

FORM 10A

MATERIAL CHANGE REPORT

Pursuant to Section 64 of the Securities Act, 2012

1. NAME OF REPORTING ISSUER

Name of Reporting Issuer

FIRST CITIZENS BANK LIMITED

2. DATE OF MATERIAL CHANGE

Date of material change

APRIL 30, 2024

3. DESCRIPTION OF MATERIAL CHANGE

Provide a description of the material change

David Inglefield resigned as a Director of First Citizens Bank Limited with effect from April 30, 2024.



By ccharles at 10:29:31 am, 07/05/2024

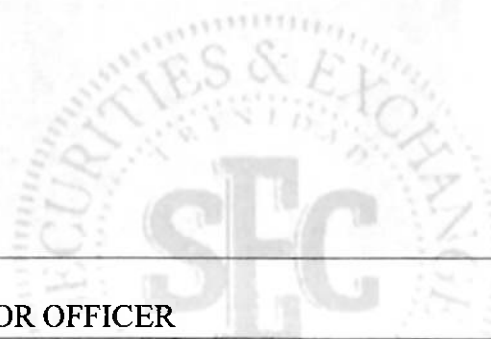
4. DETAILS OF PUBLICATION OF MATERIAL CHANGE

| | 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) | May 07, 2024 |
|--|--------------|

If "Yes"

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

5. DETAILS OF SENIOR OFFICER

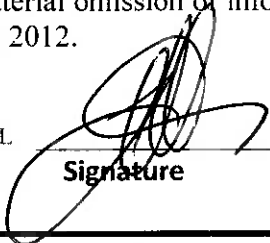
| | |
|------------------------------|---------------------------------------|
| Name (First name, Last name) | Lindi Ballah-Tull |
| Position in Organization | Group Corporate Secretary |
| Business Address | 9 Queens Park East, Port of Spain |
| Work Phone (1-xxx-xxx-xxxx) | 1 (868) 624-3178 Ext 3070 |
| Fax Phone(1-xxx-xxx-xxxx) | - |
| Email Address | lindi.ballah-tull@firstcitizenstt.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.

LINDI BALLAH-TULL

Print Name



Signature

GROUP CORPORATE SECRETARY

Position

03/05/2024

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) _____

