

MILUX CORPORATION BERHAD

[Registration No. 199401027937 (313619-W)] (Incorporated in Malaysia)

WHISTLEBLOWING POLICY

(A) Purpose

Milux Corporation Berhad ("MILUX", or "the Company") has adopted this Whistleblowing Policy ("Policy") to set out the mechanism and framework by which employees and business associates can confidently voice concerns/ complaints in a responsible manner without fear of retaliation.

(B) Scope

This Policy applies to all MILUX's employees (permanent, part-time or contractual) and business associates. It also applies to members of the public, where applicable.

(C) General

- (I) All employees, business associates and members of the public are encouraged to report genuine concerns in relation to improper conducts or illegal activities.
- (II) The following covers the instances which constitute improper conducts or illegal activities:
 - a. Conduct or activity which breaches any law or regulatory obligation;
 - b. Breach of the Company's policies, procedures or other rules of conducts;
 - c. Incidents of bribery or corruption;
 - d. Criminal breach of trust and fraud;
 - e. Abuse of power;
 - f. Improprieties in matter of financial reporting;
 - g. Misuse of Company's fund and asset; and
 - h. Endangerment of employees' or public safety and health.
- (III) The list above does not cover all instances which can be constituted as an act of improper conduct or illegal activity. This Policy should therefore be read together with the Company's other policies and procedures.

(D) Reporting Procedures

(I) Report of disclosure under this Policy can be made via post or email to the Audit and Risk Committee Chairman (using the attached form as per **Appendix 1**). If by post, it must be properly sealed in an envelope and indicated "Strictly Confidential - To be Opened by the Addressee only".

Mailing Address: Audit and Risk Committee Chairman

Milux Corporation Berhad No.31, Lorong Jala 14/KS10

Off Jalan Telok Gong 42000 Port Klang Selangor, Malaysia.

Email Address: ph.hbglobal@gmail.com

- (II) Whistleblower is advised to include any supporting evidence which may help in the investigation process.
- (III) MILUX ensures that all reports raised will be treated fairly and investigated to the extent the information and evidence provided allows for.

(E) Confidentiality & Protection

- (I) The whistleblower is entitled to his or her anonymity should it chooses to report as such.
- (II) Employees and business associates that whistleblow will not be subjected to any kind of victimisation and unfair practices, including threat, harassment and termination.
- (III) Protection will be accorded by the Company only when the whistleblower satisfies the following conditions:
 - a. The disclosure is reported in good faith.
 - b. The whistleblower has reasonable ground to believe that the information and any allegations disclosed are true.
- (IV) The whistleblower and the alleged wrongdoer will be treated fairly. The whistleblower will be informed of the status of his disclosure and the alleged wrongdoer will be given an opportunity to respond to all allegations at an appropriate time.

(F) Disciplinary Actions

- (I) The Company takes any malicious or defamatory allegation seriously. Disclosure not in good faith is considered as gross misconducts where employee or business associate concerned will be subjected to disciplinary actions, up to the termination of employment or contract with MILUX.
- (II) The appropriate authorities will be notified in the event that members of the public are discovered to have reported in bad faith.

(G) Review of This Policy

This Policy will be reviewed and updated as and when deemed necessary or at least once every three (3) years. Modification may be required, among other reasons, to ensure compliance with applicable laws and regulation; and ensure they remain consistent with the Board's objective.

This Policy was reviewed and approved by the Board of Directors on 28 November 2023.

Appendix 1

WHISTLEBLOWING FORM

| To: | | |
|---|--|-------|
| Incident Date & Time | Date: | Time: |
| Incident Location | | |
| Name of Alleged Person/ Department / Division | | |
| Description/ Circumstance of Alleged Incident (Please use attachment if necessary) | What, Who, When, Where, How, Wit Please provide evidence to support t | |
| Signature | : | |
| Name | : | |
| Department/Division/ Company | : | |
| Telephone No. | : | |
| Date | ; | |