

This Investor **Suitability Assessment (SA) Form** will guide you in choosing the unlisted capital market products that suit your investment objectives, risk tolerance, financial profile and investment experience. The information you provide will form the basis of our recommendation. It is important to provide accurate and complete information to ensure that suitable unlisted capital market products are recommended according to your investment needs and objectives.

IMPORTANT: Please tick (✓) the appropriate box and fill in your score in the column provided. Any alterations made must be countersigned.

SECTION A: KNOW YOUR INVESTOR (FIRST INDIVIDUAL APPLICANT)		
Name (Full name as in MyKad)		
Identification No (NRIC/Passport/Police or Army ID)		
SECTION B: RISK PROFILE		
Your risk preference and investment purpose may determine the type of funds that is most suitable for you.		
1	What is your age? <input type="checkbox"/> Above 60 (2) <input type="checkbox"/> 50 - 59 (3) <input type="checkbox"/> 40 - 49 (5) <input type="checkbox"/> 30 - 39 (6) <input type="checkbox"/> Below 30 (8) SCORE:	4
2	How knowledgeable are you about capital market products? <input type="checkbox"/> No knowledge (2) <input type="checkbox"/> Basic knowledge (3) <input type="checkbox"/> Moderate knowledge (5) <input type="checkbox"/> Well-versed (6) <input type="checkbox"/> Expert (8) SCORE:	Risk Tolerance: What is your willingness to take risks in your investments? <input type="checkbox"/> Very conservative. Capital preservation is my top priority. (2) <input type="checkbox"/> Conservative. I can accept small risks for some growth. (3) <input type="checkbox"/> Moderate. I can accept moderate risks for balanced growth. (5) <input type="checkbox"/> Aggressive. I am willing to take significant risks for high returns. (6) <input type="checkbox"/> Highly aggressive. I seek maximum returns and accept very high risks. (8) SCORE:
3	How many years of experience do you have investing in capital market products? <input type="checkbox"/> Never invested before (2) <input type="checkbox"/> < 1 year (3) <input type="checkbox"/> 1 - 3 years (5) <input type="checkbox"/> 3 - 5 years (6) <input type="checkbox"/> > 5 years (8) SCORE:	5
		Financial Preparedness (Emergency Fund) • If you experience a sudden loss of income, how long can your emergency fund sustain your lifestyle? <input type="checkbox"/> No emergency fund (2) <input type="checkbox"/> Less than 6 months (3) <input type="checkbox"/> 6 to 12 months (5) <input type="checkbox"/> More than 12 months (6) <input type="checkbox"/> More than 12 months and regularly reviewed (8) SCORE:
		TOTAL SCORE:
TOTAL SCORE	RISK PROFILE	DESCRIPTION
<input type="checkbox"/> Up to 12	(G1) Very Low	Your risk profile indicates that you have a very low tolerance for investment risks and potential losses. You are better suited for investments that offer returns based on current interest rates.
<input type="checkbox"/> 13 to 18	(G2) Low	Your risk profile indicates that you have a low tolerance for investment risks and potential capital losses. You are more suitable for investment products that may offer returns slightly higher than current interest rates.
<input type="checkbox"/> 19 to 29	(G3) Medium	Your risk profile indicates that you demonstrate moderate tolerance for investment risks and potential capital losses. You are better suited for investment products that may offer returns moderately higher than current interest rates.
<input type="checkbox"/> 30 to 35	(G4) High	Your risk profile indicates that you have a high tolerance for investment risks and potential capital losses, making you more suitable for investment products that could offer higher returns but may experience significant price fluctuations.
<input type="checkbox"/> 36 to 40	(G5) Very High	Your risk profile indicates that you have a very high tolerance for investment risks and potential capital losses. You are more suited for investment products that may expose you to significant price fluctuations in exchange for the potential of very high returns.

➤ This risk profile valid for 2 years. However, you may re-assess your risk with your consultant from time to time to meet your latest investment objective.

Investor's initial:

SECTION C: VULNERABLE CLIENT (To be completed by Investor & Consultant)

This section is to acknowledge and document the identification and assessment of vulnerable client. Vulnerable client include those who face challenges such as:

- ❖ Aged 65 and above*
- ❖ Physical/Cognitive Disabilities*
- ❖ Low Financial Resilience*
- ❖ Low Financial Capabilities*
- ❖ Adverse Life Events*

INVESTOR DECLARATION:

Do you belong to any groups mentioned above?
(Please note that it is compulsory to tick **YES** or **NO** at the box below)

YES NO

CONSULTANT DECLARATION:

I confirm that I have assessed the client's vulnerability status as follows:
(Please note that it is compulsory to tick one of the box below)

- Investor is a vulnerable client
 Investor is not a vulnerable client

If the investor is a vulnerable client, provide additional explanation below:

TRUSTED THIRD-PARTY INVOLVEMENT (Optional):

If applicable, provide details of the trusted third party involved in the decision-making process:

Name: _____ Relationship to investor: _____
Mobile No: _____ Remarks: _____

Investor Acknowledgment:

By signing below, I confirm that the information I provided is accurate and I have been given adequate explanations and time to make informed decisions.

I am comfortable with the method of communication that has been employed by PMBI/ the consultant and I confirm that I fully understand my right to receive details in an alternate format such as, via post or email if I were to request for it.

I acknowledge that I have the option to involve a trusted third party in the decision-making process and I confirm whether or not such involvement was required.

