

CORPORATE GOVERNANCE OVERVIEW STATEMENT

At KPJ Healthcare Berhad (“KPJ” or the “Company”), together with its subsidiaries (the “Group”), we firmly believe that strong and effective corporate governance is fundamental to delivering sustainable shareholder value, strengthening business integrity, maintaining investor confidence and achieving the Group’s long-term objectives and vision.

The Board of Directors (“the Board”), Management and employees of the Group are fully committed to upholding the highest standards of corporate governance. We continuously review and enhance our governance practices and processes to ensure they remain relevant, effective and aligned with best practices. In doing so, the Group consistently upholds the core pillars of corporate governance, namely ethical conduct, accountability, transparency and sustainability.

The Board is committed to ensuring that the Group’s Corporate Governance Model is aligned with and adheres to the following applicable laws, requirements and guidelines:

- the Companies Act 2016;
- the Malaysian Code on Corporate Governance (“MCCG”);
- the Main Market Listing Requirements (“MMLR”) of Bursa Malaysia Securities Berhad (“Bursa Securities”); and
- the Bursa Securities Corporate Governance Guide.

In accordance with Paragraph 15.25 of the MMLR, the Board is pleased to present this Corporate Governance Overview Statement for the financial year ended 31 December 2025, which outlines the application of the following principles:

- Principle A – Board Leadership and Effectiveness;
- Principle B – Effective Audit and Risk Management; and
- Principle C – Integrity in Corporate Reporting and Meaningful Relationship with Stakeholders.

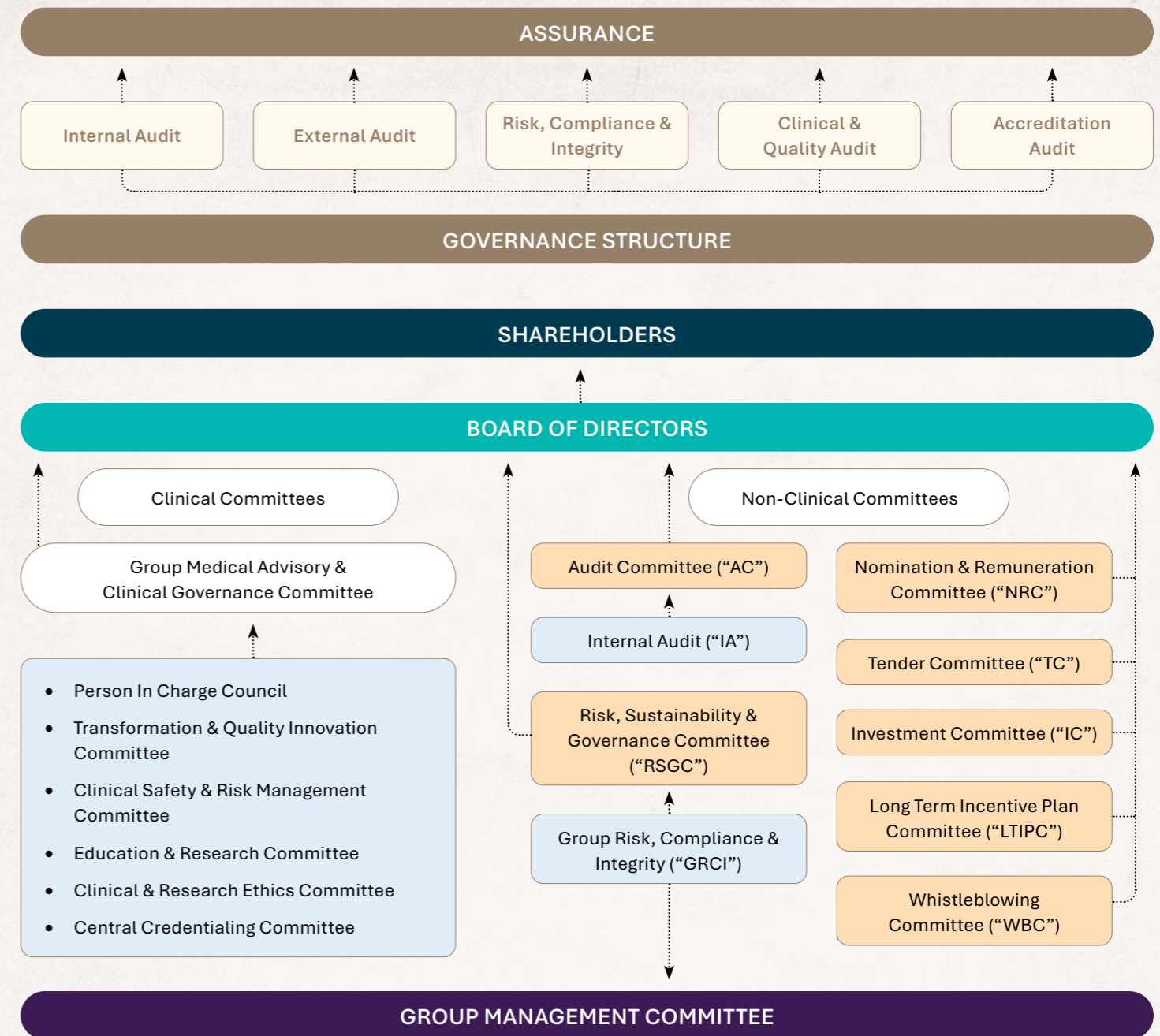
This Corporate Governance Overview Statement should be read together with the Corporate Governance Report 2025, which is available on the Company’s website.

The KPJ Corporate Governance (“CG”) Model is designed to ensure the orderly and effective discharge of the Board’s roles and responsibilities. To support this, specific responsibilities of the Board are delegated to the relevant Board Committees, the President and Managing Director (“PMD”) and various Management committees, in accordance with a clearly defined delegation structure, as illustrated at the end of this section.

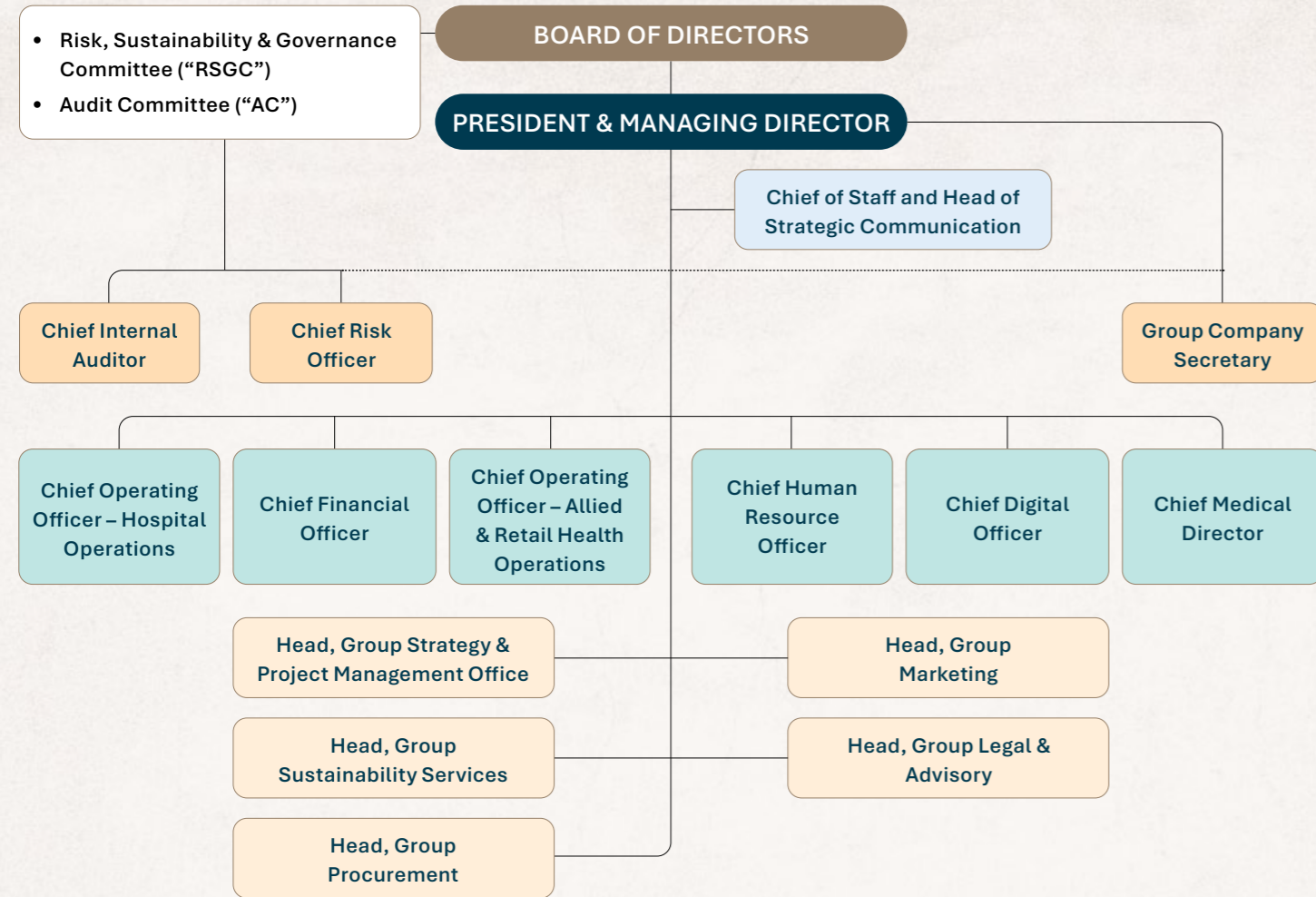
The Board has considered and taken guidance from the key CG Principles as set out in the MCCG. As at 31 December 2025, we have applied all the Practices in the MCCG, save for those disclosed in the CG Report.

