GROUP GUIDELINE

Group Whistleblowing and Internal Investigation Guideline

Draslovka a.s.



Document Information

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GP_002_Guideline_v1	10 April 2023	New document	Group Head of Compliance

Confidentiality Statement

This Guideline shall not be disclosed or distributed outside Draslovka Group, unless for audit or other purposes required by law or regulation or upon written approval of the Group Head of Compliance.

1. PURPOSE AND SCOPE

1.1. Purpose

Draslovka Group maintains a culture of personal integrity and ethical decision-making. By creating open channels of communication including effective reporting systems, Draslovka Group promotes a positive work environment and maximizes productivity. The purpose of this Group Whistleblowing and Internal Investigation Guideline (the "**Guideline**") is to provide guidance how to appropriately assess, assign, investigate and address compliance reports in accordance with Draslovka values and Draslovka Code of Conduct.

This Guideline outlines how to manage compliance reports received on the Draslovka Group Ethics Hotline (the "**Ethics Hotline**") provided by NAVEX (<u>EthicsPoint Draslovka</u>), as well as compliance reports received through other reporting channels (as listed in clause 3.3).

1.2. Scope

This Guideline applies to all Group Companies insofar as it does not contradict local legislation. The implementation and application of this Guideline in a Group Company must reflect requirements of applicable laws (including whistleblower protection laws) and shall be proportionate and take into account size and internal organization of a Group Company and the nature, scale and complexity of its activities. The "**Group Company**" shall refer to Draslovka a.s. and any entity controlled by Draslovka a.s. by means of direct or indirect majority participation or a control agreement respectively.

2. PRINCIPLES

2.1. Confidentiality

To the extent permissible by applicable law, reports and information obtained in the investigation of the reports will be kept confidential. Confidentiality encourages reporting of inappropriate behavior, protects the integrity of an investigation, and the privacy/reputation of employees involved in the allegation/issue. Investigations are handled and personal data are processed in accordance with applicable privacy laws and regulations.

2.2. Possibility to be anonymous

The Reporter may choose to remain anonymous.

2.3. Equal treatment

Group Company must ensure that the investigation and corrective actions are applied equally and consistently (i.e., that in the same situations, the measures and actions are consistent, and no exceptions or deviations to this principle are allowed).

2.4. Non retaliation

Employees are expected to report suspected violations of law, provisions of Draslovka Code of Conduct, or other policies and procedures. Group Company must not permit any retaliation or intimidation against anyone who, acting honestly and in good faith, raises a concern, reports suspected misconduct or provides information in connection with an investigation of suspected misconduct. All instances of potential retaliation will be investigated, and employees who have retaliated against the person who has reported suspected misconduct will be disciplined.

Reporters are protected against any type of recourse. Among others, the following retaliation forms are prohibited (including threats and attempts): suspension, lay-off, dismissal or equivalent measures, demotion or withholding of promotion, transfer of duties, change of location of place of work, reduction in wages, change in working hours, a negative performance assessment or

employment reference, imposition or administering of any disciplinary measure, reprimand or other penalty, including a financial penalty, coercion, intimidation, harassment or ostracism, discrimination, disadvantageous or unfair treatment, failure to renew, or early termination of, a temporary employment contract etc. Indirect retaliation, affecting colleagues, facilitators, relatives and other persons connected with the Reporter, is also prohibited. Cross-functional team will review the issues, document the facts, interview witnesses, and make recommendations on appropriate actions.

Rights and remedies provided for under this Guideline cannot be waived or limited by any agreement, policy, form or condition of employment.

3. RECEIPT OF COMPLIANCE REPORTS

3.1. Compliance Reports

In general, compliance report is a broad term and refers to any report, allegation or question received by the Group Company that relates to the Group Company's compliance with internal or external rules and regulations.

"**Compliance Report**" refers to a compliance report made by an employee or a third party, pertaining to potential, suspected or actual fraud, abuse, harassment, discrimination and other ethical misconduct in the workplace, as well as violations of applicable law or regulations, Draslovka Code of Conduct, other Group Company policies and procedures or Draslovka values, including the compliance reports that might result in serious financial, operational, legal, regulatory or reputational impact to the Group Company and/or Draslovka Group. Compliance Reports shall be subject to the full investigative procedures specified herein.

