



Policy on Whistleblowing

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Document Change Record

S/N	Description of Changes	Revision		Prepared By (Name/ Signature)	Approved By (Name/ Signature)
		No.	Date		
1	First Issue	0	7/09	Jason Kennedy, Head of Finance	Board of Directors
2	Second Issue: - Include external parties in whistleblowing policy - Maintain centralized repository for all genuine reported cases	1	06/08/13	Cindy Seetoh, Compliance Manager / Loh Hui Wen, Compliance Executive	Policies sub-committee
			31/10/13		Board of Directors
3	Third Issue: - Update designation; - To revise the reporting channel of investigation report to “ CEO and/ or ARCC Chairman, where appropriate” instead of “CEO and ARCC Chairman”; - To revise the reporting party for protection against retaliation or harassment.	2	30/11/15	Loy York Ying, Head of Compliance	Board of Directors
4	Policy was reviewed in Dec 16. All information are up to date with no amendments required.		24/01/17	Loy York Ying, Head of Compliance	Board of Directors
5	Fourth Issue: - Update of entities names due to change of names and entities; - Replace “Head of Departments or Head, HR & Corporate Services” with “Human Resource Department”; - Include additional reportable incidents; - Update whistleblowing email address due to change of entity’s name;	3	31/12/17	Loh Hui Wen, Senior Compliance Executive Loy York Ying, Head of Compliance	Audit, Risk Management and Compliance Committee (“ARCC”) (Delegated by BOD)

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5	Fourth Issue (continued): <ul style="list-style-type: none"> - Include more details on the investigation procedures; - Included "Head of Departments" if an investigation is to be conducted; - Include situation where identity of whistle blower's information is given to the police for criminal investigation as one of the circumstances where identity of whistleblower is not kept confidential 	3	31/12/17	Loh Hui Wen, Senior Compliance Executive Loy York Ying, Head of Compliance	Audit, Risk Management and Compliance Committee ("ARCC") (Delegated by BOD)
6	Fifth Issue: <ul style="list-style-type: none"> - Change 'Chief Operating Officer and Chief Financial Officer' to 'Chief Financial Officer'; and - Change 'Head of Compliance' to 'Head of Compliance and Risk Management' 	4	25/07/19	Loh Hui Wen, Assistant Compliance Manager Loy York Ying, Head of Compliance & Risk Management	ARCC
7	Sixth Issue: <ul style="list-style-type: none"> - Add the timeframe to acknowledge receipt of whistleblowing incident if the identity of the whistleblower is disclosed; - Add the requirement to inform ARCC Chairman on the whistleblowing incident the moment the incident has been received; - Add disciplinary action as one of the protections against retaliation or harassment for party found to have taken reprisal actions or victimized the whistleblower; and - Update of Appendices 3 & 4. 	5	17/03/21	Joey Ko, Manager, Regulatory and Corporate Governance Loy York Ying, Head of Compliance & Risk Management	ARCC

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8	Seventh Issue: <ul style="list-style-type: none"> - Update company's logo; - Update entities' names due to a change of names; - Update email for whistleblowers to raise concerns; and - Reword applicability section to clarify that all external parties are able to file a report. 	6	31/03/23	Joey Ko, Manager, Regulatory and Corporate Governance Loy York Ying, Head of Compliance & Risk Management	ARCC

1. PURPOSE

- 1.1. ESR-LOGOS Funds Management (S) Limited (“E-LOG FM”) and ESR-LOGOS Property Management (S) Pte. Ltd. (“E-LOG PM”) and their related entities, and ESR-LOGOS REIT Group (collectively known as the “Group”) are committed to the highest possible standards of ethical, moral and legal business conduct. In line with this commitment, this policy is established to provide guidelines and procedures for handling whistleblower claims.
- 1.2. The Board of Directors approved and adopted this policy to encourage and enable employees and external parties to bring forward in confidence any concerns about possible improprieties and to report, any conflict of interest or wrongdoings such as fraud, corruption and malpractices, whether committed by senior managers, staff, suppliers or contractors, within the Group or any activity and matters that are, or appear to be, opposed to the best interest of the Group.
- 1.3. The policy strictly prohibits frivolous and bogus complaints and it is not a route for taking up personal grievances. Personal grievances should be taken up directly with the Human Resources (“HR”) Department if the alleged person is the Head of Department or your immediate supervisor.

2. SCOPE

- 2.1. Employees are often the first to realise that there may be irregularities within a company. However, employees may not express their concerns for fear of being disloyal to their colleagues or to the company. They may also be afraid of discrimination or harassment. In such circumstances, employees may feel that it is best to ignore the concern rather than report it.

