# Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 9084580

ITEM 1 - REPORT TYPE								
✓ New report								
Amended report If amended, provide filing date of report that is being amended (YYYY-MM-DD)								
ITEM 2 - PARTY CERTIFYING TH	E REPORT							
Indicate the party certifying the report (select only one). For guidance regarding whether an issuer is an investment fund, refer to section 1.1 of National Instrument 81-106 Investment Fund Continuous Disclosure and the companion policy to NI 81-106.								
☐ Investment fund issuer	naous Disclosure and the comp	amon policy to 141 or 100	•					
✓ Issuer (other than an investment of the sum of th	stment fund)							
Underwriter	······································							
ITEM 3 - ISSUER NAME AND OT	LIED IDENTIFIEDS							
Provide the following information about the		vastment fund, about the	fund					
Full legal name	·	·	јина.					
Previous full legal name	Antim Balancea Wortg							
If the issuer's name changed in the last 12 months, provide most recent previous legal name.								
If the issuer's name changed in th	e last 12 months, provide most	recent previous legal nam	e.					
Website	www.antriminvestment	s.com (if ap	oplicable	e)				
If the issuer has a legal entity identifier, provide below. Refer to Part B of the Instructions for the definition of "legal entity identifier".								
Legal entity identifier								
If two or more issuers distributed a single s	security, provide the full legal no	nme(s) of the co-issuer(s) o	other the	an the issuer named above.				
Full legal name(s) of co-issuer(s)		(if ap	plicable	e)				
ITEM 4 - UNDERWRITER INFORM	MATION							
		gal name and firm NPD r	umbor					
If an underwriter is completing the report, provide the underwriter's full legal name and firm NRD number.  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/	Į					
Country		Postal code/Zip	code					
Telephone number		We	ebsite		(if applicable)			

If the issuer is an investment fund, do not complete item 5. Proceed to Item 6.   a) Primary industry	Item 5 - Issuer Information
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	If the issuer is an investment fund, do not complete Item 5. Proceed to Item 6.
AlcS industry code	a) Primary industry
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	
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: 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  Municipality Postal code/Zip code  Country Telephone number  e) Date of formation and financial year-end  Date of formation Financial year-end  Province/State Date of formation and financial year-end MMM 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.	NAICS industry code 5 2 2 9 9
Is the issuer does not have SEDAR profile complete item 5(d) - (h).  d) Head office address  Street address  Municipality  Country  Date of formation and financial year-end  Date of formation and financial year-end  Date of formation  The province/State	mining industry. Select the category that best describes the issuer's stage of operations.
Mortgages	
Cryptoassets  b) Number of employees  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  Municipality  Country  Postal code/Zip code  Telephone number  e) Date of formation and financial year-end  Date of formation  The postal year-end  Pinancial 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.	b) Number of employees
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 Postal code/Zip code Country Telephone number  e) Date of formation and financial year-end  Date of formation and financial year-end  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.	Number of employees: ✓ 0 - 49 ☐ 50 - 99 ☐ 100 - 499 ☐ 500 or more
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).    Head office address   Province/State   Postal code/Zip code   P	c) SEDAR profile number
If the issuer does not have SEDAR profile complete item 5(d) - (h).  d) Head office address  Street address  Municipality  Country  Postal code/Zip code  Telephone number  e) Date of formation and financial year-end  Date of formation  Financial year-end  MM DD  Financial year-end  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.	Does the issuer have a SEDAR profile?
Street address  Municipality  Country  Postal code/Zip code  Telephone number  e) Date of formation and financial year-end  Date of formation  The postal code/Zip code  Telephone number  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.	No  ✓ Yes If yes, provide SEDAR profile number  0 0 0 3 8 5 6 8
Street address Province/State 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.	
Municipality Country Telephone number  Date of formation and financial year-end  The phone number  Date of formation Telephone number  Financial year-end MMM DD  The phone number  Financial year-end MMM DD  The phone number  The	d) Head office address
Country  Telephone number  e) Date of formation and financial year-end  Date of formation  YYYY MM DD  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.	Street address Province/State
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.	Municipality Postal code/Zip code
Date of formation  YYYY MM DD  Financial year-end  MM DD  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.	Country Telephone number
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.	e) Date of formation and financial year-end
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.	
If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer.	f) Reporting issuer status
	Is the issuer a reporting issuer in any jurisdication of Canada? No Yes
AII AB BC MB NB NL NT	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	NS NU ON PE QC SK YT
g) Public listing status	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	Exchange name
h) Size of issuer's assets	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
\$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	it most accurately identifies the issuer (select only one) .				
Money market	☐ Equity ☐ Fixed income ☐ Balanced				
Alternative strate	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	nd financial year-end of the investment fund				
Date of forma	tion Financial year-end 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	s of Canada in which the investment fund is a reporting issuer.				
AII	AB BC MB NB NL NT				
☐ NS ☐	NU ON PE QC SK T				
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 on					
-	AV) of the investment fund				
	investment fund as of the date of the most recent NAV calculation (Canadian \$).				
\$0 to under \$5M	\$5M to under \$25M \$25M to under \$100M				
\$100M to under \$500	DM S500M to under \$1B S1B or over Date of NAV calculation:				
	YYYY MM DD				

### **ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION**

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

a) Curren	CV
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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 2020 03 26

End date 2020 04 02

#### 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)	Description of security	Number of securities	Single or lowest price	Highest price Total amount		
Р	R	S		Class A Preferred Non-Voting Shares	32,123.00	1.0000		32,123.00	
Р	R	S		Class B Series 'B' Preferred Non- Voting Shares	401,056.00	1.0000		401,056.00	
Р	R	S		Class B Series 'C' Preferred Non- Voting Shares	717,430.00	1.0000		717,430.00	

#### 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.

ex	onvertibe change ecurity o	able		nderlyi curity c	-		ise price adian \$)	Expiry date   Conversion		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]	5	529,000.00
British Columbia	NI 45-106 2.9(1) [Offering memorandum] (BC, NL)	11	529,859.00
Ontario	NI 45-106 2.3 [Accredited investor]	1	17,000.00
Ontario	NI 45-106 2.9(2.1) [Offering memorandum] (AB, SK, ON, QC, NB, NS)	3	50,000.00

Québec	NI 45-106 2.3 [Accredited investor]	1	13,000.00	
Saskatchewan	Saskatchewan NI 45-106 2.9(2.1) [Offering memorandum] 1 (AB, SK, ON, QC, NB, NS)			
	1,150,609.00			
	Total number of unique purchasers <sup>2</sup> b	22		

<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	2019-10-24	Y	2019-11-01

<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.	ITEM 8 - COMPENSATION INFORMATION
□ No □ Yes If yes indicate number of persons compensated □ 4	Indicate whether any compensation was paid, or will be paid, in connection with the distribution.
in yes, indicate number of percents compensated.	No ✓ Yes If yes, indicate number of persons compensated. 4

a) Name of person compe	ensated and regis	tration status	i								
Indicate whether the person com	pensated is a registi	rant.		☐ No		<b>√</b> Y	'es				
If the person compensated is an	individual, provide t	he name of the	individ	dual.							
Full legal name of individ	dual										
	i i	amily name			First gi	iven nam	ne		Secondary g	jiven names	
If the person compensated is not	an individual, provi	de the followin	g infori	mation.							
Full legal name of	of non-individual	Industrielle A	Allianc	e Valeurs	Mobilie	rs Inc.					
Fir	m NRD number	1 5	4	0	0		(i1	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 inform	nation										
If a firm NRD number is not prov	vided in Item 8 (a), p	rovide the busi	ness co	ntact infor	mation o	f the pe	rson being	g comp	pensated.		
Street address											
Municipality						Pro	vince/St	ate			
Country					Pos	stal cod	de/Zip co	ode			
Email address					Т	elepho	one num	ber			
c) Relationship to issuer or investment fund manager											
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.  Connect with the issuer or investment fund manager  Insider of the issuer (other than an investment fund)											
Director or officer of the investment fund or investment fund manager											
✓ None of the above				3		, .,					
d) Compensation details											
Provide details of all compensation paid, or to be paid, to the person identified in Item 8(a) in connection with the distribution. Provide all amounts in Canadian dollars. Include cash commissions, securities-based compensation, gifts, discounts or other compensation. Do not report payments for services incidental to the distribution, such as clerical, printing, legal or accounting services. An issuer is not required to ask for details about, or report on, internal allocation arrangements with the directors, officers or employees of a non-individual compensated by the issuer.											
Cash commissions paid	d	13.82				Se	ecurity code	e 1	Security code 2	Security co	ode 3
Value of all securities distributed as compensation			S	Security co	des						
Describe te	rms of warrants, op	tions or other r	rights								
Other compensation	5	Des	cribe								
Total compensation paid	d 1	3.82									
✓ Check box if the pers	son will or may rece	eive any deferre	ed com	npensation	(describe	e the te	rms belov	w)			
Industrielle Alliance Preferred Non-Voti Preferred Non-Voti	ing Shares, 1% of										A
<sup>4</sup> Provide the aggregate value of additional securities of the issue rights exercisable to acquire add <sup>5</sup> Do not include deferred compe	er. Indicate the secu ditional securities of	rity codes for a									er

a) Name of person compo	ensated and regis	tration s	status										
Indicate whether the person con	npensated is a regist	rant.			No		$\checkmark$	Yes					
If the person compensated is an	individual, provide t	he name	of the inc	dividual									
Full legal name of indivi	dual												
		Family nar	me			First	given n	ame		Secon	dary giv	en names	
If the person compensated is not an individual, provide the following information.													
Full legal name	of non-individual	Fidelity	Clearing	g Cana	ada UL	.C							
Fi	rm NRD number	2	8	8	8	0			(if app	licable)			
Indicate whether the person con	npensated facilitated	the distr	ibution th	rough (	a fundir	ng porta	ıl or an	interne	t-based	portal.		No 🔽	] Yes
b) Business contact inform	mation												
If a firm NRD number is not pro	vided in Item 8 (a), p	rovide th	ne busines.	s conta	ct infori	nation (	of the p	person b	eing cor	npensated.			
Street address													
Municipality							Р	rovince	/State				
Country						Po	ostal c	ode/Zip	code				
Email address		Telephone number											
c) Relationship to issuer or investment fund manager													
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.  Connect with the issuer or investment fund manager  Insider of the issuer (other than an investment fund)													
Director or officer of the	Director or officer of the investment fund 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, securitions of the commissions, securitions of the commissions of the commission of the commissions of the commissions of the commission of the commis	es-based g, legal o r employ	compenso r accounti	ation, gi ing serv	ifts, disc rices. Ar	counts o issuer	r other is not r	r compei required	nsation. to ask fo	Do not report	payme	ents for se	ervices
Cash commissions pai	d	2.19						Security	code 1	Security cod	e 2   S	Security co	ode 3
Value of all securitie distributed as compensation	~			Secu	urity cod	des							
Describe to	erms of warrants, op	tions or	other righ	ts									
Other compensation	15		Describ	e									
Total compensation pai	id	2.19											
	rson will or may rece	eive any	deferred o	comper	nsation	(describ	be the	terms b	elow)				
Fidelity Clearing C Non-Voting Shares Non-Voting Shares	s, 1% on Class B												rred
<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 code	es for all s										er

a) Name of person compo	ensated and regis	stration st	atus								
Indicate whether the person con	npensated is a regist	rant.		☐ No		✓ Y	'es				
If the person compensated is an	individual, provide	the name o	of the indiv	ridual.							
Full legal name of indivi	dual										
		Family nam	e		First gi	iven nam	ne		Secondary (	jiven names	
If the person compensated is not an individual, provide the following information.											
Full legal name	of non-individual	Genesis	Wealth I	Manageme	ent Corp	oration	l				
Fi	rm NRD number	6	4 5	7	0		(if	applic	cable)		
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.  Ves											
b) Business contact inform	mation										
If a firm NRD number is not pro	vided in Item 8 (a), ¡	provide the	business o	contact info	mation o	f the pei	rson being	сотр	ensated.		
Street address											
Municipality						Pro	vince/Sta	ate			
Country					Pos	stal cod	de/Zip co	de			
Email address		Telephone number									
c) Relationship to issuer or investment fund manager											
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.  Connect with the issuer or investment fund manager  Insider of the issuer (other than an investment fund)											
Director or officer of the	ne investment fund o	or investm	ent fund m	nanager	En En	nployee	e of the iss	suer or	r investment fun	d manager	
✓ None of the above											
d) Compensation details											
Provide details of all compensati Canadian dollars. Include cash co incidental to the distribution, suc allocation arrangements with the	ommissions, securiti h as clerical, printin e directors, officers o	es-based cog, legal or remployed	ompensati accounting	on, gifts, dis 7 services. A	counts or n issuer is	other co	ompensati Juired to a	ion. Do sk for i	not report payı	ments for se	ervices
Cash commissions pai	d	5.48				Se	ecurity code	1 :	Security code 2	Security co	ode 3
Value of all securitie distributed as compensation	~			Security co	des						
Describe to	erms of warrants, or	otions or o	ther rights								
Other compensation	15		Describe								
Total compensation pai	id	5.48									
✓ Check box if the per	son will or may rece	eive any d	eferred co	mpensation	(describe	e the ter	rms below	/)			
Genesis Wealth M Class A Preferred Series 'C' Preferre	Non-Voting Share	es, 1% or									
<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	urity codes	for all sec								er

a) Name of person comp	pensated and reg	stration status								
Indicate whether the person co	mpensated is a regis	trant.	☐ No	v	✓ Yes					
If the person compensated is a	n individual, provide	the name of the indiv	ridual.							
Full legal name of indiv	/idual									
		Family name	I	First give	n name		Secondary (	jiven names		
If the person compensated is no	ot an individual, pro	vide the following info	rmation.							
Full legal name	of non-individual	Rethink and Dive	rsify Secur	ities Inc.						
F	irm NRD number	4 7 2	5	0		(if app	licable)			
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.  Ves										
b) Business contact info	rmation									
If a firm NRD number is not pro	ovided in Item 8 (a),	provide the business o	contact infor	mation of th	ne person b	eing con	npensated.			
Street address										
Municipality					Province	e/State				
Country				Posta	ıl code/Zi <sub>l</sub>	o code			_	
Email address				Tel	ephone n	umber				
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)										
Director or officer of t	he investment fund	or investment fund m	nanager	Empl	loyee of th	e issuer	or investment fun	d manager		
✓ None of the above										
d) Compensation details										
Provide details of all compensations of all compensations and cash with the distribution, sure allocation arrangements with the Cash commissions pages.	commissions, securit ich as clerical, printi ne directors, officers	ies-based compensati ng, legal or accounting	on, gifts, disc g services. Ar	counts or oti issuer is no	her compei ot required	nsation. I to ask fo	Do not report payı	ments for ser	vices	
·		0.04			Security	code 1	Security code 2	Security cod	le 3	
Value of all securition distributed as compensation			Security co	des						
Describe	terms of warrants, o	options or other rights								
Other compensation	n <sup>5</sup>	Describe								
Total compensation pa	aid	0.64								
✓ Check box if the pe	erson will or may red	ceive any deferred co	mpensation	(describe th	ne terms b	elow)				
	ting Shares, 1%	c. will receive an ar on Class B Series '								
<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	ion, <u>excludir</u> curities distri	n <u>g</u> options, i buted as co	warrants o ompensatio	r other ri <sub>ç</sub> on, <u>includ</u>	ghts exercisable t <u>ding</u> options, warr	ว acquire จกts or other	r	

TEM 9 - DIRECTORS, EXECU	TIVE OFFICERS	AND PROMOT	ERS OF THE ISS	UER						
If the issuer is an investment fun	d, do not complete	Item 9. Procced to	Item 10.							
Indicate whether the issuer is any o	f the following (selec	t the one that applie	es - if more than one	applies, select only	one).					
Reporting issuer in any juris	sdiction of Canada									
Foreign public issuer										
Wholly owned subsidiary of	f a reporting issuer ir	n any jurisdiction of	Canada <sup>6</sup>							
Provide name of reporting issuer										
Wholly owned subsidiary of	f a foreign public issu	uer <sup>6</sup>						_		
Provide name of	f foreign public issue	r						7		
Issuer distributing only eligi	ble foreign securities	s and the distributio	n is to permitted clie	nts only <sup>7</sup>				_		
If the issuer is at least one of the	above, do not comp	olete Item 9(a) – (c	c). Proceed to Item	10.						
<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.  [V] 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				elationship to issuer elect all that apply)			
				Province or o	country	D	0	Р		
	Granleese	William		British Columbia	а	✓	<b>✓</b>			
	Granleese	William	R.	British Columbia ✓						
Worsnup Christopher Gavin British Columbia ✓										
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@antriminvestments.com							
Signature	"William Granleese"	Date	202	0 04	03					
			YYYY	/ MM	DD					

ITEM 11- CONTACT F	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 individua	al certifying the report								
Full legal name				Title					
•	Family name	First given name	Secondary given names						
Name of company									
Telephone number		Er	mail address						

#### Notice - Collection and use of personal information

The personal information required under this form is collected on behalf of and used by the securities regulatory authority or regulator under the authority granted in securities legislation for the purposes of the administration and enforcement of the securities legislation.

If you have any questions about the collection and use of this information, contact the securities regulatory authority or regulator in the local jurisdiction(s) where the report is filed, at the address(es) listed at the end of this form.

The attached Schedules 1 and 2 may contain personal information of individuals and details of the distribution(s). The information in Schedules 1 and 2 will not be placed on the public file of any securities regulatory authority or regulator. However, freedom of information legislation may require the securities regulatory authority or regulator to make this information available if requested.

By signing this report, the issuer/underwriter confirms that each individual listed in Schedule 1 or 2 of the report who is resident in a jurisdiction of Canada:

- a) has been notified by the issuer/underwriter of the delivery to the securities regulatory authority or regulator of the information pertaining to the individual as set out in Schedules 1 or 2, that this information is being collected by the securities regulatory authority or regulator under the authority granted in securities legislation, that this information is being collected for the purposes of the administration and enforcement of the securities legislation of the local jurisdiction, and of the title, business address and business telephone number of the public official in the local jurisdiction, as set out in this form, who can answer questions about the security regulatory authority's or regulator's indirect collection of the information, and
- b) has authorized the indirect collection of the information by the securities regulatory authority or regulator.