The explanation for the departures from the Practices and the measures to be taken are provided in the CG Report, which is available at https://kpj.listedcompany.com/corporate_governance.html

CORPORATE GOVERNANCE MODEL



KPJ GROUP ORGANISATION STRUCTURE



The Board is supported by an experienced Senior Management team, each entrusted with clearly defined functional responsibilities to ensure effective execution of the Group’s strategies and day-to-day operations. The respective portfolios encompass key corporate and operational functions, including hospital operations, allied and retail health services, finance, medical and clinical governance, human capital management, strategy and business development, marketing, digital and information technology, sustainability, procurement and legal and regulatory affairs.

The delineation of responsibilities among Senior Management ensures accountability, appropriate segregation of duties and effective oversight across the Group’s operations. This structured governance framework supports sound decision-making, operational efficiency, risk management, regulatory compliance and the delivery of quality healthcare services, in line with the Group’s strategic objectives and stakeholder expectations.

PRINCIPLE A: BOARD LEADERSHIP & EFFECTIVENESS

BOARD LEADERSHIP

During the financial year ended 31 December 2025, the Board continued to provide strong leadership and effective oversight in guiding the Company. All Directors contributed meaningfully to strategic direction-setting, governance, performance monitoring, resource allocation and regulatory compliance, leveraging their collective experience and expertise to discharge their duties and responsibilities in accordance with the Committees’ Terms of Reference (‘TOR’).

A clear separation of roles and responsibilities between the Chairman of the Board, the PMD and the Non-Executive Directors (‘NEDs’) remains firmly in place, in line with corporate governance best practices. This structure ensures an appropriate balance of power and authority, supports independent oversight and strengthens accountability across the Group.

Tan Sri Dato’ Sri Dr. Ismail bin Haji Bakar continues to serve as the Non-Independent Non-Executive Chairman of KPJ, providing leadership to the Board and overseeing the Group’s strategic direction, business affairs and governance. The PMD, Mr. Chin Keat Chyuan, is responsible for managing the Group’s operations and leading Management in implementing the strategies, policies and action plans approved by the Board. He maintains regular engagement with the Board on the Group’s performance, key developments and strategic matters, supported by the KPJ Group Management Committee (‘KGMC’) and other management committees under the Group’s CG Model.

The Board continues to oversee the execution of the Group’s strategic objectives through the approved Balanced Scorecard, with the PMD and Senior Management accountable for delivery. Performance outcomes form the basis of Management’s evaluation.

The Company Secretaries support the Board by advising on the Company’s Constitution, the Companies Act 2016, Board policies and procedures, and compliance with applicable regulatory requirements. They also assist in maintaining the effectiveness of the Group’s CG model.

In addition, all Directors have unrestricted access to their advice and services to enable them to discharge their duties effectively.

BOARD OF DIRECTORS

Roles and Responsibilities

In 2025, the Board continued to provide effective leadership and oversight, ensuring that the Group is guided by sound governance principles and ethical conduct. Together with Management, the Board sets a strong tone from the top by promoting integrity, accountability and a culture of compliance across the organisation.

The Board remains mindful of its fiduciary duties and broader responsibilities to stakeholders, and systematically considers the impact of its decisions on patients, employees, shareholders, regulators and the wider community. Sustainability considerations are embedded into the Group’s strategy, governance framework and decision-making processes to support long-term value creation.

The Board also actively reinforces the Group’s C.A.R.E culture; Committed, Accountable, Respectful and Excellent, which underpins the Company’s values and behaviours. This culture guides organisational conduct and supports the delivery of safe, high-quality, patient-centric healthcare services.

Activities in 2025

- Reviewed and approved the Group’s quarterly financial results;
- Reviewed and approved audited financial statements for financial year ended 2024;
- Reviewed and approved the quarterly Press Releases;
- Reviewed and approved quarterly interim dividends;
- Reviewed and approved Recurrent Related Party Transactions and Related Party Transactions;
- Reviewed the Group’s Balanced Scorecard achieved for the year 2024;
- Deliberated and approved the Group’s Balanced Scorecard for the year 2025;
- Reviewed and approved the recommendation to the shareholder for the re-election of Directors for approval at the Annual General Meeting (“AGM”) of the Company;
- Reviewed the Board Composition and the outcome of the Board Effectiveness Evaluation;
- Reviewed and approved the purchase of assets and equipment, as well as hospital renovation, upgrading and expansion to maintain and enhance the service quality of KPJ hospitals;
- Reviewed and approved the strategic investment as well as divestment proposals;
- Oversight the Group’s digital transformation including the implementation of the new Hospital Information System (“nHIS”) and the integration with Enterprise Financial System;
- Reviewed principal risks facing the Group and the adequacy of mitigation measures;
- Deliberated on succession planning for Key Senior Management positions;
- Oversaw the development of the KPJ Health System as an integrated growth platform to drive sustainable value through clinical excellence, education and research;
- Deliberated and provided feedback on the Group’s Strategic Planning 2026-2030;
- Reviewed and approved the Group’s Budget for the year 2026; and
- Received updates on the proposed name and logo changes for flagship hospitals under the Group’s rebranding exercise.

Matters Reserved for the Board

- Approval of corporate plans and programmes;
- Approval of annual budgets, including major capital commitments;
- Approval of new ventures;
- Approval of material acquisitions and disposals of undertakings and properties; and
- Changes to Management and the control structure within the Company and its subsidiaries, including key policies and delegated authority limits.

BOARD CHARTER

The Group has established clear policies to delineate the functions and responsibilities between the Board and Management, as well as between the Chairman and the PMD, ensuring the smooth operation of the Group’s business. The roles and responsibilities are outlined in the Board Charter, which serves as a comprehensive reference document for Directors on matters relating to the Board and its processes. The Board Charter, available on the Company’s website at: https://kpj.listedcompany.com/misc/board_charter.pdf

Continuing Education Programmes

NRC ensures that new Board Members undergo a structured orientation to familiarise them with the Company’s governance framework, operations and responsibilities.

To support continuous professional development, Directors also participate in the Continuous Education Programme (“CEP”), attending training sessions and programs organised by internal and external providers. During 2025, Board members enhanced their knowledge and skills through various learning initiatives, as disclosed under Practice 2.1 of the CG Report.

2025 Directors’ Training Focus Areas (excluding Alternate Directors)

Corporate Governance



Leadership



Business Management



Information Technology



Sustainability



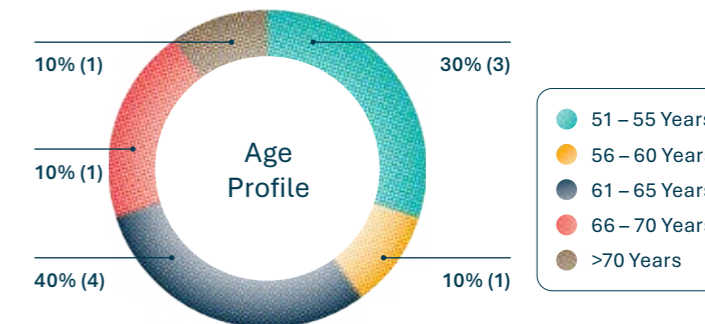
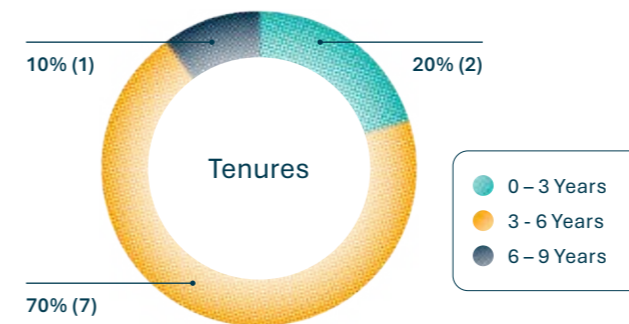
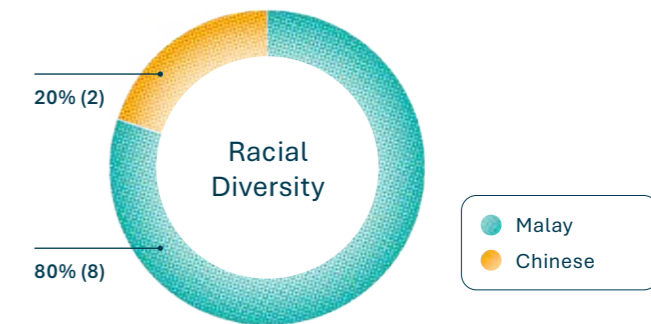
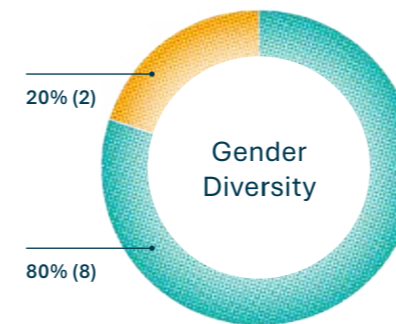
Health



BOARD COMPOSITION

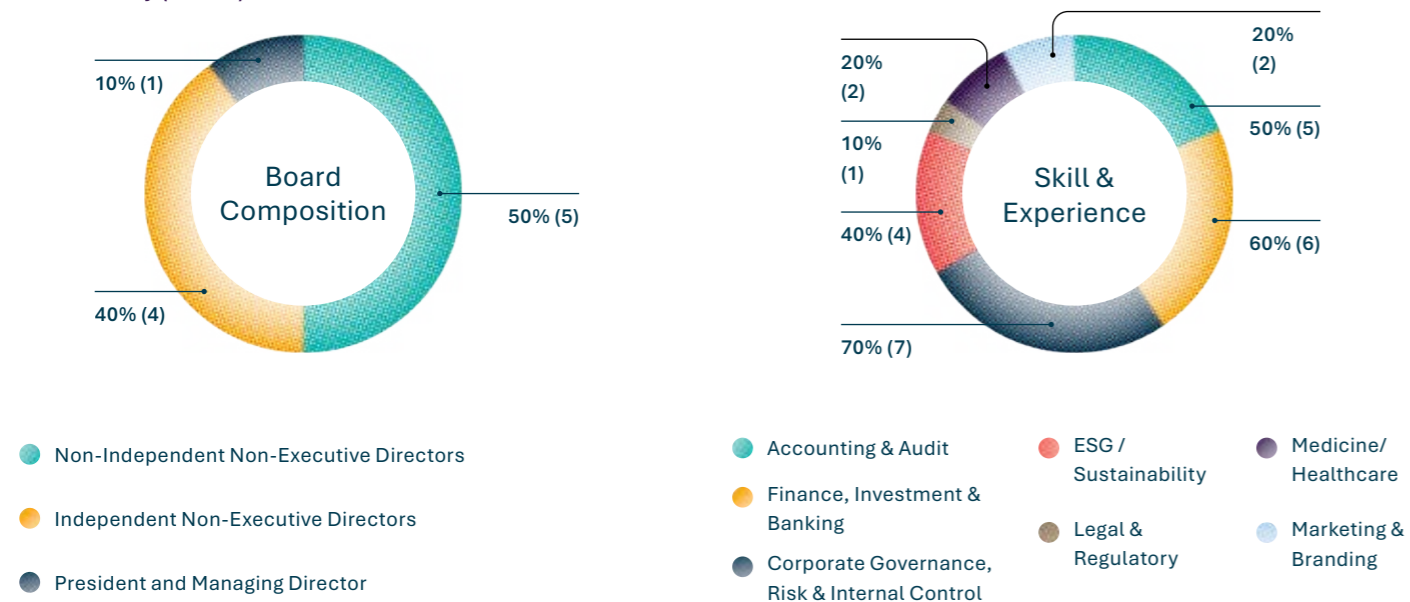
Board Diversity

The analysis on the composition of the Board as at 31 December 2025 (excluding Alternate Directors) was as follows:



BOARD COMPOSITION (CONT'D)

Board Diversity (cont'd)



The Board comprises a well-balanced mix of professionals with diverse expertise in business and operations, as well as key areas such as medical, risk, finance and investment. These competencies support the strategic direction of a growing organisation and guide sustainability considerations, including environmental, social and governance (“ESG”) matters, in line with the Fit and Proper Policy for the Board, which is available on the Company’s website. The current Board composition reflects a deliberate balance of skills, experience and diversity.

Profiles of all Board Members, including their qualifications, experience and areas of expertise, are disclosed in the Board Profile section under “Board of Directors” in the Integrated Annual Report 2025. During the financial year ended 31 December 2025, changes in the Boardroom included the resignation of Encik Mohamed Ridza bin Mohamed Abdulla on 18 February 2025 and the appointment of Puan Nina Sapura binti Rahmat as Alternate Director to Encik Shamsul Anuar bin Abdul Majid and Puan Siti Hajar binti Marhani as Alternate Director to Encik Rozaini bin Mohd Sani, both with effect from 14 May 2025. The Alternate Directors act on behalf of their respective Principal Directors in their absence, ensuring continuity in Board deliberations and decision-making. Where appropriate, they may also attend Board and Board Committee meetings as invitees. In discharging their duties, the Alternate Directors are subject to the same fiduciary duties, governance standards and regulatory obligations as the Principal Directors under the Companies Act 2016, the MMLR of Bursa Securities and other applicable laws.

The Board, through the NRC, conducts an annual evaluation of the Board, its Committees, individual Directors and the Chairman. This process assesses performance, independence of the Independent Directors, including the ability of Directors to exercise independent judgment at all times and forms the basis for recommendations on their re-election at the AGM. The current Board composition reflects a deliberate balance of skills, experience and diversity.

The Board is guided by KPJ’s Diversity, Equity and Inclusion Policy. The Policy applies across all levels, including the Board and Senior Management, ensuring that selection and appointments will prioritise merit, skills, knowledge, expertise, experience, professionalism and integrity, regardless of gender, ethnicity, or age, with the goal of optimising organisational performance, efficiency and effectiveness.

MEETING CALENDAR 2025

The Board members’ attendance at meetings during the financial year were indicated below:

Director	BOD	AC	TC	RSGC	NRC	IC	LTIP
Non-Independent Non-Executive Chairman							
Tan Sri Dato’ Sri Dr. Ismail bin Haji Bakar	9/9	-	-	-	-	-	-
Independent Non-Executive Directors							
Dato’ Mohd Redza Shah bin Abdul Wahid ^(a)	9/9	11/11	7/7	-	5/5	6/6	2/2
Mohamed Ridza bin Mohamed Abdulla ^(b)	1/1	-	-	1/1	1/1	1/1	-
Khairuddin bin Jaflus	9/9	11/11	7/7	6/6	-	-	-
Hisham bin Zainal Mokhtar ^(c)	9/9	9/11	-	5/6	3/3	5/6	-
Lee Lai Fan	9/9	-	7/7	-	5/5	-	2/2
Non-Independent Non-Executive Directors							
Shamsul Anuar bin Abdul Majid ^(d)	9/9	-	-	-	5/5	6/6	2/2
Rozaini bin Mohd Sani ^(e)	9/9	11/11	6/7	6/6	-	-	-
Prof. Emeritus Dato’ Dr. Azizi bin Haji Omar	9/9	-	-	6/6	5/5	-	2/2
Annie binti Rosle	-	-	6/7	-	-	5/6	-
President and Managing Director							
Chin Keat Chyuan	9/9	-	-	-	-	-	-
Alternate Directors							
Nina Sapura binti Rahmat ^(f) (Alternate Director to Shamsul Anuar bin Abdul Majid)	-	-	-	-	-	-	-
Siti Hajar binti Marhani ^(g) (Alternate Director to Rozaini bin Mohd Sani)	-	-	-	-	-	-	-

Chairman

Notes:

- The WBC did not convene any meetings during the year 2025.
- (a) Re-designated as a Member of the NRC and LTIP w.e.f. 1 April 2025.
- (b) Resigned as Independent Non-Executive Director on 18 February 2025. Accordingly, ceased to be Chairman and Member of the RSGC as well as Member of the NRC, IC and LTIP on the same date. No LTIP meeting was convened prior to his resignation.
- (c) Appointed as Chairman of the NRC and LTIP, and re-designated as a Member of IC w.e.f. 1 April 2025. No LTIP meeting was convened after his appointment.
- (d) Re-designated as Chairman of the IC w.e.f. 1 April 2025.
- (e) Re-designated as Chairman of the RSGC w.e.f. 1 April 2025.
- (f)(g) Appointed as Alternate Directors w.e.f. 14 May 2025. Attended Board and Board Committee meetings (where their respective Principal Directors are members) as invitees.

BOARD REMUNERATION 2025

The Board has established a remuneration framework designed to attract, motivate and retain competent and experienced Directors. In 2025, the Board approved and adopted a formal Board Remuneration Policy to further strengthen governance and enhance transparency in remuneration practices. The Board is of the view that the current remuneration structure remains competitive and commensurate with the responsibilities, expertise and contributions of the Directors. The remuneration of NEDs comprises fixed annual fees and meeting allowances, reflecting their oversight role and level of commitment.

Director	Fees (RM)		Allowance (RM)		Salary (RM)	Bonus (RM)	Benefits-in-kind (RM)	Other emolument (RM)	Total (RM)
	Company*	Subsidiary	Company	Subsidiary					
Non-Independent Non-Executive Chairman									
Tan Sri Dato' Sri Dr. Ismail bin Haji Bakar	360,000	-	36,000	-	-	-	31,150	-	427,150
Independent Non-Executive Directors									
Dato' Mohd Redza Shah bin Abdul Wahid	270,000	40,000	109,000	9,000	-	-	-	-	428,000
Mohamed Ridza bin Mohamed Abdulla ^(a)	31,200	-	10,000	-	-	-	-	-	41,200
Khairuddin bin Jaflus	240,000	76,000	93,000	22,500	-	-	-	-	431,500
Hisham bin Zainal Mokhtar	258,000	-	86,000	-	-	-	-	-	344,000
Lee Lai Fan	198,000	-	51,000	-	-	-	-	-	249,000
Non-Independent Non-Executive Directors									
Shamsul Anuar bin Abdul Majid ^(b)	57,000	-	54,000	-	-	-	-	-	111,000
Rozaini bin Mohd Sani ^(b)	87,000	-	89,000	-	-	-	-	-	176,000
Prof. Emeritus Dato' Dr. Azizi bin Haji Omar	234,000	40,000	65,000	10,000	-	-	-	252,000	601,000
Annie binti Rosle ^(c)	99,000	-	49,000	-	-	-	-	-	148,000
President and Managing Director									
Chin Keat Chyuan	-	-	-	-	2,702,400**	3,451,000**	77,564	699,333**	6,930,297
Alternate Directors									
Nina Sapura binti Rahmat (Alternate Director to Shamsul Anuar bin Abdul Majid)	-	-	-	-	-	-	-	-	-
Siti Hajar binti Marhani (Alternate Director to Rozaini bin Mohd Sani)	-	-	-	-	-	-	-	-	-

BOARD REMUNERATION 2025 (CONT'D)

Notes:

Meeting allowances were paid directly to all NEDs.

*Fee comprises Directors' fees and Committee fees.

**Inclusive of contribution to Employees Provident Fund ("EPF").

(a) Resigned as Independent Non-Executive Chairman on 18 February 2025.

(b) Fees comprised only Committee fees. Payment of Directors' fees for nominee Directors who represent and are employees of JCorp were paid directly to JCorp as Corporate Fee.

(c) 50% of the Directors' fees and Committees' fees for the nominee Director representing EPF were paid directly to EPF as Corporate Fee.

SENIOR MANAGEMENT

The Company experienced changes within its Senior Management team. The contracts of three (3) members reached their expiry during the year 2025:

- Chief Strategy Officer;
- Chief Marketing Officer; and
- Chief Medical Director.

The Company is dedicated to offering competitive total compensation packages to attract, retain, motivate and reward employees. Performance is evaluated based on the Company's relative performance and individual employees' achievement of business goals and objectives.

BOARD COMMITTEES

The Board is supported by several Board Committees established to enhance governance and enable effective oversight of specific functions and responsibilities. Each Committee operates in accordance with its respective TOR approved by the Board, that clearly outline its authority and responsibilities.

The Chairman of each Committee reports to the Board on key deliberations and recommendations arising from their meetings. The TOR are reviewed periodically to ensure they remain relevant and aligned with the Company's strategic objectives and regulatory requirements. While certain responsibilities are delegated to the Committees, the Board retains overall accountability for all decisions.

Despite the delegation of responsibilities, the ultimate decision-making authority remains with the Board. In the year 2025, the Board was supported by the following eight (8) Committees:

1. Nomination and Remuneration Committee;
2. Investment Committee;
3. Tender Committee;
4. Audit Committee;
5. Risk, Sustainability and Governance Committee;
6. Group Medical Advisory and Clinical Governance Committee;
7. Whistleblowing Committee; and
8. Long-Term Incentive Plan Committee

Nomination and Remuneration Committee

Chairman

Hisham Bin Zainal Mokhtar⁽¹⁾
Independent Non-Executive Director

Member

Dato' Mohd Redza Shah Bin Abdul Wahid⁽²⁾
Senior Independent Non-Executive Director

Lee Lai Fan
Independent Non-Executive Director

Prof. Emeritus Dato' Dr. Azizi Bin Haji Omar
Non-Independent Non-Executive Director

Shamsul Anuar Bin Abdul Majid
Non-Independent Non-Executive Director

Mohamed Ridza bin Mohamed Abdulla⁽³⁾
Independent Non-Executive Director

Notes:

(1) Appointed as Chairman w.e.f. 1 April 2025.

(2) Re-designated as a Member w.e.f. 1 April 2025.

(3) Ceased as a Member w.e.f. from 18 February 2025.

