

TITLE: Internal Investigation Policy	REFERENCE #: IGV-LEG-POL-0120
DEPARTMENT: Legal & Compliance	APPROVAL DATE: 2/5/2024
CATEGORY: Compliance	EFFECTIVE DATE: 2/5/2024
APPROVER: Marc Bonora	NEXT REVIEW DATE: 2/5/2026

1.0 Purpose and Scope

This policy and standards apply to all Ingenovis Health, Inc. (“Ingenovis”) employees and its subsidiaries’ employees, Ingenovis affiliate employees, contractors, business associates, and third parties (staff members or ‘users’).

This policy ensures that all reported ethics or compliance concerns, or other inappropriate behavior are investigated thoroughly and timely, and without any form of retaliation against the reporter or anyone participating in an investigation.

2.0 Sanctions & Enforcement

Failure to comply with this policy and its associated standards may subject the Ingenovis User to disciplinary action consistent with the severity of the incident, which may include, but not limited to:

- Loss of access privileges to information resources
- Termination of employment or engagement
- Other actions as deemed appropriate by the joint determination of Legal & Compliance, Human Resources, Security, and/or the applicable leadership team.

For Users such as contractors, consultants, and vendors, failure to comply with this policy may subject the group to the dismissal of consultants and/or cancellation of contracts based on a joint determination of the business unit or department that contracted the vendor or consultant, Legal & Compliance, and/or Human Resources teams.

3.0 Policy

Policy Statement

The Company shall investigate all reported violations of the Company’s Code of Conduct, policies, applicable laws, rules and regulations, or any other allegations of inappropriate behavior, including any potential for whistleblower activity. The Company will ensure no retaliatory action is taken against an individual who, in good faith, is reporting or participating in an investigation. Investigations will be timely completed as appropriate.

When appropriate, investigations shall be completed under the direction of the Company's general counsel and/or designated counsel.

4.0 Standards

A. Review the reported allegation(s).

B. Determine individuals best suited to conduct the investigation.

1. HR issues such as harassment or discrimination allegations should generally be investigated by the Human Resource Department unless otherwise directed by counsel.
2. Issues likely to result in significant civil or criminal liability should include the assistance of legal counsel with attorney-client privilege asserted, if appropriate. These investigations may include whistleblower situations, high dollar overpayments, or systemic problems.

C. Prepare investigation plan.

1. Gather potentially relevant documentation surrounding the allegation. Ensure the information gathered is consistent with the scope of the investigation.
2. Identify individuals likely to have information, both inside and outside of the Company.
 - a. Interview witnesses.
 - i. All interviews should be conducted in private.
 - ii. To the extent practical, have an appropriate witness present to take notes and corroborate your understanding of the facts with that witness.
 - iii. Management should only be present when necessary or as directed.
 - iv. Employees should be encouraged to report if they have been threatened, intimidated, or asked to change their stories.

D. Evaluate the evidence.

1. Evaluation of the evidence should be objective, without influence, assumptions, opinions, or subjectivities.
2. Determine all facts about the reported allegation(s).
3. Determine root causes of the non-compliant activities.

4. Determine finding(s) based on the evidence and facts.

E. Implement corrective/remedial actions, as identified and appropriate.

1. Identify any action(s) needed to correct the identified issues.

2. Implement corrective actions to reduce or mitigate finding(s).

a. Employees and contractors responsible for any violations should be disciplined as appropriate.

b. Additional policies, procedures, training, retraining, or reporting layers should be added, as necessary.

5.0 Exceptions

Requests for exceptions to this policy must be submitted to and approved by the Chief Compliance Officer or designee.

6.0 Revision History

Revision #	Date	Reviewer	Description of Changes
1.0	07/27/23	Jeff Lynch	Draft of new policy
2.0	03/31/25	Marc Bonora	Reviewed and edited

7.0 Approval

Approver name	Marc Bonora
Approver title	General Counsel
Approver signature	<i>Marc Bonora</i>
Date	02/5/2025