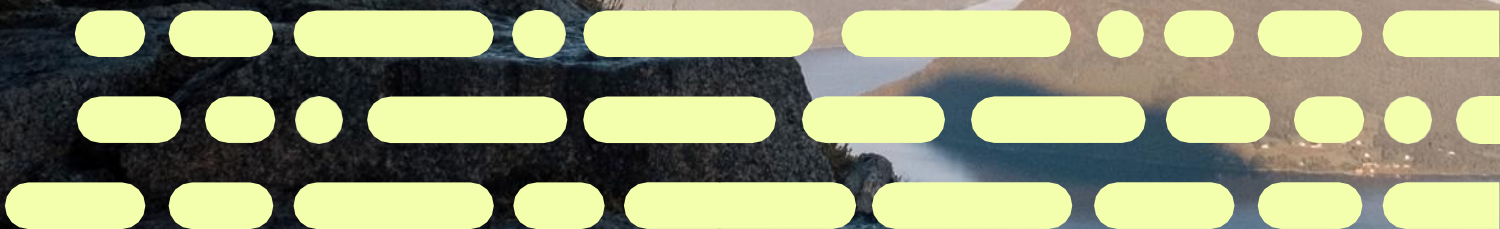


INTERIM FINANCIAL STATEMENTS

for the period ended
31 March 2025



Gjensidige



Business name	ADB Gjensidige
Company code	110057869
Address	Žalgirio str. 90, Vilnius, Lithuania
Telephone	1626
E-mail	info@gjensidige.lt
Web page	www.gjensidige.lt, www.gjensidige.lv, www.gjensidige.ee
Main field of activity	Non-life insurance services
General Director	Akshay Chandrakant Sankpal
Chief Accountant	Jolanta Markelienė
Chief Actuary	Jurgis Navikas
Beginning of financial year:	1 January 2025
End of financial year:	31 December 2025
Auditor	UAB Deloitte Lietuva

Data is collected and stored in the Register of Legal Entities, Lithuania.

The Management Board of the Company:



Chairperson
Jostein Amdal



Member
Aysegül Cin



Member
Martin Danielsen



Member
Anita Gundersen



Member
Bernhard Leon Zysman

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Financial statements of ADB Gjensidige for the period ended 31 March 2025

STATEMENT OF PROFIT AND LOSS AND OTHER COMPREHENSIVE INCOME

For the periods ended 31 March

EUR'000	Note	2025	2024
Insurance revenue	10	39.190	37.477
Insurance service expenses		-24.279	-30.257
Other insurance service expenses		-10.363	-10.405
Insurance service result before reinsurance		4.548	-3.185
Net Gain from reinsurance activities		-2.197	2.163
Insurance service result		2.351	-1.022
Interest income		615	259
Net changes in fair value of investments		214	5
Net realized gains and losses on financial assets		-1	663
Expenses related to investments management		-62	-54
Investment result		766	873
Insurance finance income or expenses		365	-1.080
Reinsurance finance income or expenses		-79	370
Net financial insurance expenses/income		286	-710
Other income		28	36
Other expenses		-31	-48
Profit before corporate income tax		3.400	-871
Tax expense		-102	28
Profit for the reporting year		3.298	-843
Other comprehensive income for the year			
Items that will not be reclassified subsequently to profit or loss		-	-
Total comprehensive income		3.298	-843

Notes on pages 8 to 27 are an integral part of these financial statements.

Akshay Chandrakant Sankpal
General Director

Jolanta Markelienė
Chief Accountant

Jurgis Navikas
Chief Actuary

25 April 2025

Financial statements of ADB Gjensidige for the period ended 31 March 2025

STATEMENT OF FINANCIAL POSITION

As at 31 March 2025

ASSETS EUR'000	Note	31.03.2025	31.12.2024
Cash and cash equivalents	4	8.345	7.632
Financial assets designated at fair value through profit or loss	2	148.718	148.620
Other receivables	3	2.541	1.935
Other prepaid expenses and accrued income		874	747
Reinsurance contracts assets	7	19.532	22.484
Property and equipment	1	636	701
Right-of-use assets	13	3.020	3.170
Intangible assets	1	3.117	3.227
Deferred tax asset		1.888	1.888
TOTAL ASSETS		188.671	190.404
LIABILITIES AND EQUITY EUR'000			
Insurance contract liabilities	6	118.586	123.019
Reinsurance contract liabilities		916	2.242
Corporate income tax liabilities		446	357
Taxes and social contributions		890	873
Other liabilities	8	3.916	3.511
Accrued expenses and deferred income		6.795	6.628
Lease liability	13	3.116	3.275
Provisions	9	3.151	2.942
Total liabilities		137.816	142.847
Share capital	5	56.184	56.184
Revaluation reserve		21	22
Accumulated loss carried forward from previous years		-8.648	-15.567
Profit of the reporting year		3.298	6.918
Total equity		50.855	47.557
TOTAL LIABILITIES AND EQUITY		188.671	190.404

Notes on pages 8 to 27 are an integral part of these financial statements.

Akshay Chandrakant Sankpal
General Director

Jolanta Markelienė
Chief Accountant

Jurgis Navikas
Chief Actuary

25 April 2025

Financial statements of ADB Gjensidige for the period ended 31 March 2025

STATEMENT OF CHANGES IN EQUITY

For the period ended 31 March 2025

EUR'000	Share capital	Revaluation reserve	Retained earnings/ (accumulated loss)	Total
Balance on 1 January 2024	56.184	22	-15.568	40.638
Total comprehensive income for the period	-	-	-843	-843
Balance on 31 March 2024	56.184	22	-16.411	39.795
Total comprehensive income for the period	-	-	7.762	7.762
Balance on 31 December 2024	56.184	22	-8.649	47.557
Total comprehensive income for the period	-	-	3.298	3.298
Revaluated assets depreciation	-	-1	1	-
Balance on 31 March 2025	56.184	21	-5.350	50.855

Notes on pages 8 to 27 are an integral part of these financial statements.

Akshay Chandrakant Sankpal
General Director

Jolanta Markelienė
Chief accountant

Jurgis Navikas
Chief actuary

25 April 2025

Financial statements of ADB Gjensidige for the period ended 31 March 2025

STATEMENT OF CASH FLOWS

For the periods ended 31 March

EUR'000	Note	2025	2024
Cash flows from operating activities			
Premiums received in direct insurance		39.629	38.537
Claims paid in direct insurance		-28.786	-29.965
Net receipts/payments from ceded reinsurance contracts		-682	-3.140
Paid corporate income tax		-53	-35
Operating expenses paid		-10.363	-10.405
Net other receipts		795	1.004
Net cash flows from operating activities		540	-4.004
Cash flows from investing activities			
Acquisition of investment		-	-43.391
Disposal of investment		262	46.447
Received interests		467	-
Other investments activities		-62	-56
Acquisition of tangible assets and intangible assets		-236	-139
Net cash flows (used in) investing activities		431	2.861
Cash flows from financing activities			
Payments to cover lease liabilities	13	-242	-237
Interest of the lease liabilities	13	-16	-17
Net cash (used in) financing activities		-258	-254
Net increase in cash and cash equivalents		713	-1.397
Cash and cash equivalents at the beginning of the year		7.632	6.988
Cash and cash equivalents at the end of the year		8.345	5.591

Notes on pages 8 to 27 are an integral part of these financial statements.

Akshay Chandrakant Sankpal
General Director

Jolanta Markelienė
Chief accountant

Jurgis Navikas
Chief actuary

25 April 2025

Financial statements of ADB Gjensidige for the period ended 31 March 2025

EXPLANATORY NOTES

I. GENERAL INFORMATION

General information

Gjensidige ADB (hereinafter referred to as the Company) was registered in the Register of Legal Entities of the Republic of Lithuania on 9 August 1993.

The Company is engaged in non-life insurance services. The license for the insurance activity is No. 21.

The Company's share capital as of 31 March 2025 consisted of 7.623.384 ordinary registered shares with a nominal value of EUR 7,37 each (as of 31 December 2024 – 7.623.384 ordinary registered shares with a nominal value of EUR 7,37 each).

100 % of the Company's share capital is owned by Gjensidige Forsikring ASA (Group), identification number (code) 995568217, registered address Schweigaards gate 21, 0191 Oslo, Norway (hereinafter referred to as Gjensidige Forsikring ASA).

As of 31 March 2025, Gjensidige Forsikring ASA group in the Baltics owned the following companies:

Gjensidige ADB with branches in Latvia and Estonia;

RedGo Estonia OÜ in Estonia who owns UAB RedGo Lithuania in Lithuania.

The parent company ASA Gjensidige Forsikring ASA is listed on Oslo Stock Exchange. There is no ultimate parent of the Company.

Employees of the Company

As of 31 March 2025, the Company employed 653 employees (as of 31 December 2024 – 661):

Country	31.03.2025	31.12.2024
Lithuania	436	442
Latvia	178	181
Estonia	39	38
Total	653	661

Company's activities

The Company has a license for the following groups of insurance or activities of voluntary insurance of separate risks:

- Land vehicles other than railway transport insurance;
- Land vehicles third party liability insurance;
- Aircraft third party liability insurance;
- Hull (sea and internal waters) third party liability insurance;
- Accident insurance;
- Aircraft insurance;
- CARGO insurance;
- Property insurance against other risks;
- General third party liability insurance;
- Sickness insurance;
- Hull (sea and internal waters) insurance;
- Property insurance against fire and natural disasters;
- Suretyship insurance;

- Financial losses insurance;
- Assistance insurance;
- Railway rolling stock transport insurance.

The Company's license for the insurance activity enables to provide such types of obligatory insurance:

- Compulsory motor third party liability insurance;
- Compulsory insurance of building construction, reconstruction, repair, renovation (modernization), demolition or cultural heritage management, construction and civil liability;
- Compulsory liability insurance of major researchers and contractors of biomedical researches;
- Compulsory liability insurance of railway companies (carriers) and companies using public railway infrastructure;
- Professional liability insurance of bankruptcy administrator in performing company bankruptcy procedures;
- Insurance of guarantee of performance of travel organiser's liabilities.

Information about branches and agencies of the Company

As of 31 March 2025, the Company had 2 foreign branches – in Latvia (3 regions), in Estonia, and 8 sales units in Lithuania (as of 31 December 2024 – 2 foreign branches, 8 sales units). The head office of the Company is located at Zalgirio str. 90, Vilnius.

Information about subsidiaries and associated companies of the Company

As of 31 March 2025, and as of 31 December 2024, the Company had no subsidiaries and associated companies.

Financial year

The financial year of the Company starts on 1 January and ends on 31 December.

II. MATERIAL ACCOUNTING POLICIES

Statement of compliance

The Company's financial statements have been prepared in accordance with International Financial Reporting Standards (IFRS), as adopted by the EU. The interim financial statements have been prepared in accordance with the accounting policy of the Company for 2024. The interim report does not include all the information required in a complete annual report and should be read in conjunction with the annual report for 2024.

The preparation of the interim financial statements involves the application of assessments, estimates and assumptions that affect the use of accounting policies and the amounts recognized for assets and liabilities, revenues, and expenses. The actual results may deviate from these estimates. The most material assessments involved in applying the accounting policies and the most important sources of uncertainty in the estimates are the same in connection with preparing the interim report as in the annual report for 2024.

The financial statements have been prepared on the assumption that the Company will be able to continue as a going concern in the foreseeable future.

Functional and Presentation Currency

The financial statements are presented in thousands of Euros (EUR'000), unless otherwise stated. The Company's functional currency is Euro (EUR).

Foreign currency

Foreign exchange transactions are translated into the functional

currency of the country of operation in accordance with the exchange rate set by the European Central Bank on the date of the respective transaction. Monetary assets and liabilities denominated in foreign currencies are retranslated into functional currency in accordance with the exchange rate set by the European Central Bank on the last date of the reporting period. Non-monetary assets and liabilities denominated in foreign currency that are measured at fair value are translated at the exchange rate as at the date fair value was determined. Non-monetary items that measured in terms of historical cost or revalued amount in foreign currency are translated using the exchange rate at the date of transaction or the date of revaluation.

Profit or loss relating to fluctuations in the exchange rate on assets and liabilities denominated in a foreign currency are recognized in the statement of comprehensive income in the period in which fluctuation occurs.

Intangible assets

Intangible assets comprise software. Intangible assets are carried at acquisition cost, less accumulated amortization and impairment losses, if any. Amortization is calculated on a straight-line basis over the estimated useful life of the asset.

Property and equipment

Plant and equipment (hereinafter referred to as non-current tangible assets)

Non-current tangible assets are stated at acquisition cost less any subsequent accumulated depreciation and accumulated impairment losses, if any. Calculation of depreciation is started from the month following the month of putting the asset into operation using the straight-line method over the estimated useful life of the tangible asset.

In case non-current tangible assets comprise important components with different useful lives, they are carried as separate units of non-current tangible assets.

Subsequent repair costs are added to the carrying amount of non-current tangible assets if they prolong the useful life of the asset or improve its useful features. All other repairs and maintenance are charged to profit or loss in the period in which they are incurred.

The gain or loss arising on the disposal of an item of non-current tangible assets is determined as the difference between the sales proceeds and the carrying amount of the asset. Gain or loss from disposal of non-current tangible assets is recognized in profit or loss when incurred.

At the end of every year, the Company reviews the estimated useful life, carrying amount and depreciation method of the tangible assets and the changes in accounting estimates, if any, are recognized on a prospective basis.

Impairment losses, write-offs and depreciation expenses are allocated to the operating expenses of the Company.

Impairment of property, plant and equipment and intangible assets

At each reporting date, the Company reviews the carrying amounts of its property, tangible and intangible assets, to determine whether there is any indication that those assets have suffered an impairment loss. If any such indication exists, the recoverable amount of the asset is estimated to determine the extent of the impairment loss (if any). Where it is not possible to estimate the recoverable amount of an individual asset, the Company estimates the recoverable amount of the cash-generating unit to which the asset belongs. Where a reasonable

and consistent basis of allocation can be identified, the Company's assets are also allocated to individual cash-generating units, or otherwise they are allocated to the smallest group of cash-generating units for which a reasonable and consistent allocation basis can be identified.

Recoverable amount is the higher of fair value less costs to sell and value in use. In assessing value in use, the estimated future cash flows are discounted to their present value using a pre-tax discount rate that reflects current market assessments of the time value of money and the risks specific to the asset.

If the recoverable amount of an asset (or cash-generating unit) is estimated to be less than its carrying amount, the carrying amount of the asset (cash-generating unit) is reduced to its recoverable amount. An impairment loss is recognized immediately, unless the relevant asset is carried at a revalued amount, in which case the impairment loss is treated as a decrease of revaluation reserve (if any).

Where an impairment loss subsequently reverses, the carrying amount of the asset (cash-generating unit) is increased to the revised estimate of its recoverable amount, but so that the increased carrying amount does not exceed the carrying amount that would have been determined had no impairment loss been recognized for the asset (cash-generating unit) in prior years. A reversal of an impairment loss is recognized as income immediately, unless the relevant asset is carried at a revalued amount, in which case the reversal of the impairment loss is treated as an increase of revaluation reserve.

Financial assets and liabilities

MEASUREMENT CATEGORIES

The classification of financial instruments at initial recognition depends on their contractual terms and the business model for managing the instruments. The match portfolio in insurance is intended to correspond to the cash flows from the underwriting business. It is invested in debt instruments with duration and currency that matches the duration and currency of the cash flow for the underwriting business. A major part of the investments would pass the SPPI-test and could be accounted for according to amortized cost. However, The Company has designated those assets at the fair value through profit or loss option (FVTPL) to reduce the accounting mismatch between investments and insurance liabilities.

While an increase in interest rates decreases market values of fixed income securities in the portfolio, it also decreases the value of insurance liabilities through discounting effect and vice versa. Therefore, the Company normally is not exposed to significant interest rate risk and to the effects of fluctuations in interest rates resulting from different maturity or interest re-pricing profile of the Company's interest-bearing assets and liabilities.

Financial liabilities are measured at either fair value through profit or loss (at amortized cost (e.g. other liabilities).

RECOGNITION AND DERECOGNITION

Financial instruments are recognized when the Company becomes a party to the instrument's contractual terms. Initial recognition is at fair value. Except for financial assets and financial liabilities recognized at FVTPL, transaction expenses are added to this amount. For financial assets and liabilities measured at FVTPL transaction expenses are recognized in profit or loss when they incur. Normally initial recognition will be equal to the transaction price. Subsequent to initial recognition, the instruments are measured as described below.

Financial assets are derecognized when the contractual rights to

cash flows from the financial asset expires, or when the Company transfers the financial asset in a transaction where all or practically all the risk and rewards related to ownership of the assets are transferred.

FINANCIAL ASSETS AND LIABILITIES AT FAIR VALUE THROUGH PROFIT OR LOSS

Financial assets and liabilities at fair value through profit or loss are measured at fair value at the reporting date. Changes in fair value are recognized in the statement of profit or loss line Net changes in fair value of investments.

The category at fair value through profit or loss comprises the classes shares with similar characteristics, bonds and other fixed income securities.

FINANCIAL LIABILITIES AT AMORTISED COST

Financial liabilities measured at amortized cost using the effective interest method.

DEFINITION OF FAIR VALUE

The fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date.

Different valuation techniques and methods are used to estimate fair value depending on the type of financial instruments and to what extent they are traded in active markets. Instruments are classified in their entirety in one of three valuation levels in a hierarchy based on the lowest level input that is significant to the fair value measurement in its entirety.

The different valuation levels and which financial assets/liabilities are included in the respective levels are accounted for below.

QUOTED PRICES IN ACTIVE MARKETS

Quoted prices in active markets are regarded as the best estimate of an asset/liability's fair value. A financial asset/liability is considered to be valued based on quoted prices in active markets if its fair value is estimated based on easily and regularly available prices and these prices represent actual and regularly occurring transactions based on the arm's length principle. Financial assets/liabilities valued based on quoted prices in active markets are classified as level one in the valuation hierarchy.

The following financial assets are classified as level one in the valuation hierarchy:

- Government backed bonds and other fixed income securities,
- Corporate bonds.

VALUATION BASED ON OBSERVABLE MARKET DATA

When quoted prices in active markets are not available, the fair value of financial assets/liabilities is preferably estimated based on valuation techniques that are based on observable market data.

A financial asset/liability is deemed to be valued based on observable market data if its fair value is estimated with reference to prices that are not quoted but are observable either directly (as prices) or indirectly (derived from prices). Financial assets/liabilities valued based on observable market data are classified as level two in the valuation hierarchy.

The following financial assets/liabilities are classified as level two in the valuation hierarchy:

- Equity funds, bond funds, hedge funds and combination funds, in which fair value is estimated based on the fair value of the underlying investments of the funds;

- Bonds, certificates, or index bonds that are unlisted, or that are listed but where transactions do not occur regularly. The unlisted instruments in this category are valued based on observable yield curves and estimated credit spreads where applicable.

VALUATION BASED ON NON-OBSERVABLE MARKET DATA

When neither quoted price in active markets nor observable market data is available, the fair value of financial assets/liabilities is estimated based on valuation techniques that are based on non-observable market data.

A financial asset/liability is deemed to be valued based on non-observable market data if its fair value is estimated without being based on quoted prices in active markets or observable market data. Financial assets/liabilities valued based on non-observable market data are classified as level three in the valuation hierarchy.

Cash and cash equivalents

Cash comprises cash on hand and cash in banks. Cash equivalents are short-term (with a maturity less than three months from the date of acquisition) liquid investments that are readily convertible to a known amount of cash and are subject to an insignificant risk of changes in value.

Share capital and reserves

Share capital and reserves are accounted for at the nominal value thereof.

Legal reserve

Pursuant to the Law on Companies of the Republic of Lithuania, legal reserve is formed from the distributable profit. Companies must transfer to the legal reserve 5% of their net profit, until the total amount of the reserve reaches 10% of the Company's share capital. The legal reserve may be used only for covering losses of the Company. The share of legal reserve in excess of 10% of the share capital may be distributed when distributing the profit for the succeeding financial year. As of 31 March 2025, it is not formed due to accumulated losses of prior years.

Insurance liabilities

On initial recognition, for the measurement of insurance contracts the Company is using the premium allocation approach (PAA).

A group of insurance contracts is recognized from the earliest of:

- The beginning of the coverage period of the group,
- The date when the first payment from a policyholder.
- Or if a group of contracts is or becomes loss-making, the loss will be recognized immediately.

The onerous test is performed at a granular level, ensuring that the group of contracts is homogenous and that profit-making contracts are not subsidizing loss-making contracts. For profit-making contracts, the earnings are based on the services accrued. Liabilities for insurance contracts consist of liability for remaining coverage (LRC) and liability for incurred claims (LIC). LRC represents liabilities for remaining coverage, while LIC represents liabilities for claims that have already been incurred and other insurance expenses incurred.

Assets for reinsurance contracts consist of the asset for remaining coverage (ARC) and the asset for incurred claims (AIC) (reinsurers' share of claims that have already been incurred).

Reinsurance is presented separately from gross insurance.

Insurance finance income or expense are presented in profit or loss.

The Company does not discount the liability for remaining

coverage to reflect the time value of money and financial risk for insurance policies with a coverage period of one year or less. For those claims that the Company expects to be paid within one year or less from the date of incurrence, the Company does not adjust future cash flows for the time value of money and the effects of financial risks. However, claims expected to take more than one year to settle are discounted applying the discount rate at the time the incurred claim is initially recognized. The Company disaggregates insurance finance income or expenses between profit or loss on the systematic allocation method over the duration of the contracts in the group.

GENERAL INSURANCE CONTRACTS: PORTFOLIOS OF INSURANCE CONTRACTS

To determine the right level of aggregation, the following elements are taken into consideration:

- Where decisions are made;
- At which level products are aggregated while still having similar risk;
- The significance of each portfolio is based on size.

The Company groups insurance policies to the level on which management of profitability and determination takes place.

GENERAL INSURANCE CONTRACTS: GROUPING OF CONTRACTS/ONEROUS CONTRACTS

All insurance contracts are written according to an approved tariff or by underwriting. All premiums are set so that there is an expected profit, and no contracts are expected to be onerous at initial recognition. The actual outcome will be different for some contracts, but Gjensidige will supervise the actual outcome very closely for all contracts and if necessary, change the premium in order not to allow any contract to become onerous over time.

Since the premiums are paid in advance, within the insurance period of normally one year, the measurement of a group of insurance contracts with respect of checking for onerous contracts, are done by looking into the expected combined ratio, adjusted for risk adjustment and eventually for discontinued loss provision (time value of money).

Consequently, the Company will for each portfolio have groups with contracts with either no significant possibility of becoming onerous or contracts that are onerous at initial recognition. The profitable and onerous contracts will be divided into groups based on the year the contract has been issued.

GENERAL INSURANCE CONTRACTS: MEASUREMENT METHOD

The Company has applied PAA model. Most of the Company's contracts have a coverage period of one year or less. For the contracts where the coverage period is more than one year, Gjensidige has determined that the LRC does not differ materially from the liability that would be obtained at by applying the general measurement model called the building block approach (BBA), and it therefore use PAA for those insurance contracts.

