

UhistleblowingPolicy



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1. AIM AND SCOPE OF APPLICATION



A culture of ethics, trust and integrity can flourish only when people feel empowered and secure about raising suspected issues. Therefore, one of the key drivers of an ethical culture is a robust Whistleblowing Policy.

DESFA People and Private Counterparties, who come in contact with DESFA in the course of business, are often the first to know about threats or harm to the Company which may arise in that context.

By reporting irregular acts, these persons act as whistleblowers; those are considered to significantly contribute to excellence within the Company, playing a key role in exposing and preventing illegal or irregular acts, in strengthening internal control and in safeguarding adherence to DESFA's governance, compliance and Internal Control System and values.

The present Policy is intended to cover serious concerns that could have a significant impact on the organization and stands out from the normal feedback and grievance channels available to employees. Concerns covered by the present Policy include actions or omissions that (either):

- are not in line with the Company's Code of Ethics, Anticorruption Policy or other corporate policies and procedures and in general violate the Internal Control System; or
- otherwise amount to serious improper conduct (for example criminal offences in the course of professional duties).

In such cases, DESFA encourages reporting persons to use DESFA's internal reporting channels, in order to effectively, diligently and within a reasonable timeframe deal with the report, whilst guaranteeing confidentiality of the investigation and protecting the reporting person from risk of retaliation.

That said, the present Policy regulates the process associated with the receipt, analysis and processing of the reports sent by the above persons, including those reports that are anonymous, intending to establish prompt and consistent implementation across the organization.

This Policy, as an integral part of DESFA's Internal Control System, constitutes an operating tool of the anticorruption compliance programme and means to comply with the applicable legislation and Company compliance and audit framework.

The present Policy is approved by the Board of Directors.

2. GENERAL PRINCIPLES

DESFA undertakes to promote and maintain an effective Whistleblowing report processing system, while at the same time upholding the values of fairness, transparency and continuous improvement. In implementing the present Policy, DESFA relies on and abides by the following principles:

2.1 Internal Control System

The Whistleblowing report processing system lies within and forms part of the Internal Control System. Responsibility for implementing an efficient Internal Control System is shared at all levels of DESFA's organizational structure; consequently, all DESFA's people, according to their functions and responsibilities, are involved in designing and actively participating in the correct functioning of this system.

2.2 Non-disclosure

All organizational units and personnel of DESFA entrusted with the receipt and processing of reports are required to guarantee the anonymity and utmost confidentiality of the reporting parties. To this end, they must use suitable communication methods and technological tools to ensure the integrity of the facts and the people mentioned in the reports, as well as the anonymity of the reporting parties. Individuals who breach the obligation for protection of either the person subject to the report or the whistleblower shall be subject to disciplinary measures.

Disclosure of said information is permitted only according to the process and subject to the conditions described herein, to: (i) the Audit Committee, (ii) the Ethics Committee, (iii) the IA, (iv) the Legal, Governance and Compliance Division, and after the end of the process, to (v) the CEO, (vi) the Human Resources Division and (vii) the senior positions of the units affected by the report.

2.3 Reports in Bad Faith

The Company assumes that all reports are made in good faith, unless duly determined otherwise, and

the IA looks into all allegations. However, DESFA equally guarantees effective protection against persons submitting Reports in Bad Faith, who shall be dealt with by suitable disciplinary measures.

2.4 Impartiality

The IA, the Ethics Committee and the Audit Committee shall treat and evaluate each case as neutral parties, with independence, impartiality and professionalism and shall report any conflict of interest they may have. For the same reason, a strict segregation of duties between investigation and implementation is guaranteed.

In any case, DESFA shall protect the reporting persons from the risk of suffering or being subjected to retaliatory measures, victimization, harassment, and in general any act or omission occurring in a work-related context, which causes them detriment and is prompted by their reporting in good faith. Those found to have taken reprisal actions or victimized the whistleblower shall face disciplinary action.

2.5 IT support

DESFA endorses the use of technological applications and documenting tools to ensure secure and accessible reporting, to facilitate flow and to foster transparency, consistency and traceability, thus enabling the Company and the process owner in particular to monitor trends, detect compliance concerns and identify areas for improvement.

2.6 Awareness and Training

DESFA promotes communication and information activities for all its personnel, to ensure the broadest knowledge and most effective application of the present Policy. To that end, awareness levels within the organization are to be monitored and adequate training of DESFA's personnel is to be offered with regard to (i) the present Whistleblowing Policy and (ii) the function and access to the channels and the tools made available by DESFA for reporting.

3. COMMUNICATION CHANNELS

DESFA has established multiple, easily accessible and available reporting channels, which enable reporting in writing (by post, by physical complaint box, through an online platform) or orally (by telephone hotline).

DESFA encourages any reports to be sent to the following channels of communication:

- electronic mail: tell.us@DESFA.gr
- voice mailbox (also accessible from abroad): +30 210 6520542
- P.O. Box: no 80, ELTA Ag. Paraskevis, 8 Ag. Ioannou str.

The hard copy of the document is forwarded to the Internal Audit (hereafter also referred to as "IA") in a closed envelope. The set-up, support and maintenance of these channels of communication is ensured by the IA, which also sees to that all organizational and technical measures are in place to ensure confidentiality of the identity of the reporting person.

Anyone who receives a report coming from outside the required channels must promptly send the original copy thereof to the IA, using the channels provided and maintaining the utmost confidentiality to protect the integrity of any reported/reporting persons and the effectiveness of the investigations.

The IA protocols the original copy of the report received and without delay commences the activities described in the next chapter. In order to ensure the management and traceability of the reports and the related preliminary investigation activities, the IA prepares and updates the "Report management monitoring and reporting system", where it records the Reports files, thereby ensuring that all the related supporting documentation is filed appropriately.

4. INVESTIGATION, ASSESMENT AND REPORTING

The IA, having protocolled the original report, proceeds to inform the Ethics Committee, and carries out the preliminary investigation to establish whether the report is: a) a "Verifiable Detailed Report" and b) within the scope of the present Policy, therefore is deemed suitable to provide some findings.

After the conclusion of the preliminary investigation, the IA introduces the relevant reports to the Ethics Committee with the proposal of a) the report being archived or b) a report file being opened. The IA's proposals are assessed by the Ethics Committee: if the Ethics Committee accepts a proposal to archive the report, the report is archived by the IA. In the opposite case, a report file is opened by the IA and recorded in the "Report management monitoring and reporting system"; the Audit Committee is notified of all the report files that are opened.

In all cases where a report file is opened, an investigation is launched by the IA, meaning that the IA conducts all inspections aimed at ensuring that it will be possible to identify, analyze and evaluate any elements that might confirm whether the reported events are well-founded.

If, following the above investigation, the reported events are considered by the IA to be "Significant Events", the IA addresses the report to the Audit Committee with the proposal to reserve an audit spot in the IA's annual plan. In case of reports concerning events that are not deemed as "Significant Events", the IA carries on and concludes the investigation outside the annual audit plan.

Whether an audit spot is reserved following the above or not, the investigation is conducted by the IA with the aim to ascertain whether the reported events are well-founded, as well as to formulate recommendations to the Ethics Committee on the necessary corrective action to decide.

Following examination by the Ethics Committee of the audit reports, the Ethics Committee either: a) asks for further investigation, b) archives the report, or c) highlights irregular behavior and sets the necessary corrective actions.

In the specific cases where irregular behavior of a member of the personnel is established by the Ethics Committee based on the investigation, the IA submits the findings to the Human Resources Division. HR evaluates the character of the conduct and the seriousness of the damage and formulates a proposal to the CEO, informing also the Legal, Governance and Compliance Division.

Especially in cases that a report is deemed by the Ethics Committee to have been made in Bad Faith, the IA, after having archived the report, addresses the case to the Human Resources Division or the CEO, as the case may be according to the identity of the whistleblower (personnel, third party), with proposed actions against the whistleblower; the CEO makes the final decision.

In any case, if the investigation gives rise to corrective actions as per the final decision of the Ethics Committee, the management of the areas/ processes under examination are responsible for preparing a corrective action plan aimed at removing the critical issues found. IA monitors the related implementation.

The IA ensures the preparation of six-month statements addressed to the Audit Committee regarding reports made. The statements contain files of any "open" reports in the reference time period, any reports involving Significant Events and reserved Audit Spots, the number of archived reports, as well as the outcomes of the cases.

5. DATA PROTECTION AND ACCESS TO DOCUMENTATION

All personal data relating to this Policy shall be processed by the persons involved in the management of reports according to the Personal Data Laws in conjunction with the relative privacy principles set out in DESFA's Code of Ethics.

The units and positions involved in the activities governed by this document ensure, each within its specific purview and including through the information systems used, the traceability of the data and information and see to the storage and filing of the relevant documentation, whether in hard copy or electronic format, in such a way as to allow the reconstruction of the different stages of the process itself.

Any documentation relating to the investigations and audits concerning the reports is stored in the IA archive. The storage of the original report documentation, either in physical or digital form, is guaranteed with the highest security standards. Locations and/or preservation methods of the aforementioned documentation must be suitable to guarantee its integrity, availability and accessibility by competent corporate units and/or duly authorized third parties who are permitted access by the IA. The original documentation is stored for 5 years, unless legal proceedings have been opened or is otherwise required by law.

6. RAISING AWARENESS AND TRAINING

This Policy is intended to be distributed as widely as possible. To this end, it is sent to the members of the Board of Directors and to all DESFA People. It is also published on the internet site of DESFA, in a way to guarantee its integrity, availability and accessibility by the public.

The Compliance Department, with the support of Human Resources Division, is responsible for setting up an internal information and training system aimed at making DESFA People aware of the present Policy.

7. MONITORING AND UPDATING

The Compliance Department monitors the adoption of the present Policy and annually reviews the Policy



and any relevant instruments, to ensure its effectiveness and suggest improvements. In particular, the Compliance Department proposes any updates and improvements:

- based on the results of checks carried out by the IA or on the outcome of specific whistleblowing reports;
- on the occasion of changes in DESFA's organizational structure or business sectors;
- in any other case where improvements to this Policy are recommended, indicatively on the basis of emerging best practices or in the event that gaps are identified.

All corporate functions involved in the process described above are responsible, within their areas of competence, for identifying corporate events that necessitate that this Policy be updated and for notifying the Compliance Department to that effect.

The amendments and updates to present Policy are approved by the Board of Directors based on the proposal of the Compliance Department following the favorable opinion of the Ethics Committee¹.

¹ Particularly definitions and footnotes of the present Policy can be amended by the Compliance Department, informing the Board of Directors.



"Anonymous report" is a report where the reporting party's general details are not specified and, in any case, cannot be unambiguously identified;

"Anticorruption Laws" include national legislation relevant to anti-corruption (Greek Criminal Code art. 159-159A, on bribery of political officials, 235-236 on bribery of public sector employees, 237 on bribery of members of the judiciary, 237A on influence trading and intermediaries, 237B on bribery in the private sector, Law 3023/2002, Law 4622/2019 Part D Chapter C, as may be updated accordingly) as well as International conventions ratified under Greek Law: (i) the OECD Convention on Combating Bribery of Foreign Public Officials in International Business Transactions (Paris, 1997), (ii) Criminal Law Convention on Corruption (Council of Europe, Strasbourg, 1999), (iii) United Nations Convention Against Corruption (Merida, 2003), (iv) Civil Law Convention on Corruption by the Council of Europe (1999);

"Anticorruption Best Practices"

- U.S.A. Foreign Corrupt Practices Act (FCPA)
- U.S.A. Federal Sentencing Guidelines for Organizations (FSGO): Compliance and Ethics Program
- UK Bribery Act 2010
- Adequate Procedures Guidance to the UK Bribery Act 2010
- United Nation Global Compact 10th Principle;

"DESFA People / DESFA's People" include DESFA's personnel and any other person who is acting, for any reason and regardless of the type of contractual relationship, in the name and/or on behalf of DESFA, within the scope of their duties and responsibilities;

"Ethics Committee" is the supervisory body composed of the Head of Legal, Governance and Compliance Division, the Head of Enterprise Risk Management and Internal Audit Division and the Head of Human Resources Division;

"IA" is the Internal Audit Department;

"Internal Control System" is all the necessary or useful tools to address, manage and check activities in the Company, aimed at

- ensuring compliance with corporate laws and procedures
- protecting corporate assets, efficiently managing activities
- providing precise and complete accounting and financial information;

"Management Team" includes DESFA People who carry out the administration, representation and/or management functions of DESFA;

"Personal Data Laws" include the national legislation (Law N.4624/2019) and the European legislation (General Data Protection Regulation 2016/679, Directive 2016/680) regarding the protection of personal data, as may be updated accordingly.

"Private Counterparties" includes suppliers, contractors, subcontractors and sub suppliers, providers, consultants, business partners, and in general any private counterparty with which DESFA is engaged in commercial relations or partnerships for any reason;

"Report" is any information, relating to possible violations, conduct and practices which can cause damage or prejudice, even if only to image, to DESFA, and referring to any of the following matters:

- non compliance with the Code of Ethics and/or Anticorruption Policy;
- non compliance with other corporate policies and procedures;
- any other serious improper conduct (for example criminal offences in the course of professional duties).

Any reports falling outside the scope of the aforesaid cases are not subject to this Policy and will be passed on the relevant Company departments, in accordance with their specific powers;

"Report in Bad Faith" is a report without grounds, submitted through wilful misconduct or gross negligence by the reporting person, who, at the time of reporting, knowingly reports wrong or misleading information;

"Significant Events" are violations, conduct and practices:

- involve members of DESFA corporate bodies or Management Team;
- refer to significant HSE issues: health, safety, environment and public safety, or
- involve criminal offences that may cause great prejudice, of financial or moral nature, to the Company;

"Verifiable Detailed Report" is a report that makes it possible to identify reasonably sufficient factual elements to launch a preliminary investigation (indicatively action committed, reference period, company concerned, people/units involved, control system irregularity, etc.) and to obtain useful findings with the investigation instruments available.



