



Investor Suitability Assessment (Institutions)

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The Sun Life Prosperity Funds, referred to as "Funds," are all managed and distributed by Sun Life Asset Management Company, Inc. (SLAMCI), a member of the Sun Life Financial group of companies.

In this form, *you* and *your* refer to the investor/institution's Authorized Representative(s), while *we*, *us*, *our*, and the *Company* refer to SLAMCI.

Purpose of the Form:

The Investor Suitability Assessment (ISA) will be used to assess the institution's investment profile based on its investment objective(s), cash flow requirements, risk appetite, and risk tolerance. This assessment is for reference only and is not to be taken as an advice from SLAMCI on how to manage your investment. No guarantee is given as to the accuracy or completeness of the assessment. Your financial needs may change over time depending on your objective and situation.

IMPORTANT NOTES:

You must accomplish and submit the completed form and requirements to any of our Relationship Managers (RM), Mutual Fund (MF) Representatives, Client Service Centers, or through an e-mail to RequestSLAMCI@sunlife.com. For inquiries, please send an e-mail to sunlink@sunlife.com.

Please write legibly using **CAPITAL LETTERS**. Write **N/A** if the question is not applicable. Mark the box(es) with a "✓" to indicate your choice(s), then sign the form only when completely filled out.

1. Name of Institution

A Risk Profiling

2. FINANCIAL GOAL

Cash Management/Liquidity Purposes

Build-up Capital

Retirement Fund

3. INVESTMENT OBJECTIVE - What is the institution's key investment objective?

[1] Capital Preservation: To secure value of investments with returns in line with money market rates

[3] Income-Oriented: To have a steady stream of income from investments

[5] Income and Growth: To achieve a balance of income and growth from investments

[7] Capital Growth: To achieve long-term growth with some income

[9] Capital Appreciation: To maximize returns on investments with high potential returns

4. INVESTMENT HORIZON - How long can the institution keep the money invested to achieve these investment objectives?

[1] Less than one (1) year

[3] One (1) year to two (2) years

[5] Three (3) years to five (5) years

[7] Six (6) years to ten (10) years

[9] More than ten (10) years

5. LIQUIDITY - What portion of the company's investible funds will be allocated for this investment?*

[1] Less than 5%

[3] 5% to 15%

[5] 16% to 25%

[7] 26% to 35%

[9] Over 35%

***Note:** It is not recommended to be exposed to a single product with 20% of the institution's investible/financial assets. Concentration Risk can be mitigated by diversifying across different issuers, asset classes, sectors, or industries.

6. KNOWLEDGE - How would you describe the institution's knowledge of investments?

[1] Bank deposit products only (current/savings/time deposit accounts)

[2] Limited (Limited knowledge of investments outside of bank deposits, e.g. treasury bills and long-term negotiable certificates of deposit)

[3] Moderate (Some knowledge of investments, e.g. bonds, stocks, and pooled funds)

[4] Good (General knowledge of investments, e.g. bonds, stocks, pooled funds, and derivatives)

[5] Extensive (Extensive knowledge of investments, e.g. bonds, stocks, pooled funds, derivatives, hedge funds, and structured products)

7. EXPERIENCE - How many years of experience does the institution have in investing in these securities?

[1] Less than one (1) year

[2] One (1) year to two (2) years

[3] Three (3) years to five (5) years

[4] Six (6) years to ten (10) years

[5] More than ten (10) years

A Risk Profiling (Continuation)

8. RISK TOLERANCE - What level of risk is the institution willing to take?

- [1] The institution wants to minimize risk and avoid losses.
- [3] The institution is willing to accept minimal fluctuations in the value of its investments for commensurate returns.
- [5] The institution is willing to accept some fluctuations (up to 10% volatility) in the value of its investments to achieve potentially higher returns in the long-run.
- [7] The institution is comfortable with volatility and can tolerate substantial fluctuations in its investments (10% to 20% volatility) in order to grow capital.
- [9] The institution fully accepts volatility (more than 20% volatility) and can tolerate significant price swings and possibility of losses in order to maximize returns.

This section should be accomplished by the RM/MF Representative.

Risk Profile Assessment

Enter the points (number in brackets []) from questions 3 to 8 in the table, then add the points to get the total score. This will determine the institution's risk profile.