Routine compliance reports, policy questions, concerns or grievances are generally not considered as Compliance Reports and are not subject to full investigation under this Guideline and, as applicable, will be investigated in terms of standard employment procedures.

Unintelligible, irrelevant, exclusively offensive and vulgar compliance reports that do not contain any valid information are inadmissible. Intentionally fraudulent compliance reports might be subject to disciplinary actions.

3.2. Sources of Compliance Reports

Compliance reports may be raised by employees, directors, officers or third parties, including but not limited to, suppliers, contractors, agents, and customers, including where the work-related relationship has already ended or is yet to begin (each a "**Reporter**").

3.3. Reporting Channels

There are various channels through which compliance reports may be made, including:

- (i) Ethics Hotline (*Group level*)
- (ii) Group HR & Compliance confidential mailbox at ethics@draslovka.com (Group level)
- (iii) Compliance, Legal, Human Resources or Finance departments (*Group or local level*)
- (iv) Management of a business unit, department or worksite (*local level*)
- (v) Local whistleblowing channels, if established (*local level*)

The compliance reports may be submitted personally, electronically, by phone or, if convenient, by other means, such as letter. If the compliance report is received personally or by phone, it must be properly documented.

On local level, Group Company makes whistleblowing channels available in accordance with the requirements of applicable laws. Group Company must provide clear and easily accessible information regarding external reporting channels as well, where such channels exist under the applicable laws.

4. INITIAL ASSESSMENT

4.1. Ethics Hotline Reports

When a compliance report is received on the Ethics Hotline, Group Head of Human Resources ("Group Human Resources") and Group Head of Compliance ("Group Compliance") will conduct the initial assessment regarding the nature of the compliance report. After mutual assessment, Group Human Resources will assign the compliance report to a competent function in the Group Company, usually this will be Group Company's Human Resources Manager/Business Partner ("Human Resources").

Group Human Resources shall function as the System Administrator for the NAVEX. The System Administrator or his/her designee shall provide an acknowledgment of receipt to the Reporter in accordance with clause 5.1.

4.2. Compliance Reports

Human Resources shall conduct a preliminary review to determine if the compliance report qualifies as Compliance Report and if there is a need for an investigation. Consulted Functions (clause 6.2) shall be engaged and provide support, as necessary.

If the threshold assessment by Human Resources indicates that the compliance report (even if assumed accurate and true) does not constitute a Compliance Report, the matter will be discussed with Group Human Resources and Group Compliance and if in agreement, the Reporter shall be so notified, and the matter will be referred to the appropriate function to address the issue. For example, if a complaint relates to employment matters (e.g., wages, hours, assignment of work, holidays), then the Reporter should be referred to the standard employment grievance procedure.

4.3. Insufficient Information

If the initial assessment by Human Resources indicates that the Compliance Report does not provide sufficient information to investigate, the System Administrator or her/his designee will notify the Reporter (either directly or through the anonymous reply feature of the Hotline) and request the necessary additional information.

If there is no response from the Reporter within 10 business days, Human Resources will determine whether further investigation is required based on the initial report. If not, the case will be closed in the Incident Management System and the Reporter will be notified either directly or through the anonymous reply feature of the Hotline.

4.4. Other Sourced Reports

If compliance reports are received via means other than the Ethics Hotline (i.e., complaint made directly to a supervisor, to Human Resources, EH&S, etc.), the recipient should report it to Group Human Resources, who will assess, in consultation with Group Compliance, and determine if the compliance report qualifies as a Compliance Report that should be entered into the NAVEX system and investigated following this Guideline.

All compliance reports received from other sources shall be assessed, and if appropriate, logged into the NAVEX by the System Administrator within three (3) days of receipt.

4.5. Escalation and Interim Action

All compliance reports (received by way of the Ethics Hotline or any other means) will be evaluated to determine if they represent a critical and immediate threat to the Group Company that requires escalation and possible interim response/mitigation measures, pending further investigation. The following are considered critical and immediate threats:

- (i) a threat of violence or physical harm to any Group Company employee or by any Group Company employee toward others;
- (ii) a report that has the potential to disrupt or suspend operations within the next 48-hour period; and
- (iii) a report of eminent public safety/health issue.

Critical and/or immediate threat reports shall be escalated immediately to the respective Business Director. The Business Director shall, as soon as reasonably possible, inform Head of EHS & S, and Group CEO, Group COO, and Group Head of Legal.

If it is determined that the compliance report represents a critical and immediate threat to the Group Company, the System Administrator will urgently submit the case to the attention of respective Ethics Committee and escalated parties and they will collectively decide what, if any, measure(s) are necessary to mitigate the critical/immediate threat.

Depending on the circumstances, interim corrective actions may for example include, but are not limited to, reiteration of guidance to the individual(s) involved, placing a hold on a potentially problematic business practice or employee action, taking document and information preservation measures, the suspension or termination of employees or third parties (subject to applicable laws and/or pending the outcome of an Investigation), or involving law enforcement.

4.6. Escalation of Executive Leadership Team Related Reports

All compliance reports involving or relating to any member of the executive management of a Group Company or Draslovka Group must be forwarded to Group Human Resources and Group Compliance for determination as to whether:

- (i) the report should be triaged to the Head of Legal (or their designee(s)) or another department that could assess the report on an independent basis;
- (ii) the Audit Committee should supervise the Investigation, and/or
- (iii) the investigation should be conducted by outside and independent counsel or party.

5. NOTIFICATION/COMMUNICATIONS TO REPORTERS

5.1. Acknowledgement

Following the initial assessment of a compliance report under clause 4.1, it is the responsibility of the System Administrator or his/her designee to provide an acknowledgment of receipt to the Reporter, either through the NAVEX system if the report came through the Ethics Hotline, or if the report originated from other sources, via any contact information provided by the Reporter.

The Reporter must receive acknowledgement in **seven days**, unless the applicable laws impose shorter period. The System Administration must always check with the Group Company what are the applicable laws and these laws have priority and must be always observed.

If the compliance report is assessed as a Compliance Report subject to investigation under this Guideline, the initial communication should, among others acknowledge receipt, reinforce the non-retaliation policy and provide contact information for further communications and follow-ups.

If the compliance report has been assessed as containing insufficient information, the Reporter shall be notified of that determination and ask for whatever additional information is necessary in order to initiate an investigation.

In any instances where the System Administrator is implicated as a responsible / affected party in the compliance report, this function shall be carried out by Group Compliance.

5.2. General guidance on communication with Reporters

As a general rule, Reporters are not provided with the details of the investigation as this information is internal and confidential. Group Company must observe all requirements arising from applicable laws, including obligations arising from privacy laws (information obligation with respect to personal data processing etc.).

6. INVESTIGATION

6.1. Responsibility for Investigation

Handling and investigating each Compliance Report shall be led by an assigned Investigation Leader within an Investigation Tier. Unless determined otherwise by Group Human Resources for a particular case, the primary Investigation Tiers for the Group Company shall be:

- (i) Human Resources; or
- (ii) Compliance, if established, or other department entrusted with closest similar function.

Depending on the factors of a particular case (nature of the report, complexity of the investigation, available resources, cross-functional involvement, potential impact and need for outside assistance, conflict of interest etc.), Group Human Resources can decide that the investigation will be led by:

- another person within the Group Company or Draslovka Group, provided that such department possesses the expertise to evaluate or investigate the report and is not implicated as a responsible party in the report; and/or
- (ii) the investigation should be conducted by outside/external party. Only Group Company's in-house legal counsel is authorized, after consultation with Group Head of Legal, to engage outside legal counsel for leading the investigation.

The investigation shall be immediate, efficient and followed by remedial actions, as necessary.

6.2. Consulted Functions

The Investigation Leader must involve (i.e., inform, consult, seek advice and cooperate with) the following functions (the "**Consulted Functions**") from the moment the report is received:

Level	Function	When to involve:
	Human Resources	 If people treatment issues are involved
	Legal Counsel	 Immediately once report is received. Company's in-house legal counsel must immediately inform Head of Legal to discuss if involvement of external legal counsel is necessary.
Local	Corporate Security	As necessary
	Other functions	As necessary
	Head of Human Resources	 If any strategic guidance on HR issues is needed If the case involves discrimination, harassment, or other similar issues If the case can have material impact on the Group
	Head of Legal	 If any strategic guidance on legal issues is needed or if laws of different jurisdiction may apply

Group	Corporate Security Head of IT	 If the case involves discrimination, harassment, or other similar issues If the act may give rise to civil/criminal liability If the case can have material impact on the Group As necessary If the investigation includes access to data/devices
		etc.
	Head of Compliance	 If any strategic guidance on compliance issues is needed If Group / Group Company policies and/or procedures were breached
	Other functions	As necessary
Outside/ external parties		 If needed due to particular facts of the case – external legal counsel, accounting firms and investigative entities This outside assistance should be coordinated with appropriate function (Legal, Compliance, HR or Corporate Security)
		 In case of crime or other serious misconduct, such a theft of trade secrets, external legal counsel must be engaged before the official investigation initiated

6.3. Notice of Investigation

If the Compliance Report was not rejected/closed in the preliminary assessment and an investigation is to be conducted, the Investigation Leader shall prepare a notice of investigation to be provided to the most senior local manager responsible for the involved functions/departments, unless that individual is an implicated party or if there are other circumstances whereby such notice would unduly jeopardize the confidentiality of the investigation.

Notice of Investigation shall:

- include a very brief summary of the allegations
- emphasize commitment to non-retaliation and confidentiality of the investigation, to the extent possible
- include a request that no ancillary investigation to be conducted

6.4. Conducting the Investigation

6.4.1. Collection of Evidence

All evidence must be properly documented and must be gathered in accordance with applicable laws, regulations, and Group Company's policies and procedures.

- 6.4.2. Interviews
 - The need for interviews is determined by the Investigation Leader or Investigation Tiers.
 - Interviews are conducted by the Investigation Lead; however, unless otherwise impracticable, the investigator should be accompanied by another member of the Investigation Tier or Human Resources. Ideally, two persons should always be present at any investigatory interview and, if discrimination (or other sensitive) report is being investigated, the investigators should have diverse background, if possible.



- When interviewing union-represented personnel, the investigator must also comply with any legal obligation to grant an employee's request for union representation during the interview.
- The investigator shall prepare an interview memorandum using notes taken during the interview.
- 6.4.3. Confidentiality

The Investigation Leader shall do whatever reasonably possible to avoid disclosing the names and information gathered and limit disclosure to a strict "need-to-know" group. Confidentiality encourages reporting of inappropriate behavior, protects the integrity of an investigation, and the privacy/reputation of employees involved in the allegation/issue. Investigations are handled in accordance with applicable privacy laws and regulations.

Consistent with Group Company policy, need to take any necessary corrective action and fulfill any required reporting obligations (internal or external) and to the extent permissible by law, reports and information obtained in the investigation of reports will be kept confidential.

Investigators may not promise complete confidentiality to witnesses because it may not be possible. If a confidentiality promise is requested by a witness, investigators should attempt to understand the witness's motivation for making the request and emphasize the non-retaliation policy.

6.4.4. Investigation Updates

The Investigation Leader should provide periodic updates about each investigation to be entered into NAVEX.

6.4.5. Summary of Investigation

Once the Investigation Leader concludes that all necessary investigation has been done, Summary of Investigation shall be prepared and shall be sent to the Ethics Committee.

6.4.6. Privileged documents

All documents that are intended to be covered by the attorney-client privilege should be labeled accordingly. Where attorneys are involved in conducting, directing, or providing legal advice with respect to an investigation, members of the investigation team should make it clear that any documentation they created should reflect the point at which their work was done at the direction of legal counsel or for purposes of obtaining legal advice. For example, "Attorney-Client Communication" or "Drafted at the direction of Counsel to give or receive legal advice and/or in anticipation of litigation."

