



## CONFLICT OF INTEREST DISCLOSURE FORM

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### INTRODUCTION

Conflicts of interest arise where a person's private interests conflict with their professional duties as a result of a particular connection, such as a family relationship, a shareholding or additional employment position. These conflicting interests will have the effect of unduly influencing that person's business judgments, decisions or actions, to the detriment of their employer.

Having a conflict of interest is not necessarily wrong. However, conflicting interests can make it difficult for that individual to work objectively and efficiently when making judgments, taking decisions, or pursuing certain actions, and may also have legal and regulatory consequences. This is why transparency, in the form of disclosure, is critical and helps to protect the integrity and reputation of both TNB ILSAS and the person involved.

This form enables TNB ILSAS employees who may have an actual, potential or perceived conflict of interest to disclose the necessary information. You should read the **TNB Conflict of Interest Policy** and any other guidance provided by TNB, and discuss the conflict with your Manager prior to completing the form. Definitions of the terms used in this form are included in the Conflict of Interest Policy.

A "Yes" answer does not necessarily constitute a conflict of interest. However, without complete disclosure of the facts, a fair and reasonable assessment of your situation cannot be made. Unless you are certain a situation does not create a possible conflict, you must disclose the situation to TNB ILSAS.

### INSTRUCTIONS:

1. Please read the entire questionnaire first.
2. To answer the questions:
  - Place an "x" next to "Yes" or "No" for each question;
  - If you answer "Yes" to any questions, please give explanation in the field provided;
  - Complete the certification on the final page and click 'submit'

### GLOSSARY

**CLOSELY RELATED PERSON(S)** - The person's relatives as defined by the Malaysian Anti-Corruption Commission Act 2009 (Act 694) in Section 3, someone with whom the person has a personal friendship, and those living in the same household as the person.

**INTEREST**- An economic or financial interest that could, or might reasonably be thought to influence judgement or action.

**MANAGER** - The person's immediate supervisor.

**SIGNIFICANT SHAREHOLDING** – a shareholding of more than 1% in the company



**TYPE OF CONFLICT OF INTEREST:**

- Actual       Potential       Perceived conflict of interest

**QUESTIONNAIRE**

1. Is there a 'closely related person' working (or hoping to work) for TNB ILSAS, where you may have a hiring, supervisory, or promoting role to play regarding their employment?

- Yes       No

If yes, please provide details.

2. Do you have any outside employment or other activity which does or might conflict with the performance of your duties at TNB ILSAS?

- Yes       No

If yes, please provide details.

3. Are you or a 'closely related person' a director, officer, owner, partner, significant shareholder, employee or agent of, or consultant to, any firm that competes with or provides products or services to TNB ILSAS?

- Yes       No

If yes, please provide details.

4. Have you or a 'closely related person' received fees, commissions, discounts, gifts, entertainment or services from a supplier, customer, or competitor of TNB ILSAS which has not already been reported through the proper channels provided by TNB ILSAS (e.g. having a house renovated by a TNB ILSAS contractor)

- Yes       No

If yes, please provide details.



5. Is there another form of potential, actual or perceived conflict of interest you would like to tell us about?

Yes       No

If yes, please provide details.

**CERTIFICATION**

I hereby certify that my answers to the foregoing questions are complete, truthful and accurate to the best of my knowledge.

Name:	
Company:	
Business/Service Unit:	
Position :	Contact No :
Staff No:	Email Address:
Manager's Name:	
Manager's Contact No. :	Manager's Email:
Staff Signature:	Manager's Signature:
Date:	Date:

**FOR MANAGER'S USE ONLY**

AGREED ACTION: