Banco Finantia

Whistleblowing and Irregularities Reporting Channels Policy

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Banco Finantia

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1 Introduction and Scope of Application

This Whistleblowing and Irregularities Reporting Channels Policy ("Policy") of Banco Finantia, S.A. (hereinafter the "Bank" or "Banco Finantia") sets out the internal procedure and establishes specific, independent, autonomous and appropriate arrangements for receiving, handling and retaining reports of breaches and irregularities involving the Bank or any entity in which it has a direct or indirect holding (hereinafter the "Group").

The Group has implemented an Internal Information System incorporating the Internal Whistleblowing and Irregularities Reporting Channels. These channels enable reports of breaches or irregularities to be submitted and followed up securely, while ensuring the confidentiality of the identities of whistleblowers and other persons involved and protection against retaliation, in accordance with applicable law.

The time limits set out in this Policy are calculated in calendar days, unless expressly stated otherwise.

2 Legal Framework

This Policy has been drawn up in accordance with the applicable legal provisions, in particular the following legislation:

Europe

- Regulation (EU) No. 575/2013 of the European Parliament and of the Council of June 26—Capital *Requirements Regulation* (hereinafter "CRR")
- Regulation (EU) 2016/679 of April 27, 2016—General Data Protection Regulation (hereinafter "GDPR")
- Directive (EU) 2019/1937 of October 23, 2019, on the protection of persons who report breaches of Union law.

Portugal

- Law No. 93/2021, of December 20 (hereinafter "RGPDI")
- Decree-Law No. 109-E/2021, of December 9 (hereinafter "RGPC")
- Legal Framework of Credit Institutions and Financial Companies (hereinafter "RGICSF")
- Banco de Portugal Notice No. 3/2020, dated July 15
- Banco de Portugal Instruction No. 18/2020, dated July 15
- Law No. 83/2017, dated August 18
- Portuguese Penal Code

Spain

- Law 2/2023, dated February 20, regulating the protection of whistleblowers and the fight against corruption

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- Organic Law 3/2018, dated December 5, on the Protection of Personal Data and the Guarantee of Digital Rights
- Law 10/2014, of June 26, on the regulation, supervision, and solvency of credit institutions
- Law 10/2010, dated April 28, regarding the prevention of money laundering and the financing of terrorism
- The Spanish Criminal Code and other sector-specific legislation applicable to the Branch's activities
- Statute of the Independent Whistleblower Protection Authority, as well as the circulars, recommendations, and criteria published by that Authority

3 Definitions of Breaches and Irregularities

3.1 For the purposes of this Policy, "Breaches" subject to reporting are any acts or omissions, actual or potential, that constitute or may constitute a breach of applicable legal provisions, including the breaches covered by Article 2(1) of the RGPDI, as well as other conduct that may give rise to administrative, civil, disciplinary, or criminal liability.

3.2 In turn, "Irregularities" subject to reporting include any serious acts or omissions that may indicate non-compliance or imminent non-compliance, in whole or in part, with any legal or regulatory duty or internal governance provision to which any Group entity is bound.

3.3 The following breaches and irregularities, in particular, may be reported through the Internal Whistleblowing and Irregularities Reporting Channels:

a those related to administration, accounting organisation, and internal oversight, or involving serious indications of a breach of duties set forth in the RGICSF or the CRR at the Bank, as well as—for the Branch—in Law 10/2014, particularly those that could place the Bank or any Group entity in a situation of financial instability;

b in the area of anti-money laundering and terrorist financing, pursuant to Law No. 83/2017 and Ley 10/2010, the regulations implementing them, and the policies, procedures, and controls established internally in this regard;

c breaches of Union law, as provided for in Article 2(1) of the RGPDI;

d those relating to the prevention of the commission and/or occurrence of crimes, in particular corruption and related offences, as provided for in the RGPC and other provisions of the Portuguese and Spanish Criminal Codes;

e those relating to non-compliance with internal rules, duties of conduct, principles, values, and established ethical standards;

f any other situations likely to cause serious financial, operational, reputational, or other harm to the Group;

g breaches covered by Law 2/2023, particularly acts or omissions that may constitute a criminal offence or a serious or very serious administrative breach, including, in any case,

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serious or very serious criminal or administrative breaches that result in economic loss to the Tax Authority (*Hacienda Pública*) or Social Security *(Seguridad Social)*.

Complaints submitted by customers or third parties do not constitute breaches or irregularities for the purposes of this Policy and must be submitted through the appropriate channel.

With regard to the Branch in Spain, the breaches and irregularities set forth in sections 3.1 through 3.3 that are reported through the Branch's Internal Reporting System are covered by the protection measures provided for in Law 2/2023, provided they fall within the scope of Article 2. The following, in particular, do not benefit from the protection regime provided for in Law 2/2023: reports concerning classified information; information protected by the duty of professional confidentiality of attorneys or healthcare professionals; strictly interpersonal conflicts; information that is already public or mere rumors; as well as other situations expressly excluded by applicable law.

4 Right and Duty to Report

4.1 Employees of the Bank, its branches, and other Group entities—including members of governing bodies and those in key positions—as well as any third parties who have a relationship or have had a relationship with any Group entity, such as shareholders, partners, customers, suppliers, or service providers, may report breaches or irregularities, even if the professional relationship has since ended (hereinafter, "Whistleblower" or "Reporting Person").

For the purposes of the Branch in Spain, this also includes volunteers, interns, and employees in training periods, regardless of whether or not they receive compensation, as well as individuals whose employment relationship has not yet begun, when the information was obtained during the selection process or pre-contractual negotiations. The protective measures under Law 2/2023 also apply, provided the legal requirements are met, to the following persons:

- legal representatives of employees in the performance of their advisory and support functions;
- individuals who assist the Whistleblower or Reporting Person during the process;
- individuals related to the whistleblower who may face retaliation, such as colleagues or family members;
- legal entities for which the whistleblower works, with which they have another professional relationship, or in which they hold a significant interest.

4.2 Employees who, in the course of their duties, become aware of facts that may constitute a breach or irregularity covered by this Policy must report such matters through the channels provided herein. This duty applies in particular to those responsible for Internal Control Functions (Internal Audit, Risk Management, and Compliance), without prejudice to any specific reporting duties that may apply to them.

5 Reporting Breaches and Irregularities

5.1 Reports of breaches and irregularities covered by this Policy may be submitted through the following channels:

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a **Whistleblowing and Irregularity Reporting Channels,** available in Portugal and Spain and accessible through the corporate *website*, which allow for the secure submission and tracking of reports of breaches and irregularities, ensuring their integrity and preservation.

These channels ensure the confidentiality of the identities of whistleblowers and those submitting reports, and their anonymity where applicable, as well as the confidentiality of the identities of third parties mentioned in the reports and restrict access to unauthorised persons.

The platform supporting the Reporting and Irregularity Reporting Channels is provided by *Whistleblower Software by Formalize*, which acts exclusively as the solution's technology provider, limiting its role to storing the submitted information and granting access strictly necessary to ensure the provision of services, with the necessary guarantees of confidentiality and anonymity.

b **Orally,** addressed directly to the Head of the Compliance Function, who, in the case of the Branch in Spain, also serves as the System Delegate. The report must be documented in writing as soon as possible, and the Whistleblower or Reporting Person must confirm that the document accurately reflects the report.

At the request of the Whistleblower or Reporting Person, a report may be made at an in-person meeting to be held within seven days. In such cases, subject to the prior consent of the Whistleblower or Reporting Person, an accurate written record of the report shall be prepared, and the Whistleblower or Reporting Person shall be asked to confirm that it accurately reflects the report.

