Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 9184229

ITEM 1 - REPORT TYPE					
☐ New report					
✓ Amended report If ame	nded, provide filing date	of report that is being am	ended 2020 07 24	(YYYY-MM-DD)	
ITEM 2 - PARTY CERTIFYING TH	e Report				
Indicate the party certifying the report (see Instrument 81-106 Investment Fund Cont	, ,	•	vestment fund, refer to section	on 1.1 of National	
☐ Investment fund issuer	·	. ,			
✓ Issuer (other than an inve	stment fund)				
Underwriter	,				
ITEM 3 - ISSUER NAME AND OT	THER IDENTIFIERS				
Provide the following information about t	he issuer, or if the issuer is an in	vestment fund, about the fund.			
Full legal name	Antrim Balanced Mortg	age 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.antriminvestment	s.com (if applicab	ole)		
If the issuer has a legal entity identifier <u>.</u> pi	L rovide below. Refer to Part B of t	 he Instructions for the definition	of "legal entity identifier".		
Legal entity identifier					
If two or more issuers distributed a single	security, provide the full legal no	 ame(s) of the co-issuer(s) other t	han the issuer named above.	'.	
Full legal name(s) of co-issuer(s)		(if applicab	ole)		
ITEM 4 - UNDERWRITER INFORM	MATION				
If an underwriter is completing the report,	provide the underwriter's full le	gal name and firm NRD numbe	r.	1	
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/State			
Country		Postal code/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 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 ☐ Real estate ☐ Commercial/business debt ☐ Consumer debt ☐ Private companies
☐ Cryptoassets
b) Number of employees
Number of employees:
c) SEDAR profile number
Does the issuer have a SEDAR profile?
No ✓ Yes If yes, provide SEDAR profile number 0 0 0 3 8 5 6 8
If the issuer does not have SEDAR profile complete item 5(d) - (h).
d) Head office address
Street address Province/State
Municipality Postal code/Zip code
Country Telephone number
e) Date of formation and financial year-end
Date of formation Financial year-end MM DD
f) Reporting issuer status
Is the issuer a reporting issuer in any jurisdication of Canada? No Yes
If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer.
AII AB BC MB NB NL NT
NS NU ON PE QC SK YT
g) Public listing status
If the issuer has a CUSIP number, provide below (first 6 digits only)
CUSIP number
If the issuer is publicly listed, provide the name of the exchange on which the issuer's equity securities primarily trade. Provide only the name of an
exchange and not a trading facility such as, for example, an automated trading system. Exchange name
h) Size of issuer's assets
11) 6120 01 100001 0 000010

Select the size of the issuer's assets based on its most recently available annual financial statements (Canadian \$). If the issuer has not prepared annual financial statements for its first financial year, provide the size of the issuer's assets at the distribution end date.

☐ \$0 to under \$5M	☐ \$5M to under \$25M	☐ \$25M to under \$100M
\$100M to under \$500M	☐ \$500M to under \$1B	\$1B or over

ITEM 6 - INVESTMENT	FUND ISSUER INFORMATION					
If the issuer is an inves	tment fund, provide the following information.					
a) Investment fund ma	anager information					
Full legal name						
Firm NRD number	(if applicable)					
If the investment fund mand	ager does not have a firm NRD number, provide the head office contact information of the investment fund manager.					
Street address						
Municipality	Province/State					
Country	Postal code/Zip code					
Telephone number	Website (if applicable)					
b) Type of investment	fund					
Type of investment fund tha	nt most accurately identifies the issuer (select only one) .					
Money market	☐ Equity ☐ Fixed income ☐ Balanced					
Alternative strateg	gies Cryptoasset Other (describe)					
Indicate whether one or bot	h of the following apply to the investment fund .					
Invests primarily in	n other investment fund issuers					
☐ Is a UCITs Fund¹						
¹ Undertaking for the Collec (EU) directives that allow c	tive Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union collective investment schemes to operate throughout the EU on a passport basis on authorization from one member state.					
c) Date of formation a	and financial year-end of the investment fund					
Date of forma	Date of formation Financial year-end MM DD MM DD					
d) Reporting issuer st	atus of the investment fund					
Is the investment fund a rep	orting issuer in any jurisdication of Canada? No Yes					
If yes, select the jurisdictions of Canada in which the investment fund is a reporting issuer.						
☐ AII ☐	AB BC MB NB NL NT					
□ NS □	NU ON PE QC SK YT					
e) Public listing status	s of the investment fund					
If the investment fund has a	CUSIP number, provide below (first 6 digits only)					
	CUSIP number					
If the investment fund is publicly listed, provide the name of the exchange on which the investment fund's securities primarily trade. Provide only the name of an exchange and not a trading facility such as, for example, an automated trading system.						
Exchange on an exchange and h						
-	AV) of the investment fund					
	investment fund as of the date of the most recent NAV calculation (Canadian \$).					
\$0 to under \$5M	s5M to under \$25M s25M to under \$100M					
\$100M to under \$500	DM \$500M to under \$1B \$1B or over Date of NAV calculation: YYYY MM DD					

ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION

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

١.	_	
a)) Currency	•
u	, Cullelley	

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 07 16

End date 2020 07 23

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	hest price Total amount	
Р	R	S		Class A Preferred Non-Voting Shares	303,900.00	1.0000		303,900.00	
Р	R	S		Class B Series 'B' Preferred Non- Voting Shares	1,187,729.00	1.0000		1,187,729.00	
Р	R	S		Class B Series 'C' Preferred Non- Voting Shares	1,469,341.00	1.0000		1,469,341.00	

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.

Convertil exchange security	eable	,	erlying ty code Exercise price (Canadian \$) Expiry date (YYYY- MM-DD)		Conversion ratio	Describe other items (if applicable)		
				Lowest	Highest			

f) Summary of the distribution by jurisdiction and exemption

State the total dollar amount of securities distributed and the number of purchasers for each jurisdiction of Canada and foreign jurisdiction where a purchaser resides and for each exemption relied on in Canada for that distribution. However, if an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include distributions to purchasers resident in that jurisdiction of Canada only.

This table requires a separate line item for: (i) each jurisdiction where a purchaser resides, (ii) each exemption relied on in the jurisdiction where a purchaser resides, if a purchaser resides in a jurisdiction of Canada, and (iii) each exemption relied on in Canada, if a purchaser resides in a foreign jurisdiction.

For jurisdictions within Canada, state the province or territory, otherwise state the country.

Province or country	Exemption relied on	Number of unique ²⁸ purchasers	Total amount (Canadian \$)
Alberta	NI 45-106 2.9(2.1) [Offering memorandum] (AB, SK, ON, QC, NB, NS)	2	246,000.00
British Columbia	NI 45-106 2.3 [Accredited investor]	11	1,233,370.00
British Columbia	NI 45-106 2.9(1) [Offering memorandum] (BC, NL)	10	448,300.00
Ontario	NI 45-106 2.3 [Accredited investor]	10	959,800.00

Ontario	NI 45-106 2.9(2.1) [Offering memorandum] (AB, SK, ON, QC, NB, NS)			
Québec	Québec NI 45-106 2.3 [Accredited investor] 1			
	2,960,970.00			

^{2a} 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	

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	Υ	2019-11-01

^{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.

Provide information for each person (as defined in NI 45-106) to whom the issuer directly provides, or will provide, any compensation in connection with the distribution. Complete additional copies of this page if more than one person was, or will be, compensated. Indicate whether any compensation was paid, or will be paid, in connection with the distribution. No Yes If yes, indicate number of persons compensated.	ITEM 8 - COMPENSATION INFORMATION					
No ✓ Yes If yes, indicate number of persons compensated.	Indicate whether any compensation was paid, or will be paid, in connection with the distribution.					
	No ✓ Yes If yes, indicate number of persons compensated. 6					

a) Name of person compe	ensated and regis	tration sta	itus								
Indicate whether the person com	pensated is a regist	rant.		☐ No		√	Yes				
If the person compensated is an	individual, provide t	he name of	the indivi	idual.							
Full legal name of indivi	dual										
		Family name			First	given na	ime		Secondary	given names	
If the person compensated is not	an individual, prov	ide the follo	wing infor	rmation.							
Full legal name of	of non-individual	Raymond	d James	Ltd.							
Fir	m NRD number	8	2 4	0				(if appl	icable)		
Indicate whether the person com	pensated facilitated	the distribu	ution thro	ugh a fund	ing porta	l or an	internet-	based p	oortal.] No ✓	Yes
b) Business contact inform	b) Business contact information										
If a firm NRD number is not prov	vided in Item 8 (a), p	provide the l	business c	ontact info	rmation o	of the p	erson be	ing con	pensated.		
Street address											
Municipality						Pr	ovince/	State			
Country				Po	stal co	ode/Zip	code				
Email address					-	Teleph	none nu	mber			
c) Relationship to issuer or investment fund manager											
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section. Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund) Director or officer of the investment fund or investment fund manager Employee of the issuer or investment fund manager											
None of the above											
d) Compensation details											
Provide details of all compensation Canadian dollars. Include cash continuities incidental to the distribution, such allocation arrangements with the	ommissions, securition h as clerical, printing e directors, officers o	es-based co g, legal or a r employees	mpensatio ccounting	on, gifts, di services. A	scounts o In issuer i	r other is not re	compens equired to	sation. L o ask fo	Do not report pay	ments for se	ervices
Cash commissions pai	a	1.33				8	Security o	ode 1	Security code 2	Security co	ode 3
Value of all securities distributed as compensation			;	Security co	odes						
Describe te	rms of warrants, op	otions or oth	ner rights								
Other compensation	5	ı	Describe								
Total compensation paid	d	1.33									
✓ Check box if the per-	son will or may rece	eive any de	ferred cor	npensatior	n (describ	e the to	erms be	low)			
Raymond James L Voting Shares, 1% Voting Shares.	td. will receive ar on Class B Serie	n annual tr es 'B' Prefe	ailer fee erred No	paid mor n-Voting	nthly in t Shares	he ame	ount of % on Cl	1/2% (ass B	on Class A Pre Series 'C' Prefe	erred Nonerred Non-	1-
⁴ Provide the aggregate value of additional securities of the issue rights exercisable to acquire ad ⁵ Do not include deferred compe	er. Indicate the secu Iditional securities o	urity codes i	for all sec								er

a) Name of person comp	ensated and regi	stration status							
Indicate whether the person co	mpensated is a regis	trant.	☐ No		✓ Yes				
If the person compensated is ar	n individual, provide	the name of the indiv	ridual.						
Full legal name of indiv	ridual								
		Family name		First give	en 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	Markham Centre	Financial	Securities	Inc.				
F	irm NRD number	6 1 0	3	0		(if app	licable)		
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 pro	ovided in Item 8 (a),	provide the business o	contact infor	mation of t	the person l	being con	npensated.		
Street address]
Municipality					Provinc	e/State			٦
Country				Post	al code/Zi	p code			ĺ
Email address				Te	lephone r	umber			ĺ
c) Relationship to issuer or investment fund manager									
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of									
the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.									
Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund)									
Director or officer of the investment fund or investment fund manager Employee of the issuer or investment fund manager									
✓ None of the above									
d) Compensation details									
Provide details of all compensate Canadian dollars. Include cash of incidental to the distribution, sur allocation arrangements with the	commissions, securit ch as clerical, printing the directors, officers	ies-based compensating, legal or accounting or employees of a non	on, gifts, dis g services. A	counts or o n issuer is n	ther compe not required	nsation. I to ask fo	Do not report payı	ments for services	
Cash commissions pa	aid	48.36			Security	code 1	Security code 2	Security code 3	4
Value of all securitie distributed as compensation			Security co	des					
Describe t	erms of warrants, o	ptions or other rights							
Other compensatio	n ⁵	Describe]
Total compensation pa	id	48.36							
✓ Check box if the pe	rson will or may red	ceive any deferred co	mpensation	(describe	the terms b	elow)			
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 issu- rights exercisable to acquire a ⁵ Do not include deferred comp	uer. Indicate the sec dditional securities	curity codes for all sec							

a) Name of person comp	ensated and regi	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	vidual									
		Family name		First giver	n name	I	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 Secu	ities Inc.						
F	irm NRD number	4 7 2	5	0		(if app	licable)			
Indicate whether the person co.	Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. Ves									
b) Business contact information										
If a firm NRD number is not pro	ovided in Item 8 (a),	provide the business	contact infor	mation of th	e person b	eing con	npensated.			
Street address										
Municipality					Province	/State				
Country				Posta	l code/Zip	code				
Email address				Tele	ephone ni	umber				
c) Relationship to issuer or investment fund manager										
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.										
Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund)										
Director or officer of t	he investment fund	or investment fund m	nanager	Empl	oyee of the	e issuer	or investment fun	d manager		
None of the above										
d) Compensation details										
Provide details of all compensations and canadian dollars. Include cash incidental to the distribution, surallocation arrangements with the	commissions, securit ch as clerical, printi ne directors, officers	ties-based compensations and compensations are completed for a complete sof a nor	on, gifts, disc g services. Ar	counts or otl n issuer is no	her comper ot required	nsation. L to ask fo	Do not report payı	ments for sei	rvices	
Cash commissions pa	aiu	14.10			Security	code 1	Security code 2	Security cod	de 3	
Value of all securitie distributed as compensation			Security co	des						
Describe	terms of warrants, o	options or other rights								
Other compensation	n ⁵	Describe								
Total compensation pa	nid	14.10								
✓ Check box if the pe	erson will or may red	ceive any deferred co	mpensation	(describe th	ne terms be	elow)				
Rethink and Diversify 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 additional securities of the issinghts exercisable to acquire a ⁵ Do not include deferred comp	uer. Indicate the sed dditional securities	curity codes for all sec	ion, <u>excludii</u> curities distri	<u>ng</u> options, v buted as co	warrants oi mpensatio	other rig n, <u>includ</u>	ghts exercisable t <u>ling</u> options, warr	o acquire ants or othe	r	

a) Name of person compo	ensated and regis	stration sta	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	f the indivi	idual.						
Full legal name of indivi	dual									
		Family name		<u> </u>	First giv	en name	e	Seconda	ry given name	3
If the person compensated is no	t an individual, prov	ide the follo	owing info	rmation.						
Full legal name	of non-individual	National	Bank Fin	ancial Inc						
Fi	rm NRD number	1	9 6	0			(if ap	oplicable)		
Indicate whether the person con	npensated facilitated	the distrib	ution thro	ugh a fundi	ng portal d	or an int	ternet-base	d portal.	☐ No [v	Yes
b) Business contact information										
If a firm NRD number is not pro	vided in Item 8 (a), ¡	provide the	business c	ontact info	mation of	the pers	son being c	ompensated.		
Street address										
Municipality						Prov	/ince/Stat	Э		
Country				Pos	tal cod	e/Zip cod	e			
Email address					Te	elephor	ne numbe	r		
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 the investment fund or investment fund manager Employee of the issuer or investment fund manager										
✓ None of the above					—	,,,,,,,				
d) Compensation details										
Provide details of all compensati Canadian dollars. Include cash co incidental to the distribution, suc allocation arrangements with the	ommissions, securiti h as clerical, printin e directors, officers o	es-based co g, legal or o r employee	ompensatio accounting	on, gifts, dis services. A	counts or c n issuer is	other co not requ	mpensation uired to ask	n. Do not report p	ayments for s	services
Cash commissions pa	a	6.17				Sec	curity code 1	Security code	2 Security of	ode 3
Value of all securities distributed as compensation			;	Security co	des					
Describe to	erms of warrants, op	otions or ot	her rights							
Other compensation	5		Describe							
Total compensation pai	d	6.17								
✓ Check box if the per	son will or may rec	eive any de	eferred cor	mpensation	(describe	the terr	ms below)			
National Bank Fina Non-Voting Share: Non-Voting Share:	s, 1% on Class B									
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 seco Iditional securities d	urity codes	for all sec							ner

a) Name of person comp	ensated and regis	stration sta	tus								
Indicate whether the person cor	npensated is a regist	rant.		☐ No		✓ Y	'es				
If the person compensated is an	individual, provide	the name of	the indivi	idual.							
Full legal name of indiv	idual										
		Family name			First gi	ven nam	ne		Secondary g	iven names	
If the person compensated is no	t an individual, prov	ide the follow	wing infor	rmation.							
Full legal name	of non-individual	Genesis V	Wealth M	/lanageme	nt Corpo	oration					
Fi	irm NRD number	6 4	1 5	7	0		(if	applica	ble)		
Indicate whether the person cor	npensated facilitated	the distribu	tion thro	ugh a fundi	ng portal	or an in	nternet-bas	sed port	tal. 🗸] No [Yes
b) Business contact infor	mation										
If a firm NRD number is not pro	ovided in Item 8 (a), ¡	provide the b	usiness c	ontact infor	mation of	f the per	rson being	compe	nsated.		
Street address											
Municipality						Pro	vince/Sta	ite			
Country				Pos	stal cod	de/Zip co	de				
Email address					Т	elepho	ne numb	er			
c) Relationship to issuer or investment fund manager											
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section. Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund) Director or officer of the 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 compensate Canadian dollars. Include cash c incidental to the distribution, suc allocation arrangements with th	commissions, securiti ch as clerical, printin e directors, officers o	es-based cor g, legal or ac or employees	mpensatic ccounting	on, gifts, dis services. A	counts or n issuer is	other co	ompensation	on. Do	not report payr	ments for se	ervices
Cash commissions pa		10.96				Se	curity code	1 S	ecurity code 2	Security co	ode 3
Value of all securitie distributed as compensatio	-		;	Security co	des						
Describe to	erms of warrants, op	otions or oth	er rights								
Other compensation	n ⁵		Describe								
Total compensation pa	id	10.96									
✓ Check box if the pe	rson will or may rec	eive any def	erred con	mpensation	(describe	e the ter	rms below)			
Genesis Wealth M Class A Preferred Series 'C' Preferre	Non-Voting Shar										
⁴ Provide the aggregate value of additional securities of the issu- rights exercisable to acquire ac ⁵ Do not include deferred comp	ier. Indicate the secu Idditional securities o	urity codes f	or all sec	on, <u>excludii</u> urities distr	n <u>g</u> options ibuted as	s, warra compei	ants or othensation, <u>in</u>	er right: cluding	s exercisable to g options, warra	ว acquire จกts or othe	er

a) Name of person compe	ensated and regis	tration status									
Indicate whether the person com	npensated is a registr	ant.		☐ No		√ Y	es/es				
If the person compensated is an	individual, provide t	he name of the	individ	dual.							
Full legal name of indivi	dual										
	F	amily name			First gi	ven nam	ne		Secondary	given names	
If the person compensated is not	t an individual, provi	de the following	g infori	mation.							
Full legal name	of non-individual	Industrielle A	Ilianc	e Valeurs	Mobilie	rs Inc.					
Fi	rm NRD number	1 5	4	0	0		(i	if appli	cable)		
Indicate whether the person com	npensated facilitated	the distribution	throu	gh a fundii	ng portal	or an in	nternet-b	ased p	ortal.] No ✓	Yes
b) Business contact information											
If a firm NRD number is not pro	vided in Item 8 (a), p	rovide the busi	ness co	ntact infor	mation of	f the pe	rson bein	ng com	pensated.		
Street address											
Municipality						Pro	vince/S	tate			
Country					Pos	stal cod	de/Zip c	ode			
Email address					Т	elepho	one num	nber			
c) Relationship to issuer or investment fund manager											
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section. Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund)											
Director or officer of the investment fund or investment fund manager Employee of the issuer or investment fund manager											
None of the above											
d) Compensation details											
Provide details of all compensations and compensations and compensations are compensationally as a compensation of the distribution, such allocation arrangements with the	ommissions, securitie h as clerical, printing e directors, officers on	rs-based compe n, legal or accou employees of	nsatio Inting	n, gifts, disc services. Ar	ounts or issuer is	other co	ompensa quired to	ition. D ask for	o not report pay	ments for se	ervices
Cash commissions pai	ld	0.93				Se	ecurity cod	de 1	Security code 2	Security co	ode 3
Value of all securities distributed as compensation			5	Security co	des						
Describe te	erms of warrants, op	tions or other r	ights								
Other compensation	₁ 5	Des	cribe								
Total compensation pai	d	0.93									
✓ Check box if the per	son will or may rece	ive any deferre	ed com	pensation	(describe	e the te	rms belo	w)			
Industrielle Allianc Preferred Non-Vot Preferred Non-Vot	ing Shares, 1% or										A
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 of	rity codes for a									er

TEM 9 - DIRECTORS, EXECU				UER						
If the issuer is an investment fun	d, do not complete l	Item 9. Procced to	Item 10.							
Indicate whether the issuer is any o	f the following (select	t the one that applie	es - if more than one	applies, select only	one).					
Reporting issuer in any juris	sdiction of Canada									
Foreign public issuer										
Wholly owned subsidiary of	f a reporting issuer in	n any jurisdiction of	Canada ⁶							
Provide name of reporting issuer										
Wholly owned subsidiary of	f a foreign public issu	uer ⁶								
Provide name o	f foreign public issue	r								
Issuer distributing only eligi	ble foreign securities	and the distributio	n is to permitted clie	nts only ⁷						
If the issuer is at least one of the	above, do not comp	olete Item 9(a) – (d	c). Proceed to Item	10.						
⁶ An issuer is a wholly owned subsice securities that are required by law to respectively. ⁷ Check this box if it applies to the collection. Refer to the definitions of "ellows". If the issuer is none of the	o be owned by its dir urrent distribution ev eligible foreign securi	rectors, are benefication in the issuer madity" and "permitted continued to the continued of the continue	ially owned by the re de previous distributi client" in Part B(1) of	porting issuer or the fons of other types	he foreign	public iss	suer,			
a) Directors, executive officer	rs and promoters of	of the issuer								
Provide the following information fo territory; otherwise state the country.						tate the p	rovince	or		
Organization or company name	Family name	First given name	Secondary given names	Business loca non-individu residenta jurisdictior individu	ial or ail n of		onship to et all that			
				Province or o	country	D	0	Р		
	Granleese	William		British Columbia	a	✓	✓			
	Granleese	William	R.	British Columbia	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 na	ames				
Title	Portfolio Manager									
Telephone number	r 6045302301 Email address will@antriminvestr				ments.co	om				
Signature	"William Granleese"	Date	2020	08	07					
			YYYY	/ MM	DD					

ITEM 11- CONTACT F	PERSON				
		or the individual that the secu the individual certifying the	urities regulatory authority or report in Item 10.	regulator ma	ay contact with any questions
Same as individua	al certifying the report				
Full legal name				Title	
	Family name	First given name	Secondary given names		
Name of company					
Telephone number		Er	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.