

# **Corporate Professional Investor Assessment Form**

# [Return Original]

Client Name: \_\_\_\_

\_\_\_\_\_ Client Code: \_\_\_\_

### PART A – Client's Assessment and Consent

### Investment Experience

For ABCI Securities Company Limited ("ABCIS") inetrnal assessment on client's knowledge, expertise and investment experience, please answer the following questions (and state the relevant market(s) for each of the product(s) selected):

Q1. Do you have experience dealing in the relevant markets?

Q2. Do you have knowledge and expertise in the relevant product(s)?

- Q3. If your answer to Q2 is yes, How you acquire the knowledge and expertise in the relevant product?(a) I am currently working or have previously worked in the relevant financial sector for at least one year in a professional position that involves the relevant product
  - (b) I have undergone training or studied courses which are related to the relevant product?
  - (c) Others (Please specify):

Q4. Are you aware of the risks involved in trading in the relevant product(s) and market(s)?

Proc	luct	Relevant Markets	Answers to Q1-4
	Equity Securities		Q1. □ Yes □ No         Investment experience: □ 1-3 years □ 3-5 years □ 5-10 years □ over 10 years         Approx. no. of trade per year:         Q2. □ Yes □ No         Q3. □ (a) □ (b) □ (c)
	Futures and Options		Q3. (a)       (b)       (c)         Q4. (a)       Yes       No         Q1. (a)       Yes       No         Investment experience:       1-3 years       3-5 years       5-10 years       over 10 years         Approx. no. of trade per year:
	Warrants, CBBC and Stock Options		Q3. □ (a)       □ (b)       □ (c)
	Fixed income securities (e.g. Bonds, convertible bonds)		Q1. □ Yes □ No         Investment experience: □ 1-3 years □ 3-5 years □ 5-10 years □ over 10 years         Approx. no. of trade per year:         Q2. □ Yes □ No         Q3. □ (a) □ (b) □ (c)         Q4. □ Yes □ No
	Mutual funds/Unit Trusts		Q1. □ Yes □ No         Investment experience: □ 1-3 years □ 3-5 years □ 5-10 years □ over 10 years         Approx. no. of trade per year:         Q2. □ Yes □ No         Q3. □ (a) □ (b) □ (c)         Q4. □ Yes □ No
	Structured products (Equity Linked Deposit/Note, Currency Linked Deposit, etc.)		Q1. □ Yes □ No         Investment experience: □ 1-3 years □ 3-5 years □ 5-10 years □ over 10 years         Approx. no. of trade per year:         Q2. □ Yes □ No         Q3. □ (a) □ (b) □ (c)         Q4. □ Yes □ No
	Others (please specify):		Q1. □ Yes □ No         Investment experience: □ 1-3 years □ 3-5 years □ 5-10 years □ over 10 years         Approx. no. of trade per year:



## Asset Adequacy Test

Pursuant to the requirements under Section 3 of the Securities and Futures (Professional Investor) Rules ("PI Rules") (Cap571D), please confirm that you are a **Corporate Professional Investor** by submitting the supporting documents.

Type of Professional Investor	Criteria	Supporting Document(s) Provided
□ Corporation/ Partnership	Has a portfolio of not less than HK\$ 8 million or equivalent in any foreign currency at the relevant date, OR Total asset of not less than HK\$40 million or equivalent in any foreign currency at the relevant date	<ul> <li>Most recent audited financial statement prepared</li> <li>in respect of the corporation or partnership and</li> <li>within 16 months before the relevant date</li> <li>One or more custodian statements issued to the corporation or partnership within 12 months before the relevant date</li> </ul>
Trust Corporation – An trust corporation having been entrusted under the trust or trusts of which it acts as a trustee	Trustee with total asset not less than HK\$40 million in any foreign currency at the relevant date	<ul> <li>Most recent audited financial statement prepared</li> <li>in respect of the trust corporation and</li> <li>within 16 months before the relevant date</li> <li>One or more custodian statements issued to the trust corporation within 12 months before the relevant date</li> </ul>
Other Corporation – Any corporation the sole business of which is to hold investments and which at the relevant date is wholly owned by one or more of those Individual or Corporation/ Partnership or Trust Corporation as mentioned above	Please refer to above	Information to prove that the corporation is wholly owned by one or more of those Individual or Corporation/ Partnership or Trust Corporation

# Portfolio includes Cash\*, certificate of deposit and/or Securities\*\*.

\* Cash includes current/ savings deposits, time deposits, structured deposits, etc.