The NRC plays a pivotal role in supporting the Board by overseeing both Board composition and remuneration governance, ensuring a strong leadership framework that advances KPJ Group's strategic objectives. The Committee is entrusted with ensuring that the governance of nomination and remuneration aligns with the KPJ Group's strategic objectives, regulatory requirements and long-term sustainability. The Committee meets quarterly and works closely with the PMD, company secretaries and Group Human Resource Management ("GHRM") to uphold best practices in governance, remuneration and leadership development.

Roles and Responsibilities

1. Board Composition & Leadership Succession

- Ensures the Board has the right mix of skills, expertise and diversity to drive KPJ's growth and align with the Group's strategic direction.
- Manages succession planning for the Board and key leadership roles, ensuring continuity of leadership and talent sustainability.
- Conducts annual Board Effectiveness Evaluations ("BEE") to assess overall performance and identify competency gaps.

2. Remuneration & Reward

- Develops competitive and attractive remuneration policies for Non-Executive Directors and Senior Management.
- Aligns remuneration with industry benchmarks, shareholder value, short term and long-term business objectives.
- Implements pay-for-performance incentives to attract, retain while balancing shareholder interests with retention of high caliber talent.
- Administers the remuneration and reward strategy for Senior Management at its discretion, in line with the powers and authority set out in its TOR and the By Laws.

3. Governance & Compliance

- Ensures adherence to Bursa Securities Listing Requirements, MCGG, and other regulatory frameworks.
- Enhances Board operations by promoting greater transparency and improving decision making efficiency.
- Oversees the Board Performance Improvement Programme, driving continuous enhancement of governance impact.

Key activities in 2025

The NRC diligently executed its mandate in line with its TOR, the MCGG and Bursa Securities Listing Requirements. The Committee considered, reviewed and where applicable, made formal recommendations to the Board on the following key areas:

1. Board Composition & Leadership Succession

- Reviewed the overall size and composition of the Board and its Committees;
- Reviewed and recommended Board Committee's TOR for Board's approval;
- Reviewed and recommended for Board's approval, the establishment of LTIP Committee to support KPJ Group's implementation of LTIP for its top executives and key talents for successful long-term strategy execution;
- Assessed and recommended the re-election of retiring directors to the Board for shareholders approval at the AGM;
- Reviewed the membership and compositions of KPJ's Directors in subsidiary and associated companies; and
- Reviewed the succession plan for the Board and its Committees.

2. Nomination and Succession Planning of Pivotal Positions

- Reviewed and assessed potential candidates (internal and external talents) for pivotal positions;
- Reviewed the framework succession planning and development for pivotal positions; and
- Successfully developed internal candidates for the position of Head of Internal Audit, identified as the final successor to be appointed in 2026 following retirement of the current incumbent.

3. Remuneration

- Review the adoption of Board Remuneration Policy and Framework for Board's approval to enhance transparency in remuneration disclosure, promote consistency in managing Directors' remuneration, while ensuring compliance with regulatory requirements and alignment with best practices;
- Reviewed the annual performances of PMD and incumbents in pivotal positions for year 2024, with feedbacks and coaching for elevated 2025 performances;
- Reviewed and approved compensation pay-mix for top executive positions for market competitiveness and to incorporate long-term strategy implementation and drive;
- Guided the establishment of LTIP for pivotal positions and emerging talents to align Group's long-term strategy and rewards, set eligibility criteria and recommended the 2025 LTIP Grant for Board approval; and
- Reviewed and recommended for Board approval, KPJ's framework on Mutual Separation Scheme based on manpower optimisation target and efficient operations driven by digitalisation.

4. Board Effectiveness Evaluation

- Reviewed the results of the BEE exercise for Year of Assessment (“YA”) 2024 and deliberated the results with Chairman and Board to formulate follow-up action plans;
- Considered the implementation and scope for the YA2025 BEE by an external independent consultant, ensuring objectivity and comprehensive scope; and
- Assessed the YA2024 Results and identified improvement plans.

5. Governance

- Deliberated on the conduct of the 32nd AGM ensuring compliance with relevant guidelines and best practices;
- Updated the status of Directors’ continuing education programs in compliance with the Board Training Plan (“BTP”); and
- Reviewed and recommended for Board approval, a structural realignment for abolishment of GMACGC and for the transfer of its clinical governance function to the management’s operational leadership under the Chief Medical Director (“CMD”) with the Board maintaining its oversight over clinical risks through the existing Board’s RSGC. This enhances governance integrity closer to business operations and ensure alignment with best practices in corporate governance and healthcare management.

The diligent and proactive efforts of the NRC in 2025 have reinforced a robust governance foundation, which is essential for the KPJ Group’s sustained success and resilience. The Committee remains unwavering in its commitment to upholding the highest standards of integrity, accountability and transparency. Aligned with the Group’s strategic vision and ethical values, the NRC will continue to drive KPJ’s journey toward sustainable growth and operational excellence. We are dedicated to nurturing high-quality human capital that reflects these principles, thereby solidifying the KPJ Group’s position as a trusted leader in the healthcare industry.

Investment Committee

Chairman

Shamsul Anuar Bin Abdul Majid ⁽¹⁾
Non-Independent Non-Executive Director

Member

Hisham Bin Zainal Mokhtar ⁽²⁾
Independent Non-Executive Director

Dato’ Mohd Redza Shah Bin Abdul Wahid
Senior Independent Non-Executive Director

Annie Binti Rosle
Non-Independent Non-Executive Director

Mohamed Ridza bin Mohamed Abdulla ⁽³⁾
Independent Non-Executive Director

Notes:

- (1) Re-designated as Chairman w.e.f. 1 April 2025.
- (2) Re-designated as a Member w.e.f. 1 April 2025.
- (3) Ceased as a Member w.e.f. from 18 February 2025.

Roles and Responsibilities

Review and recommend to the Board on matters pertaining to KPJ’s core operations, investment portfolio, strategic initiatives, potential investments, acquisitions, divestments and other value creation plans and ensure they are in line with Group’s short and long-term objectives, in accordance with the Committee’s TOR.

Activities in 2025

- Reviewed and assessed KPJ’s hospital expansion and development plans, ensuring alignment with long-term strategic goals for recommendations to the Board;
- Evaluated and recommended investment and divestment proposals to optimise KPJ’s portfolio to align with its strategic direction;
- Reviewed the Group’s portfolio of investments as well as appropriateness of capital allocation;
- Emphasised the evaluation of investment requirements to achieve targeted returns and enhance operational efficiency;
- Deliberated corporate exercises to strengthen KPJ’s financial position and market competitiveness as well as its long-term financial sustainability;
- Supported funding initiatives to ensure business continuity and mitigate financial risks;
- Engaged in in-depth discussions on the KPJ Group of Companies’ Business Plan, focusing on investment requirements, projected returns and alignment with the Group’s long term strategic objectives; and
- Carried out post-implementation evaluations of the investments undertaken.

Tender Committee

Chairman

Khairuddin Bin Jaflus
Independent Non-Executive Director

Member

Dato' Mohd Redza Shah Bin Abdul Wahid
Senior Independent Non-Executive Director

Lee Lai Fan
Independent Non-Executive Director

Rozaini Bin Mohd Sani
Non-Independent Non-Executive Director

Annie Binti Rosle
Non-Independent Non-Executive Director

Roles and Responsibilities

The TC is a Board-mandated committee established to support the execution of the Board's strategy in strengthening procurement governance across KPJ.

The Committee serves as an overarching governance mechanism to ensure the centralisation of procurement activities across the Group, the consistent application of procurement policies and adherence to the approved authority limits. Through this role, the TC promotes fair and transparent procurement practices, ensuring that tender evaluations are conducted based on consistent governance standards, whilst delivering value-for-money.

The Committee evaluates and deliberates procurement proposals submitted by Management and approves tenders within its delegated authority. For procurement proposals exceeding its approval limits, the Committee reviews the submissions and makes recommendations to the Board for approval.

Activities in 2025

During the financial year 2025, the TC focused on reinforcing corporate procurement governance across the Group through structured oversight of procurement proposals presented by Management.

