Questionnaire

The purpose of this Questionnaire is

- To receive from Business Partner information that will enable JSC "R-Pharm" to properly
 discharge its obligations under the Anti-corruption compliance policy of JSC "R-Pharm;"
- To provide an opportunity for the Business Partner to accept confidential information notification elaborated by JSC "R-Pharm" with the object of showing how this collected personal data will be used.

Please, note that all the clauses of the Questionnaire are obligatory for filling in, when appropriate, please, specify "Not applicable."

For the purpose of this Questionnaire "Government or Public Official" means any of the following:

- any government official or officer (including appointed individual or current candidate for) or employee of any other public structure, public institution or government-owned company;
- any individual acting on behalf of the government, public institution or other public agency;
- any current official or officer working in a company fully or partly owned by the government;
- any international civil servant or other person of public international (interstate or intergovernmental) organization (i.e. IMF, UN) which authorized by the organization to act on its behalf;
- current political party servant or official or employee acting on behalf of a political party;
 or/ and
- current candidate for the position of the political party official.

Business Partner Questionnaire To be completed by the Business Partner

I. Basic Information				
Company Legal Name (Fu	all Name for Individuals):	:		
Company Legal Address:				
Postal Code				
	· ·			
Street building number				
_	•			
Phone				
Company actual address (i	if different):			
Postal Code				
Country	- Control of the Cont			
·				
Phone				
Web-site				
and the second s	eka karata - jarapeka kasa disebuah sa sa sengajaran karata kana sa sa kepada sa			
II. Primary Contact Inf Contact Name:				
Contact Title:	E-Mail			
Telephone: Office	Mobile	Fax		
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	tion about Company Company (Examples: Limited Liabil	lity Company, Open Joint-Stock		
Company, Joint-Stock Company, Individual Entrepreneur etc.):				
Date of Incorporation:	Country of Inco	orporation:		
Registration Number (for	example, Primary State Registration	Number (OGRN)/ Primary State		
Registration Number of the	e Individual Entrepreneur (OGRNII	P) in the Russian Federation):		

OGRN/OGRNIP:			
Taxpayer Identification Number			
(TIN):			
2. Dos	es this company do business under any other name?		
☐ Yes			
□ No			
If yes, plea	se provide the following information:		
Company I	Legal Name (Full Name for Individu-		
als):			
Legal Add	ress:		
	arate sheet of paper, if necessary)	····	
	any Branches, Subsidiaries, Joint Venture Companies, Partnerships and other	r	
1	zations, in which the Company owns the controlling stake.		
Full Legal	Name:		
	-		
Legal Add	ress:		
Relationsh	Relationship to the Company (branch, subsidiary, partnership, other):		
(use a sepa	arate sheet of paper, if necessary)		
4. The ex	pected nature of cooperation with JSC "R-Pharm":		
	Public procurement tenders		
	Trading activities (import, export, wholesale, retail, etc.)		
	Representation of interests / counselling		
	Sales activities on behalf of JSC "R-Pharm" name (middleman, sales agent, etc.)		
	Professional / pre-clinical and / or clinical research		
	Other (specify):		
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Please provide the list of Key personnel of the company (founders, shareholder	s, official a	hđ
senior managers, chief accountant, Board members, other) (use a separate she	et of paper,	if

necessary)

Person's Full Name	Person's Position in the Company	Comments (if any)	THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN THE PERSON NAMED IN THE PERSON NAMED IN THE PERSON

If necessary, please, enclose an extract from the register of shareholders or a link to this register.

5.1 Are there any Government or Public Officials⁶ among the key personnel of the Company?

YES/NO

If NO proceed to clause 8. If YES, please, specify full name, position and give detailed explanation why this employee is considered a Government or Public Official.

Person's Full Name	Status/position in the Company	Information in the context position / status of the Government or Public Of- ficial
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⁶ The definition of the term "Government or Public Official" is given on the first sheet of the Questionnaire.

6.	. Does the key personnel specified in clause 5 and the persons specified in clause 5.1 have		
	the power to make decisions or otherwise influence JSC "R-Pharm" activity in virtue of		
	their power of the Government or Public Official in relation of the following:		
	☐ State regulation of prices for the medicines from the list of vital and essential medi-		
	cines, including the range of products of JSC "R-Pharm."		
,	☐ Inclusion of JSC "R-Pharm" products into the official lists, and / or standards of treatment		
	☐ Purchase of JSC "R-Pharm" products for companies, institutions, agencies and inter-		
	national organizations, etc. (ex., the World Health Organization)		
	☐ Approval, issuance of registration of permits, licenses or other authorization docu-		
	ments for JSC "R-Pharm" products		
	Other types of registration, authorization or approval relating to JSC "R-Pharm" commercial interests		
	☐ Other (please, specify)		
	□ None of the above		
	If yes, please, specify the name of the key employee (if applicable)		
7.	Business Size		
	Please provide the information about Company's annual sales for the last 3 years (including		
	currency)		
8.	Measures for the corruption prevention		
	Which preventive measures according to the Art. 13.3 of the Federal Law No. 273 "on		
	Counteracting Corruption" exist in your Company?		
	☐ Department or Officer (Name),		
	responsible for the corruption prevention and other offenses;		
	☐ Standards and procedures designed to ensure fair work of your Company		
	☐ Code of Ethics and Conduct		
	☐ Standards and procedures designed to prevent and to resolve conflicts of interests		
	☐ Standards and procedures designed to prevent unofficial bookkeeping and using of		
İ	forged documents		
	Please attach copies of relevant standards and procedures (if applicable)		

 Fereign-economic active a) Please provide the li 	vity st of Countries where your Comp	any has business:
	ist of Countries where your Coment from paragraph a)	pany is planning to work with JSC
		sudget, and there is no liquidation,
□ Yes		
☐ No If no, please, specify		
IV. References		
Please provide the names of	f two (2) business associates whic	ch JSC "R-Pharm" may contact as a
reference:		
Reference #1		
Reference Company Legal 1	Name:	
Reference Company Legal	Address:	
Postal Code	<u> </u>	
Country		
State, city		
Street, building, number		
Phone		
Web-site	· · · · · · · · · · · · · · · · · · ·	
	Mobile	
Reference #2		
Reference Company Legal	Name:	
Reference Company Legal		
Postal Code	·	1
Country		

State, city		
Street, building, mumber		
Phone	·	
White sites	- 1, - , , - , - ,	
Contact Name:	•	
	E-Mail	
Telephone: Office	Mobile	Fax
V. Subcontracting		
Are you going to hire contracto	ns/subcontractors to perform	work for CJSC "R-Pharm"?
Yes (fill in items 1-7)	-	
1. Will contractor/subcon	tractor interact with health o	care professionals or Government or
Public Official s on bel	ralf of JSC "R-Pharm"?	
☐ Yes ☐ No		
If yes, please, give details:		
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VI. Penalties, investigation	ns, suspensions or disqualifi	cations
1. Were any of the key po	ersonnel (clause 5) of your C	ompany involved in any criminal in-
vestigation or any of the	he key personnel (clause 5)	deprived of rights and/ or temporary
		y laundering, fraud or other offenc-
es/crimes within the pa	st five years?	
☐ Yes ☐ No		
If yes, please, specify:		
same in the same of the same o	milita jaman sa antan sa	
	usiness Partner/ affiliates in	
	iliates participate in court pro	ceedings within the past three years?
☐ Yes ☐ No		
		a separate sheet of paper with the list
of current court proceeding	(5):	
		

VIII. Observance of the JSC "R-Pharm" Compliance Policy
Do you agree to conclude a supply contract with JSC "R-Pharm" in accordance with th
established form (Appendices to the Commercial Policy), which includes the following pre-
visions on combuting corruption?
1. Requirements ensuring the observance of the U.S. Foreign Corrupt Practices Act, the U
Bribery Act and other applicable anti-corruption laws by the Business Partner.7
☐ Yes ☐ No
If no, please, specify:

2. Right of JSC "R-Pharm" to unilaterally withdraw from the contract due to the Busines
Partner's violation of the anti-corruption law including requirements ensuring that Corr
pany observes the U.S. Foreign Corrupt Practices Act, the UK Bribery Act.
☐ Yes ☐ No
If no, please, specify:
3. Right of JSC "R-Pharm" to audit documents related to Business Partner's activities
the framework of cooperation with JSC "R-Pharm."
☐ Yes ☐ No
If no, please, specify:
4. Obligation for employees involved in cooperation with JSC "R-Pharm" to be trained by
JSC "R-Pharm" as to anti-corruption measures.9
☐ Yes ☐ No
If no, please, specify:

⁷ Since JSC "R-Pharm" is an international company and also operates in the USA, it falls under the FCPA (the US Foreign Corrupt Practices Act) and the UK Bribery Act, which have extraterritorial effect. In addition, JSC "R-Pharm" cooperates with a number of the world's largest companies that conduct their business in strict compliance with this legislation, which requires strict observance of its provisions not only by JSC "R-Pharm," but also by all its business partners. Thus, companies subject to this legislation must not create a risk of non-compliance with its requirements.

The audit is the audit of operations, systems, procedures, accounting and other documents of the Business Partner to the extent that this relates to the fulfilment of the obligations of the Business Partner under the Contract with JSC "R-Pharm". Please, note that the right of JSC "R-Pharm" to conduct an audit is stipulated in the approved form of the contract, which can be found at http://www.r-pharm.com/ru/, "Commercial Policy" tab.

⁹ Free extra-mural training is conducted for the managers and key personnel of the organization in the form of sending training materials for self-study followed by the list of persons who have read the materials.

IX. Business Partner's consent

I bereby certify:

- That I am a duly authorized representative of the Company named below (Potential Business Partner or Business Partner);
- That the information I have provided is true and complete to the best of my knowledge on the date of Questionnaire delivery to JSC "R-Pharm;

In connection with Potential Business Partner or Business Partner potential cooperation with JSC "R-Phann", no officer, director, owner, employee, agent or representative of the Company ("Representatives") has given or will give or attempt to give anything of value to a Government or Public Official, political party or candidate for political office, or any other individual or entity, directly or indirectly for the purpose of obtaining or retaining any business or gaining any improper advantage. Potential Business Partner or Business Partner hereby confirms that he received the Code of Business Ethics and the Anti-corruption Compliance Policy of JSC "R-Phann," read them and had its Representatives read them and that it and its Representatives will follow the Code of Business Ethics and the Anti-corruption Compliance Policy of JSC "R-Phann."

oisname	Date	
Typed or Prin	ted Name	
Title	***************************************	
Company Nan	me	<u></u>