Item	Score	Total	Risk Profile	Score
3			Conservative	6 - 14 points
4			Moderate	15 - 22 points
5			Balanced	23 - 30 points
6			Growth	31 - 38 points
7			Aggressive	39 - 46 points
8				

B Declarations and Signatures

You understand that this assessment is based on the information you have provided and is designed to help you evaluate your financial needs as of the date of this declaration. You also understand that this questionnaire is used as a guide for the Relationship Manager (RM)/Mutual Fund (MF) Representative to recommend suitable investment options consistent with your assessed risk profile. You are aware that your financial needs may change over time depending on your financial situation and objectives, and understand that any incomplete or inaccurate information provided may affect this assessment. Therefore, this assessment is intended for reference only and does not constitute, in any manner, any advice given by SLAMCI. No guarantee is given as to the accuracy or completeness of the suggestions and recommendations provided in this assessment.

<p>9. Printed Name, Designation, and Signature of the Institution's Authorized Representative (1)</p> <div style="border: 1px solid black; width: 100%; height: 30px; margin-top: 10px; text-align: center; font-size: small;">Please sign here</div>	<p>10. Date Signed (e.g. 12-31-2019)</p> <p style="text-align: center;">Month Day Year</p> <p style="text-align: center;">— — —</p>
<p>11. Printed Name, Designation, and Signature of the Institution's Authorized Representative (2)</p> <div style="border: 1px solid black; width: 100%; height: 30px; margin-top: 10px; text-align: center; font-size: small;">Please sign here</div>	<p>12. Date Signed (e.g. 12-31-2019)</p> <p style="text-align: center;">Month Day Year</p> <p style="text-align: center;">— — —</p>

If you are investing in a Fund(s) suited for a more aggressive risk profile, please fill out the section below:

Suitability Waiver Acknowledgment

You confirm that:

- a. You have decided to invest in a Fund(s) suited for a more aggressive risk profile.
- b. You signify that you do not agree with and you are waiving the result of the ISA.
- c. You acknowledge that you shall bear the consequences of investing in a Fund(s) suited for a more aggressive risk profile.
- d. You hold SLAMCI, its representatives, employees, officers, directors, and successors-in-interest, free and harmless from any and all liabilities, claims, opportunity cost, and causes of action of whatever kind or nature that may affect you as a result thereof.

<p>13. Printed Name, Designation, and Signature of the Institution's Authorized Representative (1)</p> <div style="border: 1px solid black; width: 100%; height: 30px; margin-top: 10px; text-align: center; font-size: small;">Please sign here</div>	<p>14. Date Signed (e.g. 12-31-2019)</p> <p style="text-align: center;">Month Day Year</p> <p style="text-align: center;">— — —</p>
<p>15. Printed Name, Designation, and Signature of the Institution's Authorized Representative (2)</p> <div style="border: 1px solid black; width: 100%; height: 30px; margin-top: 10px; text-align: center; font-size: small;">Please sign here</div>	<p>16. Date Signed (e.g. 12-31-2019)</p> <p style="text-align: center;">Month Day Year</p> <p style="text-align: center;">— — —</p>

C Declaration of Relationship Manager (RM)/Mutual Fund (MF) Representative

You confirm that:

- a. You have obtained complete, timely, and accurate ISA from the institution.
- b. You have performed sufficient fact-finding and analysis to ensure that the Sun Life Prosperity Fund(s) you recommended is/are suitable based on the needs, objectives, risk profile, other holdings, financial situation, and other facts disclosed by the institution.
- c. You have considered the complexity of the Fund(s) and the institution's ability to understand it prior to making a recommendation.
- d. The Fund(s) recommended and selected is/are consistent with the clients' financial condition and risk appetite. In case the institution selected a Fund(s) suited for a more aggressive risk profile, you also declare that you have explained all the risks related to the investment(s).
- e. You have explained the Suitability Waiver Acknowledgment, and such will only be signed if the selected Fund(s) is/are more aggressive than the client's risk profile.
- f. You have informed the client of the three-year validity of the ISA. Additional investments may or may not warrant a Suitability Waiver Acknowledgment, depending on the Fund(s) to be invested in.

17. Printed Name and Signature of RM/MF Representative <div style="text-align: center; margin-top: 10px;"><small>Please sign here</small> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div></div>	18. MF Representative's Code	19. Date Signed (e.g. 12-31-2019) Month Day Year — — —
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RM'S/MF REPRESENTATIVE'S REPORT

Please indicate additional information obtained from the institution on the space below: