



FORM 10A

MATERIAL CHANGE REPORT

12:13 pm, Oct 13, 2021

Pursuant to Section 64 of the Securities Act, 2012

1. NAME OF REPORTING ISSUER

Name of Reporting Issuer
HOME MORTGAGE BANK

2. DATE OF MATERIAL CHANGE

Date of material change
OCTOBER 7, 2021

3. DESCRIPTION OF MATERIAL CHANGE

Provide a description of the material change
<p>Pursuant to the annual surveillance exercise completed by Caribbean Information and Credit Rating Services (CariCRIS), the corporate credit rating of the Home Mortgage Bank was lowered to CariA on its regional rating scale, and ttA- on the Trinidad and Tobago (T&T) national scale effective October 7, 2021, with a stable outlook.</p>


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"/>	<input checked="" type="checkbox"/>

If "No"

Date of Publication of Notice (dd/mm/yyyy)	12/OCT/2021
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If "Yes"


State the reasons for applying for the exemption


5. DETAILS OF SENIOR OFFICER

Name (First name, Last name)	BRENT MC FEE
Position in Organization	CHIEF EXECUTIVE OFFICER (Ag.)
Business Address	SECOND FLOOR, NIBTT BUILDING 14-19 QUEEN'S PARK EAST, PORT OF SPAIN
Work Phone (1-xxx-xxx-xxxx)	1-868-625-4972
Fax Phone(1-xxx-xxx-xxxx)	1-868-623-3167
Email Address	brent.mcfee@hmbinvest.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.

<u>BRENT MC FEE</u>		<u>CEO (Ag.)</u>	<u>October 11, 2021</u>
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) _____