	for se	ervices
Cash commissions pa	aid	7.12						Security	code 1	Secur	ty code 2	Secu	urity co	ode 3
Value of all securition distributed as compensation				S	ecurity co	des								
	terms of warrants, or	otions or	r other rig	hts										
Other compensatio	n ⁵		Descr	ribe										
Total compensation pa	aid	7.12		l										
✓ Check box if the pe	Check box if the person will or may receive any deferred compensation (describe the terms below)													
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.														
⁴ Provide the aggregate value of all securities distributed as compensation, <u>excluding</u> options, warrants or other rights exercisable to acquire additional securities of the issuer. Indicate the security codes for all securities distributed as compensation, <u>including</u> options, warrants or other rights exercisable to acquire additional securities of the issuer. ⁵ Do not include deferred compensation.														

a) Name of person compe	nsated and regis	tration s	status									
Indicate whether the person com	pensated is a registr	ant.		🗌 No		\checkmark	Yes					
If the person compensated is an i	ndividual, provide ti	he name	of the indiv	ridual.								
Full legal name of individ	lual											
Family name First given name Secondary given names												
If the person compensated is not an individual, provide the following information.												
Full legal name o	Full legal name of non-individual Markham Centre Financial Securities Inc.											
Fin	m NRD number	6	1 0	3	0			(if appli	cable)			
Indicate whether the person com	pensated facilitated	the distr	ibution thro	ugh a fund	ing port	al or an	internet	t-based po	ortal.	✓ N	с 🗌	Yes
b) Business contact inform	nation											
If a firm NRD number is not prov	ided in Item 8 (a), p	rovide th	e business o	contact info	rmation	of the p	erson b	eing com	pensated.			
Street address	Street address											
Municipality						Pr	rovince	/State				
Country				1	Ρ	ostal co	ode/Zip	o code				
Email address						Telepł	hone n	umber				
c) Relationship to issuer o	r investment fund	l 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 "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.												
Connect with the issue	r or investment fund	d manag	er			Insider c	of the iss	suer (othe	er than an	investmen	: fund)	
Director or officer of the	e investment fund o	r investn	nent fund m	nanager		Employe	ee of the	e issuer o	r investme	ent fund ma	nager	
✓ None of the above												
d) Compensation details												
Provide details of all compensatio Canadian dollars. Include cash co incidental to the distribution, such allocation arrangements with the	mmissions, securitie as clerical, printing	s-based 1, legal oi	compensati r accounting	on, gifts, dis 7 services. A	counts o n issuer	or other • is not re	comper equired	nsation. D to ask for	o not repo	rt payment	s for serv	vices
Cash commissions paid	ŀ	3.84				5	Security	code 1	Security co	ode 2 Sec	urity cod	e 3
Value of all securities				Security co	ndes							
distributed as compensation	4				1000							
Describe ter	rms of warrants, op	tions or o	other rights									
Other compensation ⁵	;		Describe									
Total compensation paid	ł	3.84										
✓ Check box if the person will or may receive any deferred compensation (describe the terms below)												
Markham Centre Financial Securities Inc. will receive an annual trailer fee paid monthly in the amount of 1/2% on Class A Preferred Non-Voting Shares, 1% on Class B Series 'B' Preferred Non-Voting Shares and 0% on Class B Series 'C' Preferred Non-Voting												
⁴ Provide the aggregate value of additional securities of the issue rights exercisable to acquire add ⁵ Do not include deferred competencies.	r. Indicate the secu ditional securities of	rity code	es for all sec									-

a) Name of person compensat	ed and registrati	on status												
Indicate whether the person compense	nted is a registrant.			No		\checkmark	Yes							
If the person compensated is an indivi	dual, provide the n	ame of the	individ	lual.										
Full legal name of individual														
	Family name First given name Secondary given names													
If the person compensated is not an individual, provide the following information.														
Full legal name of non-individual Aligned Capital Partners Inc.														
Firm NI	RD number 2	3	4	0				(if ap	pplica	able)				
Indicate whether the person compense	nted facilitated the	distribution	n throug	gh a fundi	ng port	al or ar	n intern	et-base	d por	tal.] No	\checkmark	Yes
b) Business contact informatio	n													
If a firm NRD number is not provided	in Item 8 (a), provid	le the busir	ness col	ntact infor	rmation	of the	person	being c	ompe	ensated.				
Street address														
Municipality						P	rovinc	e/State	e					
Country					Р	ostal c	code/Z	ip code	e					
Email address						Telep	hone	numbe	er [
c) Relationship to issuer or inv	estment fund ma	nager							L					J
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "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 ir			,	, ,		-	-			than ar	n invest	tment f	und)	
Director or officer of the inve	estment fund or inv	estment fu	ind mai	nager		Emplov	vee of th	ne issue	er or	investm	ent fun	ıd man	ader	
✓ None of the above						1 - 5								
d) Compensation details														
Provide details of all compensation pail	id, or to be paid, to	the person	identif	ied in Iten	n 8(a) in	n conne	ction w	ith the o	distril	bution. I	Provide	all am	ounts	; in
Canadian dollars. Include cash commis	sions, securities-ba	sed compe	nsatior	n, gifts, dis	counts o	or othe	r compe	ensatior	n. Do	not rep	ort payl	ments (for sei	rvices
incidental to the distribution, such as c allocation arrangements with the direc									for a	etalis a	bout, oi	report	: on, u	nternal
Cash commissions paid	0.5	5					Security	/ code 1		Security of	ode 2	Secu	rity co	de 3
Value of all securities]	0				Cecurity						ity col	
distributed as compensation ⁴			5	ecurity co	des									
Describe terms of	of warrants, options	or other r	ights											
Other compensation ⁵		Dese	cribe											
Total compensation paid	0.5	5												
Check box if the person w	✓ Check box if the person will or may receive any deferred compensation (describe the terms below)													
Aligned Capital Partners 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.														
⁴ Provide the aggregate value of all securities distributed as compensation, <u>excluding</u> options, warrants or other rights exercisable to acquire additional securities of the issuer. Indicate the security codes for all securities distributed as compensation, <u>including</u> options, warrants or other rights exercisable to acquire additional securities of the issuer. ⁵ Do not include deferred compensation.														

