
	<p style="text-align: center;">Guidelines for the Prevention of Corruption</p> <p style="text-align: center;">Approved by the Board of Directors by resolution of October 21st, 2025</p>	<p>cod.: QA CORR_ Guidelines</p> <p>rev. 0</p> <p>data: 21/10/2025</p> <p>pag. 1 di 27</p>
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1. Definitions

- **Top Management:** as per UNI ISO 37001:2016, the person or group of people who, at the highest level, direct or control an organization.
- **Biomedica or Company:** Biomedica Italia S.r.l.
- **Code of Ethics:** the Code of Ethics adopted by the Company.
- **Conflict of Interest:** as per UNI ISO 37001:2016, a situation in which commercial, economic, family, political, or personal interests could interfere with a person's judgment in the performance of their duties within an organization.
- **Recipients:** members of the corporate bodies, employees, and all those who act on behalf of and/or in the name of Biomedica Italia S.r.l. (for example, under contract, such as consultants, or by specific power of attorney, such as legal representatives in court).
- **Legislative Decree 231/2001:** Legislative Decree No. 231 of June 8, 2001.
- **Due Diligence:** as per UNI ISO 37001:2016, a process aimed at assessing the nature and extent of the Bribery risk and supporting organizations in making decisions regarding specific transactions, projects, activities, business partners, and personnel.
- **Anti-Bribery Compliance Function:** as per UNI ISO 37001:2016, the person or persons responsible and authorized to ensure the operation of the anti-corruption management system.
- **Guidelines:** Guidelines for the prevention of corruption adopted by Biomedica Italia S.r.l., also for compliance with UNI ISO 37001:2016.
- **Model:** the organization, management, and control model adopted by Biomedica Italia S.r.l. pursuant to Legislative Decree 231/2001.
- **Non-Compliance:** as per UNI ISO 37001:2016, the failure to meet a prescribed requirement.
- **ISO 37001 Standard:** UNI ISO 37001:2016 ("Anti-bribery management systems"), which specifies requirements and provides guidance for establishing, implementing, maintaining, updating, and improving an anti-bribery management system.
- **Supervisory Body or OdV:** the body provided for by Article 6 of Legislative Decree 231/2001, responsible for overseeing the functioning, observance, and updating of the Model.
- **Organization:** as per ISO 37001, a person or group of people with their own functions, responsibilities, authority, and relationships to achieve their objectives.
- **Governing Body:** as per ISO 37001, the group or body that holds ultimate responsibility and authority for the activities, administration, and policies of the Organization, to which Top Management reports and which oversees Top Management's responsibilities.
- **Policy:** Anti-Bribery Policy adopted by Biomedica Italia S.r.l.
- **Public Administration or PA:** collectively:
 - ministries;
 - supervisory authorities or regulators;
 - public entities: entities created by an act of the State to meet organizational or functional needs of the State itself, such as, for example, Municipalities and Provinces, Chambers of Commerce, INPS, ASL, ARPA, the Revenue Agency, the Italian Financial Police;
 - public officials: individuals who exercise a public legislative, judicial, or administrative function, and who can form or express the will of the PA through the exercise of authoritative or certifying powers, such as, for example, members of state and territorial administrations, supranational administrations (e.g., the European Union), Law Enforcement and the Guardia di Finanza, Chambers of Commerce, Building Commissions, judges, judicial officers, auxiliary bodies of the administration of justice (e.g., bankruptcy trustees), administrators and employees of public entities, private individuals vested with powers enabling them to form or express the will of the Public Administration;

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- individuals entrusted with a public service: individuals who, in any capacity, perform a public service, to be understood as an activity regulated in the same forms as the public function, but characterized by the absence of the typical powers of the latter, excluding the performance of simple public order tasks and the provision of purely material work. Even a private individual or an employee of a private company may be qualified as entrusted with a public service when performing activities aimed at pursuing a public purpose and protecting a public interest.
- **Anti-Bribery Management System:** a management system compliant with ISO 37001, aimed at preventing corrupt practices.
- **Business Partners:** as per ISO 37001, third parties with whom the Organization has or plans to establish a business relationship.
- **Stakeholder or Interested Parties:** as per ISO 37001, a person or organization that can affect, be affected by, or perceive itself to be affected by a decision or activity.

2) Introduction

Biomedica, in full compliance with current legislation and all requirements set out by international standards and best practices in the fight against corruption, is committed to preventing and combating the occurrence of corrupt phenomena in the conduct of its activities, inspiring these with values such as loyalty, fairness, transparency, honesty, and integrity.

This commitment is part of the broader virtuous policy adopted by Biomedica, pursued through the promotion of behaviors in line with the provisions of the Code of Ethics and the Model adopted by the Company.

To this end, the Company has adopted these Guidelines, which, drafted in compliance with the requirements of ISO 37001 and best practices in the fight against corruption, define the principles and rules to which Recipients must conform in order to ensure minimum standards of conduct for the prevention of corrupt phenomena, in compliance with current legislation.

The principles and rules of these Guidelines are implemented in the procedures and, in general, in the internal regulations and operational practices of the Company.

These Guidelines therefore describe the fundamental and key elements of the Anti-Bribery Management System adopted by Biomedica.


3) Reference Legislation

3.1) Legislation on Bribery

International legislation on Bribery is extensive. The corruption of public officials constitutes crime in almost all countries, and in some, the corruption of public officials of other countries is also a crime. In many countries, private-to-private corruption is also considered a crime. Italy has adapted its national legislation to the requirements of various international conventions, which prohibit the corruption of national and foreign public officials and private-to-private corruption.

Below are the main international and national regulations in the field of anti-Bribery:

- United Nations Convention against Corruption (UNCAC);
- OECD Convention on Combating Bribery of Foreign Public Officials in International Business Transactions;

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- OECD Recommendation for Further Combating Bribery of Foreign Public Officials in International Business Transactions and attached Good Practice Guidance on Internal Controls, Ethics and Compliance;
- OECD Guidelines for Multinational Enterprises;
- US Foreign Corrupt Practices Act (FCPA);
- UK Bribery Act and related Guidance about procedures which relevant commercial organizations can put into place to prevent associated with them from bribing;
- so-called seven pillars, i.e., the seven principles of the Federal Sentencing Guidelines Manual – Chapter 8 – Part B Effective compliance and ethics program of the U.S. Sentencing Commission for compliance with the FCPA;
- United Nations Global Compact (Principle X);
- Legislative Decree 231/2001;
- Law of 6 November 2012, no. 190 ("Provisions for the prevention and repression of corruption and illegality in public administration");

Law of 9 January 2019, no. 3 ("Measures for combating crimes against public administration, as well as in the matter of statute of limitations and transparency of political parties and movements").

In addition to the above, there is the international management standard ISO 37001.

Biomedica, also to ensure compliance with the law and to combat any corrupt practice in the conduct of its activities, has decided to organize and manage them in compliance with Legislative Decree 231/2001 and ISO 37001.


3.2) Legislative Decree 231/2001

Legislative Decree 231/2001 introduced into the Italian legal system the concept of administrative liability of legal entities for criminal offenses, combining elements of both criminal and administrative sanctioning systems. Under Legislative Decree 231/2001, an entity may be subject to an administrative sanction for an administrative offense; however, the sanctioning process is rooted in criminal proceedings: the competent authority to bring charges is the Public Prosecutor, and it is the criminal court that imposes the sanction. Thus, although the liability of entities is formally administrative, it is, in substance, criminal liability.

This liability is separate and independent from that of the individual who commits the offense, and it remains even if the perpetrator has not been identified or if the offense has been extinguished for reasons other than amnesty. In any case, the liability of the entity is additional to, and does not substitute for, the liability of the individual offender.

The scope of Legislative Decree 231/2001 is broad, covering all entities with legal personalities (including companies), associations without legal personality, and public economic entities. The regulation does not, however, apply to the State, territorial public bodies, non-economic public bodies, or entities performing functions of constitutional significance (such as political parties and trade unions).

An entity can only be held liable for certain offenses—so-called predicate offenses—specifically identified in Legislative Decree 231/2001 or in a law that entered into force prior to the commission of the relevant act. The list of predicate offenses includes, among others, those referenced in Articles 25 and 25-ter of Legislative Decree 231/2001, which cover, respectively, corruption offenses committed in the public sector¹ and those committed in the private sector².

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In addition to the commission of one of these predicate offenses, for an entity to be held liable under Legislative Decree 231/2001, other legal requirements must also be met, which can be categorized as either “objective” or “subjective.”

The first objective criterion is that the offense must have been committed by an individual who has a qualified relationship with the entity. In this regard, a distinction is made between:

- “Senior management”: individuals who hold positions of representation, administration, or management within the entity, such as directors, general managers, or managers of an autonomous organizational unit, and generally anyone who manages, even de facto, the entity itself or one of its autonomous organizational units;
- “Subordinates”: all those who are subject to the direction and supervision of senior management. This category includes employees as well as individuals who, although not formally part of the entity’s staff, perform tasks under the direction and control of senior management.

The identification of the above individuals is independent of their contractual relationship with the entity; in fact, this includes individuals who are not part of the entity’s staff, provided they act in the name of, on behalf of, or in the interest of the entity.

Another objective criterion is that the offense must be committed in the interest of or to the advantage of the entity; the existence of at least one of these two conditions, which are alternatives, is sufficient:


- “Interest” exists when the perpetrator acted with the intent to benefit the entity, regardless of whether this objective was actually achieved;
- “Advantage” exists when the entity has obtained—or could have obtained—a positive result, whether economic or otherwise, from the offense.

As for the subjective criteria for attributing liability to the entity, these relate to the preventive measures the entity has adopted to prevent the commission of one of the so-called predicate offenses in the course of its business activities.

In fact, Legislative Decree 231/2001 provides that, in the event of an offense committed by a senior manager, the entity is exempt from liability if it can prove that:

- the governing body adopted and effectively implemented, prior to the commission of the offense, organization, management, and control models suitable for preventing offenses of the type that occurred;
- the task of supervising the operation of and compliance with the models, and ensuring their updating, was entrusted to a body within the entity endowed with autonomous powers of initiative and control;
- the senior manager committed the offense by fraudulently circumventing the models;
- there was no omission or insufficient supervision by the above-mentioned body.

In the case of offenses committed by subordinates, the entity can only be held liable if it is established that the commission of the offense was made possible by the failure to comply with management or supervisory obligations. However, this liability is excluded if, prior to the commission of the offense, the entity had adopted organization, management, and control models suitable for preventing offenses of the type that occurred.

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3.3. The ISO 37001 Standard

The UNI ISO 37001:2016 standard ("Anti-bribery management systems"), first published on October 15, 2016, establishes a management standard designed to help organizations in the fight against corruption, fostering a culture of integrity, transparency, and compliance.

More specifically, ISO 37001 sets out the requirements and provides guidance for establishing, implementing, maintaining, reviewing, and improving an anti-bribery management system, which may be either stand-alone or integrated into an overall management system.

ISO 37001 provides guidance in relation to the following organizational activities:

- corruption in the public, private, and non-profit sectors;
- corruption committed by the organization itself;
- corruption committed by personnel acting on behalf of or for the benefit of the organization;
- corruption committed by the organization's business partners acting on behalf of or for the benefit of the organization;
- corruption of the organization;
- corruption of the organization's personnel in relation to the organization's activities;
- corruption of the organization's business partners in relation to the organization's activities;
- direct and indirect corruption (for example, a bribe offered or accepted through or by a third party).

The requirements set out by ISO 37001 are generic and designed to be applicable to all organizations (or parts of organizations), regardless of type, size, or nature of activity, whether in the public, private, or non-profit sector.

4. Organization Context


4.1. The Company and Its Corporate Governance and Internal Control System

Biomedica is a company within the AddLife Group, wholly owned by the Swedish company Addlife Development AB, and operates in Italy in the commercialization of medical devices for surgical specialties across the Italian territory. The Company employs over 40 people who work at its registered and operational headquarters, located at Via del Bosco Rinnovato, 6, in Assago (Milan). It does not hold any equity interests in other companies.

The Company was established following AddLife's acquisition of the business unit related to the distribution of medical devices for surgical specialties from Siad Healthcare S.p.A., and boasts thirty years of experience in the field of advanced surgical specialties.

The business areas are: (to be reviewed by ALS)

- Neurosurgery
- Otolaryngology (ENT)
- Maxillofacial Surgery
- Wound Care
- Plastic and Reconstructive Surgery

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- Burn Centers
- Wound Healing
- Diabetic Foot
- Orthopedics
- Spinal Surgery
- Interventional Neuroradiology
- Pain Therapy
- Abdominal Surgery
- Hepatobiliary Surgery
- Thoracic Surgery
- Bariatric Surgery
- Gynecology
- Respiratory Therapies

Medical devices are sourced directly from national and international manufacturers, who are market leaders in their respective fields, with whom the Company enters into distribution agreements for the Italian market, mainly on an exclusive basis. Alternative products from different brands are also available on the market.


Biomedica's clients include public hospitals and healthcare companies, private hospitals and clinics, nursing homes, pharmacies, and para-pharmacies. Sales are predominantly made to public clients, either through participation in tenders or by submitting a proposal in response to a direct request for quotation from a public institution. Customer relationships are managed by various internal departments handling commercial, technical, and administrative support aspects, as well as by external agents operating in the territory. For warehouse management and distribution to clients, Biomedica relies on two logistics outsourcers. Recently, the Company has also launched online sales of certain products through a webshop.

Biomedica engages in communication activities through participation in scientific events (congresses), training activities on the use of distributed medical devices, and collaborations with professionals in the medical field. These activities are conducted in compliance with the regulations introduced by the Confindustria Dispositivi Medici Code of Ethics.

The medical device sector is primarily regulated by EU Regulation No. 2017/745 (Medical Device Regulation) and Legislative Decree No. 137 of August 5, 2022, regarding the reporting system for incidents involving medical devices by healthcare professionals and manufacturers.

Within the scope of the above activities, Biomedica maintains relationships with the following parties, identified as Business Partners:

- Clients: The main clients are public hospital and healthcare companies, as well as private hospitals and clinics, nursing homes, pharmacies, and para-pharmacies;
- Outsourcers: Biomedica has outsourced certain key activities, including accounting and tax services, payroll services, and logistics services;
- Suppliers: of goods, services, and contractors who do not work on behalf of the Company (e.g.,

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stationery suppliers, marketing agencies, office cleaning services, IT services), as well as consultants/professionals/suppliers who do work on behalf of the Company (e.g., lawyers, QA & Regulatory Affairs, RSPP);


- Agents: external parties engaged to promote and sell the company's products;
- Professionals: from the private healthcare sector;
- Accredited ECM Providers: entities recognized by a public institution (e.g., National Commission for Continuing Medical Education) for organizing Continuing Medical Education activities;
- Manufacturers: producers of the medical devices marketed by Biomedica;
- Private entities benefiting from donations;
- Group Companies: the parent company AddLife Development AB and affiliated companies; the latter are suppliers of medical devices for distribution in Italy and are treated as third-party manufacturers.

In addition, Biomedica maintains relationships with the following public entities:

- Local Health Authorities (ASL) and public healthcare facilities: regarding the management of commercial relationships, management of deposit and consignment accounts, sponsorship, and organization of congresses and conferences;
- Professionals from the public healthcare sector: regarding the management of professional services with the medical community and healthcare facilities for the promotion of medical devices and business development;
- Ministry of Health: regarding the registration of technical dossiers for medical devices and the filing of powers of attorney;
- Public entities benefiting from donations (e.g., hospitals, research centers);
- ASL, INAIL, INPS, Labor Inspectorate, Provincial Labor Directorate, Social Security, Insurance and Welfare Entities, Fire Brigade, Local Authorities, Guardia di Finanza, Revenue Agency, Privacy Guarantor, AGCM, Customs Agency: for their respective areas of competence, with regard to human resources management, compliance management (e.g., tax, customs, various requests for measures), and any inspections by public authorities;
- Judicial Authorities: regarding the management of potential litigation.

Biomedica has identified the following relevant stakeholders for the anti-Bribery management system and their specific needs or expectations:

Stakeholder (Example)	Internal/External	Needs/Expectations
Manager (e.g., CEO, Department Head)	Internal	<ul style="list-style-type: none"> • Income • Decision-making autonomy • Recognition and reputation
Employee	Internal	<ul style="list-style-type: none"> • Adequacy of the workplace from an economic, social, health and safety perspective • Recognition and reputation
Client	External	<ul style="list-style-type: none"> • Reliability and quality of service • Economic convenience • Fairness and compliance in business conduct

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Stakeholder (Example)	Internal/External	Needs/Expectations
End consumer (patient)	External	<ul style="list-style-type: none"> • Reliability and quality of service
Competitor	External	<ul style="list-style-type: none"> • Fair competition • Transparency and cooperation • Fairness and compliance in business conduct
Supplier and outsourcer	External	<ul style="list-style-type: none"> • Opportunities and economic conditions • Reliability of payments • Fair and safe working conditions for services performed at the Company's offices/warehouses • Fairness and compliance in business conduct
State/public entities	External	<ul style="list-style-type: none"> • Legality of activities and compliance with current obligations and requirements • Cooperation
Community	External	<ul style="list-style-type: none"> • Job creation • Social responsibility • Fairness and compliance with current regulations in business conduct

In line with the above, and consistently with the corruption risk assessment carried out by the Company (see par. 4.2), the scope of the Anti-Bribery Management System adopted by the Company is defined by the Company's activities related to the commercialization of medical devices for surgical specialties.


The Company's corporate governance system is currently structured as follows:

- Board of Directors: vested with the broadest powers for achieving the corporate objectives and for the ordinary and extraordinary management of the Company, except for those acts which, by law and by the Articles of Association, are the exclusive responsibility of the Shareholders' Meeting;
- Board of Statutory Auditors: the management of the Company is overseen by a sole statutory auditor;
- Auditing Firm: accounting control is entrusted to an auditing firm registered in the register established at the Ministry of Justice.

Within the Company's corporate governance system, the Model and procedures are included, aimed not only at preventing the offenses provided for by Legislative Decree 231/2001, but also at making the control system as efficient as possible.

Biomedica's internal control system is based on the following principles:

- Clear identification of roles, tasks, and responsibilities of those involved in carrying out company activities (whether internal or external to the Organization);
- Segregation of duties between those who operationally perform an activity, those who control

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it, those who authorize it, and those who record it (where applicable);

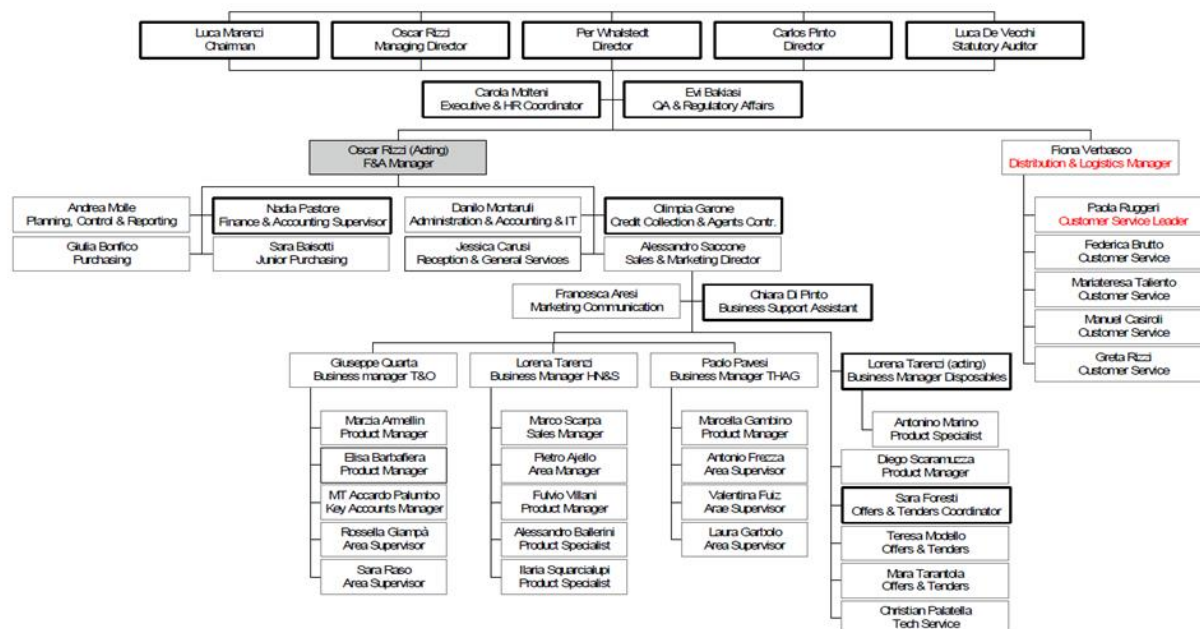
- Verifiability and documentability of operations ex post: relevant activities carried out (especially in areas exposed to the risk of criminal offenses) are adequately formalized, with particular reference to the documentation prepared during their execution. The documentation produced and/or available in paper or electronic form is archived by the functions/persons involved;
- Identification of preventive controls and ex post checks, both manual and automatic: manual and/or automatic safeguards are provided to prevent the commission of offenses or to detect ex post irregularities that could conflict with the legality objectives pursued by Biomedica. Such controls are more frequent, articulated, and sophisticated in activities characterized by a higher risk profile for criminal offenses.

