





Pursuant to section 64 of the Securities Act, 2012

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Ι.	NAN	AE OF	REPORT	LING	ISSUER

Name of Reporting Issuer

TRINIDAD AND TOBAGO UNIT TRUST CORPORATION

2. DATE OF MATERIAL CHANGE

Date of material change

November 26, 2020

3. DESCRIPTION OF MATERIAL CHANGE

Provide a description of the material change

The Board of Directors of the Trinidad and Tobago Unit Trust Corporation, at its Board meeting held on November 26, 2020, appointed Ms. Jo-Anne Julien as an Independent Director to the Board, effective November 26, 2020 for a period of one (1) year, in accordance with Sections 7(2) and (5A) of the Unit Trust Corporation of Trinidad and Tobago Act, 1981.

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?		Χ□

Date of Publication of Notice (dd/mmm/yyyy)	November 27, 2020

If "Yes"

ate the reasons	for applying for the exemption	
N.A.		

5. DETAILS OF SENIOR OFFICER

Name (Salutation, First name, Last name)	Mrs. Dawn Seepersad
Position in Organization	General Counsel and Corporate Secretary
Business Address	UTC Financial Centre 82 Independence Square Port of Spain
Work Phone (1-xxx-xxx-xxxx)	1-868-624-8648 ext. 8201
Fax Phone(1-xxx-xxx-xxxx)	1-868-624-5207
Email Address	DSeepersad@ttutc.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.

Print Name	Signature	Position	Date	
DAWN SEEPERSAD	\V	General Counsel & Corporate Secretary	November 26, 2020	
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Tool	ID Information	
Registrant's Number		The Residence
Director's Number		
Document / Record Number		
Record's Management Date Received (dd/mm/yyyy)		
Approved By:	Date (DD/MM/YYYY)	
Approved by .		