Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 9151347

ITEM 1 - REPORT TYPE											
✓ New report											
Amended report	If amer	ided, pro	vide f	iling dat	e of	report	that is	being ame	ended		(YYYY-MM-DD)
ITEM 2 - PARTY CERTIF	YING THE	REPOR	Γ								
Indicate the party certifying the Instrument 81-106 Investment									restment fund	d, refer to sect	ion 1.1 of National
Investment fund issuer											
✓ Issuer (other than an investment fund)											
Underwriter			,								
ITEM 3 - ISSUER NAME											
Provide the following informat								ut the fund.			
Full le	Full legal name Antrim Balanced Mortgage Fund Ltd.										
Previous full legal name											
If the issuer's name ch	anged in the	last 12 mc	onths, pi	rovide mo	st rece	ent previ	ous lega	al name.			
	Website	www.ar	trimin	ivestme	nts.c	om		(if applicabl	e)		
If the issuer has a legal entity i	dentifier, pro	vide below	. Refer t	to Part B c	of the l	Instructi	ons for t	the definition	of "legal enti	ity identifier".	
Legal entity	identifier										
If two or more issuers distribute	ed a single s	curity, pro	vide the	e full legal	name	e(s) of th	e co-issi	uer(s) other th	an the issuer	r named abov	2.
Full legal name(s) of co	o-issuer(s)							(if applicabl	e)		
ITEM 4 - UNDERWRITEF	R INFORM	IATION									
If an underwriter is completing	the report, p	provide the	underw	riter's full	legal	name a	nd firm	NRD number.			
Full legal name											
Firm NRD number							(if app	plicable)			
If the underwriter does not hav	e a firm NRL	D number, p	orovide	the head	office	contact	informa	ition of the un	derwriter.		
Street address]
Municipality							Prov	/ince/State			
Country						Pos	tal cod	e/Zip code			
Telephone number								Website			(if applicable)

ITEM 5 - ISSUER INFORMATION
If the issuer is an investment fund, do not complete Item 5. Proceed to Item 6.
a) Primary industry
Provide the issuer's North American Industry Classification Standard (NAICS) code (6 digits only) that in your reasonable judgment most closely corresponds to the issuer's primary business activity.
NAICS industry code 5 2 2 2 9 9
If the issuer is in the mining industry , indicate the stage of operations. This does not apply to issuers that provide services to issuers operating in the mining industry. Select the category that best describes the issuer's stage of operations.
Is the issuer's primary business to invest all or substantially all of its assets in any of the following? If yes, select all that apply.
🖌 Mortgages 🗌 Real estate 🔄 Commercial/business debt 📄 Consumer debt 📄 Private companies
Cryptoassets
b) Number of employees
Number of employees: 🔽 0 - 49 🗌 50 - 99 🗌 100 - 499 🗌 500 or more
c) SEDAR profile number
Does the issuer have a SEDAR profile?
No ✓ Yes If yes, provide SEDAR profile number 0 0 0 3 8 5 6 8
If the issuer does not have SEDAR profile complete item 5(d) - (h).
d) Head office address
Street address Province/State
Municipality Postal code/Zip code
Country Telephone number
e) Date of formation and financial year-end
Date of formation Financial year-end YYYY MM DD
f) Reporting issuer status
Is the issuer a reporting issuer in any jurisdication of Canada? No Yes
If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer.
AII AB BC MB NB NL NT
NS NU ON PE QC SK YT
g) Public listing status
If the issuer has a CUSIP number, provide below (first 6 digits only)
CUSIP number
If the issuer is publicly listed, provide the name of the exchange on which the issuer's equity securities primarily trade. Provide only the name of an exchange and not a trading facility such as, for example, an automated trading system.
Exchange name
h) Size of issuer's assets
Select the size of the issuer's assets based on its most recently available annual financial statements (Canadian \$). If the issuer has not prepared annual financial statements for its first financial year, provide the size of the issuer's assets at the distribution end date.