The components of the internal control system include:

- A system of ethical principles aimed at preventing offenses, with particular reference to corruption and the offenses provided for by Legislative Decree 231/2001;
- A sufficiently formalized and clear organizational system;
- A system of authorization and signing powers consistent with the defined organizational and management responsibilities;
- A management control system capable of providing timely reporting of the existence and emergence of critical situations;
- A communication and staff training system;
- A disciplinary system adequate to sanction violations of the regulatory system established by the Company;
- A system of operational procedures, manual or IT-based, aimed at regulating activities in risk areas with appropriate control safeguards;
- An information system for carrying out operational or control activities in areas exposed to the risk of criminal offenses, or in support of such activities.

The Company's organizational system is defined through the preparation of a company organization chart and a system of job descriptions that govern the tasks and areas of responsibility of the main organizational roles. [FAP will insert the updated ORG]

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Biomedica's organizational structure primarily identifies the following organizational areas:

- Finance & Administration Area, including the Planning, Control & Reporting, Finance & Accounting, Administration & Accounting & IT, Credit Collection & Agents Control, Purchasing, and Reception & General Services departments;
- Sales & Marketing Area, including Marketing Communication, Business Support Assistant, Business Managers for the various product lines (with their respective Product and Area Managers), and Offers & Tenders departments;
- Distribution & Logistics Area, with Customer Service staff;
- Executive & HR Coordinator;
- Quality Assurance & Regulatory Affairs.

The authorization and decision-making system consist of a structured and coherent set of powers and proxies, properly formalized and based on the following principles:

- Delegations combine each management power with the corresponding responsibility and an appropriate position in the organizational chart, and are updated as a result of organizational changes;
- Each delegation specifically and unequivocally defines and describes the managerial powers of the delegate and the person to whom the delegate reports hierarchically/functionally;
- The management powers assigned through delegations and their implementation are consistent with the company's objectives;
- The delegate must have spending powers appropriate to the functions assigned;
- Proxies are granted exclusively to individuals with an internal functional delegation or a specific assignment and provide for the extension of representation powers and, if applicable, spending limits.

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The management control system adopted by Biomedica is structured in the various phases of preparing the annual budget, analyzing periodic results, and developing forecasts. The system ensures:

- A plurality of parties involved, in terms of appropriate segregation of functions for the preparation and transmission of information;
- The ability to provide timely reporting of the existence and emergence of critical situations through an adequate and prompt system of information flows and reporting.

The management of financial resources is defined based on principles inspired by reasonable segregation of functions, ensuring that all disbursements are requested, executed, and controlled by independent functions or, as far as possible, distinct individuals, who are also not assigned other responsibilities that could create potential conflicts of interest.

To this end, the Company has adopted procedures that regulate activities exposed to the risk of criminal offenses. These procedures specifically ensure the application of the following principles:

- Clear formalization of roles, responsibilities, methods, and timing for carrying out the regulated operational and control activities;
- Representation and regulation of the separation of duties between the person making the decision (decision-making impetus), the person authorizing its implementation, the person carrying out the activities, and the person entrusted with control
- Traceability and formalization of each relevant activity within the process covered by the procedure, to allow for subsequent tracking of what has been carried out and to provide evidence of the principles and control activities applied;
- An adequate level of archiving for relevant documentation.

To safeguard the company's documentary and information assets, appropriate security measures are in place to protect against the risk of loss and/or alteration of documentation related to activities exposed to the risk of criminal offenses or unauthorized access to data/documents.


To ensure the integrity of data and the effectiveness of information systems and/or IT applications used to carry out operational or control activities in areas exposed to the risk of criminal offenses, or to support such activities, the following are guaranteed:

- User profiling systems in relation to access to modules or environments;
- Rules for the correct use of company IT systems and tools;
- Automated mechanisms for access control to systems;
- Automated mechanisms for blocking or inhibiting access;
- Automated mechanisms for managing authorization workflows.

4.2. Bribery Risk Assessment – Methodology

For the preparation of these Guidelines, in accordance with the provisions of ISO 37001 and, more generally, in line with applicable regulations and best practices in the field, the Company carried out a preliminary risk self-assessment.

The risk self-assessment activity was conducted and coordinated by a Project Team composed of specialized consultants.

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Specifically, these activities were structured in the following phases:

- Acquisition and analysis of documentation relevant to the company's internal control system (for example, Code of Ethics, Model, organizational chart, structure of delegations and proxies, internal procedures, reports, and meeting minutes);
- Preliminary identification of Bribery risks, taking into account the company structure, sector and locations in which Biomedica operates, the business activities carried out and operations performed, and relationships with the Public Administration and Business Partners;
- Identification of key officers to be involved in interviews;
- Conducting interviews aimed at:
 - o Identifying/confirming activities exposed to Bribery risk, operational methods for carrying out such activities, and the individuals involved, as well as any Bribery risks potentially related to Business Partners or resources in certain positions;
 - o Analyzing and assessing the level of "inherent" Bribery risk, net of the mitigating effect of the internal control system (classified as "low," "medium-low," "medium-high," and "high");
 - o Analyzing and assessing the existing safeguards/control systems to mitigate the above risks and identifying possible areas for improvement.

This activity led to the identification of appropriate safeguards to be implemented in the control system to make it suitable for reducing the risk of Bribery, as well as the actual implementation of such safeguards within the control system.

The risk self-assessment activities carried out represent a dynamic process, which requires periodic review to capture any changes within the Organization. Such review must be conducted at least annually and, in any case, promptly:


- Whenever the relevant regulatory framework undergoes changes;
- Whenever significant changes occur in the company structure or business activities;
- Whenever the ineffectiveness of a control safeguard or the inadequacy of the Anti-Bribery Management System is identified.

5. Leadership

5.1. Leadership and Commitment

The Board of Directors of Biomedica:

- approves the Anti-Bribery Policy;
- ensures that the Organization's strategy and Anti-Bribery Policy are aligned;
- receives and periodically reviews information regarding the content and operation of the Organization's Anti-Bribery Management System;
- requires that adequate and appropriate resources necessary for the effective functioning of the Anti-Bribery Management System are allocated and assigned;
- exercises reasonable oversight over the implementation and effectiveness of the Organization's Anti-Bribery Management System by Top Management.

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Top Management:

- ensures that the Anti-Bribery Management System, including policies and objectives, is established, implemented, maintained, and reviewed to adequately address the Organization's Bribery risks;
- ensures the integration of the requirements of the Anti-Bribery Management System into the Organization's processes;
- employs adequate and appropriate resources for the effective operation of the Anti-Bribery Management System;
- implements internal and external communication regarding the Anti-Bribery Policy;
- communicates internally the importance of effective anti-Bribery management and compliance with the requirements of the Anti-Bribery Management System;
- ensures that the Anti-Bribery Management System is properly designed to achieve its objectives;
- leads and supports personnel to contribute to the effectiveness of the Anti-Bribery Management System;
- promotes an adequate anti-Bribery culture within the Organization;
- promotes continuous improvement;
- supports other relevant management roles in demonstrating their leadership in the prevention and detection of corruption within their respective areas of responsibility;
- encourages the use of procedures for reporting suspected and actual acts of corruption;
- ensures that no resource suffers retaliation, discrimination, or disciplinary measures for reports made in good faith or based on a reasonable belief of violation or suspected violation of the Organization's Anti-Bribery Policy, or for refusing to participate in acts of corruption, even if such refusal may result in a loss of business for the Organization (except where the individual contributed to the violation);
- reports, at scheduled intervals, to the Board of Directors on the content and operation of the Anti-Bribery Management System and any allegations of serious or systemic corruption.

5.2. Anti-Bribery Policy


To counter the risk of corrupt phenomena, Biomedica has adopted, by resolution of the Board of Directors, an Anti-Bribery Policy, to which reference is made. The objective of this Policy is to identify a systematic framework of ethical and behavioral principles and rules for the prevention and fight against corruption, increasing awareness of the behaviors that must be observed by Recipients.

5.3. Roles, Responsibilities and Authority within the Organization

Top Management has overall responsibility for the implementation and compliance with the Anti-Corruption Management System and ensures that responsibilities and authorities for relevant roles are assigned and communicated within the Organization and at every level.

The Heads of the various Functions are required to ensure that the requirements of the Anti-Bribery Management System are applied and observed in the activities within their competence.

Top Management and all Biomedica personnel are responsible for understanding, observing, and applying the requirements of the Anti-Bribery Management System relevant to their respective roles in the Organization.

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5.4. Anti-Bribery Compliance Function


Biomedica identifies the Anti-Bribery Compliance Function, ensuring that it is:

- competent, i.e., educated and trained and possessing the necessary expertise to perform the role appropriately;
- authoritative;
- endowed with powers that allow it to effectively assume the responsibilities associated with its role;
- independent, i.e., as far as possible, not personally involved in Biomedica's activities exposed to the risk of corruption.

This Function:

- supervises the design and construction of the Anti-Bribery Management System;
- provides advice and guidance to personnel regarding the Anti-Bribery Management System and on issues related to corruption;
- ensures that the Anti-Bribery Management System complies with the requirements of ISO 37001 by:
 - o verifying the update status of the documentation of the Anti-Bribery Management System;
 - o monitoring, examining, and evaluating the adequacy and effectiveness of the Anti-Corruption Management System and related preventive measures;
 - o monitoring the implementation status of anti-Bribery measures resulting from the review by Top Management and the Governing Body, as well as from activities and checks (such as internal audits or those conducted by certification bodies, etc.);
- reports to Top Management and the Governing Body on the performance of the Anti-Bribery Management System;
- coordinates with the recipient of reports on acts of corruption/violations of the Anti-Bribery Management System and, if necessary, promotes investigations or acquires the results of investigations carried out by the recipient of the reports or the person appointed for this purpose;
- liaises with the Supervisory Body when it becomes aware of facts relevant under Legislative Decree 231/2001 or to obtain from the Supervisory Body information relevant to its tasks and activities.

Consistently with the above, Biomedica identifies the Compliance Manager as the Anti-Bribery Compliance Function in the Responsible [to be discussed with the Company]. The person responsible for this Function has a professional profile and technical skills that make them the most suitable company figure to assume the role of Compliance Function. Furthermore, the company position of Compliance Manager responsible for the function [to be integrated] is characterized by authority and independence. As a further guarantee of the independence of this Function, its role is within business processes in which it is involved but never the exclusive "owner", instead providing support to Management by virtue of its technical expertise.

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6. Planning

Biomedica's Anti-Bribery Management System has been designed to:

- provide reasonable assurance that its objectives can be achieved;
- prevent or reduce undesirable effects related to the Policy and anti-Bribery objectives;
- monitor its own effectiveness;
- achieve continuous improvement.

Biomedica plans:

- actions aimed at addressing corruption risks and opportunities for improvement;
- how to integrate and implement such actions within the Anti-Bribery Management System and how to assess the effectiveness of those actions.

The objectives of the Anti-Corruption Management System adopted by Biomedica:

- are consistent with the Anti-Bribery Policy;
- are measurable (when feasible);
- consider the context of the Organization and the corruption risks identified through the risk self-assessment activity;
- are achievable;
- are monitored over time;
- are communicated;
- are updated as appropriate.

In planning how to achieve the objectives of its Anti-Bribery Management System, Biomedica has determined:


- the actions to be undertaken;
- the necessary resources;
- the responsible parties;
- the timeline for achieving the objectives;
- the criteria for evaluating and reporting the results achieved;
- the person responsible for imposing sanctions.

Specifically, the objectives of the Anti-Bribery Management System adopted by Biomedica, along with the related responsibilities and methods of achievement, measurement, and monitoring, are identified in a dedicated document, which is periodically updated.

7. Support

7.1. Resources

Biomedica determines and provides the resources necessary for the establishment, implementation, maintenance, and continuous improvement of its Anti-Bribery Management System.

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7.2. Competencies

The Company has adopted a comprehensive mapping of the main job profiles and, for each role, the required technical and managerial competencies. Where necessary, the Company provides the training needed to enhance the required skills.

7.3. Personnel Selection, Hiring, and Management Process

The Company has adopted a specific procedure that defines the conditions for the selection, hiring, and management of personnel at all levels.

Regarding personnel management:


- Employment conditions require that personnel comply with the Anti-Bribery Policy, the Anti-Bribery Management System, and other relevant internal regulations (Code of Ethics, Model), entitling the Organization to sanction resources in case of violation;
- Within a reasonable period after hiring, personnel must receive a copy of the Policy or, alternatively, be able to access the document and receive training on it;
- Personnel must not suffer retaliation, discrimination, or disciplinary measures (such as threats, isolation, demotion, lack of promotion, transfer, dismissal, mobbing, harassment, or other forms of mistreatment) for:

1) refusing to participate in or declining any activity for which there is a reasonably assessed corruption risk above "low" that has not been mitigated by the Organization, or

2) expressing suspicions or making reports in good faith, or based on a reasonable belief, of attempted, actual, or suspected acts of corruption or violations of the Policy or the Anti-Bribery Management System (except where the individual has participated in such violation).

For all positions exposed to a corruption risk higher than "low," and for the Anti-Bribery Compliance Function:

- Due diligence activities are conducted in relation to resources to be hired and personnel before they are transferred or promoted by the Organization, to determine, as far as reasonable, whether it is appropriate to hire or reposition such individuals and whether it is reasonable to believe they will comply with the Policy and requirements of the Anti-Bribery Management System;
- Performance bonuses, performance objectives, and other incentive elements of remuneration are periodically reviewed to ensure that adequate safeguards are in place to prevent them from encouraging corruption;
- Personnel, as well as members of Top Management and the Governing Body, submit a declaration, at reasonable intervals in proportion to the identified corruption risk, confirming their commitment to compliance with the Policy.

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7.4. Awareness, Training, and Communication

In light of the results of the corruption risk assessment, Biomedica organizes and delivers ongoing training activities, with the aim of raising awareness among Recipients regarding the fight against corruption.

Training and awareness sessions are provided to personnel periodically and, in any case, whenever necessary. Biomedica also undertakes to raise awareness among its Business Partners regarding anti-Bribery issues.

To this end, the training and awareness program developed by the Company covers, in particular:

- The requirements of the Policy, these Guidelines, and, in general, the Anti-Bribery Management System;
- The risk of corruption and the potential harm it may cause to resources and the Organization;
- The circumstances in which a corrupt event may occur in relation to assigned duties and how to recognize such circumstances;
- How to recognize and deal with proposals and offers of bribes;
- How to prevent and avoid corruption and recognize key indicators of corruption risk;
- The contribution each resource can make to the effectiveness of the Anti-Bribery Management System, including the benefits of reporting suspected cases of corruption;
- The implications and potential consequences of any non-compliance with the requirements of the Anti-Bribery Management System;
- The channels through which to submit reports;
- Information on training and available resources.

Anti-Bribery training is operationally entrusted to the Anti-Bribery Compliance Function, which coordinates with the Supervisory Body for matters within its competence. The content of the training is differentiated according to whether it is addressed to employees in general, employees operating in areas exposed to “high” or “medium” corruption risk, members of the Board of Directors, etc.


Participation in training is mandatory and attendance is tracked.

Training may also be delivered using IT tools (for example, via e-learning) and is provided with the support of experts in the field.

Biomedica also adopts and ensures an effective communication strategy both internally and externally regarding its anti-Bribery system.

For internal communication purposes, the Company makes the Policy, these Guidelines, the Code of Ethics, the Model, and company procedures available to all personnel through:

- Distribution via email to employees;
- Availability on the Electronic Notice Board on the company intranet. [to be confirmed by the Company]

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For external communication purposes, Biomedica makes the Policy, the Code of Ethics, and the Model (General Section) available in a dedicated section of the institutional website (<https://biomedica-italia.it/chi-siamo/#code>).

Regarding the procedures for the preparation, updating, and achieving documented information, company documents that constitute the internal regulatory system, Biomedica has adopted a specific procedure.

8. Due Diligence and Additional Controls

Where the risk assessment has identified a corruption risk higher than “low” in relation to transactions, projects, or activities, business partners, or candidates for certain positions, Biomedica may carry out specific due diligence activities aimed at thoroughly assessing the nature and extent of the identified risk.

For operations or activities with a corruption risk higher than “low,” due diligence may investigate, among other aspects:

- the structure, nature, and complexity;
- the business partners and other third parties involved;
- the competence and qualifications of the parties involved;
- the reputation and location of the client.


For business partners whose corruption risk is higher than “low,” due diligence may investigate, among other aspects:

- whether the entity is a legitimate business;
- whether it has the qualifications, experience, and resources necessary to perform the assigned activities;
- whether it has an Anti-Bribery Management System and/or another prevention system, such as an organizational model pursuant to Legislative Decree 231/2001;
- whether there are any conflicts of interest (e.g., existing relationships with public officials or clients/suppliers);
- the identity of the shareholders.

For candidates for certain positions whose corruption risk is higher than “low,” due diligence may include, among other activities:

- discussing the Anti-Bribery Policy during the interview;
- verifying the accuracy of the qualifications held;
- obtaining references from previous employers;
- identifying and assessing any conflicts of interest (e.g., existing relationships with public officials or clients/suppliers).

Specifically, the criteria for assessing the risk level of certain organizational positions and business partners are defined within the risk self-assessment activities and may be reviewed during periodic updates or whenever deemed appropriate in light of additional relevant factors. For this assessment, the following are considered:

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- the number, characteristics, and risk level of the activities in which the internal or external party is involved;
- the relevance of the role and activities performed by internal and external parties in risk areas, considering, for example, the degree of decision-making autonomy, relationships with other internal or external parties, the significance of their contribution to achieving the overall objectives of the relevant process, etc.;
- market conditions and the degree of freedom in selecting the business partner;
- the economic significance of the relationship.

The due diligence activity and its frequency are governed by specific procedures (such as those relating to procurement, human resources, etc.), which also provide for additional financial and non-financial controls.

In general, the required controls must include the following:

Subject	Controls
Members of the Board of Directors, Board of Statutory Auditors, Supervisory Body, Anti-Bribery Compliance Function, employees holding organizational positions with a corruption risk higher than "low"	<ul style="list-style-type: none"> • Verification of technical and attitudinal competencies • Declaration of commitment to comply with the Policy • Declaration regarding any conflicts of interest
Business partners with a corruption risk higher than "low"	<ul style="list-style-type: none"> • Request for certification and specific documentation (e.g., chamber of commerce extract) • Declaration of commitment to comply with the Policy • Completion of specifically prepared forms • Declaration regarding any conflicts of interest


If the risk self-assessment or due diligence activities have identified a corruption risk higher than "low" for certain business partners, it must be verified whether the business partner implements anti-Bribery controls to manage the related risks.

Whether the answer is negative or it is not possible to determine whether such controls are in place:

- where feasible, contractual clauses or other instruments must be used to bind the business partner to implement anti-Bribery controls relating to the relevant transaction, project, or activity;
- if this is not feasible, the Company must take this circumstance into account in the corruption risk assessment relating to the relationship with the business partner and in how Biomedica manages such risks.

In any case, for business partners that pose a corruption risk higher than "low," contractual clauses or other instruments are used that, as far as feasible, provide for:

- the business partner's commitment to prevent acts of corruption committed by itself or by third parties on its behalf or for its benefit, in relation to the relevant transaction, project, or activity;

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- Biomedica's right to terminate the relationship with the business partner in the event of acts of corruption committed by the business partner itself or by third parties on its behalf or for its benefit, in relation to the relevant transaction, project, or activity.

If this is not feasible, the Company must take this circumstance into account in the corruption risk assessment relating to the relationship with the business partner and in how the Company manages such risks.

If the due diligence conducted on a specific transaction, project, activity, or relationship with a business partner reveals that the corruption risks cannot be adequately managed by the existing safeguards and that it is not possible to adopt additional controls, Biomedica must:

- in the case of an existing transaction, project, activity, or relationship, take appropriate measures to terminate, suspend, or withdraw from it as soon as possible;
- in the case of a new proposed transaction, project, activity, or relationship, postpone or decline to proceed.

9. Performance Evaluation of the Anti-Bribery Management System

9.1. Monitoring Activities

The Anti-Bribery Management System includes monitoring activities aimed at evaluating the effective application of the anti-Bribery measures adopted by Biomedica.


The purpose of this evaluation is to determine whether corrective or improvement actions are needed in response to any non-conformities identified.

Monitoring covers the following areas:

- the objectives outlined in section 6 of these Guidelines;
- risk activities, in line with the mapping and risk assessment of corruption carried out and updated through risk self-assessment activities;
- with reference to the above risk activities: relationships with external parties involved, in terms of the nature and outcomes of interactions and the conduct of business partners and other parties (e.g., public entities) involved.

Monitoring is carried out at three levels by the following responsible parties, with the frequency, verification methods, and reporting described below:

- at the first level by the Heads of Company Functions, who continuously verify, for the risk activities within their competence, compliance with applicable company procedures and the principles of the Anti-Bribery Management System. This activity is performed through adequate supervision, coordination, and review of operations, implementing periodic and ad hoc controls as provided for in the procedures, the Model, and the Anti-Bribery Management System under the responsibility of the Function Heads. The latter promptly reports any exceptions, critical issues, or anomalies identified to the Anti-Bribery Compliance Function and Top Management. In addition, upon request from the Anti-Bribery Compliance Function, they provide further information on activities within their competence;

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- at the second level by the Compliance Manager (Anti-Bribery Compliance Function), who monitors and measures the achievement of objectives within their competence as identified in section 6, as described above, as well as the compliance and implementation of the safeguards of the Anti-Bribery Management System across the Company, with reference to individual risk activities and to relationships with internal and external parties involved. The Anti-Bribery Compliance Function conducts this monitoring both continuously—requesting information and updates from the Heads of Company Functions on activities within their competence and on planned improvement actions, as well as interacting with Company employees—and periodically, through scheduled internal audit and review activities, applying the methodologies and reporting results as indicated below (see sections 9.2 and 9.3). The Anti-Bribery Compliance Function may also make use of the results of oversight activities conducted by the Supervisory Body;
- at the third level, as part of internal audit activities, by an auditor who meets the requirements and carries out and reports audit activities in the manner and frequency described in section 9.2.

9.2. Internal Audit

Internal audit activities are aimed at verifying that the Anti-Bribery Management System is aligned with the organization's context, complies with the requirements prescribed by ISO 37001, and is effectively implemented.

Given that Biomedica does not have an "Internal Audit Function," audits may be conducted:


- by the Anti-Bribery Compliance Function, except for audits concerning the effectiveness and operation of the Anti-Bribery Compliance Function itself;
- by consultants who possess the necessary professional qualifications, specifically:
 - i) knowledge of audit methodologies;
 - ii) knowledge of ISO 37001;
 - iii) at least two years of experience in audit activities/projects for ISO 37001 compliance;
 - iv) objectivity and impartiality with respect to the activities being audited consultants who perform risk activities on behalf of Biomedica or are directly involved in such activities are therefore excluded.

Internal audits are carried out according to an "Audit Plan," defined and approved annually. The Audit Plan identifies the schedule (month of audit execution), the person responsible for conducting the audit (Anti-Bribery Compliance Function/external auditor), the subject/scope of the audit, and the Company Functions to be involved in the audit activities.

The scheduling of individual audit interventions and the definition of the audit subject are based on the identified risk level, considering the complexity and number of operations, subprocesses, and actors involved in each risk area, with the aim of auditing particularly complex/large and high-risk areas more frequently (at least annually).

The Audit Plan may be supplemented as needed to provide extraordinary internal audit interventions in the event of:

- critical non-conformities or anomalies;
- reports received through the whistleblowing system;

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- requirements or reports from external bodies, external control authorities, or the Supervisory Body;
- significant changes in the Company's organizational structure, business processes, or context/business.

The Audit Plan and any updates are prepared by the Anti-Bribery Compliance Function, shared with and possibly supplemented by the Chief Executive Officer, and approved by the Board of Directors. The implementation of the Audit Plan is monitored and measured by the Chief Executive Officer and the Board of Directors.

The audit organization includes the following phases:

1. Preparation for the audit intervention. For each scheduled audit, the following steps are taken:
 - a. selection and appointment of the external auditor (if applicable);
 - b. definition of the audit program (also in the form of a specific "checklist") by the auditor, which defines: i) the identification of the safeguards under ISO 37001 to be tested; ii) the identification of subprocesses and/or activity phases and/or corrective actions identified by previous audit/review activities ("follow-up"); iii) the time period in scope; iv) the documentation to be requested; v) the definition of testing methods (e.g., interview, document analysis, site visit, observation); vi) the logic and drivers for selecting any samples; vii) the description of the tests; and viii) the identification of the parties involved;
 - c. notification of the start of audit activities to the parties concerned (unless it is a "surprise" audit), possibly through an opening meeting where the objectives, scope, and criteria of the audit are explained;
 - d. scheduling of audit days to be conducted at the Company's site;
2. Execution of the audit intervention:
 - a. definition and extraction of any test sample;
 - b. collection of documentation and evidence relating to the items included in the test sample and their verification, as provided for in the audit program;
 - c. systematization and evaluation of the findings, according to the following evaluation scheme:

OK	Positive result: - the formal prescription of the control within the company documents is found to be compliant with organizational requirements and in line with ISO 37001 requirements, or - the control is implemented and maintained effectively
X	Negative result: - the formal prescription of the control within the company documents is found to be non-compliant with organizational requirements or not in line with ISO 37001 requirements, or - the control is not implemented or not maintained effectively, or - cases of corruption are present or violations/lack of compliance with the anti-Bribery policy or with the requirements of the anti-Bribery management system, by internal recipients or business partners, are present
P	Result with areas for improvement: - the formal prescription of the control within the company documents is found to be partially compliant with organizational requirements or partially in line with ISO 37001 requirements, or - the control is partially implemented or maintained effectively, or - behaviors/events are present that could increase the risk of a violation/lack of compliance with the anti-Bribery policy or with the requirements of the anti-Bribery management system, by internal recipients or business partners
N/V	Prescription/Implementation not assessable (e.g., in the absence of operations to be subjected to verification)
N/A	Prescription not applicable (the Company cannot apply the prescription for the specific context)

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3. Reporting of Audit Findings:

a. Preparation of the Audit Report, which presents the objective and scope of the intervention, the methodological approach and work performed, a summary assessment of the results, the audit findings (gaps/areas for improvement identified and related suggestions for corrective action). The summary assessment is expressed on a four-level scale as described below:



ADEQUATE

Anti-Bribery management system overall adequate, for which no critical issues have been identified, or only minor/low-level critical issues have been found.

INADEQUATE

Anti-Bribery management system overall inadequate, considering significant or serious critical issues found.


SUFFICIENT

Anti-Bribery management system overall sufficient, considering moderate critical issues found.

DEFICIENT

Anti-Bribery management system overall deficient, considering significant critical issues found.

- b. Sharing of the Audit Report and presentation of the findings with the audited Company Functions, including through a dedicated closing meeting, and finalization of the Audit Report;
- c. Sharing of the Audit Report with the Anti-Bribery Compliance Function (where the audit was not conducted by this function) and with the Chief Executive Officer;
- d. Definition of an "Action Plan" to implement the suggested improvements. The Action Plan specifies the corrective actions to be implemented, the responsible parties, and the timelines for implementation;
- e. Submission of the Audit Report and the Action Plan to the Board of Directors for their information;
- f. Archiving of the Audit Report, the audit program, and copies of the verified documentation by the Anti-Bribery Compliance Function.

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9.3. Review by the Anti-Bribery Compliance Function

The Anti-Bribery Compliance Function periodically reviews the Anti-Bribery Management System and reports annually to Top Management on its adequacy and effectiveness in preventing corrupt practices. To this end, the Anti-Bribery Compliance Function considers and analyzes:

- the findings of internal audits and audits conducted by certification bodies (including related observations, non-conformities, and planned corrective actions);
- ongoing improvement activities and their progress;
- training activities;
- any information/reports on whistleblowing provided by the Supervisory Body (OdV);
- any regulatory changes or changes to the structure or organization of the Company;
- any other information or document useful for the purposes of the Anti-Bribery Management System.

The Anti-Bribery Compliance Function also coordinates with the Supervisory Body to obtain relevant information for assessing the effective application of the measures adopted and to acquire the results of the checks carried out by the Supervisory Body.

The Anti-Bribery Compliance Function may freely access all company documentation it deems appropriate to analyze for its activities and review. Should a problem or suspicion arise regarding acts of corruption or critical issues concerning the Anti-Bribery Management System, the Anti-Bribery Compliance Function has direct and immediate access to Biomedica's Top Management.

Based on the above, the Anti-Bribery Compliance Function prepares its own review document, expressing an opinion on the level of compliance and implementation of the Anti-Bribery Management System and, if necessary, proposing the required actions, also based on suggestions made in the Audit Reports.


The Anti-Bribery Compliance Function retains its review documents and evidence of the documentation received to support their drafting, as well as communications sent/received.

9.4. Review by Top Management

The Anti-Bribery Management System is periodically reviewed by Biomedica's Top Management to ensure its ongoing suitability, adequacy, and effectiveness. This review includes, among other aspects, verification of the status of corrective and improvement actions prescribed during previous reviews, the effectiveness of actions taken, and opportunities for the continuous improvement of the Anti-Bribery Management System. For the review, the Chief Executive Officer, as Top Management, receives:

- the review from the Anti-Bribery Compliance Function;
- the Audit Reports from internal audits;
- any progress reports on previously defined Action Plans.

The Chief Executive Officer, as Top Management, analyzes the above and presents their considerations to the Governing Body (see section 9.5), expressing an opinion on the level of compliance and implementation of the Anti-Bribery Management System and, if necessary, proposing the required actions.

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9.5. Review by the Governing Body

The review by Top Management, together with the review by the Anti-Bribery Compliance Function, is presented to the Board of Directors (as the Governing Body) by the Chief Executive Officer (as Top Management).

The Board of Directors (as the Governing Body) deliberates on the opinion regarding the level of compliance and implementation of the Anti-Bribery Management System and on any actions proposed by the Anti-Bribery Compliance Function and Top Management. The outcomes of the Governing Body's review and the related resolutions are formalized in the minutes of the Board of Directors.

10. Improvement

Through the internal audit and review activities, Biomedica is committed to the continuous improvement of the sustainability, adequacy, and effectiveness of its Anti-Bribery Management System.

The results of the verification activities carried out are considered by the Company to determine whether it is necessary or appropriate to make changes to the Anti-Bribery Management System: in particular, if the verification activities reveal a non-conformity that requires or suggests changes, appropriate corrective/improvement actions are promptly undertaken.

11. Reporting

Biomedica guarantees the possibility of reporting any act of corruption of which one becomes aware or suspects, as well as any violation of the provisions of the Anti-Bribery Policy or these Guidelines, and, more generally, of the control measures adopted to counter the emergence of corrupt acts.


Reports may also be anonymous and must describe in detail the facts and people subject to the report. Through a specific procedure, the following are regulated:

- the methods of reporting;
- the person/function to whom reports must be sent;
- the procedures, roles, and responsibilities for managing received reports, to guarantee the confidentiality of the whistleblower's identity and compliance with the other provisions set out below.

Conduct aimed solely at slowing down the activity of the recipient of the reports, as well as the improper use or abuse of the reporting system, is subject to sanctions.

The Company, in any case, protects whistleblowers acting in good faith against any form of retaliation, discrimination, or penalization for reasons directly or indirectly related to the report, without prejudice to the right of those concerned to protect themselves if the whistleblower is found to have criminal or civil liability for false statements and without prejudice to legal obligations. In any case, the confidentiality of the whistleblower's identity and information is ensured in any context following the report, subject to legal obligations and the protection of the rights of the Company or persons wrongly or maliciously accused. A report is made in good faith when it is made on the basis of a reasonable belief supported by factual elements.

That said, any form of abuse of the reporting system is expressly prohibited, such as, by way of example, the intentional submission of false accusations and the improper use of this tool. Any abuse or improper use of the reporting system will be prosecuted by the Company, considering that such conduct represents a significant risk to the integrity of the entire Anti-Bribery Management System.

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12. Disciplinary System

Violation of the provisions of the Anti-Bribery Policy, these Guidelines, and, in general, the principles of the Anti-Bribery Management System, when committed by Biomedica personnel, constitutes a breach of company rules, leading to the initiation of disciplinary proceedings for the application of the sanctions provided for by the company's disciplinary system, as well as possible criminal and civil consequences. If attributable to Business Partners, such violation constitutes a breach of their contractual obligations, entitling Biomedica to apply protective measures (such as, for example, termination of the contract, application of penalties, claim for damages, etc.).