

OBJECTIVES: The purpose of Investor Suitability Assessment is to understand your capacity to accept investment risk and will guide you in selecting your investments.

INSTRUCTIONS: Please choose the statement that most closely defines your needs or best describes your situation. Circle the box that corresponds to your choice.

1. COMPANY DETAILS

| | |
|---|---------------------------------|
| Company Registered Name : (As per Certificate of Incorporation) | Place of Incorporation : |
| Company / Registration No. : | Review Date : |

2. FINANCIAL CAPACITY

Please tick (✓) the appropriate box and fill in your score in the column provided.

| | SCORE |
|---|-------|
| 1. What is your company's investment objective? <input type="checkbox"/> Capital preservation (1) <input type="checkbox"/> Income (2) <input type="checkbox"/> Balanced (3) <input type="checkbox"/> Income and Growth (4) <input type="checkbox"/> Growth (5) | |
| 2. What is your company current portfolio? <input type="checkbox"/> Money market funds savings and deposits(1) <input type="checkbox"/> Bonds (2) <input type="checkbox"/> Unit trusts (equity & bond) (3) <input type="checkbox"/> Stocks and shares (4) <input type="checkbox"/> Derivatives (5) | |
| 3. How long do your company plan to invest? <input type="checkbox"/> < 1 year (1) <input type="checkbox"/> 1 - 3 years (2) <input type="checkbox"/> 4 - 6 years (3) <input type="checkbox"/> 7 - 10 years (4) <input type="checkbox"/> > 10 years (5) | |
| 4. How much is your company's latest audited profit? <input type="checkbox"/> RM0 - RM100K (1) <input type="checkbox"/> RM100,001-RM200K (2) <input type="checkbox"/> RM200,001-RM300K (3) <input type="checkbox"/> RM300,001-RM400K (4) <input type="checkbox"/> > RM400K (5) | |
| 5. How much is your company's latest audited liability? <input type="checkbox"/> > RM1,000,000 (1) <input type="checkbox"/> RM700,001-RM1Mil (2) <input type="checkbox"/> RM400,001-RM700K (3) <input type="checkbox"/> RM100,001-RM400K (4) <input type="checkbox"/> ≤ RM100,000 (5) | |
| 6. What is your risk tolerance? <input type="checkbox"/> Conservative. I am a risk averse investor (1) <input type="checkbox"/> Moderate. Able to tolerate some risk (3) <input type="checkbox"/> Aggressive. Able to tolerate high risk (5) | |
| Total Risk Profile Score | |

3. RISK PROFILE

| Risk Score : Less than 10 Conservative (Low) | Risk Score : 11 - 19 Moderate (Medium) | Risk Score : 20 and above Aggressive (High) |
|---|--|---|
| Your risk profile indicates that you can only tolerate minimal downside risks and potential capital loss. | Your risk profile indicates that you can only tolerate moderate downside risks and potential capital loss. | Your risk profile indicates that you can tolerate relatively high market volatility and potential capital loss. |

4. RECOMMENDATION (To be completed by authorised distributor)

| | | |
|--|---|-------------|
| Investment Fund / Portfolio: | | |
| 1. | 4. | |
| 2. | 5. | |
| 3. | 6. | |
| I recommended the above investment fund/portfolio to the Company | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| If YES , the reason for recommendation (<i>multiple answers allowed</i>) | <input type="checkbox"/> Suitable to investor's risk profile <input type="checkbox"/> In line with investor's investment objectives and investment horizon <input type="checkbox"/> Complements investor's portfolio of products to meet financial goals <input type="checkbox"/> Others: _____ (<i>please specify</i>) | |
| If NO , the reason for the non-recommendation (<i>multiple answers allowed</i>) | <input type="checkbox"/> Not suitable to investor's risk profile <input type="checkbox"/> Not in line with investor's investment objective and investment horizon <input type="checkbox"/> Others: _____ (<i>please specify</i>) | |
| _____ | _____ | _____ |
| Consultant's Signature | Consultant's Name | Date |

5. DECLARATION BY INVESTOR

The authorised distributor has explained and I/we have understood the features and the risks of the recommended investment fund/portfolio.

Yes No

All information disclosed herein is true, complete and accurate.

Yes No

I/We acknowledge receipt of the copy of the Product Highlights Sheet and the relevant Disclosure Document (e.g. Prospectus, Information Memorandum, etc.) which have been given to us.

Yes No

This is also to confirm that I/we shall notify in writing to Kenanga Investors Berhad should there be any change in our risk profile.

Yes No

If Applicable:

I/We decline to provide certain information required for product suitability assessment and that this may adversely affect our suitability assessment. *(This is only applicable to High net worth entities and accredited investors only)*

Yes

I/We have decided to purchase another unlisted capital market product that is not recommended by the authorised distributor.

Yes

Authorised Signatory

Authorised Signatory

Common Seal / Company Stamp

Date

(Note: Pre-signed and/or pre-thumb printed forms are not allowed by Kenanga Investors Berhad and regulators for the protection of our investors.)

**WARNING: THE RECOMMENDATION IS MADE BASED ON INFORMATION OBTAINED FROM THE SUITABILITY ASSESSMENT.
INVESTORS ARE ADVISED TO EXERCISE JUDGEMENT IN MAKING AN INFORMED DECISION IN RELATION TO THE UNLISTED
CAPITAL MARKET PRODUCT.**

Kenanga Investors Berhad (199501024358), Level 14, Kenanga Tower, 237, Jalan Tun Razak, 50400 Kuala Lumpur.

Investor Services Centre T: 1800 88 3737 F: +603 2172 3133 E: investorservices@kenanga.com.my

ACKNOWLEDGEMENT TO INVESTOR

4. RECOMMENDATION (To be completed by authorised distributor)

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|--|---|
| Investment Fund / Portfolio: | |
| 1. | 4. |
| 2. | 5. |
| 3. | 6. |
| I recommended the above investment fund/portfolio to the Company | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If YES , the reason for recommendation (<i>multiple answers allowed</i>) | <input type="checkbox"/> Suitable to investor's risk profile <input type="checkbox"/> In line with investor's investment objectives and investment horizon <input type="checkbox"/> Complements investor's portfolio of products to meet financial goals <input type="checkbox"/> Others: _____ <i>(please specify)</i> |
| If NO , the reason for the non-recommendation (<i>multiple answers allowed</i>) | <input type="checkbox"/> Not suitable to investor's risk profile <input type="checkbox"/> Not in line with investor's investment objective and investment horizon <input type="checkbox"/> Others: _____ <i>(please specify)</i> |

Consultant's Signature_____
Consultant's Name_____
Date**5. DECLARATION BY INVESTOR**

| | |
|--|--|
| The authorised distributor has explained and I/we have understood the features and the risks of the recommended investment fund/portfolio. | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| All information disclosed herein is true, complete and accurate. | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| I/We acknowledge receipt of the copy of the Product Highlights Sheet and the relevant Disclosure Document (e.g. Prospectus, Information Memorandum, etc.) which have been given to us. | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| This is also to confirm that I/we shall notify in writing to Kenanga Investors Berhad should there be any change in our risk profile. | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If Applicable: I/We decline to provide certain information required for product suitability assessment and that this may adversely affect our suitability assessment. (<i>This is applicable to High net worth entities and accredited investors only</i>) | <input type="checkbox"/> Yes |
| I/We have decided to purchase another unlisted capital market product that is not recommended by the authorised distributor. | <input type="checkbox"/> Yes |

Authorised Signatory_____
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