\$0 to under \$5M	\$5M to under \$25M	□ \$25M to under \$100M
S100M to under \$500M	S500M to under \$1B	\$1B 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 in other investment fund issuers Is a UCIT's Fund's) are investment fund issuers Is a UCIT's Fund's) are investment fund is regulated by the European Union Contractives that allow collective investment of tansfieable Securities funds (UCIT's Funds) are investment fund is regulated by the European Union Context in a manager in any indication of Canada? No
Full legal name
Firm NRD number (if applicable) If the investment fund manager does not have a firm NRD number, provide the head office contact information of the investment fund manager. Street address Municipality Province/State
If the investment fund manager does not have a firm NRD number, provide the head office contact information of the investment fund manager. Street address Municipality County Postal code/Zip code County Telephone number Postal code/Zip code Do Type of investment fund Type of investment fund Type of investment fund that most accurately identifies the issuer (select only one). Do Type of investment fund that most accurately identifies the issuer (select only one). Do Money market De Quity De County De C
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CUSIP number
name of an exchange and not a trading facility such as, for example, an automated trading system
Exchange name
f) Net asset value (NAV) of the investment fund
Select the NAV range of the investment fund as of the date of the most recent NAV calculation (Canadian \$).
L L \$\the under \$\mathbf{S}M \qquad L \qquad \mathbf{S}M \text{ to under \$\mathbf{S}M \qquad to
\$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

purchasers connection	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.											
	rency											
Select the o	currency or curre	ncies ii	n which the dis	tribution v	was made. All	dollar amounts provi	ded i	in the report	must b	e in Canadi	an dollars.	
🖌 Canad	✓ Canadian dollar US dollar Euro Other (describe)											
b) Dist	b) Distribution date(s)											
as both the	State the distribution start and end dates. If the report is being filed for securities distributed on only one distribution date, provide the distribution date as both the start and end dates. If the report is being filed for securities distributed on a continuous basis, include the start and end dates for the distribution period covered by the report. Start date 2020 06 04 End date 2020 06 11 XXXX MM DD XXXX MX MX M											
			YYYY	MM	DD			YYYY	MM	DD		
	ailed purchase											
-				ch purci	naser and a	ttach the schedul	e to	the comple	eted re	eport.		
	es of securities						_				·	
						security basis. Refer to ISIP number assigned					ow to indicate the	
	security code. If providing the CUSIP number, indicate the full 9-digit CUSIP number assigned to the security being distributed.											
Security	CUSIP number	JSIP number of Single or Listeratories Tetalement										
code	(if applicable)		Descriptio	on of secur	ity	securities		lowest price		hest price	Total amount	
P R S		Clas Shai	s A Preferre res	ed Non-	Voting	725,000.0	00	1.000	C	725,000		
P R S			s B Series ng Shares	'B' Prefe	erred Non-	324,850.0	00	1.000	C		324,850.00	
P R S	SClass B Series 'C' Preferred Non- Voting Shares.2,009,642.001.00002,009,642.00								2,009,642.00			
e) Deta	ails of rights an	d con	vertible/exch	nangeabl	e securities							
						e price and expiry dat rms for each converti					exchangeable securities	
Convertibl exchangea security co	able Underlyin			rcise price nadian \$) Hid	ghest	Expiry date (YYYY- MM-DD)	Co	onversion ratio	De	scribe other i	items (if applicable)	
			2011001	1.115								
f) Sum	mary of the dis	stribut	ion by jurisdi	ction and	d exemption			I				
 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			Exe	emption relied of	n	Nu	umber of uniqu purchasers	le ^{2ª}	Total a	mount (Canadian \$)	
Briti	ish Columbia		NI 45-106 2	2.3 [Acc	redited inv	estor]			9		1,662,004.00	
	ish Columbia		NI 45-106 2 NL)	2.9(1) [C	Offering me	morandum] (BC	,		17		1,124,288.00	
	Ontario		NI 45-106 2	2.3 [Acc	redited inv	estor]			3		241,000.00	
	Ontario		NI 45-106 2 (AB, SK, O			nemorandum]			1		20,000.00	
									1			

Québec	NI 45-106 2.3 [Accredited investor]	1	12,200.00
	Total dollar amount of se	curities distributed	3,059,492.00
	Total number of unique purchasers ^{2b}	31	

^{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

ITEM 8 -	COMPENSATION INFORMATION	
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	n (as defined in NI 45-106) to whom the issuer directly provides, onal copies of this page if more than one person was, or wil	
Indicate whether any compensation	on was paid, or will be paid, in connection with the distribution.	
🗌 No 🗹 Yes	If yes, indicate number of persons compensated.	4

a) Name of person comper	nsated and regis	tration	status													
Indicate whether the person comp	ensated is a regist	rant.		I	🗌 No		\checkmark	Yes								
If the person compensated is an ir	ndividual, provide t	he nam	e of the ir	ndivid	ual.											
Full legal name of individ	ual															
		Family na	ame			First	given n	ame				Seco	ondary (given na	ames	
If the person compensated is not a	an individual, prov	de the f	following	inforn	nation.											
Full legal name of	f non-individual	Natior	nal Bank	Fina	ncial Inc	•										
Firm	n NRD number	5	0	9	4	0			(it	f appl	licable	e)				
Indicate whether the person comp	ensated facilitatea	the dist	tribution t	throug	gh a fundi.	ng port	al or ar	n intern	et-bo	ased p	oortal.] No	\checkmark] Yes
b) Business contact inform	ation															
If a firm NRD number is not provi	ded in Item 8 (a), p	orovide t	the busine	ess cor	ntact infor	mation	of the	person	bein	g con	npenso	ited.				
Street address																
Municipality							P	Provinc	e/St	tate						
Country						Р	ostal o	code/Z	ip co	ode						
Email address							Telep	hone	num	ber						
c) Relationship to issuer or	r investment fund	d mana	iger]												
Indicate the person's relationship											aning	of "co	onnecte	ed″ in I	Part E	B(2) of
the Instructions and the meaning Connect with the issuer				106 10	r trie purp		-	of the i			or the		invoct	mont	fund)	
			-													
Director or officer of the	investment fund o	or invest	tment fun	d mar	nager		Employ	/ee of t	he is	suer	or inv	estm	ent fun	d man	ager	
None of the above																
d) Compensation details																
Provide details of all compensation Canadian dollars. Include cash cor incidental to the distribution, such allocation arrangements with the	nmissions, securitio as clerical, printing	es-based g, legal (d compen or accoun	sation nting s	n, gifts, dis ervices. Ai	counts o n issuer	or othe is not i	r compo required	ensat d to d	tion. L ask fo	Do noi	repo	ort payı	ments	for se	ervices
Cash commissions paid		8.63						Securit	v cod		Soci	urity o	ode 2	Soci	rity co	do 3
Value of all securities				•	.,			Security	y cou		0600			Jecu		
distributed as compensation ⁴				S	ecurity co	des	L									
Describe ter	ms of warrants, op	tions or	other rig	hts												
Other compensation ⁵			Descr	ibe												
Total compensation paid		8.63														
Check box if the perse	on will or may rece	eive any	deferred	l com	pensation	(descr	ibe the	terms	belov	w)						
National Bank Finar Non-Voting Shares, Non-Voting Shares.	1% on Class B															ed
⁴ Provide the aggregate value of a additional securities of the issuen rights exercisable to acquire add ⁵ Do not include deferred comper	r. Indicate the secu itional securities o	ırity coa	les for all													ər

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	ne of the i	individ	lual.										
Full legal name of indiv	vidual														
		Family n	ame			First	t given n	ame			Se	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	applio	cable)				
Indicate whether the person co.	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 pr	ovided in Item 8 (a), p	orovide t	the busin	ess co	ntact infor	mation	of the	person	being	сотр	pensated	Ι.			
Street address															
Municipality							P	rovino	e/Sta	te					
Country						Р	ostal o	code/Z	ip coo	de					
Email address							Telep	hone	numb	er					
c) Relationship to issuer	or investment fun	d mana	ager]							L				
Indicate the person's relationsh the Instructions and the meani											ning of "	connect	ed" in I	Part B	B(2) of
Connect with the issu	ier or investment fur	id mana	iger				Insider	of the	ssuer	(othe	er than a	in inves	tment f	fund)	
Director or officer of t	he investment fund	or inves	tment fur	nd ma	nager		Employ	vee of t	he issı	uer o	r investr	nent fur	nd mar	ager	
None of the above	 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 compensat Canadian dollars. Include cash incidental to the distribution, su allocation arrangements with th	commissions, securiti ch as clerical, printin	es-baseo g, legal	d comper or accou	nsatior nting s	n, gifts, dis services. A	counts o n issuer	or othe is not i	r comp require	ensatio d to as	on. De	o not rep	oort pay	ments	for se	ervices
Cash commissions pa	aid	13.56						Securit	y code	1	Security	code 2	Secu	irity co	ode 3
Value of all securitie distributed as compensatio				S	Security co	des									
	terms of warrants, or	otions o	r other rig	ghts											
Other compensatio	n ⁵		Desc	ribe											
Total compensation pa	nid	13.56													
Check box if the pe	erson will or may rec	eive any	/ deferre	d com	pensation	(descr	ibe the	terms	below))					
	Ltd. will receive a % on Class B Serie														
⁴ Provide the aggregate value 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	des 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			First	t given n	ame		Seco	ondary g	given na	mes	
If the person compensated is not an individual, provide the following information.														
Full legal name	Full legal name of non-individual Rethink and Diversify Securities Inc.													
Firm NRD number47250(if applicable)														
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.														
b) Business contact infor	mation													
If a firm NRD number is not pro	ovided in Item 8 (a), p	orovide t	the busin	ness cor	ntact info	rmation	of the	person l	being con	npensated.				
Street address														
Municipality							Р	rovince	e/State					
Country						Ρ	ostal c	code/Zi	p code					
Email address							Telep	hone r	umber					
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	-				pu.,		-	-		ner than an	invest	ment fu	ınd)	
Director or officer of t	he investment fund (or invest	tment fu	nd mar	nager		Employ	vee of th	e issuer	or investm	ent fun	d mana	ner	
 ✓ None of the above 					lager		Employ					amane	igei	
d) Compensation details														
Provide details of all compensat	ion paid or to be pa	d to the	p nerson	identifi	ied in Iten	n 8(a) ir	n conne	ction wi	th the dis	stribution F	Provide	all ame	nunts	in
Canadian dollars. Include cash c	ommissions, securiti	es-based	d compei	nsation	, gifts, dis	counts	or othe	r compe	nsation. I	Do not repo	ort payr	nents fo	or serv	/ices
incidental to the distribution, su allocation arrangements with th										or details al	oout, or	report	on, in	ternal
Cash commissions pa	[12.54	yees of a	i non a	atriduut	compe								
		12.04					-	Security	code 1	Security c	ode 2	Securi	ty code	e 3
Value of all securitie distributed as compensatio	-			S	ecurity co	des								
Describe t	erms of warrants, or	otions or	r other ri	ghts										
Other compensation	n ⁵		Desc	ribe										
Total compensation pa	id	12.54		L										
Check box if the person will or may receive any deferred compensation (describe the terms below)														
Rethink and Diver Preferred Non-Vo Preferred Non-Vo	ting Shares, 1% o													
⁴ Provide the aggregate value of additional securities of the issu- rights exercisable to acquire ad ⁵ Do not include deferred comp	ier. Indicate the seco dditional securities o	urity cod	les for al											

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	the name	e of the i	individ	lual.									
Full legal name of individual														
		Family na	ame			First	t given na	ame		Seco	ondary g	given nan	nes	
If the person compensated is not an individual, provide the following information.														
Full legal name o	Full legal name of non-individual Industrielle Alliance Valeurs Mobiliers 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.														
b) Business contact information														
If a firm NRD number is not prov	ided in Item 8 (a), J	orovide t	he busin	ess coi	ntact infor	mation	of the p	person E	eing con	npensated.				
Street address	Street address													
Municipality							Р	rovince	e/State					
Country						Р	ostal c	ode/Zi	p code					
Email address							Telepl	hone n	umber					
c) Relationship to issuer o	r investment fun	d mana	ger											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 issue				,.			-	-		ner than ar	invest	ment fu	nd)	
Director or officer of the	e investment fund (or invest	ment fur	nd mai	nager		Employ	ee of th	e issuer	or investm	ent fun	d mana	aer	
\checkmark None of the above							,						9	
d) Compensation details														
Provide details of all compensation	n naid or to be na	id to the	nerson	identif	fied in Iten	n 8(a) ir	n conner	tion wi	th the dis	stribution F	Provide	all amo	unts i	n
Canadian dollars. Include cash co	mmissions, securiti	es-based	, comper	nsatior	n, gifts, dis	counts	or other	сотре	nsation. I	Do not repo	ort payr	nents fo	or serv	ices
incidental to the distribution, such allocation arrangements with the										or details al	oout, or	report o	on, int	ernal
Cash commissions paid		0.33	,,.				_							-
								Security	code 1	Security c	ode 2	Securit	y code	93
Value of all securities distributed as compensation				S	Security co	des								
Describe ter	rms of warrants, or	otions or	other rig	ghts										
Other compensation ⁵	5		Desc	ribe									<u> </u>	
Total compensation paid	t i	0.33												
Check box if the person will or may receive any deferred compensation (describe the terms below)														
Industrielle Alliance Valeurs Mobiliers 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 compe.	er. Indicate the secu ditional securities c	urity cod	les for al											

ITEM 9 - DIRECTORS, EXECUTIVE OFFICERS AND PROMOTERS OF THE ISSUER										
If the issuer is an investment fun	If the issuer is an investment fund, do not complete Item 9. Procced to Item 10.									
Indicate whether the issuer is any o	f the following (seled	t the one that applie	es - if more than one	applies, select onl	y one).					
Reporting issuer in any jurisdiction of Canada										
Foreign public issuer										
Wholly owned subsidiary of a reporting issuer in any jurisdiction of Canada ⁶										
Provide name of reporting issuer										
Wholly owned subsidiary of	Wholly owned subsidiary of a foreign public issuer ⁶									
Provide name o	f foreign public issue	er]		
Issuer distributing only eligi	ble foreign securitie	s and the distributio	on is to permitted clie	nts only7				-		
If the issuer is at least one of the	above, do not com	plete Item 9(a) – (d	c). Proceed to Item	10.						
⁶ An issuer is a wholly owned subsidiary of a reporting issuer or a foreign public issuer if all of the issuer's outstanding voting securities, other than securities that are required by law to be owned by its directors, are beneficially owned by the reporting issuer or the foreign public issuer, respectively. ⁷ Check this box if it applies to the current distribution even if the issuer made previous distributions of other types of securities to non-permitted clients. Refer to the definitions of "eligible foreign security" and "permitted client" in Part B(1) of the Instructions.										
✓ If the issuer is none of the	above, check this	box and complete l	ltem 9(a) - (c).							
a) Directors, executive officer	rs and promoters	of the issuer								
Provide the following information fo territory; otherwise state the country						tate the	province	or		
Organization or company name	Family name	First given name	Secondary given st given name names		Business location of non-individual or residentail jurisdiction of individual		Relationship to issue (select all that apply			
				Province or country		D	0	Р		
	Granleese	William		British Columb	а	~	~			
	Granleese	William	R.	British Columb	а	~				
	Worsnup	Christopher	Gavin	British Columb	а	✓				
b) Promoter information										
If the promoter listed above is not an individual, provide the following information for each director and executive officer of the promoter. For locations within Canada, state the province or territory; otherwise state the country. For "Relationship to promoter", "D" – Director, "O" – Executive Officer.										
Organization or company name	Organization or company name Family name First given name Secondary given names Residential jurisdiction of individual Relationship to promo (select one or both if appli									
				Province or country	D		C	>		
c) Residential address of one	h individual									
c) Residential address of each individual										
Complete Schedule 2 of this form providing the full residential address for each individual listed in Item 9(a) and (b) and attach to the completed report. Schedule 2 also requires information to be provided about control persons.										

ITEM 10 - CERTIFICATION

Provide the following certification and business contact information of an officer, director or agent of the issuer or underwriter. If the issuer or underwriter is not a company, an individual who performs functions similar to that of a director or officer may certify the report. For example, if the issuer is a trust, the report may be certified by the issuer's trustee. If the issuer is an investment fund, a director or officer of the investment fund manager (or, if the investment fund manager is not a company, an individual who performs similar functions) may certify the report if the director or officer has been authorized to do so by the investment fund.

The certification may be delegated, but only to an agent that has been authorized by an officer or director of the issuer or underwriter to prepare and certify the report on behalf of the issuer or underwriter. If the report is being certified by an agent on behalf of the issuer or underwriter, provide the applicable information for the agent in the boxes below.

If the individual completing and filing the report is different from the individual certifying the report, provide the name and contact details for the individual completing and filing the report in Item 11.

The signature on the report must be in typed form rather than handwritten form. The report may include an electronic signature provided the name of the signatory is also in typed form.

Securities legislation requires an issuer or underwriter that makes a distribution of securities under certain prospectus exemptions to file a completed report of exemt distribution.

By completing the information below, I certify, on behalf of the issuer/underwriter/investment fund manager, to the securities regulatory authority or regulator, as applicable, that I have reviewed this report and to my knowledge, having exercised reasonable diligence, the information provided in this report is true and, to the extent required, complete.

Name of issuer/underwriter/ investment fund manager/agent	Antrim Balanced Mortgage Fund Ltd.										
Full legal name	Granleese	William	R	R.							
	Family name	Secondary given names									
Title	Portfolio Manager										
Telephone number	6045302301 Email address			will@antriminvestments.com							
Signature	"William Granleese"	Date 20		06	12						
			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.