



# Ethics & Compliance Helpline Policy

<b>Version</b>	<b>1</b>
<b>Issue Date</b>	November 2020
<b>Effective Date</b>	November 2020
<b>Next Review</b>	November 2023
<b>Classification</b>	Public
<b>Owner</b>	Head of Ethics & Compliance  The Policy Owner is responsible for periodically reviewing and updating this Policy so as to reflect regulatory, best practice and business developments.
<b>Approver</b>	



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## **Applicability & Consequences**

This Policy applies to the Group and to Group Personnel. Group Personnel agree to uphold the Group's commitment to do what is right and to follow this Policy and the Group Code of Conduct. Group Personnel who fail to uphold this commitment put themselves, their colleagues, and the Group at risk of fines, penalties, reputational damage and personally may be subject to disciplinary action, up to and including, loss of employment. The Group reserves the right, at its sole discretion, to disclose information about violations of law to relevant authorities. Any Group Personnel who have violated applicable laws may be personally liable for penalties or fines or may be subject to imprisonment.

A Group Asset may establish standards that are stricter than this Policy. Any exceptions to or deviations from this Policy must be submitted to the Ethics & Compliance Office.

## **Your Responsibilities:**

- Follow applicable laws and regulations
- Understand and comply with the requirements of this Policy, the Group Code of Conduct, other Group Policies, and any Division/Sector or Asset policies or procedures in relation to this Policy
- Demonstrate ethics, integrity, and accountability at all times and expect the same from others
- Complete assigned training related to this Policy
- Uphold our commitment to always do what is right
- Leadership will provide appropriate resources and support to ensure the successful implementation of this Policy

## **Questions & Reporting Violations:**

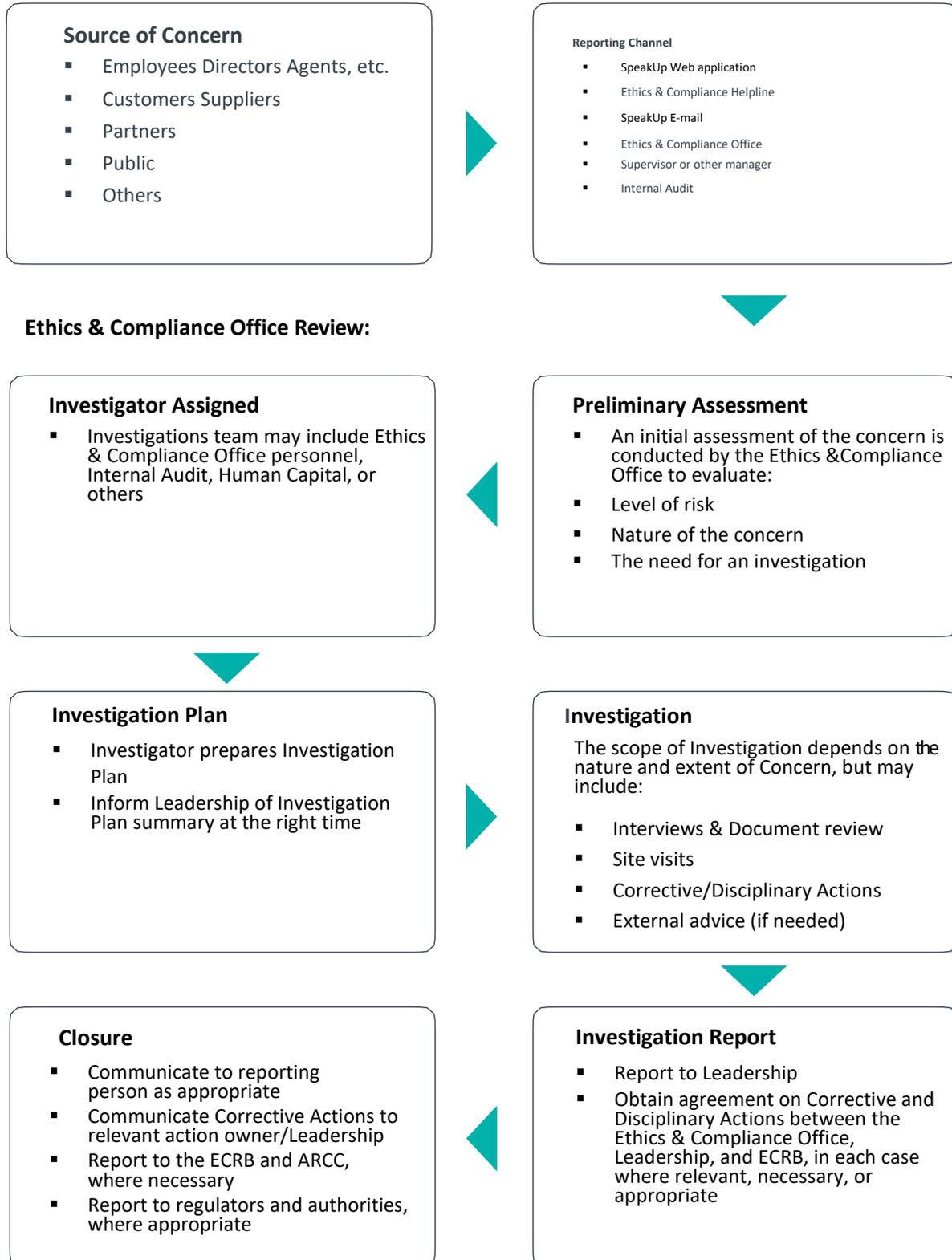
Refer in good faith any questions, concerns, or any known or suspected violations of this Policy to your line manager or other internal management or to the Ethics & Compliance Office.

Retaliation for good-faith reporting is not tolerated. Group Personnel who engage in retaliatory conduct are subject to disciplinary action.



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## Ethics & Compliance Helpline Process





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## **Policy Requirements**

### **1. Requirement to Report Concerns**

Whistleblowers are required to promptly report a Concern if there is a belief or suspicion that there has been or may be a violation of, or questions relating to:

- Any applicable law or regulation
- The Code of Conduct
- Any relevant and applicable policy or procedure in place across the Group

Unless prohibited by law, you are required to report a Concern immediately if you have been notified of a non-routine audit, investigation, lawsuit, or other inquiry by a regulatory authority or any other external party. Such notifications can come in various forms, including written and verbal requests for information, written notification of regulatory action, and receipt of formal legal documents. Immediate notification is essential to ensure any documents subject to legal privilege are appropriately protected and documents relating to the audit, investigation, lawsuit, or other inquiry are properly retained.

### **2. How to Report a Concern**

Anyone who wishes to do so is entitled to report a Concern. Concerns must be reported in good faith. Reporting a Concern other than in good faith may result in Disciplinary Action. You may report a Concern by notifying your:

- Supervisor, Line Manager or other internal management
- Ethics & Compliance Business Partner in-person or via the Ethics & Compliance Helpline (see Appendix 1)
- Ethics & Compliance Network Champion: a list of representatives for each Asset is available from the Ethics & Compliance Office
- Human Capital representative for personnel-related issues
- Internal Audit

Depending on your location, you may report a Concern anonymously via the SpeakUp web application, the Ethics & Compliance Helpline or via e-mail. If you choose to report anonymously, please ensure that you provide sufficient detail to enable the Concern to be properly investigated (for example, names of individuals involved or who may be aware of the issue, times, and dates). An acknowledgement of the report's receipt will be made to you within seven days.

Group Personnel should abide by the data protection laws and regulations that apply in their jurisdiction. Depending on your location, you may only be able to raise Concerns within your own organization through your local Ethics & Compliance Network Champion or management to ensure compliance with relevant data protection laws and regulations.

### **3. No Retaliation**

Retaliation of any kind directed against anyone who reports a Concern in good faith, or cooperates with an Investigation, will not be tolerated. Individuals engaging in retaliatory conduct, including threats of retaliation and attempts of retaliation, will be subject to Disciplinary Action up to and including Termination. If you believe that you have been the subject of retaliation, you must raise a Concern as described above.



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#### **4. Handling and Investigating Concerns**

Concerns that have been reported will be promptly assessed on a preliminary basis by the Ethics & Compliance Office to determine the need for, and appropriate course of, Investigation. Relevant Leadership will be notified at the appropriate time where a Concern is raised against a person in that Leadership's Division/Sector or Asset. In situations where Leadership is the direct subject of a Concern, the Leadership's supervisor will be notified as appropriate.

A designated member(s) of Human Capital will be notified of, and may be delegated responsibility for investigating, any Concerns that principally comprise personnel issues, performance or performance evaluation matters, or employee relations.

A designated member(s) of Internal Audit will be notified of, and may be included in the Investigation team for, any Concerns that allege fraud, improper accounting, significant financial or operational impact to the Group, or controllership issues.

Concerns raised against certain senior Leadership will be handled as follows:

- Where a Concern relates to the Policy Owner, the Concern will be overseen by the Ethics and Compliance Officer
- Where a Concern relates to the Group Chief Executive Officer, the Concern will be overseen by the ARCC and Board

#### **5. Investigation Process**

The Ethics & Compliance Office will promptly assign an appropriate Investigator to each Concern where it has been determined that an Investigation is required. Investigations are to be conducted where warranted, irrespective of an individual's position or tenure within the Group. All Investigations will be completed as soon as reasonably practicable, while maintaining a thorough and fair review. Investigators will strive to ensure that business operations are not disrupted by the Investigation.

Depending on the Concern and if deemed necessary, Investigators may seek assistance from other Group Personnel, including people inside or outside the relevant Division/ Sector or Asset (such as Human Capital, Internal Audit, Enterprise Technology & Services, etc.) provided there are no conflicts of interest and independence can be maintained.

The Investigator will consider the engagement of these other functions during the planning phase and/or during the progression of the Investigation. In addition, depending on the scope and nature of the Investigation, Investigators may require assistance from outside advisors (such as legal counsel, external auditors, accountants, fraud investigators, information technology experts, etc.).

In cases where the Investigator is not a member of the Ethics & Compliance Office, the Investigator will propose an Investigation plan, which must be approved by the Ethics & Compliance Office before the Investigation commences. Where appropriate, the Ethics & Compliance Office will review the plan with Leadership. The Ethics & Compliance Office will meet with the Investigator on a regular basis to provide oversight and receive updates on the progress of the Investigation.



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An Investigator will interview the reporting individual, if known, to discuss the Concern, gather information, and clarify any issues to help formulate the scope of the Investigation. The person who is the subject of the Investigation will be notified in a timely manner, appropriate to the type of Concern raised and legal requirements, about the Investigation and may be involved in the Investigation, as deemed necessary and appropriate.

Upon completion of the Investigation, the Investigator will prepare a closure report and/or closure plan. The reporting individual will be informed of the closure of the Concern. Feedback entailing the actions taken or lack thereof will be given to the whistleblower, not exceeding three months from the acknowledgement of a report's receipt, or if no acknowledgement was sent to the reporting person, three months from the expiry of the seven-day period after the report was made.

Relevant information and feedback will be reported to Leadership and other stakeholders as appropriate. Disclosure or reporting to a relevant regulatory or enforcement authority will be made following the approval of the Policy Owner.

Only in the case that there are newly discovered facts or information might an appeal of an Investigation be considered. An appeal will not be considered simply because a party disagrees with or dislikes the outcome of an Investigation. Only the Policy Owner has discretion to accept an appeal. Accepted appeals are reviewed by the Policy Owner who will make a final determination of the appeal. In appeals that pertain to the Policy Owner or senior Leadership, the appeal is reviewed by the ARCC.

## **6. Group Personnel Responsibilities in the Investigation Process**

You are required to cooperate when your assistance, or the assistance of any person under your supervision, is sought with respect to any Investigation. This means that you must:

- Make yourself, any persons that you supervise, and relevant documents and other records available to any Investigator or any other person who is assisting with an Investigation. Failure to cooperate in an Investigation is subject to Disciplinary Action up to and including Termination
- Answer questions truthfully
- Volunteer any information in good faith that may assist with an Investigation
- Keep confidential any information that you receive as part of an Investigation, including the existence of the Investigation, the persons involved, and the factual issues
- Not make recordings of interviews conducted in person or via telephone or video conference without the prior written consent of the Ethics & Compliance Office. The Ethics & Compliance Office may grant an Investigator approval to conduct the compliance-related interviews in person or via telephone or videoconference or to record an interview where appropriate. Prior to commencement of a recorded interview, the interviewee will be notified and will be required to provide consent to being recorded

Any communications made by you using a Group computer, telephone, mobile device, SIM card, or other electronic resource, and the information stored on them, are Group property and, where permitted by law, may be searched or monitored without your knowledge or consent, including during an Investigation.



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## **7. Confidentiality**

Any information that you provide as part of an Investigation or that is discovered during an Investigation will be treated as confidential to the extent possible, and information will only be disclosed on a need-to-know basis. Unauthorized staff members who are not explicitly referred to as recipients of reports in the SpeakUp policy will be precluded from viewing this information and your identity will not be publicly disclosed without your explicit consent. You must keep confidential any information that you receive as part of an Investigation, including the existence of the Investigation, the persons involved, and the factual issues.

## **8. Corrective Actions**

At the conclusion of an Investigation, the Investigator and/or the Ethics & Compliance Office may recommend that certain Corrective Actions be implemented. Corrective Actions are agreed upon by the respective Leadership.