7. ETHICS COMMITTEE

7.1. Ethics Committee

An Ethics Committee shall be set up in every Group Company, or if more appropriate, in every business unit or sub-unit. The Ethics Committee, in particular:

- examines Compliance Reports of possible ethics violations
- recommends on disciplinary and/or improvement actions
- monitors effective implementation of disciplinary and improvement actions
- ensures fairness and consistency of improvement actions and supervises equal treatment of all employees

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 - follows up on appropriate solutions addressing the causes of the issues at least on a quarterly basis

7.2. Members

The Ethics Committee shall have three members. It is recommendable that the Ethics Committee shall be composed from the following Group Company's/business unit functions:

- Operations Director;
- Depending on the nature of a case, Financial Manager or EHS&S Manager or another suitable Senior Manager; and
- Human Resources.

In case any member of the Ethics Committee is marked as participant or otherwise linked to the matter raised in the Compliance Report, different person shall be appointed as Ethics Committee member for the particular case, ideally from the Company's functions listed above.

Human Resources Manager will be responsible for scheduling and leading Ethics Committee meetings.

Group Company's Legal Counsel shall provide legal advice to the Ethics Committee as to interpretation of applicable laws, Group Company policies and legal risks related to a case.

7.3. Guests

The following shall be Guests for purposes of participation in Ethics Committee meetings:

- 1. Business Director
- 2. Investigation Leader, if not already a member
- 3. Group Human Resources and Group Compliance
- 4. Chief Operations Officer
- 5. Group Head of Legal and Company's Legal Counsel
- 6. Other functions, as determined by Group Human Resources for a particular case.

While Guests may elect to attend/join the meeting, their presence is not mandatory, but they must always be invited to the Ethics Committee meeting. Group CEO can always attend/join the meeting.

7.4. Case determination

When examining the Compliance Report, Ethics Committee shall, in particular, consider:

- applicable laws and regulations
- applicable policies, procedures and other internal regulations
- environmental, social, health, safety and security risks
- ethical principles and Draslovka values
- reputational impact

The Ethics Committee will make a consensus determination, based on the results of an investigation, whether the Compliance Report was substantiated, partially substantiated, or unsubstantiated and recommend corrective action(s) to Group Company's business line management who shall, in consultation with Human Resources, decide on corrective and/or disciplinary measures and other necessary actions. Ethics Committee must be informed about taken measures and actions.

Guests do not directly participate in the case determination; however they must be invited to Ethics Committee meetings and have advisory roles. In case where any Guest does not agree with the recommendation of the Ethics Committee, the matter shall be confirmed with Group Company CEO, or Group CEO, as appropriate. In extraordinary cases, mainly when the Draslovka Group may be adversely affected (either monetary, liability or reputation issues or Group Company management is involved, etc.), the case determination may be made at the Draslovka Group level.

If applicable whistleblower protection laws provide different rules for case determination, these shall prevail and shall be applied in the Group Company.

7.5. Ethics Committee Report

Human Resources shall provide a report on activities of the Ethics Committee (the "**Ethics Committee Report**") to the Group Human Resources and Group Compliance on a quarterly basis or sooner when necessary.

The Ethics Committee Report shall include a (de-identified) summary description of all cases and corrective actions or other decisions. Provided that no Compliance Report was received during the given period or there was no update on Ethics Committee activities, the Ethics Committee Report does not have to be prepared.

7.6. Reports for Draslovka a.s. BoD

In addition, the Group Human Resources shall report to Draslovka a.s. Board of Directors a summary of (de-identified) reports. The report shall contain, in particular:

- (i) information on the number of reported cases in each quarter
- (ii) brief description of allegations and outcome of each case
- (iii) statement from Site Leadership Team and statement from Head of Human Resources and Head of Compliance.

The reports to Draslovka a.s. BoD shall be provided only if there any feedback or update to be provided.

