

Whistleblower Policy

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Table of Contents

1. Introduction	3
1.1. Purpose.....	3
1.2. Scope.....	3
2. Making a Whistleblower Report.....	3
2.1. Identifying a Protected Disclosure	3
2.2. Making a Whistleblower Report.....	5
3. Whistleblower Protections	6
3.1. Confidentiality.....	6
3.2. Immunity	7
3.3. Anti-Detriment	7
3.4. Measures to Support Whistleblowers	7
4. Investigation of Whistleblowing.....	7
4.1. Acknowledgment.....	8
4.2. Investigation	8
4.3. Resolution	9
5. Treatment of other Individuals	9
5.1. Measures to Ensure Fair Treatment of Other Individuals.....	9
5.2. False and Vexatious Claims	10
6. Availability of Whistleblowing Policy	10
7. Record-Keeping	10
8. Reporting	10
9. Review	10

1. Introduction

1.1. Purpose

Christian Super Pty Ltd (the Trustee), in accordance with the entirety of its policy framework including the *Compliance Program*, endeavours to always conduct its business in a manner consistent with various legislative and regulatory obligations and the *Statement of Faith*. The Trustee recognises however that situations may arise where misconduct occurs and needs to be reported outside of the parameters of breach reporting protocols in the *Compliance Program*. The Trustee commits, in accordance with this policy, to provide the necessary mechanisms and protections for such misconduct to be reported.

The purposes of this document are to outline, consistent with the requirements of s1317A1 of the *Corporations Act 2001*, information about:

- How to make a whistleblower report, including to whom they may be made
- The protections available to whistleblowers, and how the Trustee will support whistleblowers and protect them from detriment;
- How the Trustee will investigate disclosures that qualify for protection;
- How the Trustee will ensure fair treatment of employees of the Trustee who are mentioned in the disclosures that qualify for protection;
- How the policy will be made available to all employees and directors of the Trustee; and
- Any other relevant matters, whether prescribed by legislation and regulation or otherwise.

1.2. Scope

This policy should only be utilised by an individual in the instance of serious breach of any legislation, regulation or Trustee policy where:

- The breach has already been reported in accordance with the *Compliance Program* but is not being adequately addressed in a reasonable manner and timeframe; or
- The individual deems the breach cannot be reported in accordance with the *Compliance Program* due to the nature of the misconduct.

Any whistleblower report should be made, and any whistleblower investigation should be conducted, with regard to the *Compliance Program* as well as:

- The *Fraud Risk Management Policy*, where alleged misconduct relates to fraud;
- The *Privacy Policy*, where alleged misconduct relates to a data or privacy breach; and
- The *Anti-Bullying and Harassment Policy*, where alleged misconduct relates to bullying or harassment.

2. Making a Whistleblower Report

2.1. Identifying a Protected Disclosure

A disclosure is only covered by the protections of this policy if all of the following conditions are met:

- **The discloser is an eligible whistleblower** (as defined by s2.1.1);
- **The disclosure relates to a disclosable matter** (as defined by s2.1.2); and
- **The disclosure is made to a prescribed recipient** (as defined by s2.1.3)

2.1.1. Eligible Whistleblower

The discloser is an eligible whistleblower if they are, or have at any point been:

- A director or employee of the Trustee;
- An individual, or employee of an organisation, supplying goods or services to the Trustee (including, but not limited to, a custodian or investment manager); or
- A relative or dependant of any of the aforementioned categories

2.1.2. Disclosable Matter

A disclosable matter is one when the discloser has reasonable grounds to suspect that the matter concerns either of the following in relation to the actions of the Trustee (or an employee or director of the Trustee):

- Misconduct, including fraud, negligence, breach of trust and breach of duty.
- An improper state of affairs or circumstances. This is not specifically defined by legislation or regulation, and the Trustee intentionally refrains from further defining this so as to avoid narrowing the scope of what may be a disclosable matter.

For clarity, a grievance in relation to a discloser's employment with the Trustee which affects the discloser personally but is not in and of itself misconduct affecting the Trustee as a whole, is not a disclosable matter. Without limiting its application, a personal work-related grievance may include an interpersonal conflict between the discloser and another employee, or a decision relating to the engagement transfer or promotion of the discloser except where that decision is affected by the disclosure in contravention of this policy. Disclosures that are not about 'disclosable matters' do not qualify for protection under the Corporations Act and are accordingly not covered by the protections or provisions of this policy.

2.1.3. Prescribed Recipient

A whistleblower report may be made to any of the following:

- An eligible recipient, being:
 - a director of the Trustee; or
 - a responsible officer of the Trustee (as defined by the *Responsible Officer Plan*, noting that this does not cover all employees or executives; or
- An internal auditor or external auditor of the Trustee;
- A legal practitioner; or
- ASIC, APRA or an otherwise prescribed Commonwealth authority.

2.2. Making a Whistleblower Report

2.2.1. Ensure this Policy Applies to the Report

An individual should ensure that the report they are intending to make is in relation to a matter to which the scope of this policy applies in accordance with s1.2, meaning that:

- The breach has already been reported in accordance with the *Compliance Program* but is not being adequately addressed in a reasonable manner and timeframe; or
- The individual deems the breach cannot be reported in accordance with the *Compliance Program* due to the nature of the misconduct.

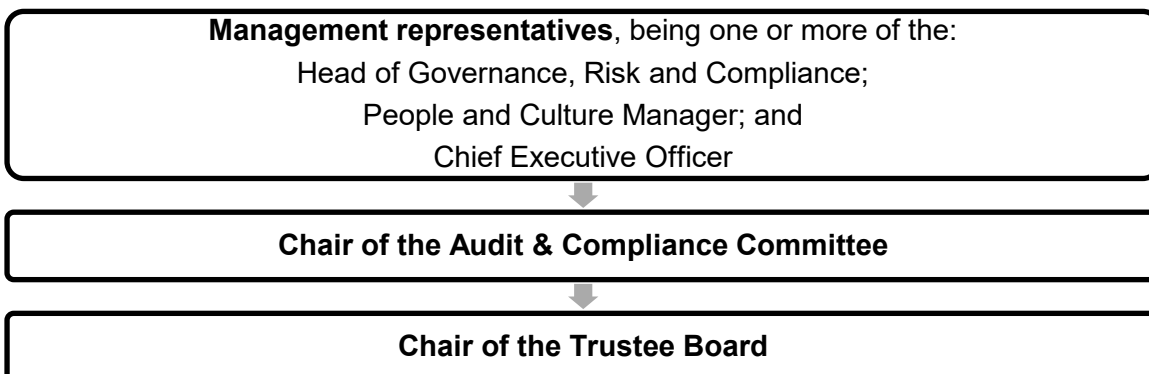
Where neither of these situations apply, the individual should first report the breach in accordance with the *Compliance Program*, and such a report would not be considered to be a whistleblower report for the purposes of this policy.

2.2.2. Report the Matter to a Prescribed Recipient

2.2.2.1. Directly to an Eligible Recipient

The Trustee believes that in most circumstances, a whistleblower report will be most effectively received, actioned and resolved if made directly to an eligible recipient, being an internal representative of the Trustee.

The following represents the typical stages in the escalation path for a whistleblower to consider in making a report.



Contact details for these eligible recipients can be found in Appendix A. Nothing in this escalation pathway is intended to prevent a whistleblower from:

- Reporting to another eligible recipient (as defined by s2.1.3) other than one listed above;
- Skipping a stage where the whistleblower feels uncomfortable or unable to report directly to that particular stage; or
- Escalating to a higher stage where the whistleblower does not feel that the person(s) to whom a report was made is not investigating the report in an appropriate and timely manner.

2.2.2.2. To the External Whistleblowing Service

If a whistleblower does not feel comfortable or able to report directly to an eligible recipient, the Trustee's external whistleblowing service may be utilised. Details of this service and how to lodge a report are included in Appendix A.

This external whistleblowing service can:

- Receive reports through a secure website or over the phone;
- Allow a whistleblower to remain anonymous;
- Assist a whistleblower in identifying the most appropriate eligible recipient(s) to make the report to;
- Provide the whistleblower report directly to the eligible recipient(s) if requested; and
- Assist the whistleblower with steps that could be taken if the report needs to instead be reported to a legal practitioner or regulator (in accordance with s2.2.2.3 below)

The external whistleblower service can also assist an eligible whistleblower in considering and determining whether they are able to and ought to make a whistleblower report.

2.2.2.3. To an Auditor, Legal Practitioner or Regulator

The Trustee recognises that there may be circumstances where the nature of the misconduct and/or the person(s) involved in the misconduct require the whistleblower report to be made directly to the Trustee's external or internal auditor, a legal practitioner or a regulator, and the protections of this policy apply wholly to such circumstances. As outlined in s2.2.2.2, the Trustee's external whistleblower service (without being able to make such a report) can assist a whistleblower in identifying how to go about making such a report.

3. Whistleblower Protections

The protections and measures outlined in this section only relate to eligible whistleblowers in accordance with s2.1.1. An eligible whistleblower should immediately report in accordance with s2.2.2 if they believe that any of these protections are not being upheld in relation to a whistleblower report that they lodged. An eligible whistleblower may be entitled to the legal remedies and compensation if any of these protections are contravened by the Trustee.

3.1. Confidentiality

It is an offence for the Trustee, or any officer, director or employee of the Trustee, to disclose the identity of a whistleblower, except where such a disclosure is made to ASIC, APRA, a member of the police or a legal practitioner. This includes making available information from which the identity of a whistleblower might reasonably be established. The Trustee will take reasonable steps to have appropriate information technology resources to secure information received as part of this policy in accordance with the *IT and Data Security Framework*, and will ensure that any external whistleblowing service similarly retains appropriate information security protocols.

An exception to this confidentiality protection applies where:

- The disclosure is of information from which the identity of the whistleblower might reasonably be established, but not direct disclosure of the identity;
- The disclosure is reasonably necessary for investigating the matter to which the report relates (in accordance with s4 of this policy); and
- All reasonable steps have been taken to reduce the risk that the whistleblower will be identified as a result of the disclosure. The Trustee recognises that the size of the organisation and the need to appropriately investigate a matter increases the

risk that a whistleblower can be identified from the information disclosed and will take all such reasonable steps to reduce this risk.

3.2. Immunity

A whistleblower is protected from any civil, criminal or administrative liability for making a whistleblower report. For clarity, this protection applies even where a contract entered into by the whistleblower would otherwise prevent them from making such a report.

3.3. Anti-Detriment

It is an offence for the Trustee, or any officer, director or employee of the Trustee, to cause or threaten detriment to a whistleblower because of the disclosure, whether express or implied. Such detriment may include, but is not limited to:

- Dismissal or alteration of position/duties
- Harassment, intimidation, harm or injury
- Damage to property, reputation, business position or financial position

3.4. Measures to Support Whistleblowers

The Trustee commits to upholding the aforementioned whistleblower protections by:

- Maintaining a clear compliance hierarchy of reporting (in accordance with s2.2.2.1), such that a whistleblower may bypass and escalate up that hierarchy if necessary to do so.
- Maintaining an external whistleblowing service.
- The clear articulation of the rights of whistleblowers under this policy to make disclosures directly to ASIC, APRA or a legal practitioner.
- Conducting all investigations in relation to a whistleblower report in accordance with s4 of this policy.
- Conducting annual training for all employees and directors on compliance and culture matters to ensure all are aware of the Trustee's whistleblower obligations.
- Providing access to an employee assistance program (EAP) whereby eligible whistleblowers who are also employees or directors may obtain access to counselling and support services.

4. Investigation of Whistleblowing

Where an eligible whistleblower makes a disclosure in accordance with s2 of this policy, the Trustee commits to investigating the disclosure in whatever manner it deems fit, such that it:

- Upholds the whistleblower protections outlined in s3;
- Ensures fair treatment of individuals mentioned in a disclosure as outlined in s5; and
- Identifies and addresses the misconduct to which the disclosure relates.

Such an investigation will be conducted in accordance with the following process. It should be noted that this investigation process will only be followed where the whistleblower report is lodged with an eligible recipient under s2.2.2.1 or through the external whistleblowing service under s2.2.2.2. Where a report is lodged with an auditor, legal practitioner or

regulator, the Trustee will take all reasonable steps to cooperate with the investigation, but the process by which the investigation will be conducted is the responsibility of the party to whom the report was lodged.

4.1. Acknowledgment

In the first instance, the eligible recipient(s) will acknowledge the receipt of the whistleblower report to the whistleblower. This acknowledgment will ordinarily also:

- Re-iterate the protections applying to the whistleblower in accordance with this policy.
- Requesting consent from the whistleblower to disclose their identity to specified parties in order to conduct the investigation. For clarity:
 - The number of specified parties will be as limited as possible, will not include any individual directly implicated in the whistleblower report, and will typically be limited to the eligible recipients stated in s2.2.2.1;
 - The whistleblower has the right to withhold such consent from some or all of the specified parties; and
 - Disclosure to any parties except as consented to by the whistleblower would constitute a contravention of the confidentiality requirements in s3.1 of this policy
- Outlining the process by which the investigation will take place.
- Agreeing with the whistleblower how they would like to receive updates and provide further information (if required) in relation to the investigation, whether direct from the eligible recipient(s) or through the external whistleblowing service (where the report was lodged through that service).
- Identifying a date by which the eligible recipient(s) will respond to the whistleblower with an update on the investigation.

The Trustee will make all reasonable attempts to acknowledge a whistleblower report where the whistleblower has remained anonymous but recognises that it may not be possible depending on the forum through which the report is made.

4.2. Investigation

The eligible recipient(s) will be responsible for conducting an investigation of the whistleblower report lodged and an assessment of the matters raised in it. Subject to the confidentiality requirements in s3.1 and/or receipt of the necessary consent in s4.1, it is the default position of the Trustee for the People and Culture Manager to run the investigation process. The Trustee may also give consideration to appointing an external party to conduct a specific investigation if it is considered necessary to meet the obligations of this policy.

The investigation process will ordinarily include:

- An assessment as to whether the report constitutes a whistleblower report for the purposes of this policy.
- Discussion with relevant individuals to collect information necessary for the investigation, subject to the confidentiality requirements.

- An assessment as to whether the matters raised in the whistleblower report are substantiated, including whether the matters are supported by evidence and whether the matters relate primarily to fact or opinion.
- Consideration of any matters that are not explicitly raised by the whistleblower report but are known to the eligible recipient(s), whether through the investigation or otherwise, which are reasonable linked to the matters raised.

4.3. Resolution

The eligible recipient(s) will be responsible for resolving the matter at the conclusion of the investigation. This resolution will ordinarily include:

- Notification to the Audit and Compliance Committee and the Board that the investigation has been completed in accordance with the requirements of this policy, noting that the extent to which the details can be disclosed are subject to the confidentiality requirements of s3.1.
- A written investigation report outlining:
 - The nature and matters raised in the initial whistleblower report;
 - The steps taken in relation to the investigation; and
 - Details of how all substantiated matters raised in the report have been addressed, or of the plan implemented to address them;
- A response to the whistleblower confirming the resolution of the matter to the extent that is deemed appropriate;
- A determination as to whether the report and/or the matters raised within need to be reported to a regulator, with specific consideration to lodgement with APRA and ASIC

The Trustee recognises that each individual whistleblower report and the investigation and resolution processes associated with each report will result in different timeframes. While this will vary on a case by case basis, the Trustee will take all reasonable steps to complete and resolve an investigation as soon as practicable.

5. Treatment of other Individuals

5.1. Measures to Ensure Fair Treatment of Other Individuals

The Trustee recognises that whistleblower reports will typically implicate one or more persons. Subject to the protections afforded to whistleblowers under this policy (which must by law be given priority), the Trustee will ensure fair treatment of individuals implicated in a whistleblower report. This is upheld by:

- Taking reasonable steps to ensure that disclosures are handled confidentially to the extent that is practical and appropriate in the circumstances;
- Ensuring that any investigation process conducted is objective and fair;
- Providing employees or directors who are implicated in a report the opportunity to respond to the matters raised to the extent that is appropriate;
- Imposing disciplinary action in relation to false and vexatious claims;

- Providing employees or directors with access to the EAP whereby they may obtain access to counselling and support services.

5.2. False and Vexatious Claims

False and vexatious claims can seriously and unnecessarily cause damage to individuals implicated in such claims. On investigation, whistleblowers may be subject to disciplinary action and will not be covered by the whistleblower protections of this policy where the results of an investigation show the report to be false and vexatious. Where some (but not all) matters raised in a whistleblower report are shown to be false and vexatious, the whistleblower protections will continue to apply to any matters raised which are not false and vexatious.

6. Availability of Whistleblowing Policy

This policy is to be available to all employees and directors at all time, and all shall receive training on its content on induction and annually thereafter. The policy must also be made available upon request to any other individual who may reasonably be an eligible whistleblower under s2.1.1. A summary of this policy is to be made available on Christian Super's external website.

7. Record-Keeping

Appropriate records and documentation will be kept of any whistleblower report and related investigations. These records will be obtained and stored in a manner that upholds the confidentiality requirements of this policy, and will be maintained by the People and Culture Manager.

8. Reporting

The Audit and Compliance Committee will receive quarterly reporting on any received whistleblower reports, noting that such reporting must adhere to the requirements of this policy, including measures to protect confidentiality.

9. Review

This policy shall be reviewed by the Audit and Compliance Committee on an annual basis. This review should specifically have regard to the effectiveness of the policy in enabling whistleblower reports and identifying any issues which might otherwise prevent or discourage the ability for whistleblower reports to be made. This policy shall also be reviewed on an ad hoc basis following the investigation of a whistleblower report where such an investigation identifies that such a review may be required.