

Molten Ventures is committed to investing responsibly and embedding environmental, social and governance, environmental and social considerations into everything that we do in order to accelerate positive change (both within our organisation and in our wider communities) and to help inspire the next generation of diverse entrepreneurs whilst achieving strong returns for our investors.

Across the Molten Ventures group ("**Group**"), we have implemented an array of Policies, Procedures, Systems, and Controls that are grounded in sound governance and robust compliance to help ensure that we achieve our investment goals responsibly as stewards for our investors and wider stakeholders in alignment with the UK Corporate Governance Code as published by the Financial Reporting Council from time-to-time.

This disclosure sets out a number of those Policies, Procedures, Systems, and Controls which are in place across the Group, with a brief description of the purpose and effect of each, and where publicly accessible, a link to where the document can be found.

For the purpose of this document, each of the documents has been sorted into the following categories:

1. Governance & ESG
2. Compliance
3. Human Resources
4. Data Protection
5. IT and Cyber
6. Finance
7. Reports and Disclosures

The Board has ultimate responsibility for the Group's system of internal controls and for the ongoing review of their effectiveness. As at the date of publication, the Board considers that these are appropriate for the size, complexity, and risk profile of the Group.

This document will be updated periodically as the Group's processes evolve. Updates to this publication will be posted on our website.

Information as at: 11 April 2023.

| 1. GOVERNANCE & ESG | | |
|---------------------|--|---|
| 1.1 | ESG Policy | The Group's ESG Policy can be located at: https://investors.moltenventures.com/esg-policy |
| 1.2 | Groupwide Code of Conduct | <p>This Code establishes the key values, principles, operating guidelines, and culture that the Group expects its staff to adhere to as part of their employment, including compliance with the SMCR Conduct Rules and the FCA's Code of Conduct for individuals.</p> <p>The Code of Conduct confirms the Group's commitment to address major business ethics risks and the overarching responsibility for business ethics issues vested in the Board and the Executive.</p> <p>All personnel, including the Executive receive annual training on their obligations under the Code of Conduct as part of their SMCR training, and are required to attest twice per year that they have read, understood and adhered to the standards of conduct expected of them.</p> <p>Breach of the Code of Conduct may result in disciplinary action being taken, which may lead to dismissal. The Code of Conduct details the measures put in place to deter non-compliance and reduce exposure to unethical opportunities, and the investigations and the proposed corrective actions to be taken in the event of non-compliance.</p> |
| 1.3 | Human Rights Policy | <p>This Policy sets out how human rights are relevant to our own business and the business of our portfolio companies and outlines the commitments we make to respect and promote human rights across our operations.</p> <p>The Policy is in alignment with international principles and standards including the UN Universal Declaration of Human Rights, OECD Guidelines for Multinational Enterprises, ILO Core Labour Standards, UN Global Compact Principles on Human Rights and Labour Standards, Women's Empowerment Principles and Children's Rights and Business Principles.</p> |
| 1.4 | Modern Slavery and Human Trafficking Statement | The Group's current Modern Slavery and Human Trafficking Statement can be located at: https://investors.moltenventures.com/modern-slavery-statement |
| 1.5 | Board Diversity & Inclusion Policy | The Board Diversity & Inclusion Policy can be located at: https://investors.moltenventures.com/investor-relations/plc/documents |
| 1.6 | Corporate Governance Statement | <p>The Group's Corporate Governance Statement can be found in the last published annual report and accounts located at: https://investors.moltenventures.com/investor-relations/plc/reports</p> <p>The Board of Molten Ventures plc c apply the principles and report against the provisions of the UK Corporate Governance Code as published by the Financial Reporting Council (FRC) from time-to-time, which is publicly available from on the FRC's website (https://www.frc.org.uk/directors/corporate-governance/uk-corporate-governance-code)</p> |

| | | |
|------|---|---|
| | | Further information about the Group's governance arrangements can be located at: https://investors.moltenventures.com/investor-relations/plc/governance |
| 1.7 | Schedule of Matters Reserved for the Board | The Schedule of Matters Reserved for the Board can be located at: https://investors.moltenventures.com/investor-relations/plc/documents |
| 1.8 | Audit, Risk & Valuations Committee Terms of Reference | The current Audit, Risk & Valuations Committee Terms of Reference can be located at: https://investors.moltenventures.com/investor-relations/plc/documents |
| 1.9 | Nomination Committee Terms of Reference | The current Nomination Committee Terms of Reference can be located at: https://investors.moltenventures.com/investor-relations/plc/documents |
| 1.10 | Remuneration Committee Terms of Reference | The current Remuneration Committee Terms of Reference can be located at: https://investors.moltenventures.com/investor-relations/plc/documents |
| 1.11 | ESG Committee Terms of Reference | The current ESG Committee Terms of Reference can be located at: https://investors.moltenventures.com/investor-relations/plc/documents |
| 1.12 | Division of Chair and CEO responsibilities and role of the Senior Independent Director Policy | <p>This Policy sets out a clear division of responsibilities between the roles of the Chair and the CEO and also defines the role of the SID.</p> <p>The Policy is intended to provide a framework for effective governance across the different board functions to allow for sufficient levels of independence, challenge and oversight.</p> |
| 1.13 | Executive Team Roles & Responsibilities Policy | <p>This Policy sets out the roles and responsibilities of each member of the Executive. The document broadly defines each role as follows:</p> <p>Chief Executive Officer: developing and maintaining the sustainability and effectiveness of the Group.</p> <p>Chief Portfolio Officer: developing and maintaining the operational performance of the Group's investment process and portfolio of investments.</p> <p>Chief Financial Officer: leading the Group Finance function to ensure that the Board is able to make proper judgements as to the Group's financial position and prospects.</p> |
| 1.14 | Board Evaluation Policy | Under this Policy, the Board conducts formal performance evaluations of the Executive and the full Board every year. The process is carried out by way of detailed questionnaires completed by each member of the Board and covering topics such as the composition of the Board, the quality and |

| | | |
|------|----------------------------------|--|
| | | <p>timeliness of information provided, relationships between the Board, Shareholders, employees and other stakeholders, and succession planning. The responses are collated by the Company Secretary, who presents a summary of the results to the Board for discussion.</p> <p>The Board will typically agree a number of specific actions to take forward during the forthcoming year in order to improve its efficiency and effectiveness.</p> |
| 1.15 | Investment Policy | <p>Molten Ventures plc's Investment Policy can be located at: https://investors.moltenventures.com/investor-relations/plc/governance</p> |
| 1.16 | Company Share Option Plan (CSOP) | <p>The Group operates a Company Share Option Scheme (CSOP) for Group personnel (including the Executive) to be granted options for shares of Molten Ventures plc vesting over 3 years subject to certain performance conditions. Options granted after 2020 have been issued under the Group's Long-Term Incentive Plan (see below).</p> <p>In accordance with this Plan, eligibility, performance criteria, and vesting periods are determined by the Group's Remuneration Committee, and restrictions are imposed on the number of shares which may be issued generally and to individual recipients.</p> <p>Please see paragraphs 9.2 and 9.6 of Part 13 of the Molten Ventures plc Prospectus issued in July 2021 for further details: https://investors.moltenventures.com/investor-relations/plc/documents</p> |
| 1.17 | Long-Term Incentive Plan (LTIP) | <p>Since 2021, the Group has operated a Long-Term Incentive Plan for the Group's personnel (including the Executive) to be granted options for shares of Molten Ventures plc vesting over 3 years subject to certain performance conditions.</p> <p>In accordance with this Plan, eligibility, performance criteria, and vesting periods are determined by the Group's Remuneration Committee and in accordance with the Remuneration Policy for the Executive.</p> <p>Please see paragraphs 9.1 and 9.3 of Part 13 of the Molten Ventures plc Prospectus issued in July 2021 for further details: https://investors.moltenventures.com/investor-relations/plc/documents</p> |
| 1.18 | Deferred Bonus Plan (DBP) | <p>Since 2021, the Group has operated a Deferred Bonus Plan (DBP) for the Group's personnel (including the Executive) under which a proportion of an individual's annual bonus may be deferred as determined by the Remuneration Committee. To the extent that a bonus awarded to an Executive's bonus exceeds 100% of salary, the balance is deferred under the DBP.</p> <p>Eligibility, vesting periods and award amounts are determined by the Remuneration Committee.</p> <p>Please see paragraph 9.4 of Part 13 of the Molten Ventures plc Prospectus issued in July 2021 for further details: https://investors.moltenventures.com/investor-relations/plc/documents</p> |
| 1.19 | Board Schedule of Activity | <p>This Schedule summarises plc Board activity, lists agendas, and documents standing agenda items pertinent to governance.</p> |

| | | |
|-----------|--|--|
| 1.20 | MLRO Report (Annual) | <p>An annual MLRO Report is prepared for each regulated entity within the Group, analysing the operation and effectiveness of each entities systems and controls to manage and combat the risk of money laundering and terrorist financing.</p> <p>The Report is presented to the Board of each entity along with any recommendations for improvements in risk management.</p> |
| 1.21 | SYSC Report (Annual) | <p>An annual SYSC Report is prepared for each regulated entity within the Group which considers the systems and controls each entity has in place to ensure that there are effective oversight arrangements in place and controls operate in an effective manner.</p> <p>The Report is presented to the Board of each entity along with any recommendations for improvements in risk management.</p> |
| 1.22 | Compliance Report (Annual) | <p>An annual Compliance Report is prepared for each regulated entity within the Group which provides an update on key regulatory developments (including ongoing Consumer Duty compliance) and details what action each entity has taken in respect of these.</p> <p>The Report is presented to the Board of each entity along with any recommendations for improvements in risk management.</p> |
| 1.23 | Corporate Risk Register | <p>The consolidated Group Register identifies principal risks facing the business and attributes a likelihood and impact scoring for each, along with proposed mitigations for each.</p> |
| 1.24 | Corporate Risk Heat Map | <p>The Risk Heat Map documents the principal risks identified in the Corporate Risk Register on a heat map aligning with the likelihood and significance ratings attributed in the Corporate Risk Register and the result of mitigation strategies.</p> |
| 1.25 | Corporate Calendar - Notification & Reporting Requirements | <p>The Corporate Calendar sets out a maintained list of all compliance, financial and regulatory reporting requirements and deadlines and assigns a named owner within each relevant team to each line item within the calendar.</p> |
| 1.26 | Reporting Schedule Calendar | <p>This Reporting Schedule Calendar diarises when reporting deadlines fall due, and includes corporate registrar filings, regulatory returns, client money reconciliations etc. and attributes each task to an individual(s) within the Group.</p> |
| 2. | COMPLIANCE | |
| 2.1 | Compliance Manual | <p>This Manual adopted at a Board/management level provides an overview of the key regulatory requirements which apply to the Group and how it complies with each requirement, including:</p> <ul style="list-style-type: none"> • Permitted activities with respect to fund management and marketing • Standards of Conduct for the Group and personnel • FCA requirements applicable to the Group, including provisions relating to Treating Customers Fairly, Conflicts of Interests, Risk Management, |

| | | |
|-----|---|--|
| | | <p>Data Security, Anti-Money Laundering and countering the risk of financial crime</p> <ul style="list-style-type: none"> • Key Senior Management Arrangements, Systems and Controls (SYSC) requirements and the Segregation of Functions • Client Categorisation and handling of client assets • Prudential Requirements and Record Keeping obligations |
| 2.2 | Business Continuity and Disaster Recovery Plan | <p>This Plan includes an assessment of the disruptions to which the Group may be susceptible (and the likely timescale of those disruptions), together with a robust plan of action to reduce potential losses that may be suffered through the interruption of its systems and procedures.</p> <p>Business resilience, including data security, is a board level concern that is considered to be one of the principal risks to the business. This Plan is key in identifying and addressing data security risks and providing the means of avoiding, and recovering any cyber-related or other disaster events.</p> <p>The principal objective of this Plan is to develop, test, and document a well-structured and easily understood set of processes which will help to plan for / mitigate any unforeseen disaster or emergency which interrupts information systems and business operations, and assist the Group recover as quickly and effectively as possible in the event that such an event occurs. Additional objectives include the following:</p> <ul style="list-style-type: none"> • The need to ensure that all employees fully understand their duties in implementing the Plan • The need to ensure that operational policies are adhered to within all planned activities • The need to ensure that proposed contingency arrangements are cost-effective • The need to consider implications on any other impacted sites • Disaster recovery capabilities |
| 2.3 | Anti-Money Laundering (AML) and Know Your Client (KYC) Policy | <p>This Policy documents the Anti-Money Laundering (AML) and Know Your Customer (KYC) checks which the Group undertakes with respect to investments, counterparties, co-investors and underlying investors (where applicable).</p> <p>Whilst the prevention of money laundering and terrorist financing is the responsibility of all Group personnel, oversight for the Policy is a Board-level consideration with support from the Audit Risk and Valuation Committee, the Executive Committee, and the Group's Money Laundering Reporting Officer (assisted by the Compliance Team).</p> <p>The aim of the Group's Anti-Money Laundering Policy is to deter criminals from using the Group as a conduit for laundering the financial proceeds of crime and to allow suspicious transactions to be reported to the National Crime Agency by the MLRO and to ensure an audit trail if a client comes under investigation in the future.</p> <p>Under the Policy, satisfactory "Know Your Customer" rules and procedures must be established on potential customers to identify and verify beneficial owners and (where appropriate and applicable) origins of underlying funds:</p> <p>Carrying out an initial client due diligence review allows a decision to be made as to the degree of money laundering risk a potential client may pose and the degree of client due diligence required in confirming identity, by</p> |

| | | |
|-----|---|---|
| | | <p>either applying simplified, standard or enhanced due diligence where PEPs or sanctions risks etc. are identified.</p> <p>All personnel, including the Executive receive annual training and are required to undertake a scored assessment to ensure that they understand their obligations for the prevention of money laundering and are able to recognise, and appropriately report activities that they suspect may constitute money laundering. All personnel including the Executive are required to attest twice per year that they have read, understood and adhered to the Anti-Money Laundering (AML) and Know Your Client (KYC) Policy. Please see the Attestation section for further details.</p> |
| 2.4 | Anti-Money Laundering (AML) Checklist | <p>In accordance with the Group AML Policy, a Checklist is employed by the Group in order that suitable KYC checks are undertaken on all clients, counterparties, co-investors, investee companies and underlying investors (where applicable). The Finance Team will only wire completion funds upon receipt of a dual signed checklist, one signature from the investment team and the other from the Compliance Team / Money Laundering Reporting Officer (MLRO).</p> <p>As at the date of publication, no legal or regulatory fines, or settlements have been levied, paid or entered into by the Group in connection with offences or matters pertaining to money laundering.</p> |
| 2.5 | Anti-Bribery and Financial Crime Policy | <p>This Policy documents the processes in place at Group level to prohibit and counter the risk of bribery, corruption, fraud, money laundering, terrorist financing, financial crime, the facilitation of tax evasion, market abuse and insider dealing, data security and measures put in place to counter the risk of fraud.</p> <p>Whilst the prevention of bribery, corruption and financial crime is the responsibility of all Group personnel, oversight for the Policy is a Board-level consideration with support from the Audit Risk and Valuation Committee, the Executive, the Group's Money Laundering Reporting Officer and the Group's Compliance Officer (assisted by the Compliance Team).</p> <p>The Policy contains definitions of bribery and corruption and facilitation payments and sets out the measures that the Group and its personnel are required to take in order to prevent financial crime, including:</p> <ul style="list-style-type: none"> • customer due diligence measures and on-going monitoring; • incident reporting; • record-keeping; • internal control; • risk assessment and management; • the monitoring and management of compliance with, and the internal communication of, the Group's anti-money laundering policies and procedures. <p>All personnel, including the Executive are encouraged to consult with the Compliance Team on ethical issues, and receive annual training which incorporates a scored test to ensure that they understand their anti-bribery, anti-corruption, anti-fraud and anti-financial crime obligations. All personnel including the Executive are required to attest twice per year that they have read, understood and adhered to the Anti-Bribery and Financial Crime Policy</p> |

| | | |
|------|--|---|
| | | <p>Regular bribery and corruption risk assessments are undertaken under this Policy (see below).</p> <p>As at the date of publication, no legal or regulatory fines, or settlements have been levied, paid or entered into by the Group in connection with offences or matters pertaining to bribery, corruption or anti-competitive standards.</p> |
| 2.6 | Anti-Financial Crime Risk Assessment | In accordance with the Anti-Bribery and Financial Crime Policy, regular Anti Financial Crime Risk Assessments are undertaken by the Group to ensure that the systems, controls and reporting mechanisms in place remain robust and suited to the environment in which the Group undertakes its business. |
| 2.7 | Anti-Bribery Risk Assessment | In accordance with the Anti-Bribery and Financial Crime Policy, regular Anti-Bribery Risk Assessments are undertaken by the Group to ensure that the systems, controls and reporting mechanisms in place remain robust and suited to the environment in which the Group undertakes its business. |
| 2.8 | Facilitation of Tax Evasion - risk assessment | In accordance with the Facilitation of Tax Evasion Risk Assessment, regular assessments are undertaken by the Group in connection with the facilitation of tax evasion to ensure that the systems, controls and reporting mechanisms in place remain robust and suited to the environment in which the Group undertakes its business. |
| 2.9 | Senior Managers and Certification Regime (SMCR) Policy | <p>This Policy documents how SMCR applies to the Group; the annual processes which must be followed around fitness and propriety assessments and training; and the standards of conduct expected from staff.</p> <p>Under the SMCR Policy and the Code of Conduct (see below), guidance is included to assist all personnel to undertake ethical risk assessments</p> <p>All personnel, including the Executive receive annual SMCR training and are required to attest twice per year that they have read, understood and adhered to the SMCR Policy including the standards of conduct expected of them.</p> |
| 2.10 | Training and Competence Policy | <p>This Policy prescribes the skills, knowledge and expertise which must be achieved and maintained by staff involved in Group investment activities.</p> <p>The following non-exhaustive topics of training are covered under this Policy:</p> <ul style="list-style-type: none"> • New Joiner Compliance Induction • Annual Anti-Money Laundering • Annual Bribery, Fraud, Corruption and Financial Crime Prevention • Annual Data Protection and Cyber Security • Annual Conduct Rules Training for Conduct Rule 'Senior Managers' • Annual Conduct Rules Training for Certification Regime and Conduct Rule 'Employees' • Annual CASS Training • Annual SMCR Training • Annual Modern Slavery Training |

| | | |
|------|--|---|
| 2.11 | Conflicts of Interest Policy | <p>This Policy defines conflicts of interest and captures the conflicts most likely to face the Group as well as the steps which are / can be taken to avoid, manage, mitigate, and where appropriate disclose conflicts.</p> <p>This Policy:</p> <ul style="list-style-type: none"> identifies existing or potential conflicts and describes how the Group addresses conflicts of interests arising in connection with its venture capital business; describes the procedures and controls on the activities of each Firm and its personnel that are designed to minimise the risks of conflicts and harm arising; ensures that all personnel engaged in business activities that may involve a conflict of interest entailing risk of damage to the interests of our clients, can carry on those activities with a reasonable level of independence; and details how the Group acts honestly, fairly and professionally in accordance with the best interests of its clients. |
| 2.12 | Market Abuse and Personal Account Dealing Policy | <p>The Market Abuse and Personal Account Dealing Policy documents the requirements imposed by the Group on staff share dealing (both in respect of group and non-group securities, listed and unlisted) to ensure that personal dealings and outside business interests are known, regulatory requirements are complied with, and risks relating to market abuse and conflicts of interest can be managed.</p> <p>The Group mandates that all personnel, and persons connected to them:</p> <ul style="list-style-type: none"> Comply with regulatory requirements as they relate to the prevention of market abuse; Conduct their financial affairs responsibly in order to demonstrate their continued suitability for the role they perform; Are mindful of the firm's reputation at all times when conducting their financial affairs; and Monitor and trade their personal portfolios, if at all, only in their spare time and to ensure that it does not interfere with their work. <p>All personnel are required to read and sign an acknowledgement & undertaking and return it to the Compliance Team. An attestation process takes place to confirm that personnel continue to observe this procedure at least once a year.</p> |
| 2.13 | Market Abuse Risk Assessment | <p>In accordance with the Market Abuse and Personal Account Dealing Policy, regular Market Abuse Risk Assessments are undertaken by the Group to ensure that the systems, controls and reporting mechanisms relating to insider information remain robust and suited to the environment in which the Group undertakes its business.</p> |
| 2.14 | Dawn Raid Policy | <p>This Policy applies at a Group level and documents the process that would be followed in the event of a dawn raid by a legal, regulator (including competition) or court authority at Molten Ventures plc's registered office of 20 Garrick Street, London, WC2E 9BT.</p> |

| | | |
|------|--|---|
| 2.15 | Gifts and Entertainment Policy | This Policy documents the circumstances where the gifting/ receipt of gifts, hospitality and entertainment may or may not be appropriate and prescribes where advanced approval must be obtained from the Compliance Team. |
| 2.16 | AIFMD Remuneration Policy | This Policy documents how the Group's full-scope Alternative Investment Fund Manager, Esprit Capital Partners LLP encourages alignment of the risks and that fixed and variable components of remuneration are paid in accordance with regulatory requirements. The Policy only applies to certain key senior individuals providing services to Esprit Capital Partners LLP. |
| 2.17 | Best Execution Policy | This Policy sets out the obligations of Best Execution principles incumbent upon the Group's regulated entities and confirms the non-applicability of these to the Group's core venture capital business |
| 2.18 | Product Governance Policy | This Policy sets out the Product Governance obligations required by the FCA and confirms the non-applicability of these to the Group's core venture capital business |
| 2.19 | Tax Evasion Policy | This Policy documents the steps taken by the Group to preventing the facilitation of financial crime, including tax evasion and the periodic risk assessments taken. |
| 2.20 | Complaints Handling Policy | This Policy outlines the Group's complaint handling policy and procedures in accordance with regulatory requirements and is issued in the event of a customer complaint. |
| 2.21 | Risk Policy and Risk Assessment | This Policy and Risk Assessment details the processes that are in place within the Group to manage the various risks faced by the business, including operational, credit, market, and liquidity risks. |
| 2.22 | Financial Promotion Checklist and Approval Process | This Checklist documents our internal review and 'four eyes' sign off process for all financial promotions issued, approved and communicated by the Group. |
| 2.23 | New Staff Compliance Attestation | New joiners are required to complete this Compliance Undertaking Attestation confirming that they have read and understood the Groupwide Policies and Procedures, including those in relation to PA Dealing, Inside Information, Conflicts, Bribery, Whistleblowing, and Inducements. |
| 2.24 | All-Personnel Biannual Attestation | Twice per year, all Group Personnel are required to complete a Compliance Undertaking Attestation which contains various statements and declarations to confirm that they have undertaken all mandatory training, that they have read and understood the Groupwide Policies and Procedures, including those in relation to PA Dealing, Inside Information, Conflicts, Bribery, Whistleblowing and Inducements. All personnel (including the Executive) also affirm any personal account deals, outside business interests and confidentiality agreements that have been disclosed or entered into during the foregoing six-month period. |
| 2.25 | Compliance Acknowledgment | All personnel (including the Executive) are asked to complete the Compliance Acknowledgement and Undertaking annually to confirm |

| | | |
|------|---|---|
| | ment and Undertaking | whether they hold any pertinent outside business interests which may conflict with the Group's activities. |
| 2.26 | Client Classification Register | This Register documents how each regulated entity within the Group categorises its clients for the purposes of the FCA Rules. |
| 2.27 | Conflicts of Interest Register | This Register outlines the conflicts facing the business and how the business avoids, manages, monitors, mitigates, and discloses conflicts of interest. |
| 2.28 | Personal Account Dealing Register | This Register records all personal account deals (in both listed and unlisted securities) undertaken by staff along with details of the proposed transaction and supporting paperwork (to the extent required). |
| 2.29 | Gifts, Hospitality & Inducements Register | This Register records all gifts, hospitality and entertainment given or received by staff and exceeding internal limits. |
| 2.30 | Training Registers | The Group maintains the following registers of training undertaken by all personnel including the Executives (save where indicated or implied): <ul style="list-style-type: none"> • New Joiner Compliance Induction • AML • Bribery Prevention • Cyber Security and Data Protection • Conduct Rules for Conduct Rule 'Senior Managers' • Conduct Rules for Conduct Rule 'Employees' • Annual CASS Training • Annual SMCR Training • Modern Slavery Training |
| 2.31 | Fitness & Propriety Register | This Register documents the annual fitness and propriety assessments required under SMCR, including details of the assessment process undertaken. |
| 2.32 | Staff Attestations Register | This Register records receipt of the compliance related attestations that all staff are required to complete every six months as a condition of employment. |
| 2.33 | Breaches Register | This Register records any rule breaches, the action taken and whether any remediation / corrective action is required. |
| 2.34 | Conduct Rule Breaches Register | This Register documents staff conduct rule breaches (to the extent they occur) under the SMCR. |
| 2.35 | Complaints Register | This Register records any customer complaints received by the Group. |

| | | |
|---------------------------|--------------------------------------|---|
| 2.36 | Service Providers Register | This Register details all service providers engaged by the Group, and the frequency of periodic reviews undertaken on each. |
| 2.37 | Outside Business Interests Register | This Register details all outside business interests (e.g., financial memberships, appointments, directorships etc.) held by personnel within the Group. |
| 2.38 | Client Disclosures Register | This Register documents client specific disclosures required in the event of a conflict of interest. |
| 2.39 | Quarterly Regulatory Monitoring Plan | External compliance advisors, IQEQ Compliance Services (UK) Limited are engaged to provide ad-hoc compliance reports and commission quarterly monitoring reports which opine on the Group's compliance with regulatory requirements. Copies of the monitoring reports, including any recommendations made are provided to the Board . |
| 3. HUMAN RESOURCES | | |
| 3.1 | Contracts of Employment | <p>The following standard terms are included in the contracts of employment of all personnel (including Executives):</p> <ul style="list-style-type: none"> • All minimum provisions required under Section 1 of the Employment Rights Act 1998 • Description of role and duties and application of SMCR (including references to the Conduct Rules) • Remuneration and any entitlement to short and long term incentives • Place of work, working hours and application of the Working Time Regulations 1998 • Holiday entitlement • Availability of training (and confirmation that mandatory training is applicable) • Sickness pay • Pension and benefits • Data Protection provisions including by reference to the Group's Privacy Notice(s) • Confirmation of Equal Opportunities, under which the Group confirms that it is fully committed to the active promotion of equal opportunities in its capacity as an employer and its provision of all its services to the community as a whole. • Application of IT Usage Policy • Confirmation that there are no collective agreements which directly affect the terms and conditions of your employment <p>The contracts of employment for senior staff (including the Executive) as well as members of the Investment Team additionally include details of the SMCR</p> |

| | | |
|-----|---|---|
| | | regime as it applies to senior managers and certification function holders (as applicable). |
| 3.2 | Whistleblowing Policy | <p>This Policy documents the Group's approach to whistleblowing and sets out the process which must be followed together with the protections afforded to whistle-blowers.</p> <p>The Whistleblowing Policy, amongst other things, confirms:</p> <ul style="list-style-type: none"> • The full structures in place to process whistleblower reports including different means of making a report, and the reporting lines for any person who wishes to blow the whistle, including to alternate contacts and the availability of an independent 24/7 reporting hotline • The Possibility for anonymous reporting and the confidential manner in which reports are treated • The strict non-retaliation policy adopted by the Group <p>The Whistleblowing Policy is proactively presented to all new joiners as part of their Compliance onboarding training delivered by a member of the Compliance Team and is readily available on the Group HR intranet. All personnel, including the Executive receive annual training on the topic of whistleblowing, and are required to attest twice per year that they have read, understood and adhered to the Whistleblowing Policy.</p> <p>The Policy confirms that training will be provided to all personnel as well as to the whistleblowing champion (and alternate contacts) on how to respond to whistleblowing disclosures.</p> <p>In accordance with the Whistleblowing Policy, internal monitoring has been consistently maintained and suitable reporting systems including metrics related to the number of enquiries, complaints, or issues received by the whistleblowing champion and wider reporting framework. Any disclosures made, including the number of reports received, the types of misconduct and the measures taken are reported to the Board annually.</p> <p>As the Group is located solely in the UK and Ireland, it is made available in English, being the only local language required.</p> |
| 3.3 | Diversity, Equality, Inclusion and Equal Opportunities Policy | <p>This Policy sets out the Group's commitment to ensure equal opportunities and the avoidance of discrimination at work.</p> <p>It applies to all employees, officers, partners, consultants, agency workers and any job applicants will receive equal treatment. And confirms that the Group embraces and encourages all employees' differences in age, colour, disability, ethnicity, family, marital or civil partner status, gender identity or expression, language, national origin, physical and mental ability, political affiliation, race, religion or belief, sex or sexual orientation, socio-economic status, veteran status, and other characteristics that make our employees unique, and applies to all aspects of employment with the Group, including recruitment, pay and conditions, training, appraisals, promotion, conduct at work, disciplinary and grievance procedures, and termination of employment.</p> <p>The Policy confirms that the Group will always adhere to the law not to discriminate directly or indirectly in recruitment, or employment because of age, disability, sex, gender reassignment, pregnancy, maternity, race (which includes colour, nationality and ethnic or national origins), sexual orientation, religion, or belief, or because someone is married or in a civil partnership. It further confirms that it will not discriminate because of any other irrelevant</p> |

| | | |
|-----|---|--|
| | | <p>factors and will build a culture that values meritocracy, openness, fairness, and transparency.</p> <p>The Policy confirms the prohibition of the following forms of discrimination:</p> <ul style="list-style-type: none"> • Direct discrimination where a person is treated less favourably than another because of a protected characteristic. • Indirect discrimination where a provision, criterion or practice is applied to everyone but that adversely affects people with a particular protected characteristic more than others and is not justified. • Harassment where there is unwanted conduct, related to one of the protected characteristics that has the purpose or effect of violating a person’s dignity; or creating an intimidating, hostile, degrading, humiliating or offensive environment. • Victimisation where an employee is subjected to a detriment, such as being denied a training opportunity or a promotion because they made or supported a complaint or raised a grievance under the Equality Act 2010, or because they are suspected of doing so. • Disability Discrimination including direct and indirect discrimination, any unjustified less favourable treatment because of the effects of a disability and failure to make reasonable adjustments to alleviate disadvantages caused by a disability <p>The Policy confirms that recruitment, promotion, and other selection exercises such as redundancy selection will be conducted on the basis of merit against objective criteria that avoid discrimination, and that any recruitment exercise carried out for the Group by external recruiters must be in accordance with the Group’s DEI Recruitment Policy (see below).</p> <p>Under the Policy individual training needs will be identified through regular appraisals and there is an obligation to ensure that all personnel will be given appropriate access to training to enable you to progress within the organisation and all promotion decisions will be made on the basis of merit.</p> <p>The Board has overall responsibility for the effective operation of this Policy including diversity initiatives undertaken by the Group and for ensuring compliance with discrimination law</p> <p>The Group is committed to providing training on equal opportunities not less than annually, including unconscious bias training and anti-harassment training.</p> |
| 3.4 | Diversity Equality and Inclusion Recruitment Policy | <p>This Policy sets out the Group’s requirements in instances where external recruiters are engaged and sets out various standards that must be observed in the search and engagement process, including:</p> <ul style="list-style-type: none"> • a ‘Blind’ recruitment policy whereby all candidate CV’s must be adjusted to minimise the impact that unconscious bias may have on the review and sifting process by the removal of personal information or other experience-related information, including age, title, first name, last name, preferred first name, employee number, gender indication, candidate email address, address details / location of residence, telephone numbers, nationality details, immigration details, education dates, names of universities, schools, colleges • a requirement for all candidates to be sourced fairly, objectively and without bias with no candidate being about health, disability or any other protected characteristic before a job offer is made |

| | | |
|-----|-----------------------------------|--|
| | | <ul style="list-style-type: none"> • a requirement that job advertisements include a short policy statement on equal opportunities • a requirement for job advertisements to avoid stereotyping or using wording that may discourage particular groups from applying and be advertised to a diverse section of the labour market <p>The Policy also sets out our target D&I recruitment metrics as follows:</p> <ul style="list-style-type: none"> • A wide pool of diverse candidates should be sourced wherever possible, targeting an initial pool of CV's that include as close as possible to a 50% representation of female candidates, and comprise at least 30% from a racial or ethnic minority background <p>The Policy contains the following statements:</p> <p>We believe that creating an environment which celebrates and encourages a diverse range of skills, perspectives and experiences will facilitate better and more effective insights, challenge, decision-making, and strategy development and we are fully committed to the active promotion of equal opportunities in our capacity as an employer and our provision of services to the community as a whole.</p> <p>We consider the promotion of diversity and inclusion, at all levels across the business, to be essential to attracting, developing and retaining the highest-calibre talent. It is therefore in the best interests of the Group, its shareholders and its stakeholders to ensure a broad range of human attributes, backgrounds, knowledge, gender, age, ethnicity, disability, sexual orientation, socio-economic status, education, experience, expertise and diversity of thought across the business.</p> |
| 3.5 | Anti-Harassment & Bullying Policy | <p>This Policy confirms the Group's commitment to providing a working environment free from harassment and bullying and ensuring all staff are treated, and treat others, with dignity and respect.</p> <p>The policy covers harassment or bullying which occurs at work and out of the workplace, such as on business trips or at work-related events or social functions. It covers bullying and harassment by staff (which may include consultants, contractors and agency workers) and by third parties such as customers, suppliers or visitors to our premises.</p> <p>The Policy defines 'Harassment' as any unwanted physical, verbal or non-verbal conduct that has the purpose or effect of violating a person's dignity or creating an intimidating, hostile, degrading, humiliating or offensive environment for them, and confirms that a single incident can amount to harassment.</p> <p>Bullying is defined as offensive, intimidating, malicious or insulting behaviour involving the misuse of power that can make a person feel vulnerable, upset, humiliated, undermined or threatened which can take the form of physical, verbal and non-verbal conduct.</p> <p>The Policy sets out the ways in which incidents of harassment or bullying can be reported, the steps that will be taken and the protection and support afforded to those involved.</p> |
| 3.6 | Anti-Corruption & Bribery Policy | <p>This Policy is in addition to the Group's Anti-Bribery and Financial Crime Policy and confirms that a zero-tolerance approach to bribery and corruption and are committed to acting professionally, fairly and with integrity in all our business dealings and relationship.</p> |

| | | |
|------|---------------------------------------|---|
| | | <p>The Policy defines 'Bribery' as financial or other inducement or reward for action which is illegal, unethical, a breach of trust or improper in any way. Bribes can take the form of money, gifts, loans, fees, hospitality, services, discounts, the award of a contract or any other advantage or benefit.</p> <p>The Policy sets out the ways in which any concerns can be reported, the steps that will be taken and the interaction with the Group's Whistleblowing Policy.</p> |
| 3.7 | Health and Safety Policy | <p>This Policy confirms the Group's commitment to protecting the health and safety of personnel and sets out the Group's arrangements for ensuring it meets all of its health and safety obligations to staff, and anyone visiting our premises or affected by the Group's work.</p> <p>The Policy sets out the responsibilities of all personnel in respect of safe working conditions (in all locations) as well as details relating to usage of equipment, accident response and first aid responders.</p> <p>The Policy also contains provisions relating to computers and display screen equipment as well as an entitlement for personnel to take workstation assessments and regular eye tests.</p> <p>Under the Policy, all new personnel are provided with a health and safety induction and provided with appropriate safety training, including manual handling. The Group also commits to providing all personnel with adequate training and supervision to perform their work competently and safely.</p> <p>As at the date of publication, the group has not introduced quantitative metrics, targets or implementation timeline has been adopted by the group concerning its operations or reduction efforts. This position is kept under review.</p> <p>During the 12 month period prior to the date of publication, no injuries, occupational diseases or work-related fatalities were reported.</p> |
| 3.8 | Disciplinary and Capability Procedure | <p>This Procedure sets out the ways that the Group seeks to ensure fairness and consistency when dealing with allegations of misconduct or poor performance where these cannot be resolved informally.</p> <p>The Procedure contains details of each step of a disciplinary or capability procedure including investigations; hearings (including the right to be accompanied by a trade union representative or a colleague); the potential actions that may be taken by the Group, including written warnings and dismissal; the right to appeal and process for doing so; and the specific provisions around gross misconduct.</p> |
| 3.9 | Grievance Policy and Procedure | <p>This Procedure sets out the process by which personnel a grievance can be raised and will be dealt with in circumstances where the underlying matter cannot be resolved informally.</p> <p>The Procedure sets out the means by which a grievance can be submitted together with the process by which a meeting is expected to be convened, the outcome of such meeting, as well as the appeals process.</p> |
| 3.10 | Maternity Policy | <p>This Policy outlines the rights and responsibilities of personnel who are pregnant or have recently given birth and sets out the arrangements for pregnancy-related sickness, health and safety, and maternity leave, including enhanced maternity pay for qualifying personnel.</p> |

| | | |
|------|---|---|
| | | The Policy details how holiday entitlement accrues during maternity leave as well as detailing access to 'keeping in touch' days and the process for returning to work at the end of maternity leave. |
| 3.11 | Paternity Policy | <p>This Policy outlines when an employee may be entitled to paternity leave and paternity pay and sets out the arrangements for qualifying personnel taking it.</p> <p>Qualifying personnel are entitled to enhanced paternity pay and confirms the ongoing entitlement to accrue holiday leave and receive pension contributions.</p> |
| 3.12 | Adoption Policy | <p>This Policy sets out the arrangements for adoption leave and pay for qualifying personnel who are adopting a child through an adoption agency. Qualifying personnel are entitled to enhanced adoption pay.</p> <p>The Policy details how holiday entitlement accrues during adoption leave as well as detailing access to 'keeping in touch' days and the process for returning to work at the end of adoption leave.</p> |
| 3.13 | Shared Parental Leave (birth) Policy | <p>This Policy outlines the arrangements for shared parental leave and pay in relation to the birth of a child.</p> <p>The Policy sets out how qualifying personnel are able to apply for shared parental leave as well as the mechanism for communicating this to the Group and to any other related employers. Details are provided of how to book shared parental leave dates and the rate of pay applicable, which is enhanced for personnel with sufficient length of continuous service with the Group.</p> <p>The Policy confirms the entitlement to keeping in touch days and the mechanism for returning to work.</p> |
| 3.14 | Shared Parental Leave (adoption) Policy | <p>This Policy outlines the arrangements for shared parental leave and pay in relation to the adoption of a child.</p> <p>The Policy sets out how qualifying personnel are able to apply for shared adoption leave as well as the mechanism for communicating this to the Group and to any other related employers. Details are provided of how to book shared parental leave dates and the rate of pay applicable, which is enhanced for personnel with sufficient length of continuous service with the Group.</p> <p>The Policy confirms the entitlement to keeping in touch days and the mechanism for returning to work.</p> |
| 3.15 | Parental leave Policy | <p>This Policy summarises the statutory right of employees with at least one year's continuous service to take up to 18 weeks' unpaid parental leave in respect of each child.</p> <p>The Policy details the entitlement of eligible personnel and the circumstances under which requests may be made as well as the notification requirements and the rights of the Group as it relates to accommodation of such requests.</p> |
| 3.16 | Time off for dependents Policy | This Policy provides all personnel with the right to take a reasonable amount of unpaid time off work to deal with unexpected events involving dependants, for example where a dependant falls ill or is injured or upon the death of a dependent. |

| | | |
|------|--|---|
| | | The Policy sets out what a reasonable time is expected to be, and the process for exercising the right to take time off. |
| 3.17 | Time off for antenatal appointments Policy | This Policy outlines the statutory right to take paid time off during working hours to attend antenatal appointments (including any relaxation or parenting classes that a doctor, midwife or health visitor has advised) for personnel who are pregnant or in a "qualifying relationship" with the pregnant person or the child. |
| 3.18 | Time off for adoption appointments Policy | This Policy outlines the way in which personnel may take paid time off during working hours to attend an adoption appointment once notified that a child is to be placed for adoption. |
| 3.19 | Sickness absence Policy | <p>This Policy sets out our arrangements for sick pay and for reporting and managing sickness absence.</p> <p>The Policy details the way in which leaves of absence due to sickness should be reported, the evidence required to be provided to the Group and the entitlement to sick pay.</p> <p>The Policy further details return-to-work interviews and the steps to be taken by personnel and the Group when managing long-term or persistent absence, including the steps to be taken where personnel are unable to return to work.</p> <p>The Policy confirms that enhanced sick pay is provided to all qualifying personnel.</p> |
| 3.20 | Compassionate leave Policy | <p>This Policy sets out the entitlement to take paid compassionate leave to help personnel to cope with the death of a close relative, deal with necessary arrangements and attend their funeral, together with the process for requesting such leave.</p> <p>The Policy confirms that compassionate leave may also be granted where a close relative is seriously or critically ill.</p> |
| 3.21 | Flexible working Policy | <p>This Policy sets out the right for qualifying personnel to request a change to their working pattern to vary working hours or days worked or to work from a different location.</p> <p>The Policy sets out the ways in which a request should be made and the process and timeframes for consideration of that request as well as the criteria that will be considered by management when a request is received.</p> |
| 3.22 | Holiday Policy | This Policy sets out our arrangements for staff wishing to take annual leave and applies to personnel within the Group. The Policy sets out the holiday entitlement for all personnel, the means by which holiday can be taken and the how the rules relating to short and long-term sickness interact with holidays. |
| 3.23 | Time off for public duties and charity volunteering Policy | <p>This Policy sets out the way that personnel may be granted paid or unpaid time off to perform public duties.</p> <p>The Policy confirms that the Group operates a scheme to permit all personnel to take up to five days in any 12-month period to volunteer for a charitable cause of their choosing.</p> <p>The Policy also confirms that basic pay is paid during periods of jury service.</p> |

| | | |
|---------------------------|--------------------------|--|
| 3.24 | Travel & Expenses Policy | <p>This Policy deals with claims for reimbursement of expenses, including travel, accommodation and hospitality properly incurred in accordance with this policy.</p> <p>The Policy sets out the way in which expenses are submitted and reimbursed and confirms that any attempt to claim expenses fraudulently or otherwise in breach of this policy may result in disciplinary action.</p> <p>The Policy cross-references the Group's Gifts and Entertainment Policy and sets out a list of non-reimbursable expenses.</p> |
| 3.25 | Smoking Policy | <p>This Policy sets out the Group's commitment to protecting the health and safety of all personnel by providing as safe place of work without exposure to smoke.</p> <p>The Policy confirms that smoking is not permitted anywhere in our workplace and applies to anything that can be smoked including cigarettes, e-cigarettes, pipes, cigars and herbal cigarettes.</p> <p>Smoking is only permitted outside in designated areas during breaks.</p> |
| 3.26 | Dress Code Policy | <p>The Code establishes a basic guidelines on the standard of clothing and appearance considered appropriate at our workplace, so that the Group:</p> <ul style="list-style-type: none"> • promotes a positive and professional image; • respects the needs of men and women from all cultures and religions; • makes any adjustments that may be needed because of disability; • takes account of health and safety requirements; and • helps staff and managers decide what clothing is appropriate to wear to work. |
| 4. DATA PROTECTION | | |
| 4.1 | Privacy Notice | <p>A copy of the Group's Privacy Notice can be found here: https://www.moltenventures.com/privacy-policy</p> <p>This Privacy Notice sets out what personal data is collected from visitors to the Group's website; recipients of marketing from the Group; and prospective investee companies.</p> <p>The Notice confirms who will have access to personal data, where data can be transferred, the security measures in place to protect data and the rights available to data subjects whose information is processed by the Group.</p> <p>The Notice also details the way in which complaints can be made to the Group's Privacy Manager.</p> |
| 4.2 | Privacy Standard | <p>This Standard sets out how the Group handles personal data of its own personnel as well as individuals from our investors, portfolio companies, prospects, suppliers, and other third parties.</p> <p>The Standard applies to all personal data processed by the Group regardless of the media on which that data is stored or whether it relates to past or present employees, workers, customers, clients or supplier contacts, shareholders, website users or any other data subject.</p> <p>The Standard sets out the requirements that must be observed by all personnel in the handling of personal data in alignment and accordance with</p> |

| | | |
|------|---|--|
| | | the data protection principles set out in applicable data privacy laws, including the UK Data Protection Act 2018, the EU GDPR and the UK GDPR. |
| 4.3 | Data Breach and Security Incident Management Policy | <p>This Policy details the internal breach identification and reporting process that the Group must follow (including consideration of processor reporting) and the steps needed to assess the nature of a breach and to determine whether it is reportable.</p> <p>The Policy confirms the circumstances when a breach notification may be made or is mandatory as well as the timeframes by which such notification must be made from the point of occurrence.</p> |
| 4.4 | Personal Data Risk Assessment Procedure | This Procedure sets out the steps that need to be followed when the Group is considering and assessing privacy risks to its business. |
| 4.5 | Data Protection Officer (DPO) Position Assessment | <p>This Assessment details the circumstances in which organisations are legally required to appoint a Data Protection Officer (DPO) responsible for overseeing data protection strategy and implementation to ensure compliance.</p> <p>The Assessment confirms that the role must report into the highest level of leadership and has certain minimum requirements. The Assessment will need to be deployed periodically by the Group to determine whether a DPO appointment must be made.</p> <p>As at the date of publication, the Group (and all data controller entities within it) have assessed that a DPO is not required. This position is kept under regular review.</p> |
| 4.6 | Data Protection Impact Assessment Procedure | This Procedure sets out the circumstances in which where a Data Protection Impact Assessment (DPIA) must be undertaken by the Group, including the criteria for determining whether a DPIA should be carried out; the timing in relation to any new project/process; and the methodology by which a DPIA should be conducted. |
| 4.7 | Data Portability Procedure | This Procedure sets out the measures to be deployed by the Group to allow for the prompt provision of data in machine readable format back to a data subject exercising their right to data portability to obtain and reuse personal data that they have provided to the Group for their own purpose across different services. |
| 4.8 | Internal Data Protection Audit Procedure | This Procedure sets out the Group's internal data protection audit process to self-assess and reduce risk of non-compliance with applicable data protection laws. |
| 4.9 | Transfers to Third Countries Procedure | This Procedure determines how data transfers can be made by the Group and whether the usage of a data transfer agreement is required for the envisaged processing of data. |
| 4.10 | Appointment of an EU Representative Policy | This Policy addresses the legal requirement for the appointment of a representative in the EU to deal with data protection supervisory authorities in the EU and to serve a function as a point of contact for data subjects who are based within the EU. |

| | | |
|------|---|---|
| | | The Policy notes that the Group has a wholly owned subsidiary company that is incorporated and subsists within the Republic of Ireland which is appointed as EU Representative of the non-EU aspects of the business. |
| 4.11 | Information Classification Procedure & Data Inventory | This Procedure and Register establishes information classification descriptions to be applied to information assets across the Group including 'confidential', 'privileged' and 'public'. |
| 4.12 | Legitimate Interests Assessment (LIA) Template | This Template Assessment functions to assist the Group to determine where its 'legitimate interests' can be relied upon as the lawful basis of processing activities |
| 4.13 | Personal Data Inventory | This Inventory records the categories of data subject and types of personal data being processed by the Group in the course of its ordinary business |
| 4.14 | Controller Register of Processing | This Register is maintained by the Group where it fulfils a data controller function and sets out the purposes of personal data processing, the categories of data subjects and categories of personal data, the categories of whom the personal data will be disclosed, a general description of the technical and organisational security measures and, where applicable, the transfers of personal data to a third country or an international organisation. |
| 4.15 | Processor Register of Processing | This Register sets out names and contact details of the processor and the controller on behalf of which a Group processor is acting; the controller's or processors representative (where applicable); and details of the Privacy Manager. |
| 4.16 | Subject Access Request Register | This Register records any requests have been made and the actions taken by the Group in accordance with its Subject Access Request Response Policy. |
| 4.17 | Internal Data Breach Register | This Register is maintained to include all breaches reported from a data processor to its controllers, as well as from controllers to individuals and authorities including details of remedial action taken by the Group. As at the date of publication, there have been no reported (or known reportable) data security breaches. |
| 4.18 | Intra-Group Data Processing (Controller to Processor) Agreement | This Agreement sets out the mechanisms by which the Group ensures the protection and lawful processing of personal data that that is processed by entities within the Group (as processor) for other Group entities (as controller). The Agreement applies to all entities within the Group structure and incorporates the EU standard contractual clauses for the transfer of personal data from the Community to third countries (controller to processor transfers) to the extent that this applies to any intra-group processing arrangements. |
| 4.19 | Intra-Group Data Transfer (Controller to | This Agreement sets out the mechanisms by which the Group ensures the protection and lawful processing of personal data that that is transferred |

| | | |
|---------------------------------|--|--|
| | Processor) Agreement | <p>between entities within the Group (as controller) to other Group entities (also as controller).</p> <p>The Agreement applies to all entities within the Group structure and incorporates the EU standard contractual clauses for the transfer of personal data from the Community to third countries (controller to controller transfers)</p> <p>Between to the extent that this applies to any intra-group transfer arrangements.</p> |
| 5. IT AND CYBER-SECURITY | | |
| 5.1 | IT and Communications systems Policy | <p>This overarching policy sets out the standards that must be observed when personnel use any Group IT or Communications systems. The Policy permits the circumstances in which usage may be monitored, and the action that will be taken if these standards are breached.</p> <p>Business resilience, including IT security, is a board level concern that is considered to be one of the principal risks to the business (see the Group's most recent annual report for more information in this regard). This Policy outlines employee responsibilities around data security and passwords, e-mail and internet usage as well as disciplinary action surrounding prohibited use of our systems.</p> <p>The Policy is consistent with, and adherent to, management's approach to identifying and addressing data security risks which are captured in this Policy as well as the generality of wider policies and procedures adopted by the Group</p> |
| 5.2 | Acceptable usage Policy (AUP) | <p>This Policy outlines the security and use of all Group information and IT equipment. It also includes the use of email, internet, voice, and mobile IT equipment.</p> <p>This Policy applies to all information (in any form) relating to the Group's business activities, and to all information handled by the Group relating to other organisations with whom it deals. It further covers all IT and information communications facilities operated by the Group or on its behalf.</p> <p>The Policy recognises the use of laptops and mobile devices off-site and details the controls that must be applied to working away from the office environment in order to protect the Group's data and equipment.</p> |
| 5.3 | Access Control and User Access Management Policy | <p>This Policy is intended to ensure that the Group has adequate controls to restrict access to its IT systems and data. The Policy details the maintenance of confidentiality and integrity of Group systems data through restricted access to such resources.</p> <p>The Policy confirms that only approved and authorised users or processes can access the Group's systems, based on the need to know and least privilege to carry out roles and responsibilities.</p> |
| 5.4 | Bring your own device Policy | <p>This Policy is intended to protect the security and integrity of the Group's data and technology infrastructure where personnel use their own devices to access Group IT networks.</p> <p>The Policy defines acceptable business use of own devices as activities that directly or indirectly support the business of the Group and provides the guidance of parameters for usage of devices whilst at work.</p> |

| | | |
|-----------|--|---|
| 5.5 | Social media Policy | <p>This Policy deals with the use of all forms of social media, including social networking sites, internet postings and blogs.</p> <p>The Policy is in place to minimise the risks to the Group through use of social media and ensure that all personnel are not utilising social media communications in a manner that could damage the Group's business interests or reputation.</p> <p>The Policy outlines guidelines for responsible use of social media, ensuring that statements made on social media platforms are respectful, professional and appropriate.</p> |
| 5.6 | Password Policy | <p>This Policy operates to ensure the protection of information system resources and protect unauthorised access to the Group's IT infrastructure, systems and assets.</p> <p>The Policy outlines the required password settings around complexity and suitable level of strength in order to minimise risk of IT assets becoming comprised.</p> |
| 5.7 | Back-up Restoration Policy | <p>This Policy operates to ensure that any 'revived' archived data is compliant and consistent with the Group's other policies, including its policies concerning the protection of personal data, retention and subject requests for erasure of personal data.</p> |
| 5.8 | CCTV Policy | <p>This Policy sets out the use of CCTV and other surveillance systems by the Group at its offices in order to help maintain a safe and secure environment for staff and visitors.</p> <p>The Policy outlines the purpose of CCTV usage to prevent crime, protect personal safety of staff and visitors and to assist in the effective resolution of disputes.</p> <p>The Policy confirms that images recorded by surveillance systems are personal data which must be processed in accordance with data protection laws and the Group's data protection policies.</p> |
| 6. | FINANCE | |
| 6.1 | Financial Policy and Procedures Manual | <p>This Manual describes the financial, governance and operating procedures adopted by the Group including the roles and responsibilities of the Board, the sub-committees of the Board and the Group's appointed service providers, in particular the Board's responsibility for oversight of the Group's affairs and of performance of these tasks for which the Board has delegated authority to the Executive and/or third party service providers.</p> |
| 6.2 | Valuation Policy | <p>This Policy documents the regulatory requirements imposed by AIFMD alongside the IPEV Guidelines and details the practical process adopted at a Groupwide level in connection with the valuation of investments. The Valuation Policy is the subject to independent scrutiny by the Group's auditors.</p> |
| 6.3 | Treasury Policy | <p>This Policy outlines the Group's approach to treasury activities in respect to funding, FX, and risks (including counterparty, interest rate, and other operational risks) and sets out the systems and controls to ensure that all such activities are conducted in accordance with all applicable laws and best practice.</p> |

| | | |
|--|---|--|
| 6.4 | Liquidity Policy | This Policy documents the liquidity requirements of the Group and its Alternative Investment Funds (AIFs) under management to ensure liquidity risks are monitored, managed and stress tested on a regular basis. |
| 6.5 | Leverage Policy | This Policy documents how Esprit Capital Partners LLP as a full-scope Alternative Investment Fund Manager monitors and manages leverage for Molten Ventures plc to the extent deployed. |
| 6.6 | Regulatory Capital Requirements Policy | Each of the regulated entities within the Group are subject to regulatory capital requirements at a prudential level and are required to make regular filings to the FCA confirming that each holds a surplus to its base regulatory capital requirement. This Policy sets out the procedure for monitoring and calculating monthly capital adequacy returns, quarterly returns to the FCA via its online RegData platform. |
| 6.7 | CASS Policy Handbook | <p>These policies and procedures (including a Resolution Pack) document how Esprit Capital Partners LLP (as the only entity within the Group which holds client money/ asset permissions) holds and protects the client assets it holds. It further details the reconciliations that must be undertaken by the Group and the frequency of such reconciliation.</p> <p>Each aspect of the CASS Policy Handbook is assigned a named owner to ensure the timely delivery of all of the Group's CASS obligations in accordance with the Client Money and Assets section of the FCA Handbook.</p> |
| 6.8 | Finance Department Risk Assessment | <p>This Assessment identifies and rates relevant financial risks, outlines mitigating factors already in place and the impact of these on the risk rating, as well as any further mitigating actions to be taken.</p> <p>The Assessment also assigns a banding to every identified risk which determines how it will be triaged and treated on an ongoing basis.</p> |
| 7. REPORTS, DISCLOSURES AND STANDARDS | | |
| 7.1 | Articles of Association | <p>The current Articles of Association for Molten Ventures plc dated 27 July 2021 can be located at: https://investors.moltenventures.com/investor-relations/plc/documents</p> <p>They are also freely accessible from the UK Companies House website here: https://find-and-update.company-information.service.gov.uk/company/09799594/filing-history</p> |
| 7.2 | Annual Report | The most recent Annual Report of Molten Ventures plc can be located at: https://investors.moltenventures.com/investor-relations/plc/reports |
| 7.3 | Interim Results | The most recent Interim Results of Molten Ventures plc can be located at: https://investors.moltenventures.com/investor-relations/plc/reports |
| 7.4 | Prospectus (July 2021) | The most recent Prospectus issued at the time of Molten Ventures plc's move up to the main market of the London Stock Exchange in July 2021 can be located at: https://investors.moltenventures.com/investor-relations/plc/documents : |
| 7.5 | Sustainability section of Annual Report | The Sustainability section of the latest Annual Report can be located at: https://investors.moltenventures.com/sustainability |

| | | |
|------|---|---|
| 7.6 | Key Information Document | The latest Key Information Document can be located at: https://investors.moltenventures.com/investor-relations/plc/documents |
| 7.7 | AIFMD Investor Information Disclosure | The latest AIFMD Investor Information Disclosure can be located at: https://investors.moltenventures.com/investor-relations/plc/documents |
| 7.8 | Sustainable Finance Disclosure Regulation (SFDR) Disclosure | The latest SFDR EU Sustainability Disclosure can be located at: https://investors.moltenventures.com/investor-relations/plc/documents |
| 7.9 | Group Governance Disclosures | The Group's Governance Disclosures can be located at: https://investors.moltenventures.com/investor-relations/plc/governance |
| 7.10 | UN PRI | The Group became a signatory to the United Nations Principles of Responsible Investment in 2019 and reports to the UN PRI Framework. Details relating to the Group can be found on the UN PRI website here: https://www.unpri.org/signatory-directory/molten-ventures-plc/4366.article |
| 7.11 | ISS | The Group reports to the ISS ESG QualityScore on an ongoing basis |
| 7.12 | Sustainalytics | The Group reports to the Sustainalytics' ESG Risk Rating and Low-Carbon Transition Rating questionnaires on an annual basis |
| 7.13 | Diversity VC | The Group has been awarded the Level 1 Diversity VC Standard |
| 7.14 | Investing in Women Code | The Group became a signatory to the Investing in Women Code in 2022 and will report annually. Details relating to the Code can be found here: https://www.british-business-bank.co.uk/investing-in-women-code/ |
| 7.15 | BVCA | The Group is a member of the British Private Equity & Venture Capital Association (BVCA) and holds a seat on the Venture Capital committee and Responsible Investment Advisory Group |
| 7.16 | CDP | The Group discloses information on its environmental impact to CDP through annual completion of their climate change questionnaire, beginning in 2022. Details relating to CDP can be found here: https://www.cdp.net/en |
| 7.17 | TCFD | The Group is a public supporter of the Task Force on Climate-Related Financial Disclosures (TCFD) and its recommendations. The Group's first TCFD Report is located in the Sustainability section of the Annual Report which is located at: https://investors.moltenventures.com/sustainability |