

FORM 10

MATERIAL CHANGE REPORT

Pursuant to section 64 of the Securities Act, 2012*



1. NAME OF REPORTING ISSUER

Name of Reporting Issuer
Trinidad & Tobago Unit Trust Corporation

2. DATE OF MATERIAL CHANGE

Date of material change
January 8, 2020

3. DESCRIPTION OF MATERIAL CHANGE

Provide a description of the material change
Mr. Ruben Mc Sween's term of office as a Director of the Board of the Trinidad and Tobago Unit Trust Corporation, appointed by the National Insurance Board of Trinidad and Tobago (NIBTT) expires on January 8, 2020 in accordance with section 7(4) of the Unit Trust Corporation of Trinidad and Tobago Act, Chapter 83:03.




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/mmm/yyyy)	January 8, 2020
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If "Yes"


State the reasons for applying for the exemption


5. DETAILS OF SENIOR OFFICER

Name (Salutation, First name, Last name)	Mrs. Dawn Seepersad
Position in Organization	General Counsel & Corporate Secretary
Business Address	UTC Financial Centre 82 Independence Square PORT OF SPAIN
Work Phone (1-xxx-xxx-xxxx)	1-868-624-8648
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.

Dawn Seepersad  General Counsel & Corporate Secretary January 7, 2020

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) _____