In any case, the Whistleblower or Reporting Person may review, amend, and approve the minutes of the report or the meeting by signing them to confirm that the document accurately reflects the content of the report made.

5.2 In addition to, or as an alternative to, the reporting channels listed above, the Whistleblower or Reporting Person may submit a report regarding the same facts through alternative channels, specifically by communicating directly with the Internal Control Functions.

5.3 Reports of breaches and irregularities must be made in good faith and must state the grounds on which they are based. The Whistleblower or Reporting Person is not required to provide evidence that the reported facts occurred, but must have a reasonable degree of certainty sufficient to justify opening an investigation.

5.4 The deliberate, abusive, or manifestly unfounded use of the available Whistleblowing and Irregularities Reporting Channels may constitute a disciplinary, civil, or criminal offence and result in the loss of the protection afforded by applicable law.

5.5 Any report received through channels other than those formally provided will be forwarded without delay to the applicable management procedure, ensuring the confidentiality of the identity of the Whistleblower or Reporting Person, the individuals involved, and any third parties mentioned in the report, as well as compliance with all protection safeguards provided for in applicable law.

5.6 Only reports submitted through the Whistleblowing and Irregularities Reporting Channels may be made anonymously. In all cases, the confidentiality of the identity of the

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Whistleblower or Reporting Person, and of any other person involved, shall be ensured in accordance with applicable law.

5.7 Whenever legally permissible and consistent with the rights of defence of those involved, the information contained in the report must be transmitted in a manner that preserves the anonymity of the whistleblower or reporting person vis-à-vis the other parties involved in the process.

5.8 Access to the reports submitted shall be limited to the Head of the Compliance Function in his or her capacity as the person responsible for the Internal Information System and the Whistleblowing and Irregularities Reporting Channels as well as to the individuals designated by him or her to ensure their analysis, investigation, and follow-up, namely the Head of the AML Department, the Head of the Internal Control Department, or when complaints related to the Branch are involved, a Permanent Representative or a member of the Legal Department. Any external consultants hired to provide specialized advice in this area may also have access to the reports strictly to the extent necessary for the performance of their duties.

5.9 The Whistleblowing and Irregularities Reporting Channels will be accessible on Banco Finantia's institutional website, in Portugal and in Spain.

The Branch in Spain will provide clear and accessible information on the use of internal reporting channels, as well as on the external channels available through the Independent Whistleblower Protection Authority, the competent regional authorities, and, where applicable, the institutions, bodies, or agencies of the European Union.

6 Content of Reports

6.1 Reports of breaches and notifications of irregularities must contain, whenever possible, the following information:

a Identification of the Whistleblower or Reporting Person (full name/contact information, the latter being optional) and the person against whom the complaint is filed, if applicable;

b a description of the reported facts;

c evidence and/or documents supporting the report.

7 Receipt, Assessment and Handling of Reports

7.1 Once a report is received, an acknowledgment of receipt must be provided within **7 (seven) days** from the date of receipt, clearly and accessibly informing the whistleblower of the requirements, competent authorities, procedure, and admissibility of the external complaint. Also within this period, the Whistleblower or Reporting Person may be asked to provide additional or supplementary information in order for the complaint to be accepted for processing, when it is determined that the report submitted does not contain sufficient information to initiate an investigation.

7.2 Reports received are recorded and subjected to a preliminary review by the Head of the Compliance Function and by the individuals designated to ensure their analysis, investigation, and follow-up, namely the Head of the AML Department, the Head of the

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Internal Control Department, or—when matters related to the Branch are involved—a Permanent Representative or a member of the Legal Department, as well as any external consultants hired to provide advice in this regard.

The purpose of the preliminary review is to verify the admissibility of the report, specifically whether:

- **a** the reported facts fall within the scope of this Policy
- **b** the report contains sufficient information to allow for its evaluation
- **c** there is a minimum basis to justify opening an investigation
- **d** the report is not manifestly unfounded or abusive.

Whenever the report does not contain sufficient information for its evaluation, the Complainant or Reporting Person may be asked to provide additional information.

Following this preliminary review, a decision is made to accept or reject the report.

If the report is accepted, an internal investigation is initiated, led by the person designated by the Head of the Compliance Function, who may seek internal or external support if deemed appropriate and necessary.

If the report is not accepted, the decision will be communicated to the Whistleblower or Reporting Person, who may appeal the decision by submitting a reasoned request within 15 (fifteen) days.

7.3 In the case of complaints or reports concerning serious irregularities that could place the Group in a situation of financial instability or significantly compromise its financial soundness, reputation, or business continuity, access to the relevant case file shall also be granted to members of the Audit Committee ( ) for the purposes of monitoring and supervision, unless there is a conflict of interest, a disqualifying circumstance, or any other reason that could compromise their independence or impartiality.

7.4 As part of the internal investigation, the necessary and proportionate actions and procedures are carried out to verify the reported facts and, where applicable, to identify, cease, mitigate, and correct the breaches or irregularities that are the subject of the report.

7.5 Whenever, in the course of the investigation, facts are identified that may constitute evidence of money laundering, terrorist financing, or non-compliance with restrictive measures, the Head of the Compliance Function is responsible for assessing such facts and deciding whether to report them to the competent authorities, in accordance with applicable law. The decision not to report must be duly justified and brought to the attention of the Board of Directors.

7.6 Whenever a report concerns the actions of the Head of the Compliance Function or there are any circumstances that could affect his or her independence or impartiality, the Head of the Compliance Function shall be barred from participating in any phase of the analysis and investigation process, and the report shall be forwarded to the Audit Committee.

7.7 All employees, members of corporate bodies, or third parties who have, may have, or appear to have a conflict of interest regarding the reported facts, the Whistleblower or Reporting

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Person, or the persons involved shall also be excluded from the review and investigation process.

7.8 Once the collection of information, evidence, and other investigative steps deemed necessary by the Head of the Compliance Function or a member designated by the Head of the Compliance Function for the assessment of the facts has been completed, the person concerned shall be guaranteed the right to be heard and to present the arguments, clarifications, and evidence they deem relevant to their defense. Under no circumstances will the identity of the Whistleblower or Reporting Person be disclosed, except in cases provided for by law.

The person subject to the investigation has the right to be informed of the acts or omissions attributed to them and to be heard at any stage of the proceedings. Such notification will be provided at the time and in the manner deemed appropriate to ensure the proper conduct of the investigation.

Throughout the entire procedure, the person's presumption of innocence, right to a good name and reputation, and right to a defence, and the confidentiality of their identity will be respected. Under no circumstances will the identity of the Whistleblower or Reporting Person be disclosed, nor will they be granted access to information that could lead, directly or indirectly, to their identification.

7.9 The statements obtained during the investigation shall be duly documented in minutes or an equivalent record, including, in particular, details of the person interviewed and the date, place and content of the statements made. These records shall be made available to the persons concerned for review and correction and, if they so wish, confirmation by signature.

7.10 Once the period granted to the person concerned to exercise their rights in the internal investigation has expired, or once the steps considered necessary to establish the facts have been completed, the person responsible for assessing and handling the report shall prepare a duly reasoned Final Report setting out their conclusions and, where applicable, proposing:

- **a** the adoption of the measures necessary to correct, mitigate, or cease the identified breach or irregularity
- **b** the implementation of corrective, preventive, or reinforcing measures for the internal control system
- **c** reporting the facts to the competent authorities, when legally required or justified by the circumstances of the case
- **d** the dismissal of the case, when the reported facts are not confirmed or there is insufficient evidence to justify the adoption of any measures.

7.11 The **Final Report** must contain, at a minimum:

- **a** the identification of the relevant individuals and departments involved
- **b** a description of the facts analyzed
- **c** the steps taken and the evidence gathered
- **d** the conclusions reached
- **e** the proposed corrective, preventive, disciplinary, or organisational measures
- **f** the rationale for the proposed measures or for any decision to close the case

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7.12 The Final Report is submitted for review to the Head of the Compliance Function, who is responsible for monitoring the execution and implementation of the measures deemed appropriate, without prejudice to the powers assigned to the governing bodies, the Audit Committee, and other Internal Control Functions or other departments.

7.13 In cases where the report involves the Head of the Compliance Function or where there is any situation that could compromise his or her independence or impartiality, the Final Report shall be submitted directly to the Audit Committee, which is responsible for reviewing the case and monitoring the measures deemed appropriate.

7.14 The investigation process and the preparation of the Final Report must be completed within **75 (seventy-five) days** from the date of receipt of the report, except in duly justified cases of particular complexity.

With regard to the Branch in Spain, the maximum timeframe for completing the investigation and reporting the results may not exceed **3 (three) months** from the date of receipt of the report or, if no acknowledgment of receipt was sent, three months from the end of the seven-day period following the submission of the report. In particularly complex situations, this deadline may be extended for an additional period of up to 3 (three) months. The extension must be duly justified, approved by the Branch System Manager, and documented in the relevant file.

7.15 The Audit Committee is responsible for reviewing the findings of the investigation and deciding on proposed measures to be adopted. When situations are involved for which it was initially decided not to report to the competent authorities and a reconsideration of that decision proves necessary, the final decision rests with the Board of Directors.

7.16 The Audit Committee or, where applicable, the Board of Directors shall communicate the decision adopted to the Head of the Compliance Function and to the person responsible for processing the report in question, within 10 (ten) days of receiving the Final Report; this deadline may be extended by an additional 5 (five) days when justified by the complexity of the case, without prejudice to compliance with the maximum statutory period of 3 (three) months for notification to the Whistleblower or Reporting Person.

7.17 The Whistleblower or Reporting Person is informed of the measures planned or taken to address the report, as well as the respective rationale, within the maximum legal period of 3 (three) months from the date of receipt.

7.18 Without prejudice to the provisions of the preceding paragraph, the Whistleblower or Reporting Person may, at any time, request information regarding the status of the report, within the limits permitted by law, subject to the duty of confidentiality and the needs of the investigation.

7.19 The implementation of corrective measures resulting from complaints or reports of irregularities is monitored and documented by the Head of the Compliance Function, who periodically reports on the status of their implementation to the Audit Committee.

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8 Data Protection and Confidentiality

The Bank guarantees the confidentiality of the reports it receives, as well as the protection of the personal data of the Whistleblower or Reporting Person, the individuals involved, and any third parties mentioned in the communication, in accordance with the General Data Protection Regulation (GDPR) and the corresponding applicable national legislation.

The Bank, in its capacity as the data controller, processes only the personal data strictly necessary for the receipt, analysis, investigation, and follow-up of the reports received, ensuring that only personal data that is adequate, relevant, and not excessive will be processed in this context. Personal data that is manifestly irrelevant to the assessment of the communication will not be retained and will be deleted without undue delay.

At the Branch, personal data may be retained in the Internal Information System only for the period strictly necessary to decide whether to open an investigation. If **three (3) months** have elapsed since the receipt of the report without any investigative steps having been initiated, the data must be deleted from the System, except when its retention is necessary to demonstrate the System's proper functioning. Reports that do not result in any follow-up may only be retained in anonymised form.

When an investigation is initiated, the necessary information may be retained outside the reporting channel, incorporated into the respective case file, and subject to the applicable legal and corporate retention periods.

The identity of the Whistleblower or Reporting Person, as well as any information that could lead to their identification, will only be disclosed in the cases provided for by law or when such disclosure is necessary to safeguard the right to a defence, ensure the proper conduct of legal proceedings, or comply with applicable legal or regulatory obligations.

With regard to the Branch, the identity of the Whistleblower or Reporting Person may only be disclosed to a judicial authority, the Public Prosecutor's Office, or the competent administrative authority in the context of a criminal, disciplinary, or sanctioning investigation. Prior to the disclosure of their identity, the Whistleblower or Reporting Person will be informed in writing of the reasons justifying the disclosure of their confidential data, unless such information could compromise the investigation or the judicial proceedings.

Data subjects may exercise their rights under applicable data protection laws, specifically the rights of access, rectification, restriction of processing, objection, and erasure, in accordance with the terms and within the limitations provided by law.

Access to personal data contained in the Internal Information System is limited, within the scope of their respective responsibilities and duties, to the following persons:

- **a** The Head of the Internal Information System and the persons who directly manage the System by delegation from the Head
- **b** The Head of Human Resources or a person designated by him or her, exclusively when disciplinary measures may be necessary
- **c** The Head of the Legal Department, when it may be necessary to take legal action
- **d** The Data Protection Officer

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Access may be granted to other individuals whenever strictly necessary for the implementation of corrective measures or for the investigation of disciplinary or criminal proceedings, provided that the duty of confidentiality is maintained in all cases.

The personal data collected may be disclosed: (i) to the competent judicial, administrative, or supervisory authorities, when required by regulatory obligations or when necessary for the investigation of the reported facts, or (ii) to Group entities or third parties, for the purpose of investigating the reported irregularity or breach.

For more information on the processing of personal data, data subjects may consult the Privacy Policy, available at www.finantia.com, or contact the Bank via email at dadospessoais@finantia.com.

9 Annual Report

The Head of the Compliance Function is responsible for preparing the "*Annual Report on Reports of Irregularities*," which, following prior review by the Audit Committee, will be submitted to the Banco de Portugal, in compliance with the provisions of Article 35(4) of Banco de Portugal Notice No. 3/2020.

The report must include, among other elements, a description of the specific measures adopted for the receipt, processing, and archiving of reports received, with a summary of the content of the reports received regarding irregularities referred to in section 3.3(a) of the Policy and the action taken in response to them.

The information shall be submitted in an anonymised form, preventing the direct or indirect identification of Whistleblowers, the persons concerned, or any third parties.

Reports related to matters of anti-money laundering, countering the financing of terrorism, and compliance with restrictive measures are subject to separate reporting to the Banco de Portugal, in accordance with applicable law.

10 Additional Safeguards

10.1 Conditions and Protective Measures

A Whistleblower who submits a report in good faith and has serious grounds to believe that the facts and information provided are true at the time of submission is entitled to the protections provided for in this Policy, the GDPR, and other applicable legislation.

10.2 No Retaliation

The filing of a report under this Policy, as well as any communication made directly to the competent authorities, shall not, in and of itself, constitute grounds for any retaliation.

Any direct or indirect action or omission that results in unfavorable treatment or places a person at a particular disadvantage in the workplace or professional context as a result of filing an internal complaint, an external complaint, or publicly disclosing information in accordance with legal provisions is prohibited.

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This prohibition also covers threats and attempts at retaliation, which may include, among other things, dismissal, suspension, demotion, denial of promotions or access to training, detrimental changes to working conditions, intimidation, harassment, discrimination, damage to reputation, inclusion on exclusion lists, early termination of contracts, or unjustified refusal to provide professional references.

Acts that may constitute retaliation include, in particular, those provided for in applicable law, and the Whistleblower is entitled to the legally established presumptions and protective mechanisms.

10.3 Rights of Defence and the Right to Be Heard

Upon receipt of the report and the initiation of the applicable proceedings, the person concerned must be informed of the initiation of the corresponding procedure and its purpose, except in cases where, for justified reasons related to the investigation itself, it is necessary to postpone this notification.

Once notified of the opening of the proceedings, the person concerned shall have the right to provide all evidence they deem relevant and to make any arguments they deem appropriate in their defence. Likewise, they shall have access to legally admissible evidence that may have been collected, except with regard to the identity of the whistleblower.

Before any decision is made, the person concerned must be given the opportunity, if they so wish, to present their arguments.

10.4 Presumption of Innocence

The presumption of innocence of the person under investigation is guaranteed throughout the entire proceedings and until a decision is rendered. Measures to preserve evidence may be imposed when such measures prove essential, always in accordance with the principles of reasonableness and proportionality.

10.5 Notification of the Investigation's Conclusion

Regardless of the outcome of the investigation, the Whistleblower or Reporting Person may request, at any time, the results of the review of the complaint within 15 (fifteen) days after its conclusion.

Likewise, the whistleblower will be informed, if applicable, of the rejection of the complaint and the reasons for it.

The person concerned will also be duly informed of the decision.

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11 Recording and Retention of Reports

Reports received, together with the resulting reports, shall be recorded and retained by the Head of the Compliance Function in a predefined, secure location with restricted access, and entered in a dedicated database in a durable format that allows the information to be reproduced in full and without alteration, for a period of **5 (five) years, or 7 (seven) years** in the case of reports relating to AML/CFT.

The Branch shall ensure that reports prepared following its assessment are retained for **10 (ten) years** and, irrespective of that period, for as long as any related disciplinary, judicial or administrative proceedings remain pending.

Irrespective of these periods, the data shall be retained for the duration of any pending judicial, administrative or disciplinary proceedings relating to the report.

In the case of the Branch, the information will be retained only for the period necessary and proportionate to ensure compliance with Law 2/2023 and the responsibilities arising from the report filed; under no circumstances will personal data be retained for a period exceeding **ten (10) years**.

The provisions of the preceding paragraphs do not preclude the obligation to delete reports submitted directly through the Internal Whistleblowing and Reporting of Irregularities Channel, in accordance with the terms set forth in the chapter on data protection, whenever no investigation has been initiated as a result of the report received.

12 Non-compliance

Non-compliance with this Policy, even if committed through negligence, may constitute a disciplinary offence, without prejudice to any civil, administrative, or criminal liability that may arise.

Without prejudice to the provisions of the preceding paragraph, non-compliance with the provisions of this Policy and/or the RGPDI may constitute an administrative offence, punishable under the terms provided by law, for both natural persons and legal entities.

Both attempts and acts of negligence regarding acts or omissions that violate the provisions of this Policy or the aforementioned RGPDI are punishable under the terms set forth therein.

Similarly, acts or omissions that breach this Policy or applicable Spanish law, in particular Law 2/2023 on the protection of persons who report regulatory breaches and the fight against corruption, may result in the sanctions, fines and other measures provided for therein being imposed on natural or legal persons. Where provided for by law, other sanctions or ancillary measures may also be imposed.

Internal disciplinary measures shall be imposed in full compliance with applicable employment law, any applicable collective bargaining agreements, and the principles of legality, proportionality, the right to be heard and the right to a defence.

Intentional or negligent acts or omissions that breach this Policy or applicable law shall be subject to the sanctions provided for by law.

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13 Approval, Review and Publication

This Policy shall be reviewed periodically, at least every 2 (two) years, on a proposal from the Head of the Compliance Function and whenever changes or relevant circumstances justify a review.

The Board of Directors is responsible for approving this Policy and any subsequent amendments, after obtaining the prior opinion of the Audit Committee.

The appointment and cessation of duties of the person responsible for the Internal Information System applicable to the Branch shall be notified to the Independent Whistleblower Protection Authority or, where applicable, the competent regional authority within the statutory period of ten working days. Where duties cease, the notification shall state the reasons for the cessation.

This Policy shall be made available internally to employees through publication on the Bank's intranet and shall be published on Banco Finantia's corporate website within 30 (thirty) days of its approval, in accordance with Article 35(5) and Article 64(1) of Banco de Portugal Notice No. 3/2020.

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