



JUMP+ Plan



JUBILEE ENTERPRISE PUBLIC COMPANY LIMITED

(JUBILE)

Year 2026 - 2028

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Table of Contents

	Page
Executive Summary	1
Section 1 Business Plan	2
Target in 2028	3
Strategic Plan : Wedding Market Penetration and Growth Program	3
Section 2 Governance Plan	7
Enhancing anti-corruption and fraud prevention efforts	8
Enhancing prevention of conflicts of interest	11
Enhancing internal audit quality evaluation	13
Section 3 Climate Action Plan	16
Greenhouse gas inventory (GHG) plan	17

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Consumer Products

CG Report :

SET ESG Ratings: -

Anti-Corruption Certification (CAC): -

Business Type

The Company operates a business as a retailer of diamond jewelry.

Financial Statement				
Year	2025	2024	2023	2022
Income Statement (MB)				
Revenues	1,230.68	1,445.47	1,579.87	1,795.12
Expenses	1,096.42	1,273.73	1,307.61	1,394.88
Net Profit	103.69	140.71	203.22	314.38
Balance Sheet (MB)				
Assets	2,240.34	2,187.43	2,132.75	2,160.54
Liabilities	503.70	512.65	521.85	648.29
Shareholders' Equity	1,736.64	1,674.78	1,610.90	1,512.24
Cash Flow (MB)				
Operating	276.54	205.18	231.65	254.60
Investing	-130.43	-23.41	-40.73	-2.08
Financing	-142.84	-180.50	-198.73	-239.66
Financial Ratio				
EPS (Baht)	0.59	0.81	1.17	1.80
GP Margin (%)	48.24	46.87	48.56	49.77
NP Margin (%)	8.43	9.73	12.86	17.51
D/E Ratio (Times)	0.29	0.31	0.32	0.43
ROE (%)	6.08	8.56	13.01	22.11
ROA (%)	6.06	7.95	11.98	18.80

JUMP+ Plan

Business Plan

Target in 2028

Net Profit **150-170** Million Baht

Strategic Plan	Growth	Profitability & Efficiency	Stability
1. Strategic Plan : Wedding Market Penetration and Growth Program			

Governance Plan

1. Enhancing anti-corruption and fraud prevention efforts
2. Enhancing prevention of conflicts of interest
3. Enhancing internal audit quality evaluation

Climate Action Plan

1. Greenhouse gas inventory (GHG) plan

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Section 1
Business Plan

Section 1 Business Plan

Target in 2028

Topic	YE/2023	YE/2024	YE/2025	Target in 2028
Net Profit (Million Baht)	203.22	140.71	103.69	150-170

The company targets a Net Profit of 150–170 million baht in 2028, driving growth with an average annual Revenue Growth of 10% through expanding its customer base, particularly in the Wedding segment, and managing costs to enhance share cost efficiency and sustainable profitability.

Growth plan/Increase business value

Strategic Plan : Wedding Market Penetration and Growth Program

The company will penetrate the wedding diamond jewelry market by positioning itself as an expert in engagement and wedding rings, offering a Personalized Design & Customization experience. This will be combined with in-depth consultation and digital decision-making tools to enhance confidence and increase sales conversion rates. This will be achieved through the expansion of Omnichannel channels and CRM implementation to broaden the customer base and foster future repeat purchases/upgrades.

This plan will promote and develop the organization in the following dimensions

- Growth

Targets

- Corporate Financial Targets

Topic	Latest data		Targets		
	YE/2024	YE/2025	2026	2027	2028
Revenue Growth (%) YoY Growth Rate	-8.51	-14.86	10%	10%	10%

- Other Targets

Topic	Baseline	Targets		
	YE/2025	2026	2027	2028
Growth of the Wedding Customer Segment	-	100%	20%	20%

Strategic Initiative

This plan aims to penetrate the wedding diamond jewelry market to accelerate revenue and profit growth by enhancing the customer experience throughout the Customer Journey. This will be achieved through Personalized Design & Customization approaches and in-depth consultation (Consultative Selling), supplemented by digital tools to increase confidence and Conversion

Rate. These efforts will be carried out concurrently with expanding Omnichannel channels in high-potential branches and integrated marketing with partners to generate leads and schedule consultations. Furthermore, CRM will be utilized to manage customer relationships, increase repeat purchases, and facilitate long-term upgrades.

Strategic Initiative	Year	Expected Outcomes
Launch of specialized projects/brands and the Wedding sector	2026	<ul style="list-style-type: none"> Initiate the selection and engagement process for consultants in brand building and marketing planning (Design/Technology/Marketing/Training), including the Terms of Reference (TOR) and verifiable deliverable plans. Invest in and install related assets (tangible/intangible) to support the in-store experience and consultation (e.g., service zones, digital systems, sales support media). Launch the brand and operate no less than 10 branches under a specialized Wedding group project/brand. Increase sales revenue by no less than 10 percent and expand the customer base for the Wedding segment by no less than 100 percent.
	2027	<ul style="list-style-type: none"> Expand by at least 3 new branches according to location selection criteria (marriage rate/demographic/purchasing power). Integrate appointment, in-store, and CRM processes to achieve end-to-end sales closure and customer follow-up, while enhancing in-store efficiency (conversion/productivity). Increase sales revenue by at least 10% and expand the customer base for the Wedding segment by at least 20%.
	2028	<ul style="list-style-type: none"> Expand branches by no less than 3 locations Standardize the branch model, service standards, and sales support system for scalability (standardized operating model). Increase sales revenue by at least 10% and expand the customer base for the Wedding segment by at least 20%.
Develop and launch a Wedding-specific collection/product line	2026	<ul style="list-style-type: none"> Launch a Wedding collection/product line comprising no fewer than 10 designs/collections, covering segmented price points (mass-market, mid-range, and high-end). Develop a Signature Collection to enhance Brand Identity and serve as a core element in marketing communication. Develop Customizable Design Templates to support Personalized Design & Customization, enhancing sales flexibility and increasing conversion. Expand the 'Complete Bridal Set' product category beyond rings (e.g., earrings, pendants, necklaces, bracelets, and accessories for Thai traditional attire). Establish production and quality control standards in accordance with company standards to maintain Quality Consistency/Brand Trust and accommodate Economy of Scale.
	2027	<ul style="list-style-type: none"> Launch additional Wedding collections/product sets, comprising no fewer than 5 designs/collections, based on sales data and customer demand.

Strategic Initiative	Year	Expected Outcomes
	2028	<ul style="list-style-type: none"> • Adjust and enhance Design Templates to cover designs, price ranges, and use cases, to elevate conversion and average order value (basket size). • Increase the proportion of complementary product sets (cross-sell) for brides/families to support revenue and profit. • Maintain production/QC standards and utilize shared production infrastructure to continuously support Gross Margin. • Launch additional Wedding collections/product lines, featuring a minimum of 5 designs per collection, and extend these into seasonal/limited editions to stimulate demand. • Elevate the Portfolio to accommodate the post-marriage life cycle (anniversary/upgrade/gifting) to increase repeat purchases. • Standardize and scale the Portfolio + Templates + QC system. • Maintain economies of scale from joint production to support gross margin and long-term profitability.
Marketing campaigns/partners/activities to accelerate awareness and generate sales for the Wedding segment	2026	<ul style="list-style-type: none"> • Implement an IMC campaign (Digital/OOH/PR/Influencer/ Partner) to generate awareness, leads, and appointments for consultation (appointment-driven funnel). • Implement CRM/Relationship Marketing through the iMoment platform to leverage repeat/upgrade/referral. • Increase sales revenue by no less than 10% and expand the customer base for the Wedding segment by no less than 100%.
	2027	<ul style="list-style-type: none"> • Optimize the funnel (lead appointment conversion) and adjust budget/channels based on performance by tracking KPIs (conversion, CAC, marketing ROI). • Expand cooperation with partners in the wedding ecosystem/ financial partners to increase reach and conversion. • Increase sales revenue by at least 10% and expand the customer base for the Wedding segment by at least 20%.
	2028	<ul style="list-style-type: none"> • Establish CRM-driven growth as the primary mechanism for growth (repeat/upgrade/referral) through systematic communication aligned with wedding seasons and anniversaries. • Increase sales revenue by at least 10% and expand the customer base for the Wedding segment by at least 20%.
Enhance the capabilities of consultative sales and service personnel	2026	<ul style="list-style-type: none"> • Develop a curriculum/standard for consulting and after-sales service for the Wedding market, covering diamond knowledge and certification, consultative selling, the use of digital tools (AI guide/iMoment/interactive), and CRM. • Implement a system for service standard evaluation/ certification and service quality monitoring in pilot branches. • CSAT/NPS Average >80%
	2027	<ul style="list-style-type: none"> • Expand training and on-site coaching to cover all project branches, while enhancing customer experience consistency.