The Committee deliberated procurement proposals covering both capital and operational requirements, ensuring that decisions were aligned with approved procurement policies, authority limits, budgetary provisions and governance standards. In carrying out its responsibilities, the Committee emphasised disciplined decision-making and consistency in procurement practices across hospitals and support companies.

The Committee oversaw key matters related to the procurement for the Group, driving significant achievements, including:

- Oversight of significant procurement activities across the Group, encompassing both capital expenditure ("CAPEX") and operational expenditure ("OPEX"), to support operational sustainability, business growth and strengthened financial governance;
- Approval of key technology-enabled initiatives, supporting the Group's digital enablement objectives, including enterprise platforms and service models to enhance operational efficiency, scalability and governance;
- Approval of the appointment of project consultants for hospital development projects, to support capacity expansion in alignment with the Group's long-term growth strategy; and
- Monitoring the implementation of high-value or complex procurement initiatives, with focus on financial and cost considerations and the timeliness of deliverables, to identify material risks or variances that may impact approved budgets or business objectives, while providing governance-level oversight and assurance.

Long-Term Incentive Plan Committee

Chairman

Hisham Bin Zainal Mokhtar ⁽¹⁾
Independent Non-Executive Director

Member

Dato' Mohd Redza Shah Bin Abdul Wahid ⁽²⁾
Senior Independent Non-Executive Director

Lee Lai Fan
Independent Non-Executive Director

Prof Emeritus Dato' Dr. Azizi Bin Haji Omar
Non-Independent Non-Executive Director

Shamsul Anuar Bin Abdul Majid
Non-Independent Non-Executive Director

Mohamed Ridza bin Mohamed Abdulla ⁽³⁾
Independent Non-Executive Director

Notes:

- (1) Appointed as Chairman w.e.f. 1 April 2025.
- (2) Re-designated as a Member w.e.f. 1 April 2025.
- (3) Ceased as a Member w.e.f. from 18 February 2025.

Roles and Responsibilities

The duties and responsibilities of the LTIP Committee are as set out in the approved KPJ LTIP By-Laws which include amongst others:

- To exercise all the powers and undertake the duties and responsibilities stated in the LTIP By-Laws;
- To report its activities including how it has discharged its responsibilities to the Board on a regular basis and promptly provide to the Board copies of the minutes of meetings of the LTIP Committee;

- To arrange for periodic reviews of its own performance, constitution and TOR to ensure it is operating at maximum effectiveness and recommend any changes it considers necessary to the Board for approval;
- To act in line with the directions of the Board; and
- To consider and examine such other matters as the LTIP Committee considers appropriate.

Activities in 2025

The Board had approved the formation of LTIP Committee to implement and administer KPJ LTIP program in accordance to the LTIP's By-Laws in September 2024.

Following that, an Extraordinary General Meeting ("EGM") of KPJ was held on 28 February 2025 where the shareholders approved the allocation of KPJ's existing ordinary shares to PMD under the LTIP program.

The LTIP Committee convened its first meeting in March 2025 to deliberate on the LTIP consideration for the remaining top executives and selected talents. During the meeting, the LTIP grant and vesting criteria were reviewed and endorsed, and the 2025 LTIP grant eligibility criteria and quantum for individual recipients were approved.

The LTIP Committee met twice in 2025 for the above deliberation, and it was agreed that it will reconvene only in the event of material changes arising from stakeholder engagements or technical reviews; otherwise, the next meeting will be held in 2026 for the vesting exercise.

PRINCIPLE B: EFFECTIVE AUDIT & RISK MANAGEMENT

Audit Committee

Chairman

Dato' Mohd Redza Shah Bin Abdul Wahid

Senior Independent Non-Executive Director

Member

Khairuddin Bin Jaflus

Independent Non-Executive Director

Hisham Bin Zainal Mokhtar

Independent Non-Executive Director

Rozaini Bin Mohd Sani

Non-Independent Non-Executive Director

The AC comprises four (4) members, consisting of one (1) Senior Independent Non-Executive Director, two (2) Independent Non-Executive Directors and one (1) Non-Independent Non-Executive Director. Collectively, the AC members possess the relevant qualifications, experience and expertise to effectively discharge their roles and responsibilities.

All members are financially literate and are able to understand matters relating to financial reporting. This enables the AC to undertake informed deliberations and provide effective oversight of the integrity of the Group's financial reporting process.

The company secretaries coordinates the scheduling of AC meetings in advance to align with the Group's financial reporting and governance calendar.

Roles and Responsibilities

The AC assists the Board in fulfilling its oversight responsibilities in relation to financial reporting, internal controls, risk management and the effectiveness and independence of the internal and external audit functions.

In performing its duties, the AC promotes transparency, accountability and integrity in the Group's governance processes. The AC also provides independent assurance to the Board on the adequacy and effectiveness of the Group's financial reporting framework and internal control environment.

A key focus of the AC is to ensure that the External and Internal Audit functions remain independent, objective and adequately resourced to effectively carry out their respective mandates.

Activities in 2025

Financial Reporting Oversight

- Reviewed the quarterly financial statements in compliance with Malaysian Financial Reporting Standards ("MFRS") 134 and the MMLR of Bursa Securities before recommending the same to the Board for approval;
- Reviewed the draft announcements of the quarterly financial results to Bursa Securities, to ensure compliance with the applicable accounting standards in Malaysia and other legal and regulatory requirements prior to tabling to the Board for approval;
- Reviewed the Financial Results for the year ended 2025 and reviewed the Management Letter, together with the Management's response to the issues raised by the External Auditors on their review of KPJ operations and internal control system; and
- Assessed and recommended the dividend pay-outs in line with the Company's dividend guideline, ensuring compliance with the provisions of the Companies Act 2016.

Oversight of External Audit

- Reviewed the 2025 External Audit Plan on the scope and focus area of the External Auditors;
- Reviewed and monitored the non-audit services provided by the External Auditors to ensure that their independence and objectivity were not impaired; and
- Assessed the performance, effectiveness and independence of the External Auditors prior to recommending their re-appointment and remuneration to the Board.

Related Party Transactions

- Reviewed the Group's related party transactions ("RPT") and recurrent related party transactions ("RRPT"), ensuring they were in the best interest of the Company, fair and reasonable, on normal commercial terms and not detrimental to the interest of the minority shareholders;
- Reviewed the estimated RRPT mandates for the ensuing year and Circular to Shareholders in relation to the Renewal of Shareholders' Mandate and Additional Mandates for RRPT amount transacted during the year; and
- Periodically reviewed the RRPTs that were mandated and transactions against the mandated amount and ensuring these transactions were within the mandated amount.

Internal Audit and Internal Control

- Reviewed and approved the Internal Audit Services Key Performance Indicators ("KPI") 2025 targets;
- Reviewed the Internal Audit Plan for 2026 and its budget to ensure that high-risk auditable areas are being covered in the audit scope;
- Reviewed the performance of the Chief Internal Auditor and the department against the Internal Audit Plan;

- Reviewed and deliberated on the internal audit reports, audit recommendations and Management's action plan to ensure all key risks and critical issues were properly addressed;
- Reviewed the External Quality Assessment conducted on the Internal Audit function;
- Reviewed and approved the Audit Charter in line with the International Standards for Professional Practice of Internal Auditing by the Institute of Internal Auditors ("IIA");
- Assessed the adequacy and effectiveness of internal control processes, including mitigation measures relating to technology risks and operational controls across hospitals and subsidiaries; and
- Reviewed the submission of the Self-Audit Checklist initiative performed by the hospital management as part of the continuous monitoring framework.

Review of the Performance of AC

The annual review of the composition, performance and effectiveness of the AC was conducted as part of the BEE process.

Relationship with External Auditors

The AC maintains a professional and transparent relationship with the External Auditors, Internal Audit and Group Finance. Discussion was held between these parties to discuss the External Auditors' audit plan, report, internal controls issues and procedures. The performance of External Auditors was assessed, and the AC recommended their appointment and remuneration to the Board.

In 2025, the External Auditors attended three (3) out of 11 meetings held on 17 February 2025, 26 August 2025, and 19 November 2025 respectively. Separate private sessions were conducted without Management's presence at two (2) out of three (3) of the meetings attended by the External Auditors.

