## **COVER SHEET**

|                     |           |      |       |        |      |               |               |     |       |       |            |       | A     | ૦    | U   | 9    | 4        | U        | U        |          | 1    | <u>ა</u> | 3    |   |
|---------------------|-----------|------|-------|--------|------|---------------|---------------|-----|-------|-------|------------|-------|-------|------|-----|------|----------|----------|----------|----------|------|----------|------|---|
|                     |           |      |       |        |      |               |               |     |       |       |            |       |       |      | S   | .E.C | . Re     | gist     | ratio    | n N      | umb  | er       |      |   |
|                     |           |      |       |        |      |               |               |     |       |       |            |       |       |      |     |      |          |          |          |          |      |          |      |   |
| EAST                | W E       | S    | Т     |        | В    | Α             | N             | K   | I     | N     | G          |       | С     | 0    | R   | Р    | 0        | R        | Α        | Т        | Π    | 0        | Ν    |   |
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|                     |           |      |       |        |      | (             | Com           | npa | ny's  | Full  | Na         | me)   |       |      |     |      |          |          |          |          |      |          |      |   |
|                     |           | _    |       |        |      |               |               |     |       |       |            |       |       |      |     |      |          |          |          |          |      |          |      |   |
| T  H  E    B        | E A       | U    | F     | 0      | R    | Τ  ,          |               | 5   | T     | Н     |            | Α     | ٧     | Е    | N   | U    | Е        |          | С        | 0        | R    |          |      |   |
|                     | I= I      | -    | _     |        |      |               |               | _   |       |       | _          |       | _     | _    |     | Ι.   |          | _        |          | I =      | ls.  |          | 1    |   |
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| T A G U I           | G         | С    |       | Т      | Υ    | $\overline{}$ | $\overline{}$ | 1   |       | _     |            |       | ı -   |      | ı   |      |          |          | ı        | 1        |      |          |      |   |
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| Month Day           | _         |      |       |        |      |               |               |     |       | RM    |            | PE    |       |      |     |      |          |          |          | Мо       | nth  |          | Day  | , |
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|                     |           |      |       |        |      | Sec           | ond           | ary | Lice  | ense  | Ту         | pe,   | if Av | aila | ble |      |          |          |          |          |      |          |      |   |
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| M S R D             |           |      |       |        |      |               |               |     |       |       |            |       |       |      |     |      |          |          |          |          |      |          |      |   |
| Dept. Requiring thi | is Doc.   |      |       |        |      |               |               |     |       |       |            |       |       |      | Am  | nenc | led A    | Artic    | les l    | Num      | ber/ | 'Sec     | tion |   |
|                     |           |      |       |        |      |               |               |     |       |       |            |       |       |      |     |      |          |          |          |          |      |          |      |   |
|                     |           |      |       |        |      |               |               |     | г     |       |            |       | To    | otal | Am  | ount | of E     | orro     | owin     | gs       |      |          |      |   |
|                     |           |      |       |        |      |               |               |     |       |       |            | _     |       |      |     |      | J        | <u> </u> |          |          |      |          |      |   |
| Total No. of Stockl | holders   |      |       |        |      |               |               |     |       |       |            | Do    | mes   | stic |     |      |          | F        | orei     | gn       |      |          |      |   |
|                     |           |      |       |        |      |               |               |     |       |       |            |       |       |      |     |      |          |          |          |          |      |          |      |   |
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|                     |           |      |       | П      |      |               |               |     |       |       |            |       |       |      |     |      |          |          |          |          |      |          |      |   |
| File N              | lumber    |      |       |        |      | -             |               |     |       |       | LC         | CU    |       |      |     |      | •        |          |          |          |      |          |      |   |
|                     |           |      |       |        |      |               |               |     |       |       |            |       |       |      |     |      |          |          |          |          |      |          |      |   |
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| Docum               | nent I.D. |      |       |        |      | -             |               |     |       |       |            |       |       |      |     |      | _        |          |          |          |      |          |      |   |
|                     |           |      |       |        |      | _             |               |     |       | (     | Cas        | hier  |       |      |     |      |          |          |          |          |      |          |      |   |
|                     |           |      |       |        |      |               |               |     |       |       |            |       |       |      |     |      |          |          |          |          |      |          |      |   |
| STA                 | MPS       | 3    |       |        |      |               |               |     |       |       |            |       |       |      |     |      |          |          |          |          |      |          |      |   |

Remarks = pls. Use blank ink for scanning purposes

## SECURITIES AND EXCHANGE COMMISSION Metro Manila, Philippines

Check box if no longer subject to filing requirement

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

| Filed pursuant to | Section 23 | 3 of the | Securities | Regulation | Code |
|-------------------|------------|----------|------------|------------|------|