## **9. Disciplinary Actions**

The Investigator and/or the Ethics & Compliance Office may also recommend that certain Disciplinary Actions be taken. Disciplinary Actions are imposed in alignment with the respective Leadership and other stakeholders where relevant. Types of Disciplinary Actions include, but are not limited to:

- Coaching
- Verbal Warning
- Written Warning
- Suspension
- Salary Action
- Repayment of Funds
- Demotion
- Termination (subject to local labor law)

The following factors ordinarily are considered when determining appropriate Disciplinary Action:

- Intent (including recklessness and conscious disregard of a risk)
- Timely self-disclosure
- Cooperation with an Investigation
- Level of responsibility/or position of special trust within the Group
- Personal gain
- Repeated violations
- Transaction/situation complexity
- Whether advice was sought from the Ethics & Compliance Office or from another appropriate source

## **10. Reporting Related to Concerns, Investigations, and Corrective and Disciplinary Actions**

The Ethics & Compliance Office will maintain a log of Concerns, Corrective Actions, and Disciplinary Actions, and will report relevant information to the ECRB and ARCC on a regular basis. The Ethics & Compliance Office will monitor and track timely completion of Corrective Actions and Disciplinary Actions. It is, however, the responsibility of the respective Leadership to ensure that Corrective Actions and Disciplinary Actions are implemented in a timely manner.



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## Definitions

<b>Term</b>	<b>Definition</b>
<b>ARCC</b>	The Audit, Risk and Compliance Committee of the Board of Directors
<b>Asset</b>	Any company or business within the Group
<b>Coaching</b>	Providing guidance and direction in respect of a Concern to ensure clear understanding and awareness of the issue and any Corrective Actions
<b>Concern</b>	Any question or suspicion about a potential or known violation that has occurred or may occur in respect of any applicable law, regulation, policy, or procedure in place across the Group, including but not limited to the Code of Conduct
<b>Corrective Action</b>	An action taken against a recipient to alert, correct behaviors, and/ or deter the recipient from future issues, violation, or instances of misconduct. Disciplinary Action may range from Coaching to Termination
<b>Demotion</b>	Reassignment to a position with diminished responsibilities
<b>Disciplinary Action</b>	An action taken against a recipient to alert, correct behaviors, and/ or deter the recipient from future issues, violation, or instances of misconduct. Disciplinary Action may range from Coaching to Termination
<b>Division/Sector</b>	A business or corporate function
<b>Ethics &amp; Compliance Office</b>	The Ethics & Compliance Office or relevant Asset ethics & compliance function
<b>Group Policy(ies)</b>	Any policy that applies to the Group. Group Policies do not include policies that only apply to a limited set of Group Personnel, for example, a policy that only applies to a specific Division/Sector or Asset within the Group
<b>Investigation</b>	The review and analysis of the factual, legal, and ethical bases of a Concern, which may include interviews, review of documents and data, site visits, or receipt of advice from external advisors
<b>Investigation Plan</b>	The investigation strategy for reviewing a Concern, which usually enumerates the types of documents or information to be requested and reviewed, the persons to be interviewed, and an outline of questions to ask. Investigation Plans may vary in format, from a detailed formal document to a verbally communicated plan, depending on the nature, complexity, and financial or legal risk at issue
<b>Investigator</b>	Any person designated by the Ethics & Compliance Office to coordinate, supervise, and conduct the Investigation of a particular Concern
<b>Leadership</b>	The Chief Executive Officer or equivalent of the Group, a Sector or Division head, or, in each case, a nominated representative
<b>Group</b>	Avramar; any entity, operation, or investment controlled by; and/or any entity, operation, or investment that adopts the Group Code of Conduct
<b>Group Personnel</b>	All individuals who work directly for or represent the Group, including directors, employees, consultants, and long-term contractors of the Group
<b>Salary Action</b>	A reduction in, or freezing of, current or future salary or other compensation such as bonuses
<b>Suspension</b>	A temporary, enforced absence from employment, with or without pay
<b>Termination</b>	Separation from employment by the Group



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<b>Verbal Warning</b>	A formal, verbal conversation that discusses the violation or Concern and that is recorded in the Group Personnel's employment record
<b>Written Warning</b>	A formal, written action that discusses the violation and is recorded in the Group Personnel's employment record

### **Ethics & Compliance Contact Information**

Telephone Number (Spain): +34 607 907 477

Facsimile: + 34 964 586 321

E-mail: [ethics@avramar.eu](mailto:ethics@avramar.eu)

### **Ethics & Compliance Helpline Channels**

Call : 00800 – 26376633 / 00800 – Avramar

Go to : <http://speakup.avramar-group.grantthornton.gr>

Send an email to : [speakup.avramar-group@gr.gt.com](mailto:speakup.avramar-group@gr.gt.com)