Strategic Initiative	Year	Expected Outcomes
	2028	<ul style="list-style-type: none"> Utilize CSAT/NPS data and feedback to continuously improve service processes and customer follow-up. Average CSAT/NPS >85% To standardize consultation and after-sales service, and maintain quality across all participating branches. Average CSAT/NPS >90%

Risk Management

Risk 1 : Gold and diamond prices are volatile

• **Risk Characteristic**

Gold and diamond prices fluctuate according to global markets, exchange rates, and economic conditions, causing rapid changes in costs and selling prices with limited predictability.

• **Risk Impact**

impacting gross profit margins and inventory value, potentially necessitating frequent price adjustments, which in turn affects competitiveness and customer confidence.

• **Risk Management Measures**

1. Procure incrementally/in staggered rounds to reduce unnecessary stock (JIT) and regularly monitor stock value.
2. Utilize hedging for large orders or deals as appropriate.
3. Utilize a flexible pricing structure referencing actual costs and disciplined market adjustments.
4. Add value through services, consultation, and experience to reduce price competition pressure.

Risk 2 : Declining marriage rate

• **Risk Characteristic**

The declining trend in marriages, stemming from changing values, high cost of living, and delayed marriage age, has led to a contraction in the wedding jewelry market size and uncertain demand.

• **Risk Impact**

Wedding segment sales may fall short of the target, as competition for market share has intensified and is pressuring growth/profitability.

• **Risk Management Measures**

1. Diversify revenue streams into other opportunities (Anniversary/Gifting/Daily Wear) to reduce sole reliance on Wedding
2. Increase average transaction value (Basket Size) through product bundles/sets and cross-selling (earrings/pendants/necklaces/bracelets)
3. Utilize CRM to stimulate repeat purchases/upgrades/referrals (repeat–upgrade–referral) based on anniversary periods and lifecycle
4. Enhance differentiation through specialized consulting technology and in-store experience to increase conversion
5. Control costs and increase margin per transaction while monitoring market trends and consistently adjusting strategies

Section 2

Governance Plan

Section 2 Governance Plan

Accountability and Transparency Governance

Enhancing anti-corruption and fraud prevention efforts

The company recognizes the importance of establishing good governance and transparency, and has therefore developed a plan to enhance anti-corruption efforts. This plan aims to prevent financial and reputational risks while building confidence among both internal and external stakeholders. Furthermore, it assists the organization in complying with laws, regulations, and international standards of good governance, and strengthens an ethical organizational culture. This ensures that employees at all levels are aware of their responsibilities and perform their duties with integrity. Additionally, it helps protect the organization from potential risks, creates a positive image, enhances competitiveness, and supports the long-term sustainability of the business.

Targets

Topic	Current Status	Targets		
		2026	2027	2028
The company has established an anti-corruption policy and practices.	In Progress	In Progress	In Progress	Success
<ul style="list-style-type: none"> An anti-corruption and anti-bribery policy has been developed to comprehensively cover the organization's business operations, formally approved by the Board of Directors, and supported by clear and practical implementation guidelines 	In Progress	In Progress	In Progress	Success
<ul style="list-style-type: none"> The company conducts regular monitoring and evaluation of compliance with its anti-corruption and anti-bribery policy and procedures. Audit results are reported by internal auditors to the Board of Directors at least annually. In the event of any violations, corrective actions and preventive measures are clearly defined to prevent recurrence 	In Progress	In Progress	In Progress	Success
<ul style="list-style-type: none"> The company conducts an annual review of its anti-corruption and anti-bribery policy and practices with the Board of Directors 	In Progress	In Progress	In Progress	Success
Achieve CAC certification from the Thai Institute of Directors (Thai IOD)	Not Started	Not Started	Signatory	Certified
Strengthen the organizational culture of integrity (Ethical Culture) through continuous training and communication on anti-corruption policies and practices.	-	Develop and implement a training plan on anti-corruption policies and guidelines.	More than 50% of employees received training on anti-corruption policies and practices.	More than 100 percent of employees received training on anti-corruption policies and practices.