\*\* Securities include stocks, bonds, debentures, notes, funds, warrants, options and other instruments defined as securities by the SFO.

# Consent to be Treated as a Corporate Professional Investor

I/We, confirm the assessment results above provided by me/us is true, complete and accurate, and consent that ABCIS to classify me/us as a Corporate Professional Investor pursuant to Paragraph (j) of the definition of professional investor in section 1 of Part 1 of Schedule 1 of the Securities and Futures Ordinance (Cap. 571), section 3 of the PI Rules and Paragraph 15.2 of the Code of Conduct for Persons Licensed by or Registered with the Securities and Futures Commission.



### Risks and Consequences of being Treated as a Corporate Professional Investor

I/We have been advised by the sales representative(s) of ABCIS that I/we am/are treated as Corporate Professional Investor in \_\_\_\_\_\_ (product) in \_\_\_\_\_\_ (market), and I/we fully understand the risks and consequences of being treated as a Corporate Professional Investor as described below.

Information for clients

ABCIS may not be required to:

- inform me/us about ABCIS and the identity and status of ABCIS's employees or others acting on behalf of ABCIS;
- (b) confirm promptly with me/us the essential features of a transaction after effecting a transaction for me/us; and
- (c) provide me/us with documentation on the Nasdag-Amex Pilot Program.

#### Contract notes, statements of account and receipts

ABCIS may not require to provide me/us with contract notes, statements of account or receipts in accordance with the Securities and Futures (Contract Notes, Statements of Account and Receipts) Rules, unless I/we notify ABCIS otherwise in writing.

I/We understand that I/we may be exposed to substantial risks in being treated as a professional investor as described above. I/We acknowledge that the above risk disclosure statements cannot and do not purport to disclose all the risks associated with being treat as a professional investor as described above. ABCIS also advised me/us to carefully consider the risks and consequences of such treatment in the light of my/our own experience, objectives and financial resources and other relevant circumstances.

### Right to withdraw from being Treated as a Professional Investor

I/We understand that I/we have the right, at any time, in respect of all investment products and/or market or any part thereof on giving a written notice of not less than 5 business days to ABCIS to object to being treated as a professional investor as described above and request to withdraw from being so treated.

I/We agree that unless and until ABCIS receives from me/us written notification of my/our objection and withdrawal, ABCIS will be entitled to treat me/us as a professional investor as described above with its attendant risks and consequences. Any request by me/us to withdraw from being treated as a professional investor shall be without prejudice to and shall not affect the provision of any services rendered to me/us on the basis that I am/ we are a professional investor prior to such withdrawal taking effect.

I/We undertake to notify ABCIS if I/we become aware of any change in my/our financial conditions that may affect my/our eligibility for being classified as a professional investor.

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Company Chop &

Authorized Signatory:

Name of Authorized Person:

Name of Company:

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Signature verification	Phone Confirmation	Fee Processing	Data Update	Acknowledgment sent	Document Filed	



# [For Internal Use]

## PART B – Declaration from Sales Representative

I have reviewed the Corporate Professional Investor Assessment Form and the supporting documents (if applicable) from my client. Based on my discussion with the client during the Know Your Client process, I based on my best knowledge and effort, confirm that the client satisfied the requirements to be treated as a Corporate Professional Investor falling under the PI Rules and the Code in \_\_\_\_\_\_ (product) in \_\_\_\_\_\_ (market).

I declare that I have explained the contents of this document and the risks and consequences of consenting to being treated as a Corporate Professional Investor in a language which the client fully understands and have invited the client to ask questions and take independent advice if the client thinks fit. I have also informed the client of the right to withdraw from being treated as a Corporate Professional Investor.

Sales representative's Signature:	(	CE no. )	Date:	

Sales representative's Name:

# PART C – Approval

### To be completed by Client Services

1	Has the client filled and signed Part A of this form?	□ Yes	□ No
2	Has the Sales Representative filled and signed B of this form?	□ Yes	□ No
3	Has the client provided relevant supporting documents?	□ Yes	□ No
	If No, please state the outstanding documents:		

Handled by: (Client Services)

Reviewed by: (Compliance)

Approved by: (Head of Sales/ RO)

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Name:

Name:

Date:

Date:

Date: