

Board Nomination Forms

For the Term (2022-2025)

REEF HOLDING CO. B.S.C. (c)

Nominee Name:	
Date:	
Signature:	

REEF HOLDING CO. B.S.C.**Board Nomination Declaration Forms**

For the Term (2022-2025)

1. NOMINEE DETAILS & PROFILE

SECTION A: NOMINEE DETAILS			
Nominee Name:			
ID Card No.:		ID Card Expiry Date:	
Passport No.:		Passport Expiry Date:	
Residential Address:			
Office Address:			
Preferred Mailing Address:	<input type="checkbox"/> Residential Address	<input type="checkbox"/> Office Address	
Mobile No.:			
Email Address:			
Contact Details:	Telephone (Mobile 1):	Telephone (Mobile 2):	
	Telephone (Landline):	Fax:	
	Email:		

Director Initials: _____

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SECTION B: NOMINEE PROFILE	
Qualifications:	
Experience:	
Current Board Memberships:	
Current Positions in other key regulatory, government or commercial entities	

Director Initials: _____

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2. DECLARATION OF INTERESTS

SECTION A: CURRENT DIRECTORSHIPS			
Do you hold directorships in any entity other than the Company? <i>If "YES", please specify details below.</i>		YES <input type="checkbox"/>	NO <input type="checkbox"/>
NAME OF ENTITY	POSITION	DATE OF APPOINTMENT	

SECTION B: SHAREHOLDING IN OTHER ENTITIES			
Do you own shares of 5% or more in an entity other than the Company? <i>If "YES", please specify details below.</i>		YES <input type="checkbox"/>	NO <input type="checkbox"/>
NAME OF ENTITY	SHAREHOLDING %	DATE OF OWNERSHIP	

SECTION C: CURRENT MANAGERIAL POSITIONS			
Do you hold key managerial positions or a management power of attorney in any entity other than the Company? <i>If "YES", please specify details below.</i>		YES <input type="checkbox"/>	NO <input type="checkbox"/>
NAME OF ENTITY	POSITION	DATE OF APPOINTMENT	

Director Initials: _____

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SECTION D: OTHER DIRECT/INDIRECT INTERESTS					
Are you involved in any other business or have a relationship which may give rise to a direct/indirect conflict of interest with your position in the Company? <i>If "YES", please specify details below.</i>			<table border="1"> <tr> <td>YES <input type="checkbox"/></td> <td>NO <input type="checkbox"/></td> </tr> </table>	YES <input type="checkbox"/>	NO <input type="checkbox"/>
YES <input type="checkbox"/>	NO <input type="checkbox"/>				
NAME OF ENTITY /PERSON	TYPE OF RELATIONSHIP		DATE OF CONFLICT		
NATURE OF CONFLICT	<input type="checkbox"/> Actual	<input type="checkbox"/> Perceived	<input type="checkbox"/> Potential <input type="checkbox"/> No Conflict		
NATURE OF CONFLICT	<input type="checkbox"/> Actual	<input type="checkbox"/> Perceived	<input type="checkbox"/> Potential <input type="checkbox"/> No Conflict		
NATURE OF CONFLICT	<input type="checkbox"/> Actual	<input type="checkbox"/> Perceived	<input type="checkbox"/> Potential <input type="checkbox"/> No Conflict		

SECTION E: TRANSACTIONS WITH THE COMPANY					
Did you engage in or carry out any material transactions with the Company during the declaration year? <i>If "YES", please specify details below.</i>			<table border="1"> <tr> <td>YES <input type="checkbox"/></td> <td>NO <input type="checkbox"/></td> </tr> </table>	YES <input type="checkbox"/>	NO <input type="checkbox"/>
YES <input type="checkbox"/>	NO <input type="checkbox"/>				
TRANSACTION DATE	TRANSACTION DETAILS	AMOUNT	STATUS <i>(completed/ongoing)</i>		
NATURE OF CONFLICT	<input type="checkbox"/> Actual	<input type="checkbox"/> Perceived	<input type="checkbox"/> Potential		
NATURE OF CONFLICT	<input type="checkbox"/> Actual	<input type="checkbox"/> Perceived	<input type="checkbox"/> Potential		
NATURE OF CONFLICT	<input type="checkbox"/> Actual	<input type="checkbox"/> Perceived	<input type="checkbox"/> Potential		

SECTION F: NOMINEE STATEMENT
<ol style="list-style-type: none"> I, the undersigned, hereby declare that all particulars and information given in this Declaration Form are true, correct, complete and up to date in all respects and I have not withheld any information. I undertake to advise the Company in writing about any change that may occur to such particulars and/or information immediately via submission of an amendment to this Declaration Form. I agree to comply with any conditions or restrictions imposed by the Company to manage, mitigate or eliminate any actual, potential or perceived conflict of interest and/or any commitment. I further consent to the Company processing the personal data provided herein for the purpose of compliance with the relevant laws and regulations, including but not limited to, those of Ministry of Industry, Commerce and Tourism, and discharging my obligations.

Director Initials: _____

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4. INDEPENDENCE DECLARATION

SECTION A: GUIDANCE AND DEFINITION OF INDEPENDENT DIRECTOR

General Guidance:

"Independent Director" means a director whom the Board has specifically determined has no material relationship which could affect his/her independence of judgement, taking into account all known facts. The Board should consider that, although a particular director meets the formal requirements, he/she may not be independent owing to specific circumstances of the person or the Company, ownership structure of the Company, or for any other reason. The Board's determination should be a good faith finding after diligent review and full discussion.

"Independent Director" means a director of the Company who, or whose family shareholders either separately or together with him/her or each other, does not have any material pecuniary relationships or transactions with the Company (not counting director's remuneration for this purpose), and in particular who, meet all the conditions below.

Note:

- a. Where the term "family" or "family member or related persons" is used reference is made to: spouse, father, mother, son(s) or daughter(s); and
- b. Where the term "associate" is used reference is made to:
 - i. Spouse, father, mother, son(s) or daughter(s); or
 - ii. A person who is an employee or partner of the Director or of the firm represented or owned by the Director.

Ref.	SECTION B: INDEPENDENCE STATUS	YES	NO
1.	During the preceding year, were you an employee of the Company? <i>If YES, please provide details:</i>	<input type="checkbox"/>	<input type="checkbox"/>
2.	During the preceding year, did you own directly or indirectly (including for this purpose ownership by any family member or related person) 5% or more of the shares of any type or class of the Company? <i>If YES, please provide details:</i>	<input type="checkbox"/>	<input type="checkbox"/>
3.	Do you hold 10% or more of the shares in the parent company or one of the Company's subsidiaries or associates? <i>If YES, please provide name of entity:</i>	<input type="checkbox"/>	<input type="checkbox"/>
4.	Are you the representative of a legal person who holds 10% or more of the shares of the Company, parent company or one of the Company's subsidiaries or associates? <i>If YES, please provide name of entity:</i>	<input type="checkbox"/>	<input type="checkbox"/>
5.	Did you serve for the two (2) years preceding your nomination in an executive position in the Company, parent company or one of its subsidiaries or associates? <i>If YES, please provide name of entity:</i>	<input type="checkbox"/>	<input type="checkbox"/>
6.	During the preceding year, were you an associate of a director or a member of senior management of the Company, parent company or one of the Company's subsidiaries or associates? <i>If YES, please provide details:</i>	<input type="checkbox"/>	<input type="checkbox"/>
7.	Were you a director of the parent company or one of its subsidiaries or associate companies prior to nomination? <i>If YES, please provide name of entity:</i>	<input type="checkbox"/>	<input type="checkbox"/>
8.	In the two (2) years preceding your nomination, have you been employed by one of the parties contracting with the Company including the external auditor, major supplier or community	<input type="checkbox"/>	<input type="checkbox"/>

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Ref.	SECTION B: INDEPENDENCE STATUS	YES	NO
	association which has received substantial funding from the Company, its subsidiaries or associates? <i>If YES, please provide name of entity:</i>		
9.	Have you been employed by the parent company or one of parent company's subsidiaries or associates in the two (2) years preceding your nomination? <i>If YES, please provide name of entity:</i> <i>If YES, please provide details:</i>	<input type="checkbox"/>	<input type="checkbox"/>
10.	During the preceding year, did you have any significant contractual or business relationship with the Company which could be seen to materially interfere with the person's capacity to act in an independent manner? <i>If YES, please provide details:</i>	<input type="checkbox"/>	<input type="checkbox"/>
11.	During the preceding year, were you engaged directly or indirectly as an auditor or professional adviser for the Company? <i>If YES, please provide details:</i>	<input type="checkbox"/>	<input type="checkbox"/>
12.	Are you or one of your relatives a partner of the Company's external auditor or an employee thereof? <i>If YES, please provide name of relative and external auditor:</i>	<input type="checkbox"/>	<input type="checkbox"/>
13.	During the two (2) years preceding the date of appointment on the Board of Directors of the Company, were you a partner or employee of the Company or the Company's external auditor? <i>If YES, please provide details of position held:</i>	<input type="checkbox"/>	<input type="checkbox"/>
14.	Are you an employee or a partner in a company that provides consulting services to the Company or any of its parent, subsidiary or associate companies? <i>If YES, please provide name of entity and position held:</i>	<input type="checkbox"/>	<input type="checkbox"/>
15.	Are you employed by a parent company or a subsidiary of it which is a governmental entity or a company whose capital is owned 75% or more by the government? <i>If YES, please provide name of entity and position held:</i>	<input type="checkbox"/>	<input type="checkbox"/>

SECTION C: NOMINEE STATEMENT

- I, the undersigned, hereby declare that all particulars and information given in this Declaration Form (and all documents referred to or provided therewith) are true, correct, complete and up-to-date in all respects and I have not withheld any information.
- I undertake to advise the Company in writing about any change that may occur to such particulars and/or information immediately via submission of an amendment to this Declaration Form.
- I further consent to the Company processing the personal data provided herein for the purpose of compliance with the relevant laws and regulations, including but not limited to, those of Ministry of Industry, Commerce and Tourism, and discharging my obligations as a Director of the Company.

Director Initials: _____