Strategic Initiative

Strategic Initiative	Year	Expected Outcomes
Anti-Corruption and Bribery Enhancement Plan	2026	<ul style="list-style-type: none"> • There is a committee and a team overseeing risk, internal control, and anti-corruption. • Select and engage consultants to support the enhancement of the governance system. The consultants must deliver verifiable outputs, which include: (1) Gap Assessment Report and Action Plan, (2) Relevant Policy/Procedure Pack, (3) Training Pack (documents/media and training plan) for relevant personnel, and (4) Evidence System and guidelines for collecting evidence to support subsequent monitoring and audit/certification. • Develop and implement policies, guidelines, plans, or procedures related to the CAC Self-Assessment Checklist.
	2027	<ul style="list-style-type: none"> • Policies, practices, plans, or procedures related to the CAC Self-Assessment Checklist have been approved by the company's Board of Directors. • Implementation of related policies, practices, plans, or procedures. • Communication and data collection concerning policies, practices, plans, or procedures relevant to the company's stakeholders. • More than 50% of employees received training on anti-corruption policies and practices. • Report on the audit, monitoring, and evaluation of compliance with anti-corruption policies and guidelines by the internal auditor to the Board of Directors. • The Board of Directors reviews its anti-corruption and anti-bribery policies and practices. • Submit a declaration of intent to join CAC and submit the Self-Assessment Checklist. • Implementation, evidence collection, performance evaluation (monitoring), and document revision based on operational results
	2028	<ul style="list-style-type: none"> • Fully accredited CAC member • 100% of employees received training on anti-corruption policies and practices. • Internal Auditor's Report on the Monitoring and Evaluation of Compliance with Anti-Corruption Policies and Guidelines to the Board of Directors • The Board of Directors reviews its anti-corruption and anti-bribery policies and practices. • Disclose/Report on supervision results

Risk Management

Risk 1 : Regulatory Risk

- **Risk Characteristic**

Risk arising from an unclear definition of the anti-corruption and bribery governance structure, such as ill-defined roles, responsibilities, reporting lines, and unsystematic monitoring mechanisms, may lead to inconsistent implementation of the plan and an inability to enforce it across the entire organization.

- **Risk Impact**

rendering decision-making, monitoring, and enforcement of anti-corruption policies ineffective, resulting in operational delays, failure to achieve planned objectives, and increasing the risk of regulatory/credibility observations, including preparedness for assessment under the CAC framework.

- **Risk Management Measures**

1. Appoint a working group/key responsible persons for anti-corruption, with roles defined according to RACI and clear reporting lines.
2. Establish follow-up cycles and report to the Board of Directors/relevant committees at least quarterly, with records maintained as evidence.
3. Develop annual work plans and key performance indicators (e.g., % training completion, % policy acknowledgment signatures, number of partner evaluations/closed complaint cases) and monitor progress according to the plan.
4. Establish approvers/reviewers for key documents (policies, investigation procedures, disciplinary measures) to ensure consistent standards across the organization.

Risk 2 : Personnel and Organizational Culture Risks

- **Risk Characteristic**

The risk that directors, executives, and employees lack knowledge, understanding, or awareness of anti-corruption policies and practices, or may not consistently adhere to them, consequently rendering prevention, whistleblowing, and risk control ineffective in practice.

- **Risk Impact**

resulting in unintentional non-transparent behavior or incidents, or the failure to report discovered events, thereby increasing the risk of fraud/corruption and financial damage, impacting stakeholder confidence and the organization's image, and consequently impeding the achievement of planned objectives.

- **Risk Management Measures**

1. Continuously conduct training and communicate the anti-corruption policy by identifying target groups based on risk (e.g., Procurement/Warehouse/Finance/Approvers/Branches) and retain training records.
2. Directors, executives, and relevant employees shall sign an acknowledgment of the policy/Code of Conduct and review it at least once a year.
3. Establish accessible channels for reporting tips/complaints and communicate the principle of whistleblower protection (non-retaliation), along with recording and tracking case closures.
4. Monitor results using indicators such as % completion of training, % acknowledgment signatures, number of complaints and their resolution status for presentation to management/the board according to the specified schedule.

Enhancing prevention of conflicts of interest

The company recognizes the importance of preventing conflicts of interest and has therefore developed an enhanced plan to enable personnel at all levels to correctly and transparently identify, manage, and avoid conflicts of interest. This plan establishes clear governance standards, promotes transparency in decision-making, and helps protect the organization from legal and regulatory risks. Concurrently, it also supports an organizational culture that emphasizes integrity and accountability, making employees and management aware of the impact of conflicts of interest, reducing potential risks, and building confidence among both internal and external stakeholders.

Targets

Topic	Current Status	Targets		
		2026	2027	2028
The company has established a policy and procedures to prevent conflicts of interest.	In Progress	In Progress	In Progress	Success
<ul style="list-style-type: none"> The company has developed a comprehensive, written policy and guidelines to prevent conflicts of interest, which have been approved by the Board of Directors. 	In Progress	In Progress	In Progress	Success
<ul style="list-style-type: none"> Compliance with the conflict of interest policy is monitored through a formal process at least annually. 	In Progress	In Progress	In Progress	Success
<ul style="list-style-type: none"> Conflicts of interest are reported to the Board of Directors at least annually. If any violations are detected, corrective actions and preventive measures are clearly outlined to prevent recurrence. 	In Progress	In Progress	In Progress	Success
Directors, senior executives, and relevant employees complete a personal relationship and conflict of interest survey at least once a year.	-	Conduct a survey on personal relationships and conflicts of interest	100% of directors and senior executives and at least 50% of employees completed the survey.	Directors, senior management, and 100% of employees completed a survey.

Strategic Initiative

Strategic Initiative	Year	Expected Outcomes
Conflict of Interest Prevention Enhancement Plan	2026	<ul style="list-style-type: none"> The oversight team commenced the process of developing a comprehensive written policy, preventive guidelines, and a process for monitoring compliance with the conflict of interest policy. Conduct a survey on personal relationships and conflicts of interest Develop Conflict of Interest (COI) disclosure forms and a COI Register, and establish procedures for managing identified COIs (Mitigation Measures).
	2027	<ul style="list-style-type: none"> The policy, prevention guidelines, and the process for monitoring compliance with the conflict of interest policy have

Strategic Initiative	Year	Expected Outcomes
		<p>been approved by the Board of Directors.</p> <ul style="list-style-type: none"> • Implementation of policies and practices for conflict of interest prevention • Communication on policies and practices for preventing conflicts of interest • Survey, collect data, and monitor compliance with the conflict of interest prevention policy by 100% of directors and senior executives, and at least 50% of employees. • Reporting Conflicts of Interest to the Board of Directors • Monitor policy compliance at least once a year and prepare a summary report of the results, including recommendations/ corrective measures, for submission to the Board of Directors. • Parties involved in approval, procurement, or partner selection have fully disclosed Conflicts of Interest.
	2028	<ul style="list-style-type: none"> • Survey, collect data, and monitor 100% compliance with the conflict of interest prevention policy for directors, senior executives, and employees. • Reporting Conflicts of Interest to the Board of Directors • Review and update the COI policy/guidelines at least once a year, monitor the results of corrective actions for identified cases, and report to the Board of Directors.

Risk Management

Risk 1 : Personnel and Organizational Culture Risks

• **Risk Characteristic**

The risk arising from directors, executives, and relevant employees lacking understanding or awareness of the policy and guidelines for preventing conflicts of interest (COI), including potentially not disclosing information completely/not keeping it up-to-date or not acting within the specified timeframe, resulting in incomplete and inconsistent monitoring of policy compliance.

• **Risk Impact**

Cases of undisclosed or improperly managed conflicts of interest may arise, leading to business decisions being susceptible to a lack of transparency, resulting in incomplete monitoring and reporting to the Board of Directors, affecting the credibility of the governance system, and increasing the company's regulatory/reputational risks.

• **Risk Management Measures**

1. Organize training/communicate the COI policy to directors, executives, and relevant employees, along with summary media on best practices and case studies.
2. Establish a cycle for COI Declaration at least once a year and assign responsibility for tracking individuals who have not yet completed the process.
3. Prepare standard forms and a central register (COI Register) to record disclosures and their status, along with storing evidence in a central folder.
4. Define guidelines for managing COI when identified (Mitigation Measures), such as recusal from consideration/changing the

approver/increasing review and recording management outcomes.

- Review the completeness of disclosures and report the status to the Board of Directors at least once a year.

Risk 2 : Data Disclosure Risk

• **Risk Characteristic**

Risk arising from incomplete, outdated, or non-standard disclosure of personal relationship and conflict of interest information, such as incomplete data entry/failure to specify necessary details, failure to update within the survey cycle, data collection from multiple departments/versions, and disorganized storage of evidence, making it impossible to trace back (audit trail).

• **Risk Impact**

leading to inaccurate or incomplete data used for monitoring and evaluating COI policy compliance, consequently resulting in incorrect or incomplete reporting to the Board of Directors, potentially causing untimely management of COI cases, and increasing regulatory risks, organizational credibility risks, and reputational risks.

• **Risk Management Measures**

- Define a single standard Template/COI Declaration form specifying the minimum information to be disclosed (e.g., relationships/partners/related interests) and set the survey frequency to at least once a year.
- Create a COI Register (central registry) to summarize the disclosure status of directors, executives, and relevant employees, along with specifying the update date/preparer.
- Define a process for completeness check before finalizing the results, such as checking the list of those who have not submitted/have incomplete information, and following up until completion.
- Store data and evidence in a central folder with file naming standards/version control and assign a person responsible for document management.
- Summarize disclosure results and key issues (including cases requiring COI management) to report to the Board of Directors at least once a year.

