

Investor Suitability Assessment (Institutions)



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 group of companies.

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

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.

This assessment aims to determine your risk profile and investment experience. To enable Sun Life to offer products and services that are in line with your needs and risk profile, it is necessary that you provide accurate and sufficient information about your knowledge, experience, financial situation, financial capability (including ability to bear losses), and investment objectives (including risk tolerance). Otherwise, we are not in a position to accurately determine whether a particular product or service is appropriate to you, given the limited information available.

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 this test. Your financial needs may change over time depending on your objective and situation.

Select the answers that most closely define your needs or best describe your situation.

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. Fields in **BOLD** Letters are **ALL MANDATORY**

1. MF Account Number (e.g. 01234567CF01)
2. Name of Institution

A Risk Profiling

3. FINANCIAL GOAL	Cash Management/Liquidity Purposes	Build-up Capital	Retirement Fund
4. LIQUIDITY – What portion of the Institution's investible funds* will be allocated for this investment? <small>*Cash, bank deposits, mutual funds/ UITFs, stocks, or any asset easily converted to cash</small>			
[1] Less than 5%	[3] 5% to 15%	[5] 16% to 25%	[7] 26% to 35%
[9] More than 35%			
<small>Note: SLAMCI does not recommend investing more than 20% of your investible/ financial assets in a single product. In order to manage risks, it is recommended that you diversify your assets.</small>			
5. INVESTMENT OBJECTIVE – What is the Institution's key investment objective?			
[1] Capital Preservation: To secure value of capital even if the investments provide low returns.			
[3] Regular Income: Have a steady stream of income, as opposed to funds that widely fluctuate.			
[5] Income and Growth: Achieve a balance of income and growth from investments.			
[7] Capital Growth: Achieve long-term growth with some income.			
[9] Capital Appreciation: Maximize returns on investments with high potential returns.			
6. INVESTMENT HORIZON – How long can the Institution keep the money invested to achieve these investment objectives?			
[1] Less than one (1) year	[5] Three (3) years to five (5) years	[9] More than ten (10) years	
[3] One (1) year to two (2) years	[7] Six (6) years to ten (10) years		
7. KNOWLEDGE – How would you describe the Institution's knowledge of investments?			
[1] No knowledge			
[2] Limited (Limited knowledge of investments outside of bank deposits)			
[3] Moderate (Some knowledge of investments like bonds, stocks, and pooled funds, e.g., mutual funds, UITFs)			
[4] Good (General knowledge of investments like bonds, stocks, pooled funds, and derivatives)			
[5] Extensive (Extensive knowledge of investments like bonds, stocks, pooled funds, derivatives, and structured products)			
8. EXPERIENCE – How many years of experience does the Institution have in investing in these securities?			
[1] No experience	[3] One (1) year to five (5) years	[5] More than ten (10) years	
[2] Less than one (1) year	[4] Six (6) years to ten (10) years		

9. RISK TOLERANCE – What level of risk is the Institution willing to take?

- [1] Less than 20%
- [3] 21% to 40%
- [5] 41% to 60%
- [7] 61% to 80%
- [9] Over 80%

10. FINANCIAL SITUATION - Which statement best describes the Institution's current financial situation?

- [1] The Institution needs this investment to supplement its current income
- [3] The Institution does not need this investment to supplement its current income; however, this could change in the next months
- [5] The Institution does not expect to use this investment to meet current requirements, but would need to access these funds in an emergency
- [7] The financial situation of the Institution is stable, and it has a sufficient cash flow to meet most of its requirements
- [9] The financial situation of the Institution is completely secure, and can meet emergency requirements

Add the points (numbers in brackets [] from questions 3 to 10) to get the total score. This will determine your risk profile and the recommended Sun Life Prosperity Funds for you.

Total Score					
Scoring Criteria	14 points and below	15 to 22 points	23 to 30 points	31 to 38 points	39 points and above
Risk Profile	CONSERVATIVE	MODERATE	BALANCED	GROWTH	AGGRESSIVE
Recommended Sun Life Prosperity Funds	<ul style="list-style-type: none"> • Peso Starter Fund (formerly Money Market Fund) • Dollar Starter Fund • Other Funds: 	<ul style="list-style-type: none"> • GS Fund • Bond Fund • Dollar Abundance Fund • Other Funds: 	<ul style="list-style-type: none"> • Balanced Fund • Achiever Funds 2028, 2038, and 2048 • Dollar Wellspring Fund • Other Funds: 	<ul style="list-style-type: none"> • Dollar Advantage Fund • World Income Fund • Other Funds: 	<ul style="list-style-type: none"> • Index Fund • Equity Fund • World Equity Index Feeder Fund • World Voyager Fund • Other Funds:

The result of this Investor Suitability Assessment (ISA) is valid for three (3) years from the date signed. However, we strongly recommend that the institution review its investment risk profile at least once a year and inform us if there are major changes in its circumstances which will impact its existing risk profile. When a major change occurs in the institution's situation, make sure the institution's investment decisions continue to match its needs. The allocation of the institution's investment should be consistent with its assessed risk profile based on the results of this assessment. Should the institution decide otherwise at any time, it is responsible for the decision and any of its effects.

If you are investing in or switching to at least one (1) Fund that is suited for a more aggressive risk profile, please acknowledge the following declarations by marking the check box in item 10 and answering item 11 below. Otherwise, please skip this section.

11. 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 this Investor Suitability Assessment.
 - c. You acknowledge that you shall bear the consequences of investing in a Fund(s) suited for a more aggressive risk profile.
 - d. You are fully aware of your current risk profile and fully understand the risk rating of the products and services that you are investing into. 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.

12. Please provide a reason for investing in a Fund(s) suited for a more aggressive risk profile:

B Investor's Acknowledgement and Agreement

By signing below, you confirm that:

- a. You understand that to enable Sun Life to offer products and services that are in line with your needs and risk profile, it is necessary that you provide accurate and sufficient information about your knowledge, experience, financial situation, financial capability (including ability to bear losses), and investment objectives (including risk tolerance). Otherwise, we are not in a position to accurately determine whether a particular product or service is appropriate to you, given the limited information available.
- b. You are aware that your financial needs may change over time depending on your financial situation and objectives. 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.
- c. You agree to the processing of your personal and sensitive personal information for the purpose of implementing your request/instructions herein in accordance with the Company's Privacy Policy available at <https://online.sunlife.com.ph/privacy>, reaffirm your consent to the processing of your personal data as recorded in your most recent application form, and acknowledge that such consent continues to be in full force and effect. Your rights include the right to be informed, access your data, rectify errors, object to processing, and file a complaint. For more information about your rights and how we protect your data, you may access our privacy policy at <https://online.sunlife.com.ph/privacy>. Should you have any concerns in relation to your rights or the processing of your personal data, you may get in touch with our Data Protection Officer at privacyconcern@sunlife.com.
- d. Electronic or digital signatures or sign-in-wraps utilized in this form shall have the same force and effect as a manual signature. You understand the risks and assume full responsibility for all your electronic transactions, and warrant that SLAMCI can rely on your electronic signatures and/or instructions via electronic means. We do not assume any responsibility for technical errors, failure to access, delay or any similar occurrences beyond our reasonable control.

13. Printed Name, Designation, and Signature of the Institution's Authorized Representative (1) <div style="text-align: center;">Please sign here</div> <div style="border: 1px solid black; width: 200px; height: 30px; margin: 0 auto;"></div>	14. Date Signed (e.g., 14-MAY-2024)
15. Printed Name, Designation, and Signature of the Institution's Authorized Representative (2) <div style="text-align: center;">Please sign here</div> <div style="border: 1px solid black; width: 200px; height: 30px; margin: 0 auto;"></div>	16. Date Signed (e.g., 14-MAY-2024)

FOR THE MUTUAL FUND (MF) REPRESENTATIVE USE ONLY

By signing below, you confirm that:

- a. You have obtained complete, timely, and accurate ISA from the Institution.
- b. You performed sufficient research to align product selection with the Institution's risk profile and informed the Institution that incomplete or inaccurate information regarding their financial knowledge and experience may impede the ability to accurately assess product suitability due to the limited information provided.
- c. You have accurately represented the nature and structure of the product and/or service, terms and conditions, fundamental benefits and risks, detailed breakdown of the pricing, or any cost associated with the product and service.
- d. The Fund(s) recommended and selected is/are consistent with the Institution's 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 Institution's risk profile.
- f. You have informed the Institution 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 MF Representative <div style="text-align: center;">Please sign here</div> <div style="border: 1px solid black; width: 150px; height: 30px; margin: 0 auto;"></div>	18. MF Representative's Code	19. Date Signed (e.g., 14-MAY-2024)
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FOR OFFICE USE ONLY

20. Date Received (e.g., 14-MAY-2024)	21. Time Received	22. Receiving Department/Office
23. Remarks		