Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 10199269

ITEM 1 - REPORT TYPE								
✓ New report								
☐ Amended report If ame	nded, provide filing date	of report that is bein	g ame	ended	(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								
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							
If an underwriter is completing the report,		gal name and firm NPD r	numbar					
Full legal name	provide the underwriter's fall te	gat name ana ן מיזוו איזיין מיזור	iumber.					
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	☐ Invests primarily in other investment fund issuers					
☐ Is a UCITs Fund¹						
	tive Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union ollective 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) Currency

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 2023 06 01

YYYY MM DD

End date 2023 06 08

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	,		Description of security Number of securities Single or lowest price		lowest	Highest price	Total amount		
Р	R	S		Class A Preferred Non-Voting Shares	10,000.00	1.0000		10,000.00		
Р	R	S		Class B Series 'B' Preferred Non- Voting Shares	271,635.00	1.0000		271,635.00		
Р	R	S		Class B Series 'C' Preferred Non- Voting Shares	2,176,788.00	1.0000		2,176,788.00		

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	-	Y I (Canadian %) I ' Y I		expiry date Conversion		(Canadian \$) 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 ²⁸ purchasers	Total amount (Canadian \$)
British Columbia	NI 45-106 2.3 [Accredited investor]	12	1,114,058.00
British Columbia	NI 45-106 2.9(1) [Offering memorandum] (BC, NL)	15	877,535.00
Ontario	NI 45-106 2.3 [Accredited investor]	2	69,750.00
Ontario	NI 45-106 2.9(2.1) [Offering memorandum] (AB, SK, ON, QC, NB, NS)	3	34,600.00

Manitoba	NI 45-106 2.3 [Accredited investor]	1	234,780.00
New Brunswick	NI 45-106 2.9(2.1) [Offering memorandum] (AB, SK, ON, QC, NB, NS)	5	87,000.00
Québec	NI 45-106 2.3 [Accredited investor]	1	40,700.00
	2,458,423.00		

^{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	2022-10-14	Υ	2022-10-14

^{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.	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 compen	sated and regis	tration statu	S								
Indicate whether the person comp	ensated is a registr	ant.		☐ No		\checkmark	Yes				
If the person compensated is an in	dividual, provide ti	he name of th	e indivi	dual.							
Full legal name of individu	ıal										
	F	amily name			First	given na	ame	I	Secondary (given names	
If the person compensated is not an individual, provide the following information.											
Full legal name of	non-individual	iA Private V	Vealth	nc./iA Ge	stion p	rivée d	de patri	moine			
Firm	NRD number	1 5	4	0	0			(if app	licable)		
Indicate whether the person comp	ensated facilitated	the distribution	on throu	ıgh a fundi	ng porta	ıl or an	interne	t-based p	portal.] No ✓	Yes
b) Business contact informa	ation										
If a firm NRD number is not provid	led in Item 8 (a), p	rovide the bu	siness co	ontact infor	mation	of the p	person b	eing con	npensated.		
Street address											
Municipality						Р	rovince	/State			
Country					Po	ostal c	ode/Zip	code			
Email address						Telep	hone n	umber			
c) Relationship to issuer or	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	• • • • • •		• • • •	<i>C</i> 1: 1:	0():						
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	1	4.09					Security	code 1	Security code 2	Security co	ode 3
Value of all securities distributed as compensation ⁴			9	Security co	des						
·	ns of warrants, op	 tions or other	rights								
Other compensation ⁵		De	scribe								=
Total compensation paid	1	4.09									
			red con	npensation	(describ	oe the t	terms be	elow)			
Check box if the person will or may receive any deferred compensation (describe the terms below) IA Private Wealth Inc. will receive an annual trailer fee paid monthly in the amount of 1/2% on Class A Preferred Non-Voting Shares, 1% on Class B Series 'B' Preferred Non-Voting Shares and 0% on Class B Series 'C' Preferred Non-Voting Shares.											
⁴ Provide the aggregate value of a additional securities of the issuer rights exercisable to acquire addi ⁵ Do not include deferred compen	Indicate the secu tional securities of	rity codes for	pensatio all secu	on, <u>excludil</u> urities distr	<u>ng</u> option ibuted a	ns, wai s comp	rrants or pensatio	other rig n, <u>includ</u>	ghts exercisable t ding options, warr	o acquire ants or othe	er