Governance of Risk and Management Compliance

Enhancing internal audit quality evaluation

The plan to enhance the quality assessment of internal audit work aims to develop the knowledge and understanding of personnel at all levels regarding internal control systems, including their roles and responsibilities in the internal control process. This plan enables personnel to perform internal audit tasks accurately, completely, and efficiently. The implementation of this plan also helps strengthen robust internal control standards, reduce risks from errors or deficiencies in processes, and support the organization's operations to achieve its objectives and established standards.

Targets

Topic	Current Status	Targets		
		2026	2027	2028
An independent external organization is appointed to evaluate the quality of internal audit activities in comparison with the updated international standards for internal auditing.	Complete	-	-	-

Topic	Current Status	Targets		
		2026	2027	2028
Personnel involved in the internal control process and operators in high-risk processes possess knowledge and understanding of the internal control system and their own roles within the internal control process.	-	Develop a training plan concerning the internal control system and one's role in the internal control process.	More than 50% of employees received training on internal control systems and their roles in the internal control process.	100% of employees received training on the internal control system and their roles in the internal control process.

Strategic Initiative

Strategic Initiative	Year	Expected Outcomes
Internal Audit Quality Assessment Enhancement Plan	2026	<ul style="list-style-type: none"> Develop a framework and criteria for assessing the quality of internal audit work, consistent with the standards/practices adopted by the organization, and specify the scope, assessment methodology, and required evidence. Prepare TOR/selection criteria and conduct the selection process for independent external agencies (shortlist/request for quotation) to prepare for procurement in the next year. Prepare a training plan regarding the internal control system, one's own role, and the preparation of evidence in the internal control process.
	2027	<ul style="list-style-type: none"> Engage an independent external agency and conduct a quality assessment of internal audit work within the specified scope (e.g., document/work file/process review). Received the Quality Assessment Report, along with findings, recommendations, and an Improvement/Action Plan, including the assignment of responsible parties and a timeline for corrective actions. More than 50% of employees received training on internal control systems, their roles, and related practices.
	2028	<ul style="list-style-type: none"> Implement, monitor, and close the Action Plan based on the evaluation results, and prepare evidence of improvement to confirm the corrective actions. Summary of operational performance and progress in enhancing the quality of internal audit work for reporting to the Audit Committee/Board of Directors at least once a year. 100% of employees received training on the internal control system, their roles, and related practices.

Risk Management

Risk 1 : Personnel and Organizational Culture Risks

- **Risk Characteristic**

Risk arises from involved personnel's lack of understanding regarding internal control systems, their own roles and responsibilities within the internal control process, and the significance of auditing/assessing the quality of internal audit work. This results in incomplete cooperation in providing information, preparing evidence, and responding to inquiries from external agencies, or failure to adhere to the stipulated timelines.

- **Risk Impact**

This causes the external quality assessment of internal audit work to be delayed or incomplete, resulting in an assessment that does not reflect the actual situation. Observations regarding evidence preparation and work processes have increased, and repeated review/preparation of documents may be required, impacting the work plan and the reliability of the internal control system.

- **Risk Management Measures**

1. Organize training/communication sessions to provide knowledge on internal control systems and the roles and responsibilities of each department, along with summary media on best practices and examples of required evidence.
 2. Appoint a coordinator in each department (focal point) to collect data and evidence, and to coordinate with external evaluators to ensure adherence to the timeline.
 3. Establish a pre-assessment readiness plan (pre-assessment checklist) and periodically monitor the submission status of data/evidence to mitigate the risk of delays.
-

Section 3

Climate Action Plan

Section 3 Climate Action Plan

Greenhouse gas inventory (GHG) plan

As a key player in driving the economy, the company prioritizes and recognizes the necessity of participating in the preparation of a Greenhouse Gas (GHG) Inventory. This is considered a fundamental process of utmost importance for initiating and driving GHG management within the organization, and for further developing into a plan for reducing greenhouse gas emissions to support global goals, such as achieving net-zero greenhouse gas emissions by 2050. The company has established objectives and operational plans, including key risk management plans, as follows:

Targets

Topic	Targets		
	2026	2027	2028
GHG inventory report, GHG verification and disclosure (specific to Scope 1 and Scope 2 emissions)	In Progress	In Progress	Success

Strategic Initiative

Strategic Initiative	Year	Expected Outcomes
Plan for Management, Verification, and Reporting of Greenhouse Gas Inventory Data	2026	<ul style="list-style-type: none"> Year 2026 “Establish a functional system + Collect audit-ready evidence” 1) Governance & Accountability <ul style="list-style-type: none"> Appoint a working group to prepare the GHG inventory covering Scope 1–2, with roles defined according to RACI (Owner/ Contributor/Reviewer/Approver). Appoint a single "central coordinator" to collect, monitor, and summarize results. 2) Boundary & Completeness <ul style="list-style-type: none"> Establish a 100% complete Source & Site Register (e.g., HQ, leased branches, warehouses, vehicles, air conditioning/ refrigerant systems). Define the reporting boundary (organizational boundary) and completeness criteria. 3) Data System & Evidence <ul style="list-style-type: none"> Develop SOPs, Checklists, and Data Collection Templates for electricity, fuel, refrigerant, and landlord documents. Establish central folders/an evidence storage system by period (monthly/quarterly/annually), with file naming standards and version control. Define data submission frequency (monthly/quarterly) and cut-off dates. 4) Board Oversight

Strategic Initiative	Year	Expected Outcomes
	2027	<ul style="list-style-type: none"> • The Board of Directors reviews and monitors the progress of GHG accounting in at least 80% of its total annual meetings, accompanied by status reports and risk considerations. • Year 2027 “Accurately calculated + Internal QA + Ready for audit” • 1) Calculation & Methodology • Scope 1–2 calculations are complete, accurate, and consistent with the same methodology across the entire organization. • Develop a Master Calculation File (standard formulas/units/unit conversions) and lock key formulas. • 2) Internal QA / Dry-run • Conduct a two-tier internal review (recorder checks for completeness consolidator checks for reasonableness/ comparison with previous period). • Conduct at least one Dry-run/Pre-assurance review to close gaps in evidence, completeness, and data consistency before entering the year 2028. • 3) Evidence Readiness • Supporting evidence (bills/receipts/work orders/landlord documents) is complete according to the checklist and traceable (audit trail).
	2028	<ul style="list-style-type: none"> • Year 2028 "Reasonable Assurance + Timely Disclosure" • 1) Verifier Engagement & Assurance Plan • Process for selecting and engaging verifiers, with clear Terms of Reference (TOR) specifying the scope of work/timeline/evidence format. • Collaborate on defining the assurance plan and execute the plan until completion. • 2) Assurance Outcome • Received a Reasonable Assurance report for Scope 1–2 • 3) Disclosure • Disclose verified GHG Scope 1–2 data on the ESG Data Platform and 56-1 Report by April 30th annually.

Risk Management

Risk 1 : Personnel continuity risk in GHG accounting

• Risk Characteristic

Risks arising from changes in personnel involved in GHG accounting, such as transfers, resignations, or leaves of absence, lead to discontinuity in data collection and supporting evidence. This also includes risks from incomplete handover of tasks, resulting in new responsible parties being unable to proceed according to established procedures and timelines accurately.

• Risk Impact

causing delays or incompleteness in data and evidence submission, which impacts the overall calculation and summary of GHG accounts. This may necessitate rework/data correction, thereby increasing the risk to accuracy, reliability, and readiness for verification/validation as per the plan.

• Risk Management Measures

1. Assign primary and backup responsible persons for each data category (e.g., electricity/fuel/refrigerant) and appoint one central coordinator to collect and track tasks.
2. Prepare a concise Standard Operating Procedure (1-page SOP) and a "Document Checklist" for submission in each cycle to enable new responsible persons to follow immediately.
3. Store data and evidence in a single location (central folder) by defining a standard folder structure/file naming convention and establishing a document upload schedule.
4. Monitor completeness on a regular basis (e.g., monthly/quarterly) and summarize the status for management's awareness to prevent accumulated outstanding tasks at the end of the period.

Risk 2 : Accuracy risk of GHG accounting data collection

• Risk Characteristic

Risk arising from the incorrect or inconsistent storage and collection of activity data used for GHG calculation, such as incorrect unit recording (kWh, liters, kg), erroneous number entry, use of incorrect periods, use of different document sets/versions, redundant or missing data, and incomplete evidence storage, which renders the data untraceable.

• Risk Impact

Leading to erroneous greenhouse gas emission calculation results, which impacts the reliability of the report. This may also necessitate corrections and recalculations, thereby increasing the workload and the risk to audit and verification readiness, as well as affecting data disclosure within the stipulated timeframe.

• Risk Management Measures

1. Provide knowledge or training on GHG accounting to relevant personnel or teams prior to the commencement of operations.
2. Establish a standardized data collection format (single template), clearly specifying units, periods, sources, and recorders.
3. Primarily utilize reference documents (e.g., electricity bills, fuel receipts, air conditioner refrigerant refill work orders, documents from lessors) and consistently attach supporting evidence, storing them in a central folder organized by period.
4. Implement a simple two-tier review process: the recorder verifies completeness/units prior to submission, and the compiler assesses reasonableness (e.g., by comparing with previous periods; if anomalies exceed established criteria, further verification is required).
5. Implement edit locking and version control (e.g., standardize file naming and designate editors exclusively to compilers) to mitigate confusion arising from multiple file versions.