External parties who have dealings with any entities listed in the Group (such as tenants, suppliers, contractors, service providers and consultants) may also avoid raising a concern of potential irregularities for the same reasons.

This Policy governs the reporting and investigation of improper or illegal activities at the Group, as well as the protection offered to the “Whistleblower”.

For the purposes of this policy, the term “whistleblower” refers to someone who discloses or raises concerns in relation to reportable incidents to people or authorities that have the power to take corrective action.

- 2.2. Applicability

This Policy applies to all employees (including short term employees such as interns, part-time staff) of the Group and all external parties. External parties include tenants, suppliers, contractors, service providers, consultants and general public.

- 2.3. Reportable Incidents

Reportable incidents include and are not restricted to the following improper or illegal activities (actual or suspected):

- Concerns about the Group’s accounting, internal controls or auditing matters;
- Breach of Group’s policies, or Code of Conduct;
- Impropriety, corruption, acts of fraud, theft and misuse of the Group’s properties, assets or resources;

- Corruption, bribery or blackmail;
- Conduct which is an offence or breach of laws;
- Conduct endangering health and safety of persons or environment;
- Abuse of power or authority;
- Any forms of harassment;
- Conflict of interest without disclosure;
- Concealing information about any of the above malpractice or misconduct; and
- Any other improper matters which may cause financial or non-financial loss to the Group or damage its reputation.

2.4. Some examples of the above situations are provided in **Appendix 1**.

3. HOW TO RAISE A REPORTABLE INCIDENT

3.1. Employees can raise via the following 3 options:-

- Option One: Your immediate supervisor.
- Option Two: If the concern involves your immediate supervisor, manager or Head of Department, or for any reason you would prefer them not to be told, you may raise to one of the other Heads of Departments.
- Option Three: If you feel that none of the channels above is suitable, you can address your concerns to the Head of Compliance and Risk Management or Chief Executive Officer (“CEO”) or Chairman of the Audit, Risk Management and Compliance Committee (“ARCC Chairman”). Employees can refer to the telephone directory for the contacts information of the CEO, Head of Compliance and Risk Management and ARCC Chairman.

The concerns raised should be submitted using the attached prescribed template (see **Appendix 2**).

External parties can raise their concerns by submitting the information, using the prescribed template attached, to whistleblowing@esr-logosreit.com.sg. It will be routed directly to the ARCC Chairman and designated officers, to allow independent investigation of the matter raised and appropriate follow-up action.

4. CONCERNS RAISED OR INFORMATION PROVIDED ANONYMOUSLY OR INCOMPLETE

4.1. A whistleblower has the option to identify himself / herself or remain anonymous. However, concerns expressed or information provided anonymously or incomplete will be investigated on the basis of their merits (e.g., seriousness of the issued raised, credibility of the concern, and the likelihood of confirming the allegation from other sources). Vague or insufficient information can impede the investigation process and consequently investigation may not be pursued.

5. WHAT HAPPENS AFTER A REPORTABLE INCIDENT IS RAISED

- 5.1. The recipients of the whistleblowing information will acknowledge in writing to the whistleblower within 3 working days after the whistleblowing report is received, if the identity of the whistleblower is disclosed. The recipients will then make an initial assessment as to who to escalate to for preliminary investigation. Generally, all whistleblowing reports will be directed to Compliance Department for preliminary investigation unless the Department is conflicted. The Compliance Department will need to inform the ARCC Chairman as soon as practicable on the report regardless of the severity of the incident and before any investigation commences.
- 5.2. The Compliance Department will conduct a preliminary investigation to assess the validity of the information, and determine whether a thorough investigation is warranted. The following factors may affect the investigation process and outcomes:
 - Seriousness of the issue;
 - Credibility of the concern or information; and
 - Likelihood of confirming the concern or information from credible source.
- 5.3. Depending on the nature of the concern raised or information provided, if an investigation is to be conducted, it will generally involve one or more of the following persons:
 - Chief Executive Officer;
 - Chief Financial Officer;
 - Heads of Departments (“HoDs”);
 - ARCC;
 - Board of Directors (“BOD”);
 - Internal Auditors/External Auditors;
 - Forensic Accountants; or
 - The Police or Commercial Affairs Department (“CAD”).
- 5.4. All investigations done will be reported to the:
 - CEO and/ or ARCC Chairman, where appropriate;
 - ARCC Chairman will report the conclusion of the investigation to the BOD (where appropriate);
 - ARCC or BOD will discuss and determine the disciplinary actions to be taken on the alleged person(s); and
 - Compliance will maintain a centralised repository (**Appendix 3**) of all cases that are genuine and raised in good faith to ensure that issues raised from either employees or external parties are properly reviewed.
- 5.5. Subject to any legal constraints, the Group will inform the whistleblower of the outcome of the investigation (if any is conducted) and any action taken.
- 5.6. A flowchart of the Whistleblowing Process is provided in **Appendix 4**.

6. PROTECTION AGAINST RETALIATION OR HARASSMENT

- 6.1. The Group prohibits discrimination, retaliation or harassment of any kind against a whistleblower who submits a report in good faith. If a whistleblower believes that he or she is being subjected to discrimination, retaliation or harassment for having made a report under this Policy, he or she should immediately report those facts to the CEO, ARCC Chairman or Head of Compliance and Risk Management (for employee). For outside party, he or she should immediately report those facts to the ARCC Chairman using the email address provided above.
- 6.2. Any party found to have taken reprisal actions or victimized the whistleblower may face disciplinary action, including the possibility of dismissal.
- 6.3. The party making the report may need to come forward as a witness. If an employee or outside party makes an allegation in good faith but it is not confirmed by the investigation, no action will be taken against him or her. If, however, an employee has made an allegation frivolously, maliciously or for personal gain, disciplinary action may be taken against him or her. Likewise, if investigations reveal that the outside party making the report had done so maliciously or for personal gain, appropriate action, including reporting the matter to the police, may be taken.

7. CONFIDENTIALITY OF IDENTITY

- 7.1. The identity of the whistleblower will be kept confidential, with the exception of the following:
 - Where the Group is required to reveal under a legal obligation;
 - The whistleblower has waived his/her rights to confidentiality;
 - The identity of the whistleblower is already publicly known;
 - For the purpose of obtaining professional advice;
 - Where the information is given to the police for criminal investigation; and
 - The ARCC with the concurrence of the BOD opined that it would be in the best interests of the Group to disclose the identity.

8. MODIFICATION

The Group may modify this policy to maintain compliance with applicable laws and regulations or accommodate organisational changes within the Group.

Appendix 1

EXAMPLES OF SITUATIONS THAT SHOULD BE REPORTED

Example 1:

You work in the Finance Department of the Group. You are concerned about the lack of internal controls or the appropriateness of the internal controls in the functions of the Finance Department you are tasked to do and are aware of discrepancies and abuse as a result of this. What should you do?

Refer to section 3 of the Policy for guidance and report must include details of breach of controls and if possible with documentary evidence.

Example 2:

A particular supplier is always providing poor quality materials or is shoddy in workmanship. You have brought this matter up with your immediate supervisor, but no action was taken against the supplier. You suspect your supervisor is favoring the supplier to the detriment of the company. What should you do?

Refer to section 3 of the Policy for guidance.

Example 3:

You have become aware of serious and immediate safety concerns at one of the company's properties. You have already informed the Property Management Department and no action has been taken. What should you do?

Refer to section 3 of the Policy for guidance.

Example 4:

Despite you telling him/her not to, a colleague or supervisor repeatedly makes lewd remarks to you and generally harasses you. What should you do?

Refer to section 3 of the Policy for guidance.

Example 5:

As a close friend of the person in charge of procurement, you realise that a procurement contract he or she has approved is with a company in which his or her family member has a financial interest. No one else in the company knows about this personal relationship with the supplier. What do you do?

Refer to section 3 of the Policy for guidance.

NOTE: The above examples are not exhaustive.

Appendix 2

To facilitate our independent investigation, please provide us with the following information when you make a report.

Name (Optional):	NRIC/Passport Number/Unique Entity Number (Optional):	Date of Report: <i>(dd/mm/yy)</i>
Contact Details	Contact Number:	
	Convenient time to be contacted: <i>(please indicate in hh:mm format)</i>	
	Email:	
Nature or description of concerns <i>(Should there be insufficient space, please attach annex(es)):</i>		
Date of incident <i>(dd/mm/yy)</i> <i>(where applicable)</i> <i>(Please indicate N/A if it is not applicable)</i>		
Time of incident <i>(where applicable)</i> <i>(Please indicate N/A if it is not applicable)</i>		
Location of incident <i>(where applicable)</i> <i>(Please indicate N/A if it is not applicable)</i>		
How incident is discovered		
Alleged perpetrator(s) <i>(where applicable)</i> <i>(Please indicate nil if it is not applicable)</i>		
Department(s)/companies involved <i>(where applicable)</i> <i>(Please indicate nil if it is not applicable)</i>		
Documentation of evidence <i>(where applicable)</i> <i>(Please indicate nil if it is not applicable)</i>		

Appendix 4

Flowchart of Whistleblowing Process

