



FORM 10A

MATERIAL CHANGE REPORT

11:13 am, Nov 15, 2023

Pursuant to Section 64 of the Securities Act, 2012

1. NAME OF REPORTING ISSUER

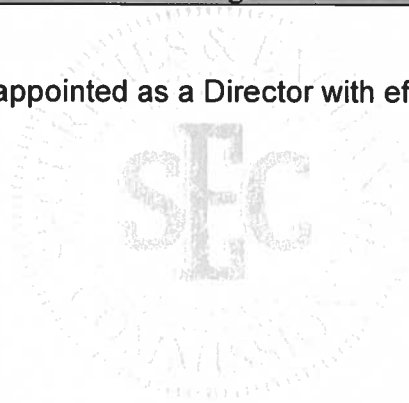
| |
|--------------------------------------|
| Name of Reporting Issuer |
| Citibank (Trinidad & Tobago) Limited |

2. DATE OF MATERIAL CHANGE

| |
|--------------------------------|
| Date of material change |
| November 14, 2023 |

3. DESCRIPTION OF MATERIAL CHANGE

| |
|--|
| Provide a description of the material change |
| James Ollivierre was appointed as a Director with effect from November 14, 2023. |




4. DETAILS OF PUBLICATION OF MATERIAL CHANGE

| | YES | NO |
|--|--------------------------|----------------------------|
| Will you be seeking an exemption from publishing a notice in accordance with Section 64(2) of the Securities Act 2012? | <input type="checkbox"/> | X <input type="checkbox"/> |

If "No"

| | |
|--|-------------------|
| Date of Publication of Notice (dd/mmm/yyyy) | November 20, 2023 |
|--|-------------------|

If "Yes"


| State the reasons for applying for the exemption |
|---|
|  |

5. DETAILS OF SENIOR OFFICER

| | |
|------------------------------|---|
| Name (First name, Last name) | Mitchell de Silva |
| Position in Organization | CCO |
| Business Address | No. 12 Queen's Park East, Port of Spain |
| Work Phone (1-xxx-xxx-xxxx) | 1-868-821-6066 |
| Fax Phone(1-xxx-xxx-xxxx) | 1-868-624-8131 |
| Email Address | mitchell.anthony.desilva@citi.com |

6. DATE, CERTIFICATION AND SIGNATURE

I hereby certify that the statement and information contained in this form and any attachment hereto are true and correct to the best of my knowledge and belief and submitted in compliance with the provisions of the Securities Act, 2012. I understand that any misrepresentation, falsification or material omission of information on this application may result in a breach of the Securities Act, 2012.

DANIELLE RAMPERSAD  DELEGATE SECRETARY 14/11/2023

Print Name **Signature** **Position** **Date**

FOR OFFICIAL USE ONLY

| Tool | ID Information |
|--|----------------|
| Registrant's Number | |
| Director's Number | |
| Document / Record Number | |
| Record's Management Date Received (dd/mm/yyyy) | |

Approved By : _____ Date (DD/MM/YYYY) _____