Applying the PAA model, The Company measures the carrying amount of the LRC on initial recognition as the premiums received upon initial recognition.

At the end of each subsequent reporting period, the carrying amount of the LRC is the carrying amount at the start of the period plus the premiums received during the period, minus the amount recognized as insurance revenue for services provided in that period. LRC corresponds to the provision for unearned premium deducted by premium receivables.

At the end of each subsequent reporting period, the carrying amount of the LIC, comprising the fulfilment cash flows related to past services, is measured according to best estimate of future

payments for incurred claims and claims expenses. Future payments are based on historical payment pattern.

The Company has applied an option to expense the insurance acquisition cash costs directly to the profit and loss as they are incurred.

GENERAL INSURANCE CONTRACTS: DISCOUNTINGS

A major part of the LIC stems from long-tailed business with a duration of more than one year, and Gjensidige has therefore discounts LIC for all products. Future cash-flows are discounted using EIOPA risk -free rates without volatility adjustment, which have a long duration and are a fairly good hedge for the investments.

For LRC, most of the premiums are received in the same year as coverage is provided. In addition, a substantial part of the premium is paid monthly or quarterly. Hence, the financial component of LRC is very limited, and therefore discounting is not performed.

GENERAL INSURANCE CONTRACTS: RISK ADJUSTMENT

The risk adjustment (RA) represents the compensation an entity requires for bearing the uncertainty about the amount and timing of the cash flows that arise from non-financial risk as the entity fulfils insurance contracts. The percentile approach is chosen, and risk adjustment is chosen to represent a confidence level of 80 per cent for the ultimate probability distribution for the claim's provisions.

The confidence level of 80 per cent is aligned with Gjensidige's cost of capital until the final run-off of the claim's provisions. Ultimate risk is chosen because the accounting balance shows the liabilities as estimated until the final run-off.

The Company has developed their own model, based on the Solvency II risk margin, to determine the RA. The calculation of RA is adjusted to comply with the Group principle of a confidence level of 80 per cent and based on ultimate risk.

The confidence level of 80 per cent until the final run-off corresponds to a level of 95 per cent for one-year risk.

Corporate income tax

Income tax expense comprises the expenses of the current income tax and deferred income tax.

Current income tax

Current income tax is calculated based on the applicable tax laws in each country, including foreign branches, based on the results of the country concerned.

In Lithuania the current income tax is paid based on taxable profit for the year. Taxable profit differs from net profit as reported in profit or loss because it excludes items of income or expense that are taxable or deductible in other years and it further excludes items that are never taxable or deductible. Income tax is calculated using tax rates that have been enacted by the end of the reporting period. In Lithuania, the income tax applied to the Company is 16 % (2024: 15%).

The corporate income tax in Latvia is paid on distributed profits, calculated 20/80 of the net payable amount, and other non-deductible expenses deemed as distributed profit, calculated by applying coefficient of 0.8. Tax rate in Latvia is 20% (2024: 20%).

Corporate income tax in Estonia is paid on the payment on distributed profits and other non-deductible expenses deemed as distributed profit. Tax rate in Estonia is 22/78 % (2024: 20/80%).

Deferred income tax

Deferred tax is recognized on temporary differences between the

carrying amounts of assets and liabilities in the financial statements and the corresponding tax bases used in the computation of taxable profit. Deferred tax liabilities are generally recognized for all taxable temporary differences and deferred tax assets are recognized to the extent that it is probable that taxable profits will be available against which deductible temporary differences can be utilized. Such assets and liabilities are not recognized if the temporary difference arises from goodwill or from the initial recognition (other than in a business combination) of other assets and liabilities in a transaction that affects neither the taxable profit nor the accounting profit.

The carrying amount of deferred income tax assets is reviewed at each reporting date.

Deferred tax assets and liabilities are measured at the tax rates that are expected to apply in the period in which the liability is settled or the asset realized, based on tax rates (and tax laws) that have been enacted or substantively enacted by the end of the reporting period. The measurement of deferred tax liabilities and assets reflects the tax consequences that would follow from the manner in which the Company expects, at the end of the reporting period, to recover or settle the carrying amount of its assets and liabilities.

Deferred income tax assets and liabilities are offset when there is a legally enforceable right to set off current tax assets against current tax liabilities and when they relate to income taxes levied by the same taxation authority and the Company intends to settle its current tax assets and liabilities on a net basis.

Current and deferred tax are recognized as an expense in profit or loss, except when they relate to items credited or debited directly to Other comprehensive income (hereinafter referred to as OCI), in which case the tax is also recognized directly in OCI.

Other provisions

Other provisions are recognized when the Company has a legal obligation as a result of the past event, it is probable that an outflow of resources embodying economic benefits will be required to settle the obligation, and a reliable estimate of the amount can be made.

Employee benefits

Short-term employee benefits, including remuneration and social insurance contributions, bonuses and holiday pay, are included on an accrual basis into operating expenses over the entire employment period. Over the entire period of employment, the Company, on behalf of its employees, pays social insurance contributions to the State Social Insurance Fund Board; these contributions are made following local legal acts; the Company is not obligated to pay additional pension contributions for the years of service of its employees at the Company.

Leases

IFRS 16 requires all contracts that qualify under its definition as a lease to be reported on a lessee's balance sheet as right-of-use assets and lease liabilities. Short-term leases (less than 12 months) and leases of low-value assets are exempt from the right-of-use asset and liability recognition. A lessee shall recognize a right-of-use asset and a lease liability. The interest effect of discounting the lease liability shall be presented separately from the depreciation charge for the right-of-use asset. The depreciation expense will be presented with the group's other depreciations, whereas the interest effect of discounting will be presented as a financial item.

The cost of the right-of-use asset consists of:

- The amount of the initial measurement of lease liability;

- Any lease payments made at the before commencement date, less any lease incentives received;
- Incurred initial direct costs;
- The expenses incurred in relation to dismantling or removing the lease assets.

The assets managed at the right of use are depreciated by the straight-line method throughout the entire period set by the lease obligation.

The assets managed according to the right of use are broken down into the following group:

Land and buildings;

At the commencement date, the lease payments included in the measurement of the lease liability comprise the following payments for the right to use the underlying asset during the lease term that are not paid at the commencement date:

- Fixed payments, less any lease incentives receivable;
- Variable lease payments that depend on an index or a rate;
- Amounts expected to be payable by the lessee under residual value guarantees;
- Payments of penalties for terminating the lease, if the lease term reflects the lessee exercising an option to terminate the lease.

To determine whether a contract contains a lease, it is considered whether the contract conveys the right to control the use of an identified asset. This is for the Company considered to be the case for rental contracts, leases for cars and other assets.

The rental period is calculated based on the duration of the agreement plus any option periods if these with reasonable certainty will be exercised. Joint expenses etc. are not recognized in the lease liability for the rental contracts.

The discount rate for the rental contracts is determined by looking at observable borrowing rates in the bond market for regions in which Gjensidige operates. The interest rates are adapted to the actual lease contracts duration etc. The discount rate for the leasing cars is determined based on an assessment of which loan interest Gjensidige would achieve for financing cars from a financing company.

Classification of insurance contracts

i) Recognition and measurement of insurance contracts

The insurance contract signed by the insurer is only recognized as an insurance contract if under such contract the policyholder transfers significant insurance risks to the insurer. All of the Company's insurance contracts are classified as insurance contracts and they do not include any items linked to investment units or other investment items.

The classification of insurance contracts is based on the transfer of insurance risk, for example:

- Personal accident insurance,
- Travel insurance,
- Property insurance against damage or theft,
- Vehicle insurance,
- Liability insurance.

ii) Insurance revenue and outward reinsurance premiums

The portion of premiums earned received is recognized as revenue. Premiums are earned from the date of commencement of risk, over term of the insured period. Unearned premium is recognized in the insurance liability of the remaining coverage. Outward reinsurance premiums represent the share of premiums in the accounting period, which was subject to reinsurance and adjusted by the change in reinsurance premiums asset (ARC).

Insurance service expenses – claims incurred

Insurance service expenses - claims incurred comprise claims attributable to the accounting period, i.e. claims paid, claim handling costs, subtracting subrogation receivables and the liability of the incurred claims change during the accounting period. The risk adjustment changes during the accounting period. The loss component change of the liability for remaining coverage during the accounting period.

Subrogation received comprises the actual amounts during the accounting period from third parties in cash or upon sale of transferred property, and the amounts receivable after the end of the accounting period which are related to the damages compensated prior to the end of the accounting period, taking into consideration the likely period of payment of such amounts and the likeliness of receipt of such amounts.

Motor Bureau fee calculated in Lithuania, Latvia and Estonia is accounted for as claims handling expenses.

Claims handling costs comprise the claims handling center costs and certain portions of the costs incurred by the Company's headquarter and branches offices assigned in accordance with the methodology approved by the Company.

Operating expenses related to claims handling expenses are classified in claims incurred.

The reinsurers' share of the claims incurred comprises the amounts paid by reinsurers under reinsurance contracts or the amounts receivable from reinsurers for the claims payments made by the Company during the accounting period, adjusted by the reinsurance claims assets change during the accounting period, and the retrospective and external claims handling costs expenditure assigned to the reinsurers.

