



FORM 10A

MATERIAL CHANGE REPORT

May 18, 2023, 2:18 pm

Pursuant to Section 64 of the Securities Act, 2012

1. NAME OF REPORTING ISSUER

| |
|--------------------------|
| Name of Reporting Issuer |
| Scotia Money Market Fund |

2. DATE OF MATERIAL CHANGE

| |
|----------------------------|
| Date of material change |
| 11 th May, 2023 |

3. DESCRIPTION OF MATERIAL CHANGE

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|--|
| Provide a description of the material change |
| <p>Mr. Neil Macdonald was appointed a Director of the Board of Scotia Money Market Fund effective 11th May, 2023, subject to regulatory approval.</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/mmm/yyyy) | 16 th May 2023 |
|--|---------------------------|

If “Yes”

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

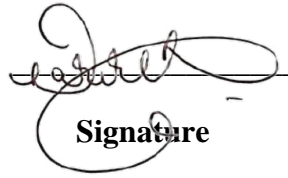
5. DETAILS OF SENIOR OFFICER

| | |
|------------------------------|--|
| Name (First name, Last name) | Lanecia Darville |
| Position in Organization | Senior Manager, Legal and Corporate Secretary |
| Business Address | P.O. Box N-7518 2nd Floor Rawson Square Nassau, The Bahamas |
| Work Phone (1-xxx-xxxxxxx) | 1-242-356-1647 |
| Fax Phone(1-xxx-xxx-xxxx) | |
| Email Address | Lanecia.darville@scotiabank.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.

Lanecia Darville



Senior Manager

11th May 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)