8. INVESTIGATION REPORT

8.1. Investigation Report Content

After the Ethics Committee delivers its recommendation and Group Company's business line management decides on corrective and/or disciplinary actions, the Investigation Leader shall prepare an Investigation Report. The Investigation Report shall:

- contain corrective/disciplinary actions to be taken if the report was substantiated
- be sent to same functions as Notice of Investigation, who shall have 3 business days to review the Investigation Report and raise any concerns to the Investigation Leader. The Investigation Leader must bring the concerns to the Ethics Committee and, after evaluation, address the concerns and provide proposals of an amended Investigation Report to all addressees with explanation of changes.

If litigation might be anticipated in connection with the Investigation Report, the Investigation Leader shall confer with Group Head of Legal about whether and to what extent the Investigation Report should be prepared by or at the direction of legal counsel and accordingly designated and treated as privileged.

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Once all questions/concerns are cleared, the Investigation Leader shall prepare a final Investigation Report and sign it. The respective parties (e.g. Human Resources) can then take appropriate actions (e.g. send notice, a reprimand, terminate employment, etc.)

8.2. Root Cause Analysis

The Investigation Leader and the Ethics Committee shall work with Group Company management to conduct a process of discovering the root causes of problems to identify appropriate solutions, address the identified issues and adopt measures to prevent similar misconduct. Group Company is encouraged to use any of the following means to address the misconduct:

- Implementing written policies, procedures, and standards of conduct
- Designating a compliance officer and compliance committee
- Conducting effective training and education
- Developing effective lines of communication
- Conducting internal monitoring and auditing
- Enforcing standards through well-publicized disciplinary guidelines
- Responding promptly to detected offenses and undertaking corrective action
- Corporate communications or Investigative learning sessions for employees

The Ethics Committee shall follow up on appropriate solutions addressing the causes of the issues at least on a quarterly basis.

9. INVESTIGATION CLOSING

9.1. Investigation Closing Means

Once the Investigation Report has been released, the investigation can be closed by the Investigation Leader:

- If the Compliance Report was submitted through the Hotline, the System Administrator or her/his designee shall file the outcome of the investigation to the portal and the Reporter can log into an on-line confidential portal and review the response once the investigation is closed.
- If the Compliance Report was raised through another method, the Reporter will be contacted through selected method (or any other indicated method).

The feedback to the Reported must be provided within a reasonable timeframe not exceeding **three months** from the acknowledgment of receipt, unless the applicable laws impose shorter period.

9.2. Communication with the Reporter

As a general rule, when an investigation is closed, Reporters should be told whether and to what extent the report was substantiated and the fact that corrective action was taken. If the report was considered as unsubstantiated, Reporters should be told the reason. The Reporter shall not be provided with the Investigation Report, the details of the investigation or the corrective actions as these are internal and confidential documents. Data privacy laws and interest of Draslovka Group must be always respected.

9.3. Violation of civil/criminal laws

Some violations may constitute a crime and/or civil offence. The decision to inform law enforcement should be a made with consultation by Legal, Security and Line Management.

10. RECORDS OF THE CASES

All documents related to investigation (Advice of Investigation, Summary of Investigation, Investigation Report, interview write-ups, results of record reviews, etc.) must be properly stored (electronically, and if not possible, in a lockbox) by the Investigation Leader in a folder with limited access.

Applicable laws and policies for shredding and archiving must be observed by the Group Company.

11. FINAL PROVISIONS

11.1. Local implementation

This Guideline is issued under the Group Policy on Code of Conduct, as may be amended from time to time. Group Company is required to implement this Guideline into local internal documents. Group Company may apply additional or stricter rules at local level, taking into account applicable laws and industry specific risks.

11.2. Assumption

This Guideline applies only if it does not contradict the local legislation.

11.3. Owner of the Guideline

The Owner of this Guideline is Group Head of Compliance.

11.4. Implementation

This Guideline was issued on and shall be effective from 10 April 2023.

11.5. Amendments

This Guideline does not form part of Employee's contract of employment and may be amended at any time.