| Fν | ISFD |  |
|----|------|--|
|    |      |  |
|    |      |  |

| Name and Address of Reporting Person | Issuer Name and Trading               | Symbol         |  |                | 7. Relations | hip of Reporting Person to                                   |  |  |  |  |  |  |
|--------------------------------------|---------------------------------------|----------------|--|----------------|--------------|--|--|--|--|--|--|--|
| GOTIANUN, JONATHAN TAN               | EAST WEST B                           | ANKING CO      | RPORATIO                                   | ON (EW)        |              |  | (Check all applicable)                         |  |  |  |  |  |
| (Last) (First) (Middle)              |                                       |                | <ol><li>Statement for Month/Year</li></ol> | or             | _ <u>x</u>   | Director<br>Officer<br>(give title be                        | low)   | 10% Owner Other (specify below)  |  |  |  |  |
| (Street)                             | 4. Citizenship                        | 4. Citizenship |  |                |              |  | Chairman                                       |  |  |  |  |  |
|                                      | FILIPIN                               | 0              | Original (MonthYear)                       |                |              | •  |  |  |  |  |  |  |
| (City) (Province) (Postal            |                                       | O              |  |                | <u> </u>     |  |  |  |  |  |  |  |
| , , , , , ,                          | ,                                     |                |  |                | Table        | 1 - Equity Securities Be                                     | neticially Owned                               |  |  |  |  |  |
| Class of Equity Security             | Transaction     Date (Month/Day/Year) | Securities A   | cquired (A) or D                           | isposed of (D) |              | t of Securities Owned at<br>End of Month<br>Number of Shares | 4 Ownership Form: Direct (D) or Indirect (I) * | Nature of Indirect Beneficial     Ownership  |  |  |  |  |
|                                      | (MOIIII/Day/Teal)                     | Amount         | Price                                      |                |              |  |  |  |  |  |  |  |
| COMMON                               | July 02, 2019                         | Starting E     | Balance                                    |                |              | 19   | D  |  |  |  |  |  |
|                                      | December 12, 2022                     | Starting E     | Balance                                    |                |              | 22,777,387   | I  |  |  |  |  |  |
|                                      |                                       |                |  |                |              |  |  |  |  |  |  |  |
|                                      | October 13, 2023                      | 14,954         | А  | 9.35           |              | 14,954   | I  | Proportionate ownership of shares held by A.L. Gotianun, Inc., where Director is a shareholder |  |  |  |  |
|                                      |                                       |                |  |                |              |  |  |  |  |  |  |  |
|                                      |                                       |                |  |                |              |  |  |  |  |  |  |  |
|                                      |                                       |                |  |                |              |  |  |  |  |  |  |  |
|                                      |                                       |                |  |                |              |  |  |  |  |  |  |  |
|                                      |                                       |                |  |                |              |  |  |  |  |  |  |  |
|                                      |                                       |                |  |                |              |  |  |  |  |  |  |  |
|                                      |                                       |                |  |                |              |  |  |  |  |  |  |  |
|                                      |                                       |                |  |                |              |  |  |  |  |  |  |  |
|                                      |                                       |                |  |                |              |  |  |  |  |  |  |  |
|                                      |                                       |                |  |                |              |  |  |  |  |  |  |  |
|                                      |                                       |                |  |                |              |  |  |  |  |  |  |  |
|                                      |                                       |                |  |                |              |  |  |  |  |  |  |  |
|                                      |                                       |                |  |                | TOTAL S      | SHAREHOLDINGS:   |  |  |  |  |  |  |
|                                      |                                       |                |  |                | 0.00%        | 19   | D  |  |  |  |  |  |
|                                      |                                       |                |  |                | 0.01         | 22,792,341   | I  |  |  |  |  |  |
|                                      | ·                                     |                |  |                |              |  |  | (Print or Type Responses)  |  |  |  |  |

If the change in beneficial ownership is 50% of the previous shareholdings or is equal to 5% of the outstanding capital stock of the issuer, provide the disclosure requirements set forth on page 3 of this form.

Reminder: Report on a separate line for each class of equity securities beneficially owned directly or indirectly.

- (1) A person is directly or indirectly the beneficial owner of any equity security with respect to which he has or shares:
  - (A) Voting power which includes the power to vote, or to direct the voting of, such security; and/or
  - (B) Investment power which includes the power to dispose of, or to direct the disposition of, such security.
- (2) A person will be deemed to have an indirect beneficial interest in any equity security which is:
  - (A) held by members of a person's immediate family sharing the same household;
  - (B) held by a partnership in which such person is a general partner;
  - (C) held by a corporation of which such person is a controlling shareholder; or
  - (D) subject to any contract, arrangement or understanding which gives such person voting power or investment power with respect to such security.

## Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., warrants, options, convertible securities)

| Derivative Security | Conversion or     Exercise Price     of Derivative     Security | 3. Transaction<br>Date<br>(Month/Day/Yr) | Number of Derivat<br>Acquired (A) or Di |            | 5. Date Exercisable and Expiration Date (Month/Day/Year) | 6. Title and Underlying |       |                                  | 8. No. of<br>Derivative<br>Securities<br>Beneficially<br>Owned at | 9. Owner-<br>ship Form<br>of Derivative<br>Security;<br>Direct (D) | 10. Nature<br>of Indirect<br>Beneficial<br>Ownership |     |
|---------------------|---|--|---|------------|--|-------------------------|-------|----------------------------------|---|--|--|-----|
|                     |   |  | Amount                                  | (A) or (D) | Date Exercisable   | Expiration<br>Date      | Title | Amount or<br>Number<br>of Shares |   | End of<br>Month  | or<br>Indirect (I) *                                 |     |
| N/A                 | N/A   | N/A                                      | N/A                                     | N/A        | N/A  | N/A                     | N/A   | N/A                              | N/A   | N/A  | N/A  | N/A |
|                     |   |  |   |            |  |                         |       |                                  |   |  |  |     |
|                     |   |  |   |            |  |                         |       |                                  |   |  |  |     |
|                     |   |  |   |            |  |                         |       |                                  |   |  |  |     |
|                     |   |  |   |            |  |                         |       |                                  |   |  |  |     |
|                     |   |  |   |            |  |                         | _     | +                                | <del>                                     </del>                  |  |  |     |
|                     |   |  |   |            |  |                         | 1     |                                  |   |  |  |     |
|                     |   |  |   |            |  |                         |       |                                  |   |  |  |     |
|                     |   |  |   |            |  |                         |       |                                  |   |  |  |     |

Explanation of Responses:

Note: File **three (3)** copies of this form, one of which must be manually signed.

Attach additional sheets if space provided is insufficient.

Signature of Reporting Person

GOTIANUN, JONATHAN TAN

Data