Risk, Sustainability & Governance Committee

Chairman

Rozaini Bin Mohd Sani ⁽¹⁾

Non-Independent Non-Executive Director

Member

Khairuddin Bin Jaflus

Independent Non-Executive Director

Hisham Bin Zainal Mokhtar

Independent Non-Executive Director

Prof Emeritus Dato' Dr. Azizi Bin Haji Omar

Non-Independent Non-Executive Director

Mohamed Ridza bin Mohamed Abdulla ⁽²⁾

Independent Non-Executive Director

Notes:

(1) Re-designated as Chairman w.e.f. 1 April 2025.

(2) Ceased as a Chairman and Member w.e.f. from 18 February 2025.

Roles and Responsibilities

The RSGC supports the Board in overseeing the Group's risk management, sustainability and governance matters. The Committee reviews the adequacy and effectiveness of the Group's frameworks in these areas and assists the Board in setting the strategic direction for risk, sustainability and governance.

The RSGC promotes an integrated approach to risk management, ensures compliance to safeguard patients, employees and assets, and oversees ESG policies and strategies to address sustainability-related risks and opportunities. The Committee monitors the implementation of the Group's Green Healthcare Sustainability Framework, which encompasses environmental protection, community engagement, employee wellbeing and governance practices. It also deliberates on governance matters and provides recommendations to ensure alignment with the Group's strategic objectives.

Activities in 2025

- Reviewed the Group's consolidated Enterprise Risk Management ("ERM") reports. The review encompassed reporting status, risk profiles, key risk priorities, and mitigation action plans to ensure that emerging and evolving risks within the operating environment are effectively identified and managed;
- Discussed and reviewed the Group Risk Plan, which outlines the activities for 2025, ensuring that the RSGC focuses its attention on meeting the RSGC's TOR requirements throughout 2025;
- Reviewed and recommended to the Board for approval the Statement on Risk Management and Internal Control, Sustainability Statement and CG Overview Statement for inclusion in the Integrated Annual Report 2024, and the CG Report for submission to Bursa Securities;
- Strengthened clinical governance through the review of clinical and non-clinical incidents and the assessment of corresponding mitigation actions to enhance patient safety and operational controls;
- Reviewed and recommended to the Board for approval the amendments to the Limit of Authority ("LOA");

- Monitored the execution of Business Continuity Management ("BCM") drills across all business units in line with the BCM Framework, and oversaw ongoing initiatives to enhance organisation-wide awareness, preparedness, and response capabilities through structured engagement, training programmes, and cross-functional knowledge-sharing on business continuity and crisis management;
- Monitored hospital licensing status and progress, ensuring compliance with regulatory requirements to support operational excellence;
- Reviewed key compliance and integrity initiatives, including measures to enhance data protection compliance in line with the amendments to the Personal Data Protection Act, and initiatives to further strengthen the Anti-Bribery Management System ("ABMS") across the KPJ Group through continuous evaluation, monitoring, training, awareness programmes and audits, alongside efforts to reinforce ethical practices and foster a strong governance culture across the organisation;
- Reviewed and endorsed the refined Green Healthcare Sustainability Framework as the Group's core sustainability control architecture, while providing oversight on its implementation to ensure alignment with long-term strategy, material ESG priorities and healthcare imperatives, strengthening consistency and accountability across the Group;
- Reviewed and acknowledged KPJ's five-year Sustainability Roadmap, building on the Green Healthcare Sustainability Framework to guide the phased integration of sustainability across the KPJ Health System, including integration into clinical practice, education and research to strengthen a "learning health system" approach;
- Reviewed and endorsed KPJ's SusATTAINability 30-by-30 targets, outlining the Group's medium-term sustainability ambitions encompassing emissions reduction, renewable energy adoption and green hospital development;
- Provided oversight of management's initial steps to strengthen climate-related governance, data readiness and integration within enterprise risk management, including the establishment of an International Sustainability Standards Board ("ISSB") Reporting Steering Committee to support readiness for National Sustainability Reporting Framework-aligned reporting International Financial Reporting Standards ("IFRS") S1 and S2 in line with Bursa Securities phased implementation timeline;
- Provided oversight of Group Technology Services ("GTS") IT projects and digital transformation initiatives, including the nHIS implementation, and endorsed the related governance policy to ensure alignment with corporate and ethical standards; and
- Provided oversight on cybersecurity, information management and data security initiatives, including the Security Roadmap.

Group Medical Advisory & Clinical Governance Committee

Chairman

Prof. Emeritus Dato' Dr. Azizi Bin Haji Omar

Non-Independent Non-Executive Director

Chin Keat Chyuan

President and Managing Director

Dato' Mohamad Farid bin Salim

Chief Operating Officer – Hospital Operations

Dr. Luis Chen Shian Liang

Chairman, Group Person In Charge Council

Assoc. Prof. Dr Yap Yoke Yeow

Chairman, Clinical and Research Ethics Committee

Dr. Jamal Azmi Mohamad

Chairman, Clinical Safety and Risk Management Committee

Prof. Emeritus Dato' Dr. Lokman Saim

Chairman, Education and Research Committee

Assoc. Prof. (C) Dr. Mohamad Ismail Ali

Chairman, Transformation and Quality Innovation Committee

Assoc. Prof. Dr. Mohd Daud Sulaiman

Member of GMACGC

Prof. Dr. Amaluddin Ahmad

Member of GMACGC

Dr. Munirah Khudri

General Manager, Clinical Governance and Quality Performance

Dr. Mohamed Ahsan Mohamed Ismail

Head, Operational Governance & Medical Professional Management

Jayanthi a/p Marimuthu

Group Chief Nursing Officer

Zarihasyum Wan Zein

Head, Pharmacy and Allied Health Services

Dr. Rafiza Mohamed Nazir

Senior Manager, Patient Experience & Patient-Centered Care

Roles and Responsibilities

Clinical governance remains an integral component of KPJ's corporate governance framework, ensuring accountability for the delivery of safe, effective, high-quality and patient-centred care, which underpins excellence in clinical care across the Group.

In 2025, this governance framework continued to be anchored by the Seven Pillars of Clinical Governance, a model first established within the United Kingdom's UK National Health Service to ensure organisational accountability for quality and patient safety. Over the decades, the adoption of this internationally recognised framework, aligned with Malaysian accreditation requirements, provides a systematic and risk-based approach to clinical oversight across the Group, ensuring governance arrangements are structured, consistent and not ad hoc in nature.

As the Group progressed in the development of the KPJ Health System and expanded its Centres of Excellence, clinical governance arrangements were reviewed to ensure they remain fit-for-purpose, scalable and aligned with increasing clinical complexity. The evolution of academic partnerships, multidisciplinary models of care, research activities, and specialty-driven services necessitated clearer lines of accountability, more integrated oversight and stronger linkage between clinical leadership, quality governance and strategic development.

In response, refinements were made to Group-level clinical governance structures and reporting relationships during the year. These changes were intended to strengthen executive accountability for clinical outcomes, support more effective oversight of patient safety and ethical practices and enable more agile decision-making across specialty and academic domains, while preserving statutory hospital-level governance requirements.

Evolution of the GMACGC

Historically, the Group Medical Advisory Committee served as the central advisory body providing clinical oversight, professional guidance and strategic input to the Group on matters relating to patient care, clinical standards and medical practice.

In 2025, KPJ undertook a review of its Group-level clinical governance arrangements to better align accountability with executive leadership and to streamline governance pathways. As part of this evolution, a planned transition of the Central Group Medical Advisory Committee was announced at the 4th GMACGC Meeting on 27 October 2025. The Committee continued to function until 31 December 2025, after which its advisory and oversight functions transitioned to the CMD with effect from January 2026.

Hospital Medical (and Dental) Advisory Committees ("HMDACs") continue to be retained, in line with statutory and regulatory requirements, to provide clinical oversight and professional governance at hospital level.