a) Name of person compe	nsated and regis	stration	status													
Indicate whether the person com	pensated is a regist	rant.			🗌 No		\checkmark	Yes								
If the person compensated is an i	ndividual, provide i	the nam	e of the i	ndivid	lual.											
Full legal name of individ	lual															
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 Fidelity Clearing Canada ULC																
Fin	m NRD number	2	8	8	8	0				(if app	licable	e)				
Indicate whether the person com	pensated facilitated	l the dist	tribution	throug	gh a fundi.	ng porte	al or ar	n inter	net-L	based _j	portal.] No	\checkmark] 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	npenso	ited.				
Street address																
Municipality							P	Provin	ce/S	State						
Country						P	ostal o	code/2	Zip d	code						
Email address							Telep	phone	nur	mber						
c) Relationship to issuer o	r investment fun	d mana	iger]
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.																
Connect with the issue	r or investment fun	d mana	ger				Insider	of the	issu	ier (otl	ner tha	an an	invest	ment f	und)	
Director or officer of the	e investment fund o	or invest	tment fur	nd ma	nager		Employ	ee of	the i	ssuer	or inve	estm	ent fun	d man	ager	
✓ None of the above																
d) Compensation details																
Provide details of all compensatio Canadian dollars. Include cash co incidental to the distribution, such allocation arrangements with the	mmissions, securiti as clerical, printin	es-based g, legal (d compen or accour	nsatior nting s	n, gifts, dis services. Ai	counts o n issuer	or othe is not i	r comp require	oenso ed to	ation. ask fo	Do not	repc	ort payı	nents (for se	rvices
Cash commissions paid	1	5.89						Secur	itv co	de 1	Secu	iritv c	ode 2	Secu	rity co	de 3
Value of all securities				6	ecurity co	doo	- F		.,						,	
distributed as compensation	4			3		ues										
Describe ter	ms of warrants, op	otions or	other rig	ghts												
Other compensation ⁵			Desc	ribe												
Total compensation paid		5.89														
✓ Check box if the pers	✓ Check box if the person will or may receive any deferred compensation (describe the terms below)															
Fidelity Clearing Canada ULC will receive an annual trailer fee paid monthly in the amount of 1/2% on Class A Preferred Non-Voting Shares, 1% on Class B Series 'B' Preferred Non-Voting Shares and 0% on Class B Series 'C' Preferred Non-Voting Shares.																
⁴ Provide the aggregate value of additional securities of the issue rights exercisable to acquire add ⁵ Do not include deferred compen	r. Indicate the secu ditional securities c	urity coa	les for all													er

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	Item 10.									
Indicate whether the issuer is any of the following (select the one that applies - if more than one applies, select only one).												
Reporting issuer in any jurisdiction of Canada												
Foreign public issuer												
Wholly owned subsidiary of	a reporting issuer in	n any jurisdiction of	Canada ⁶									
Provide nar	ne of reporting issue	er 🗌]				
Wholly owned subsidiary of	Wholly owned subsidiary of a foreign public issuer ⁶											
Provide name of foreign public issuer												
Issuer distributing only eligi	ble foreign securities	s and the distributio	n is to permitted clier	nts only ⁷								
If the issuer is at least one of the	above, do not com	plete Item 9(a) – (d	c). Proceed to Item 1	0.								
securities that are required by law to respectively. ⁷ Check this box if it applies to the cu clients. Refer to the definitions of "e	⁶ An issuer is a wholly owned subsidiary of a reporting issuer or a foreign public issuer if all of the issuer's outstanding voting securities, other than securities that are required by law to be owned by its directors, are beneficially owned by the reporting issuer or the foreign public issuer, respectively. ⁷ Check this box if it applies to the current distribution even if the issuer made previous distributions of other types of securities to non-permitted clients. Refer to the definitions of "eligible foreign security" and "permitted client" in Part B(1) of the Instructions.											
a) Directors, executive officer	s and promoters	of the issuer										
 a) Directors, executive officers and promoters of the issuer Provide the following information for each director, executive officer and promoter of the issuer. For locations within Canada, state the province or territory; otherwise state the country. For "Relationship to issuer", "D" – Director, "O" – Executive Officer, "P" – Promoter. 												
Organization or company name	Family name First given nam		Secondary given names	Business loc non-individe resident jurisdictio individu	ual or ail n of		issuer apply)					
				Province or	D	0	Р					
	Granleese	William		British Columb	а	✓	~					
	Granleese	William	R.	British Columb	a	~						
	Worsnup	Christopher	Gavin	British Columb	a	✓						
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	Rela (select c	itionship one or bo	to promo oth if app	oter licable)				
				Province or country	D		C)				
c) Residential address of eac												
Complete Schedule 2 of this form completed report. Schedule 2 also					(a) and (b)) and at	tach to t	he				

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 Fu	Intrim Balanced Mortgage Fund Ltd.										
Full legal name	Granleese	R	R.									
	Family name		Secondary given names									
Title	Portfolio Manager											
Telephone number	6045302301	Email address	will@an	om								
Signature	"William Granleese"	2020	03	20								
			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	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.