

WHISTLEBLOWER POLICY

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1. Objective

1.1. The objective of this CRIF High Mark Credit Information Services Private Limited (“CHM” or “Company”) Whistleblower Policy (‘Policy’) is to:

- support the reporting of suspected instances of improper practices or behavior which may implicate the ethical standards or integrity of CHM and that normal investigative and/or complaint handling procedures are not considered adequate; and
- outline the mechanisms and infrastructure in place within CHM for the reporting and investigation of matters raised by a Whistleblower; and
- outline the measures in place to protect employees against reprisal or recriminatory action from within the organization.

2. Scope and Coverage

2.1. This Policy applies to the whole of CHM.

3. Whistle-Blower

3.1. Whistle-blower means any of the following:

- a) any employee, contractor, supplier / vendor, clients / customers, business partners, consultant, shareholders and persons belonging to the administrative, management or supervisory body, volunteers and trainees;
- b) any persons working under the supervision and direction of contractors, subcontractors and suppliers, even when the work-based relationship which has ended or is yet to begin;
- c) stakeholder in general

who discloses or demonstrates evidence of any Misconduct. The protection ensured by such Policy is also extended to the persons assisting or connected to the Whistle-blower, as well as to its colleagues.

4. Types of Misconducts

4.1. Misconduct can take many different forms but for ease of data analysis CHM uses eight generic types of misconduct:

- Human resources matters (including harassment, discrimination, inadequate behavior at work, any potential breach of local Labour Law)
- Misappropriation of assets (including theft; misuse or abuse of Company assets such as phone, computer, funds; data leakage etc.)
- Financial statement fraud (misrepresentation, falsification, concealment, misstatement or omission of financial records)
- Other fraudulent statement (i.e., related to non-financial management information such as HR, strategic, commercial, asset management, etc.)
- Corruption, bribery, extortion (including gift, commission, political contribution, conflict of interest etc. that are not compliant with CHM Policies)

- Other breach of applicable laws or regulation
- Endangering health, life and/or safety
- Customer mistreatment

This list is simply to facilitate reporting of the events in a consistent manner; it is not intended that this list be considered as a comprehensive list of subjects upon which whistle-blowing events can be made.

5. Whistleblower Reporting and Escalation Process

- 5.1 The whistleblowing mechanism will be overseen by the Chief Compliance Officer ('CCO') under the supervision of the Audit Committee.
- 5.2 Whistleblower is encouraged to directly raise the issues / report the suspected instance by writing an email to the CCO at ***Whistleblower@crifhighmark.com***
- 5.3 The Whistleblowing complaints on operational in nature will get investigated by the CCO and submitted to Audit Committee for its consideration. Audit Committee will recommend Actions, if any, will be taken against those individuals whom the complaint has been made is found guilty.
- 5.4 There is no specific format required for the Whistleblower Report, but the report should include sufficient information to allow investigation to be conducted, such as:
 - The name and designation of the concerned party(ies)
 - Sufficient details of the incidence with supporting materials, if any and how Whistleblower became aware of the same
 - Contact details (e.g. an email address or telephone number) for the CCO to follow-up.
- 5.5 Should a Whistleblower wish to remain anonymous it is important that they provide either enough information to facilitate a thorough investigation into the matter(s) being raised or anonymized contact details (e.g. email address) for follow-up.
- 5.6 The Whistleblower should make the report in good faith and have reasonable grounds to suspect the information he/she is reporting indicates misconduct occurred. Deliberate false reporting will not be tolerated, and anyone found making a deliberate false report will be subjected to disciplinary action, which could include but not limited to dismissal.
- 5.7 An acknowledgement of receipt of whistleblowing complaint will be sent to the Whistleblower within 7 days of receipt, wherever communication details are provided in the complaint.

- 5.8 CCO will have direct and unrestricted access to financial, legal and operational assistance when this is required. All CHM employees are required to co-operate in investigations.
- 5.9 Under certain circumstances, the member of staff may be contacted for additional information to clarify the notification made.
- 5.10 Any individual who is the subject of an allegation and is under investigation should be given a fair opportunity to respond to the allegation, if appropriate, before the Audit Committee. The person who is whistle-blown against must not be notified of the allegation against them until such time that this has been approved by the CCO.
- 5.11 Confidentiality must be ensured at all times and every reasonable efforts must be taken to keep the whistle-blower's identity confidential. This is critical in ensuring that no reprisal or recriminatory action is taken against the Whistleblower. Revealing the existence of an investigation or details contrary to this Policy could result in disciplinary action. Furthermore, should the Whistle-blower suffer, or reasonably fear of suffering, retaliation following his/her report, he/she must immediately notify the Audit Committee, which will immediately take any action necessary to protect the Whistle-blower.
- 5.12 All whistleblowing complaints should be disposed-off within 2 months of the receipt except in cases requiring detailed investigations wherein the time can be extended with the approval of the Audit Committee.
- 5.13 Reporting to Board of Directors: The periodic update, if any, on whistleblowing complaints is to be provided to the Board of Directors.

6 Review of Policy

- 6.1 This Policy will be reviewed at least on annual basis.