Activities in 2025

- Promoting "Toward Zero Sentinel Event" Campaign throughout the Group **Safe Surgery Saves Lives ("SSSL")**, **Step Up to Reduce Fall, Medication without Harm and Prevention and Control of Infection**
The goal of the campaign is to reduce the number of preventable surgical injuries, death or complication;
- **Step up to reduce fall: sustainable campaign**
This campaign builds on successful outcomes in reducing fall rates in KPJ Hospital and aim to ensure sustainability of our existing projects;
- **Medication without harm**
Under the 'Medication without Harm' campaign, nursing services focused on creating awareness and developing strategies to reduce the administration errors;

- **Clean hands and environment, save lives**
This hand hygiene campaign focused on preventing hospital acquired infection and creating a better patient experience;
- Enhancing the clinical acuity and proficiency of the Medical Officer in Charge and Medical Officers;
- Integrating Academic Health System with the hospital day to day operation;
- Enhancing the development of Centre of Excellence;
- Leverage Mayo Clinic Care Network Affiliation – the Group leveraged its affiliation with the Mayo Clinic Care Network to enable structured knowledge transfer and the adoption of evidence-based rehabilitation protocols for breast and colorectal cancer, strengthening clinical capability and intellectual capital across KPJ Oncology Services;
- Advancing Value-Based Care and Governance Maturity – KPJ advanced its transition towards value-based care through the evolution of the former Performance Measurement Unit into the Value-Based Care ("VBC") Unit. A Group-wide VBC framework was developed, supported by six enablers encompassing data, governance, patient voice, care and cost pathways, scaling mechanisms and incentive alignment readiness;
- Patient Safety Culture Survey – A strategic initiative to understand the safety culture among healthcare professionals in the group was initiated several years ago. A Group-wide survey covering all 29 hospitals was completed and formally reported at the 4th GMACGC Meeting on 27 October 2025;
- Annual Clinical survey, validation survey, focus survey and gap analysis;
- Dietetics and Food Services achieved Group-wide standardisation through the implementation of a Standardised Diet Manual, centralised education materials and the expansion of digital Halal assurance systems to improve compliance and operational efficiency;

- Health Information Management Services strengthened information governance through Group-wide medical coding competency training and standardisation of key clinical and administrative documentation, enhancing data reliability, audit readiness and medico-legal safeguards;
- Preparation and submission of a proposal to replace the current incident reporting system to a new incident reporting system to improve the tracking and management of clinical and non-clinical incidents across KPJ hospitals;
- Medication Price Transparency supporting the implementation of medication price transparency in line with Ministry of Health (“MoH”) directives;
- Selection of staff for advanced cardiac rehabilitation training (Latihan Lanjutan Rehabilitasi Kardiak) in collaboration with UKM Hospital Canselor Tuanku Muhriz (“HCTM”) to upskill physiotherapists in specialised cardiac care;
- Just Culture enhancement as a continuing effort to promote psychological safety;
- Pilot of awareness by frontline leaders of mental health and burnout among healthcare workers. A programme to provide a safe and supportive working environment is being developed with emphasis on principles of Just Culture, psychological safety and humble leadership;
- Outcome measures that matter to patients are being developed specifically for procedures such as Total Knee Replacement (“TKR”) and Coronary Artery Bypass Grafting (“CABG”) that include pertinent clinical outcomes for each surgery, PROM and PREM;
- A focus group study was conducted to understand perceptions and identify possible areas for improvement with regard to the implementation and governance of the KPJ Health System (Academic Health System) was conducted. Five leadership groups were engaged – Medical Directors, Hospital CEO’s, Hospital CNO’s, Hospital Heads of Service and University Academic Leaders; and
- KPJ is extending their care arm into the community by initiating a palliative and home care program that will be implemented in 2026 onwards.

Function of sub-committee of GMACGC:

Committees	Functions
Person in Charge Council	1. Work closely with Group Clinical Services to improve clinical governance at the hospital levels making sure all the resolution from GMACGC is cascaded at the hospital level.
Transformation and Quality Innovation Committee	1. Drive transformation initiatives in providing care. 2. Implement innovations in quality and safety. 3. Drive culture change. 4. Develop service clusters and Centres of Excellence.
Clinical Safety and Risk Management Committee	1. Monitor, analyse, and report scientifically safety incidents, safety goals and clinical indicators. 2. Develop quality and safety dashboards. 3. Analyse and report mortality, morbidity and sentinel-incidents and incidence.
Education and Research Committee	1. Integrate KPJ University and Hospitals into a single platform to train and educate healthcare professionals of all levels. 2. Enhance research activities in hospitals. 3. Elevate major hospitals into academic health centres.
Clinical and Research Ethics Committee	1. Monitor ethical issues involving clinical care. 2. Provide advice on ethical questions as they arise. 3. Review and decide on ethical appropriateness of research proposals.
Central Credentialing Committee	1. Act as oversight body to credentialing approvals of hospital credentialing committees.

Following further governance refinements during the Board Retreat in November 2025, only the Persons-in-Charge Council, Clinical Safety and Risk Management Committee (“CSRMC”) and Clinical and Research Ethics Committee (“CREC”) will continue into 2026, with the remaining central committees completing their roles by 31 December 2025.

PRINCIPLE C: INTEGRITY IN CORPORATE REPORTING & MEANINGFUL RELATIONSHIPS WITH STAKEHOLDERS

The Group recognises its major responsibility to provide timely and sufficient information to shareholders and investors, reflecting good corporate governance practices. Maintaining transparency, building trust, and fostering understanding through active dialogue and communication with shareholders and investors are imperative.

As part of the Group’s commitment to promoting high levels of communication and transparency with the investment community, Senior Management personnel are directly involved in the Group’s investor relations (“IR”) function. The PMD, supported by the KPJ Senior Management team, regularly engages with analysts, investors and shareholders to discuss the Group’s results and performance.

The key Senior Management personnel involved in the IR function during the year were:

- Chin Keat Chyuan – PMD; and
- Mohd Khairul Izzad Bin Mohammed Shamsudin – Chief Financial Officer.

Presentations are conducted, where appropriate, to explain the Group’s strategies, performance and major developments. However, any information considered privileged or material will be safeguarded until it has been officially announced to Bursa Securities, in compliance with the MMLR.

All shareholders have equal access to information. The Group has established formal channels to engage with shareholders and stakeholders as follows:

- Integrated Annual Report and Sustainability Report;
- Announcements to Bursa Securities;
- KPJ Investor Relations Website;
- Annual General Meeting;
- Quarterly results briefings with analysts and investors; and
- Face-to-face engagement at investor conferences, site visits and frequent 1-on-1 and group investor meetings.

Annual General Meeting

- The 32nd AGM of KPJ was held at Level 8A, Menara KPJ, 238, Jalan Tun Razak, 50400 Kuala Lumpur, Malaysia on Thursday, 26 June 2025.
- Pursuant to the Securities Commission Guidance Note and Section 327(2) of the Companies Act 2016, the Chairman was present at the main venue of the AGM to chair the AGM. All the other KPJ Directors, Senior Management and auditor were also present at the AGM.
- The Company dispatches the notice of its 32nd AGM to its shareholders more than 28 days before the AGM, which exceeds 21-day requirement under the Companies Act 2016.
- The proceedings of the 32nd AGM included an overview of KPJ’s ongoing transformation, highlighting the progress in clinical excellence, digital innovation, sustainability and talent development by the Chairman, followed by a presentation from the PMD covering KPJ’s financial performance, growth plans and value-creation activities.
- Shareholders were given the opportunity to pose questions to the Board and Management during the 32nd AGM.
- In accordance with Paragraph 8.29A(1) of the MMLR, all resolutions in the 32nd AGM Notice were put to vote by poll using the Remote Participation and Voting facility provided by Tricor Investor & Issuing House Sdn Bhd.
- The minutes of the AGM were uploaded on the Company’s website following the event.

Communication via Mass Media

- Media interviews on corporate developments;
- Press releases on key issues; and
- Social media platforms at the Group and subsidiary levels.

KPJ Share Performance

