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INVEST ENERGY GROUP

WHISTLEBLOWER PROTECTION POLICY

Version 01, Effective 15/07/2023

Invest Energy Group (hereinafter "IESB") expects each director, officer, employee and contractor to comply with all applicable laws and company regulations. IESB is committed to promoting honesty and integrity, and maintaining the highest ethical standards in all its activities. Consistent with these values, IESB does not tolerate any illegal or unethical behaviour, including fraud, criminal acts, regulatory violations, manipulation of accounting and auditing records or any breach of company policies, procedures and practices.

The Whistleblower Protection Policy (hereinafter "Policy") is a critical tool for protecting individuals who report activities believed to be illegal, dishonest, unethical, or otherwise improper. IESB is committed to providing a non-retaliatory and discreet avenue through which it may receive reports on incidents so as to be able to be aware of and to be able to investigate the same. Where requested and within IESB's power to do so (subject to applicable law), IESB is committed to maintaining the confidentiality of the persons making such reports.

This Policy shall be made available to the public together with the communication channel in IESB's website at www.investenergygroup.com.



DEFINITIONS

Administrator The person designated by the Board to organize the day-to-day

administration of this Policy, including receiving, tracking and

reporting to the Board on incidents reported.

Management

The management committee appointed by the Company's Board of

Committee Directors.

Board The Company's Board of Directors.

Company Refers to Invest Energy Sdn. Bhd. (IESB).

Employee Reporter An employee of the Company or contractor reporting incidents under

this Policy.

Incident One or more violations or suspected violations of the applicable laws,

or the Company's accounting, financial reporting, internal accounting controls, or auditing policies and procedures, or related matters as

specified in the following sections.

Investigator The person or persons designated by the Board with responsibility to

investigate and bring closure to reported incidents.

Reporter An employee Reporter or director, officer, or any other person

reporting incidents in accordance with this Policy, including but not limited to business associates, contractors, suppliers, consultants,

agents and representatives, or members of the public.



1. APPLICATION

This Policy applies to each incident reported, and the procedures, protections and other provision of this Policy are for the benefit of every director, officer, employee, and contractor of IESB and each of its subsidiaries, where applicable, that has not adopted a similar policy.

The Administrator be authorized by the Board to implement equivalent policies (and procedures) for IESB's subsidiaries, projects, business ventures and contracts in which IESB is engaged and/or working. The Administrator shall serve as the main contact for such subsidiaries and parties in relation to the administration of equivalent subsidiary policies and shall oversee the reporting to the Board of Directors regarding such matters.

2. INCIDENT REPORTING

2.1 Examples of Incidents

- Suspected violations of law, whether civil or criminal, including breaches of occupational health and safety legislation;
- Suspected violation of corporate policies or guidelines;
- Questionable accounting, internal accounting controls, auditing practice or accounting or auditing irregularities;
- Experiencing or observing discrimination, harassment, sexual misconduct, workplace violence, substance abuse, violations of human rights, or similar behaviour;
- Any falsification of contracts, books, records, reports, or accounts;
- Any direct or indirect participation in any bribes, kickbacks, improper profit-sharing arrangements, illegal gratuities or improper inducements or payments to any public official or other act of corruption or bribery;
- Fraud against or involving the company, its subsidiaries or affiliates or any party having a business relationship with the company or its subsidiaries or affiliates;
- Risks to the company's assets, property or resources;
- Risks to the environment;
- Any matter involving a significant threat to the health and safety of the company's personnel, other representatives, or business partners and/or the general public including unsafe working conditions;
- Concerns about the company's business practices;
- A matter likely to receive negative media or public attention;
- Any retaliation against any Reporter for intending to make or making a good faith report.



2.2 Reporting Incidents

- (a) Incidents must be reported promptly by Reporters to someone who can address them properly. In most cases where involving an employee Reporter, the incident should be reported to the employee's supervisor. If the employee believes that the circumstances are not appropriate to report to the incident to the supervisor, the employee Reporter may report the incident to any officer or other member of IESB's management team to whom the person believes would be appropriate to receive the report.
- (b) When a supervisor or other member of the management receives an incident report, it must be promptly forwarded to the Administrator. Suspected fraud or violations of applicable laws should be promptly reported directly to the Administrator. Reporters may report their concerns through several channels that is most appropriate given the nature of their concern:
 - To the Administrator
 - To the Board of Directors
 - To external reporting channels or regulatory bodies
- (c) IESB takes all concerns seriously and will investigate all credible complaints. While anonymous Reporters shall be assessed and investigated on their merits, employees and other Reporters should be aware that reporting anonymously or through other channels may limit the ability of IESB to thoroughly investigate a report if insufficient information is provided.
- (d) Access to incident reports is strictly controlled to prevent interference with and ensure the independence, effectiveness, and integrity of any ensuing incident investigation upon receiving an incident report. The Administrator will forward the report to the Chair of the Board of Directors.

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2.3 Reporting Content

Reports of incidents must be supported by sufficient information and evidence to enable a proper investigation, particularly in the of anonymous incident reports, since the investigation may not be able to seek further details from the Reporter. Incident reports should include:

- The date(s) of the incident(s);
- Details of whether the incident has finished occurring or is still occurring;
- Details of the location(s) of the incident and affect areas, if any;
- The identity of individuals and witnesses involved;
- A description of the specific actions or omissions that constitute the incident (please provide as much detail as possible);
- How the Reporter became aware of the incident;
- Any steps taken by the Reporter to date with respect to the incident;
- Details of whom the Reporter has reported or brought the incident to the attention of;
- Details of the desired outcome or suggested resolution with regard to the incident;
- Any material or document relevant to support or evidence the incident; and
- Details of whether the Reporter wishes to remain anonymous (noting that reporting anonymously or through other channels may limit the ability of the company to thoroughly investigate a report if insufficient information is provided).



2.4 No Retaliation

- (a) IESB will not, in relation to the reporting of any incidents under this Policy, permit any form of retaliation or reprisal (including discharge, demotion, transfer, suspension, threat, intimidation, harassment, or any other form of discrimination) by any person or group, directly or indirectly, against any report, witness or interviewee who truthfully and in good faith:
 - Reports any incidents in accordance with this Policy;
 - Lawfully provides information or assistance in an investigation regarding any conduct which the Reporter reasonably believes constitutes a violation of applicable laws or any other company policies;
 - Files, caused to be filed, testifies, participates in, or otherwise assists in a proceeding related to the violation of applicable laws or any other company policies;
 - Provides a law enforcement officer with information regarding the commission or possible commission of an offence, unless the individual reporting is one of the violators;
 - Assists the Investigator, the Board of Directors, management or any other person or group (including any government or regulatory authority) in the investigation of an incident.
- (b) Any director, officer, employee, or contractor who retaliates against a Reporter, witness, or interviewee in violation of the above would face disciplinary action, up to and including termination of the person's employment or position within the company.
- (c) If any person believes that retaliation or reprisal has occurred, that person may submit a complaint pursuant to this Policy.



3. INVESTIGATION AND OVERSIGHT

- 3.1 The Reporter is not responsible for investigating the alleged illegal or dishonest activity, or for determining fault or corrective measures; appropriate management officials are charged with these responsibilities.
- 3.2 The Administrator has been designated by the Board and will serve as the Investigator for incidents of a general nature that are more appropriately investigated by another person. When an incident pertains to a matter more appropriately investigated by another person, the Administrator will consult the Chair of the Board to assign an appropriate internal or external Investigator to investigate the incident. No person will be appointed to investigate an incident where that person is or would reasonably be perceived to be in a conflict of interest, or otherwise not impartial or unbiased in conducting the investigation.
- 3.3 The Investigator will investigate incidents in an independent, expeditions and confidential manner, taking care to protect the identity of the people involved and to ensure that the investigation is not impaired in any manner.
- 3.4 The Investigator will contact the Reporter to acknowledge receipt of the incident within three (3) business days.
- 3.5 All incidents will be promptly investigated, and appropriate corrective action will be taken if warranted by the investigation.
- 3.6 Reporters are encouraged to provide contact details for follow up, although this is not mandatory. This will assist the Administrator/Investigator to be able to properly and appropriately conduct the investigation. All persons (including the Reporter) must fully cooperate in the Investigator's investigation.
- 3.7 The Investigator may involve other people in the investigation as deemed appropriate (including members of the company management). The Investigator may agree to authorize an independent investigation and/or to engage external consultants to assist in the investigation. The Investigator has direct access to the Chair of the Board.
- 3.8 The Board shall oversee the activities of the Administrator and Investigator, and the investigation and resolution of incidents. The Administrator will report to the Board on all other material incidents once per quarter.



- 3.9 The status, and to the extent possible the outcome of an incident will be communicated to the Reporter in a timely manner either through direct communication, if the Reporter provided his or her name.
- 3.10 The reports and outcomes of the investigation shall be reported to relevant stakeholders as and when required.

4. ACTION IN GOOD FAITH / LIMITATION TO PROTECTION

- 4.1 A Reporter must act in good faith and have reasonable grounds for believing that the information disclosed is true.
- 4.2 While every reasonable effort will be sued to protect Reporters from unfair treatment as set out in this Policy, if it is discovered that the matter has been reported maliciously, or that the report is not genuine or not made in good faith or where it is known that the report is false, then IESB reserves its right to take/recommend appropriate disciplinary action. Incident found to have been made in bad faith, maliciously, or which were known to be false when made, will be viewed as a serious offense that could give rise to disciplinary action, up to and including termination of employment.
- **4.3** A person is entitled to the protection under this policy only if the matter of public concern is not the result of conduct by the individual seeking protection, unless it is the result of conduct by the person that was required by his or her employee.

5. CONFIDENTIALITY AND ANONYMITY

5.1 All incident reports will be treated as confidential, and each report and the identity of the Reporter will be kept confidential to the extent permissible by law and feasible to permit proper investigation and resolution. Reports will only be accessible to people that the investigator determines have a need to know and where such access will not otherwise compromise or interfere with the independence, effectiveness, and integrity of the investigation. Ordinarily, a need to know arises from an obligation to investigate or to take remedial action based on the information contained in the incident report. For clarity, sharing incident information in a manner required by this policy will not be considered a breach of confidentiality.

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6. RETENTION OF RECORDS

- 6.1 Records pertaining to an incident and the property of the company should be retained:
 - (a) In compliance with applicable laws and the company's record retention policies;
 - (b) subject to safeguards that ensure their confidentiality and when of applicable, the anonymity of the Reporter; and
 - (c) in such a manner as to maximize their usefulness to the company's overall governance, business integrity and compliance program.

We are committed to ensure all employees of the company and its subsidiaries, projects, business ventures, contractors and any other parties involved in the company's activities are aware of this Policy, and the company's employees are appropriately trained on the whistleblowing procedure. This Policy is to be reviewed for applicability, relevance, and effectiveness with the continuously evolving business environment no less than once every two (2) years.

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GROUP MANAGING DIRECTOR

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