Risk 3 : Accuracy Risk of Greenhouse Gas Emissions Calculation

• **Risk Characteristic**

Risk of inaccurate greenhouse gas emission calculations due to the selection of outdated or inappropriate Emission Factors (EF) for the energy type/activity, as well as the risk of using incorrect calculation formulas (e.g., incorrect unit conversion, wrong reporting period, incorrect Scope selection), which leads to calculation results that do not reflect actual emissions and are inconsistent with GHG accounting principles.

• **Risk Impact**

leading to erroneous greenhouse gas emission calculation results, which affects the reliability of the report. This may necessitate revisions/recalculations, impacting targets and planned monitoring, and increasing the risk of audit/verification observations.

• **Risk Management Measures**

1. Appoint a team or personnel to monitor current GHG accounting data from reliable sources and inform relevant parties of any changes.
2. Define EF reference sources to be used as a consistent standard and update at least once a year (or when new announcements are made), along with recording the "version/update date".
3. Prepare a standard calculation file (Master Calculation File) that locks important formulas and clearly specifies units to reduce errors from data entry/unit conversion.
4. Review the reasonableness before finalizing results by comparing with the previous period/year. If there are unusual changes, trace back to the Activity Data and EF used.
5. Record assumptions and calculation methods every time (e.g., estimation methods for incomplete data) to allow for retrospective verification and ensure consistent application of the same approach in every period.

Risk 4 : Risk of Completeness of Boundary and Greenhouse Gas Emission Sources (Completeness of Boundary & Emission Sources)

• **Risk Characteristic**

Risk arising from incomplete or inconsistent identification of organizational boundaries and greenhouse gas emission sources, such as the opening/closing/relocation of facilities or the presence of related assets/activities (e.g., leased branches, warehouses, vehicles, air conditioning systems/refrigerants) that are not recorded in the emission source registry, consequently leading to activity data and supporting evidence not covering the scope required for reporting in Scope 1 and 2.

• **Risk Impact**

This leads to a lack of completeness in GHG accounting (completeness), resulting in an underestimation of actual greenhouse gas emissions or an inability to reliably explain changes. This increases the risk of observations during auditing/verification and impacts the credibility of data disclosure, as well as year-on-year monitoring.

• **Risk Management Measures**

1. Prepare and maintain a Source & Site Register covering Scope 1–2, and review it at least once a year.
2. Establish procedures for reporting changes (e.g., opening/closing/relocating branches, changing electricity bill responsibility/adding/removing meters, vehicles, or related equipment) to keep the register up-to-date.
3. Utilize a completeness checklist before period-end closing, verifying that all data and evidence are complete for all sites/categories listed in the register.
4. Designate a reviewer to verify completeness before finalizing the total to ensure no emission sources are overlooked.

Risk 5 : Audit Trail and Assurance Readiness Risk**• Risk Characteristic**

Risk associated with incomplete, unsystematic, or untraceable (audit trail) storage of supporting evidence, such as incomplete electricity bills, fuel documents, air conditioning refrigerant refill work orders, or documents from lessors; inconsistent payment periods or storage in different locations/multiple versions; and unclear recording of assumptions and calculation methods, which renders the process unprepared for planned inspection/verification, especially when aiming for a Reasonable Assurance level.

• Risk Impact

Leading to delays in the review process, significant findings, or an inability to achieve the targeted level of assurance, which impacts the reliability of reports and the timely disclosure of information. This may potentially require retrospective document collection or repeated revisions, increasing workload and costs, as well as reputational risks if the published information is subsequently questioned.

• Risk Management Measures

1. Prepare an Evidence Checklist for each data category (Electricity/Fuel/Refrigerant/Lessor documents), specifying the required documents and the period to be covered.
 2. Establish a central folder for storing documents by period, along with file naming standards, and assign responsibility for uploading all documents before the period closes.
 3. Establish a process for reviewing the completeness of evidence before finalizing the aggregate results (at least 2 levels) and record the review results as supporting evidence.
 4. Record assumptions/estimation methods/changes in calculation methods or EF every time to ensure traceability and reduce the risk of retrospective amendments.
 5. Conduct at least one Dry-run/Pre-assurance review before the actual review year to close documentation gaps and audit trails.
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