Investor Signature: _____

Date: _____

Consultant Acknowledgment:

By signing below, I confirm that I have thoroughly assessed the client's vulnerability status and all necessary actions have been taken to ensure the suitability of investment recommendations.

I confirm that I have provided the client with the option to involve a trusted third party, and have documented any such involvement appropriately.

Consultant Signature: _____

Date: _____

DISCLAIMER:

This section ensures that vulnerable investors receive fair treatment and additional support tailored to their unique needs. Vulnerable investors are not denied access to any capital market products or services based solely on their status. Instead, additional measures are implemented to promote informed decision-making, including providing sufficient time, utilizing appropriate communication methods, and involving trusted third parties when necessary. All information provided by the client will be treated with strict confidentiality and used solely to ensure the suitability of investment recommendations. Consultants are trained to engage with vulnerable clients empathetically, ensuring fair treatment and support during the assessment and recommendation process.

NOTE:

- *Age - 65 and above.
- *Physical/Cognitive Disabilities – Disabilities that could impact their ability to make an informed decision.
- *Low Financial Resilience - Limited ability to withstand financial shocks, such as those who are heavily indebted, face cash flow issues or have no savings
- *Low Financial Capabilities - Limited knowledge of financial matters, low confidence in managing money or limited capability in other relevant areas such as literacy, language or digital skills.
- *Adverse Life Events – One who have experienced adverse life events resulting in temporary or long-term financial hardship such as unemployment, death or total permanent disability of the main breadwinner.

THE FINDINGS IN THIS SECTION MUST BE REVIEWED AND CONSIDERED IN THE FUND RECOMMENDATION PROCESS OUTLINED IN SECTION D

SECTION D: FUND RECOMMENDATION (To be completed by Consultant)

Based on the vulnerability assessment in Section C, the recommended funds must align with the investor's specific needs and adjusted risk profile (if applicable). If a vulnerable client is identified, the risk profile should be adjusted to reflect their capacity for risk.

Adjustment Based on Section C Findings:

If the assessment in Section C identifies the investor as a **vulnerable client**, their risk profile may be adjusted downward to better align with their capacity for risk tolerance:

- (G5) Very High to (G4) High
- (G4) High to (G3) Medium
- (G3) Medium to (G2) Low
- (G2) Low to (G1) Very Low
- (G1) Very Low remains (G1) Very Low

If **no vulnerabilities are identified** in Section C, the risk level remains as originally assessed.

Refer to table below for further understanding:

Initial Risk Profile	Vulnerability	Adjusted Risk Profile
(G5) Very High	Yes	(G4) High
(G4) High	Yes	(G3) Medium
(G3) Medium	Yes	(G2) Low
(G2) Low	Yes	(G1) Very Low
(G1) Very Low	Yes	(G1) Very Low

DISCLAIMER:

The adjustment of the risk profile for vulnerable investors is implemented solely to enhance the suitability of investment recommendations. This process is designed to ensure alignment with the investor's capacity to withstand financial risks. It is not intended to restrict investment opportunities or discriminate against any group.

The recommended funds based on your investor's risk tolerance assessment are:

(G1) Very Low Up to 12 <input type="checkbox"/>	(G2) Low 13 to 18 <input type="checkbox"/>	(G3) Medium 19 to 29 <input type="checkbox"/>	(G4) High 30 to 35 <input type="checkbox"/>	(G5) Very High 36 to 40 <input type="checkbox"/>
1. PMB Shariah Cash Management Fund	1. PMB Sukuk Fund	1. PMB-An-Nur Waqf Income Fund 2. PMB Shariah Index Fund	1. PMB Dana Al-Aiman 2. PMB Dana Mutiara 3. PMB Dana Bestari 4. PMB Shariah Aggressive Fund 5. PMB Shariah Growth Fund 6. PMB Shariah Small-Cap Fund 7. PMB Shariah Premier Fund 8. PMB Shariah Dividend Fund 9. PMB Shariah Equity Fund 10. PMB Shariah Tactical Fund 11. PMB Shariah Global Equity Fund 12. PMB Shariah ESG Global Equity Fund	1. PMB Shariah ASEAN Stars Equity Fund 2. PMB Shariah Greater China Equity Fund

SECTION D: ACKNOWLEDGEMENT (To be completed by Investor)

a) I wish to invest in the recommended unit trust fund(s) that is/are within or under my assessed risk tolerance.

b) I have decided to purchase other/additional unit trust fund(s) which are not recommended by the consultant. The list of funds is as follows:

1. _____ 3. _____ 5. _____
2. _____ 4. _____ 6. _____

I decline to provide my personal information for the completion of the suitability assessment. I will make all current and future investment decisions based on my own judgment and any independent advice I deemed appropriate. I acknowledge that I understand the purpose of the suitability assessment which is to evaluate my risk tolerance, investment needs and objectives to identify unit trust fund(s) and products that are suitable for me.

The consultant, where applicable, has explained the features, nature, associated risks and terms and conditions of the relevant unit trust fund(s) and I confirm my understanding of these.

All information provided by me is true, complete and accurate. I understand that any misleading, inaccurate or incomplete information I provide may affect the recommendation outcome. In such cases, the consultant will not be held liable for the recommendation (if any).

I acknowledge receipt of the Product Highlight Sheet and relevant disclosure documents provided to me.

Investor's name:	Consultant's name:
Signature:	Signature:
Date:	Date:

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