a) Name of person compe	ensated and regis	tration stat	us								
Indicate whether the person com	pensated is a registi	rant.		☐ No		✓ Y	'es				
If the person compensated is an	individual, provide t	he name of t	he indivi	dual.							
Full legal name of individ	dual										
	i i	amily name			First g	iven nam	ne		Secondary g	jiven names	
If the person compensated is not	an individual, provi	de the follow	ving infor	mation.							
Full legal name of	of non-individual	NATIONAL	BANK	FINANCI	AL INC./	FINAN	CIÈRE E	ANQL	JE NATIONAL	E INC.	
Fir	m NRD number	1 9	6	0			(if	applica	able)		
Indicate whether the person com	pensated facilitated	the distribut	ion throu	ıgh a fundi	ng portal	or an in	nternet-ba	sed por	tal.	No ✓	Yes
b) Business contact inform	nation										
If a firm NRD number is not prov	rided in Item 8 (a), p	rovide the bu	usiness co	ontact info	mation o	f the pei	rson being	compe	ensated.		
Street address											
Municipality						Pro	vince/Sta	ate			
Country					Pos	stal cod	de/Zip co	de			
Email address					٦	elepho	one numb	oer [
c) Relationship to issuer or investment fund manager											
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section. Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund)											
Director or officer of the investment fund or investment fund manager Employee of the issuer or investment fund manager											
✓ None of the above											
d) Compensation details											
Provide details of all compensation Canadian dollars. Include cash continuities incidental to the distribution, such allocation arrangements with the	mmissions, securitien has clerical, printing directors, officers of	es-based com g, legal or acc r employees	npensatio counting	n, gifts, dis services. A	counts or n issuer is	other co	ompensati uired to a	on. Do	not report payr	ments for se	ervices
Cash commissions paid	d	9.62				Se	curity code	1 S	Security code 2	Security co	ode 3
Value of all securities distributed as compensation			(Security co	des						
Describe te	rms of warrants, op	tions or othe	er rights								
Other compensation	5	D	escribe								
Total compensation paid	d	9.62									
✓ Check box if the pers	son will or may rece	eive any defe	erred con	npensation	(describe	e the ter	rms below)			
National Bank Fina Non-Voting Shares Non-Voting Shares	, 1% on Class B										ed
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 of	irity codes fo									∍r

a) Name of person compe	ensated and regist	ration status	\$								
Indicate whether the person com	pensated is a registro	ınt.		☐ No		✓ Y	'es				
If the person compensated is an	individual, provide th	e name of the	e individ	dual.							
Full legal name of indivi	dual										
	Fa	amily name			First g	jiven nam	ne		Secondary	given names	
If the person compensated is not	t an individual, provid	e the followin	ng infori	mation.							
Full legal name of	of non-individual	PI Financial	Corp.	/Corporat	ion Fina	ancière	PI				
Fir	m NRD number	5 2	9	0			(i	f appli	cable)		
Indicate whether the person com	pensated facilitated t	he distributio	n throu	ıgh a fundi	ng portal	l or an in	nternet-bo	ased po	ortal.	No ✓	Yes
b) Business contact inform	mation										
If a firm NRD number is not prov	vided in Item 8 (a), pr	ovide the bus	iness co	ontact infor	mation c	of the pe	rson bein	g com	pensated.		
Street address											
Municipality						Pro	vince/St	tate			
Country					Po	stal cod	de/Zip c	ode			
Email address					-	Telepho	one num	ber			
c) Relationship to issuer or investment fund manager											
Indicate the person's relationship the Instructions and the meaning	g of "control" in sectio	on 1.4 of NI 45			oses of c	ompletir	ng this se	ction.	-		
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, securities h as clerical, printing, e directors, officers or	e-based composite legal or accomployees of	ensatio unting	n, gifts, dis services. A	counts or n issuer i	other co s not req	ompensa Juired to d	tion. D ask for	o not report pay	ments for se	ervices
Cash commissions pai	a	1.48				Se	ecurity cod	le 1	Security code 2	Security co	ode 3
Value of all securities distributed as compensation			8	Security co	des						
Describe te	erms of warrants, opti	ons or other	rights								
Other compensation	5	Des	scribe								
Total compensation pai	d ·	1.48									
✓ Check box if the per-	son will or may recei	ve any deferr	ed com	npensation	(describ	e the te	rms belov	w)			
PI Financial Corp. Shares, 1% on Cla Shares.											oting
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 secur Iditional securities of	ity codes for a									er

a) Name of person compe	nsated and regis	tration	status										
Indicate whether the person com	pensated is a regist	rant.			☐ No		√	Yes					
If the person compensated is an i	ndividual, provide t	he name	e of the	indivi	dual.								
Full legal name of individ	dual												
		Family na	ame		-	First	given r	name		Secor	ndary gi	ven names	
If the person compensated is not	an individual, provi	de the f	ollowing	infor	mation.								
Full legal name o	of non-individual	RAYM	IOND J	AME	S LTD.								
Fin	m NRD number	8	2	4	0				(if app	olicable)			
Indicate whether the person com	pensated facilitatea	the dist	ribution	throu	ıgh a fund	ing port	al or aı	n interne	t-based	portal.		No 🔽	Yes
b) Business contact inform	nation												
If a firm NRD number is not prov	ided in Item 8 (a), p	rovide t	he busin	iess co	ontact info	rmation	of the	person l	peing cor	mpensated.			
Street address													
Municipality							F	Province	e/State				
Country						Р	ostal o	code/Zi	p 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 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 co- incidental to the distribution, such allocation arrangements with the	mmissions, securition as clerical, printing directors, officers o	es-basea g, legal o r employ	l compei or accou	nsatio nting	n, gifts, dis services. A	scounts (In issuer	or othe	r compe required	nsation. ' to ask fo	Do not repor	t paym	nents for s	ervices
Cash commissions paid	¹	5.73						Security	code 1	Security co	de 2	Security c	ode 3
Value of all securities distributed as compensation				9	Security co	odes							
Describe te	rms of warrants, op	tions or	other ri	ghts									
Other compensation ⁵	5		Desc	cribe									
Total compensation paid	t	5.73											
✓ Check box if the pers	son will or may rece	eive any	deferre	d con	npensatior	descri	ibe the	terms b	elow)				
Raymond James L' Voting Shares, 1% Voting Shares.	td. will receive ar on Class B Serie	annua es 'B' P	al trailer referre	r fee d Nor	paid mor n-Voting	nthly in Shares	the ar	nount o	of 1/2% Class B	on Class A Series 'C' I	Prefe Prefer	erred Nor red Non-	1-
⁴ Provide the aggregate value of additional securities of the issue rights exercisable to acquire add ⁵ Do not include deferred compe	r. Indicate the secu ditional securities o	ırity cod	les for a										er

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	ct the one that appli	es - if more than one	applies, select onl	y one).					
Reporting issuer in any juris	sdiction of Canada									
Foreign public issuer										
Wholly owned subsidiary of	a reporting issuer i	n any jurisdiction of	Canada ⁶							
Provide name of reporting issuer										
Wholly owned subsidiary of a foreign public issuer ⁶										
Provide name of foreign public issuer										
Issuer distributing only eligi	ble foreign securitie	s and the distribution	on is to permitted clie	ents only ⁷				_		
If the issuer is at least one of the	above, do not com	plete Item 9(a) – (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 Item 9(a) - (c).										
a) Directors, executive officer	rs and promoters	of the issuer								
Provide the following information for territory; otherwise state the country						tate the p	province	or		
Organization or company name	Family name	Secondary given name First given name names		Business loc non-individu resident jurisdictio individu	ual or ail n of	Relationship to issue (select all that apply)				
				Province or	country	D	0	Р		
	Granleese	William		British Columbi	а	✓				
	Granleese	William	R.	British Columbi	а	✓	✓			
	Worsnup	Christopher	Gavin	British Columbi	а	✓				
b) Promoter information										
If the promoter listed above is not ar within Canada, state the province or										
Organization or company name	Organization or company name Family name First given name Residential First given name Relationship to (select one or both									

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.

Province or

country

D

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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	McKechnie	Stephanie								
	Family name	First given name		Seconda	ary given names					
Title	Administrative Officer									
Telephone number	6045302301	Email address	stepha	nie@antrim	ninvestments.com					
Signature	"Stephanie McKechnie"	Date	2023	3 06	09					
			YYYY	MM	DD					

PERSON				
		, ,	regulator may	contact with any questions
al certifying the report				
			Title	
Family name	First given name	Secondary given names		_
	Er	mail address		
	this report, if different than	ness contact information for the individual that the secuthis report, if different than the individual certifying the al certifying the report Family name First given name	ness contact information for the individual that the securities regulatory authority or this report, if different than the individual certifying the report in Item 10.	iness contact information for the individual that the securities regulatory authority or regulator may this report, if different than the individual certifying the report in Item 10. al certifying the report Title Family name First given name Secondary given names

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.