Other insurance service expenses

Other insurance service expenses include expenses incurred at the moment of concluding insurance contracts, commission payments to agents and intermediaries for the distribution of insurance policies, advertising and promotion expenses, operating expenses and employee payroll along with social security expenses.

Investment activity income and expenses

All investment income and expenses related to financial assets investment operations are attributed to investment income and expenses.

Interest income is included in the statement of comprehensive income for all cash generating financial instruments using the effective interest rate method. Interest income includes coupon payments earned on fixed-income securities, interest earned on investments in bank deposits and loans, current account balances and discount or premium amortization or other difference between the book value of an interest-bearing instrument and its value on the maturity date calculated based on the effective interest rate method.

Insurance finance income and expenses

Insurance finance income and expenses arising from insurance liabilities discounting and the risk adjustment for non-financial risk. Assumptions about inflation based on an index of prices or rates or on prices of assets with inflation-linked returns are assumptions that relate to financial risk; and Assumptions about inflation based on an entity's expectation of specific price changes

are not assumptions that relate to financial risk.

Insurance finance income and costs are recognized in profit or loss.

Other income and expenses

Other income and respectively incurred expenses for the distribution of insurance products of other companies are reflected in other income and expenses upon selling the relevant policy of another insurance company.

Other income includes income earned from services other than insurance services: interest not related to investments such as interest on cash in bank; income from foreign currency conversion and currency rate translation not related to investments; gain on revaluation of the items of the statement of financial position not related to investments, and other similar income not included in other items.

Other expenses include various expenses such as changes in foreign currency exchange rates of outstanding balances, loss on revaluation of the items of the statement of financial position which do not relate to investments, fines and penalties for late payments, interest of the lease and other expenses not included into other items.

All other income and expenses are recognized on an accrual basis.

Statement of cash flows

The cash flow statement is prepared applying the direct method.

Cash and cash equivalents comprise cash at banks. The received interest is shown in investment activity.

Offsetting

While preparing the financial statements assets and liabilities, and income and expenses are not offset, except cases, when an individual international financial reporting standard requires such offset.

Related parties

Parties are considered to be related if one party has the ability to control the other party or exercise significant influence over the other party in making financial and operating decisions. Related parties are defined as shareholders, its subsidiaries, members of the supervisory council and management board, their close relatives and companies that directly or indirectly through one or more intermediaries, control, or are controlled by, or are under common control with, the Company.

Regulatory requirements

The Company is subject to the regulatory requirements of the Bank of Lithuania. These requirements include minimum capital, minimum solvency, restricted investments, accounting and provision setting policies.

Contingencies

Contingent liabilities are not recognized in the financial statements. Contingent liabilities are disclosed unless the possibility of a material outflow of resources embodying economic benefits is remote.

A contingent asset is not recognized in the financial statements but disclosed when a material inflow or economic benefits are probable.

Events after the end of the reporting period

Events after the end of the reporting period that provide additional information about the Company's position at the reporting date (adjusting events) are reflected in the financial

statements. Events after the end of the reporting period that are not adjusting events are disclosed in the notes when material.

III. USE OF ESTIMATES

The preparation of the financial statements under IFRS adopted by EU and the application of the adopted accounting policies require that management make assessments, prepare estimates and apply assumptions that affect the carrying amounts of assets and liabilities, income and expenses. The estimates and the associated assumptions are based on experience and other factors that are considered to be justifiable based on the underlying conditions. Actual figures may deviate from these estimates. The estimates and associated assumptions are reviewed regularly. Changes in accounting estimates are recognized in the period the estimates are revised if the change only affects this period, or both in the period the estimates change and in future periods if the changes affect both the existing and future periods.

Assumptions and major sources of estimation uncertainty that have a significant risk of resulting in a material adjustment to the carrying amount of insurance liabilities within the next financial year are discussed below.

LIABILITIES FOR REMAINING COVERAGE (LRC)

Onerous groups of contracts

For groups of contracts that are onerous, the liability for the remaining coverage period is determined based on estimated cash flows for expenses minus income.

LIABILITIES FOR INCURRED CLAIMS (LIC)

Insurance products are generally divided into two main categories: products with a short or long settlement period. The settlement period is defined as the length of time that elapses after a loss or damage occurs (date of loss) until the damage is reported and then paid and settled. Short-tailed products are, for example, property insurance, while long-tailed products primarily involve personal injury related to motor, occupational injury and other personal insurance. The uncertainty in short-tailed industries is primarily linked to the size of the loss. For long-tailed products, the risk is linked to the fact that the final loss costs must be estimated based on experience and empiricism. For certain lines of business' within accident and health insurance, it can take ten to 15 years before all claims that have been incurred in a calendar year are reported to the company. In addition, there will be many cases where information reported in a claim is insufficient to calculate a correct provision. This may be due to the lack of clarity around causation and uncertainty about the injured party's future ability to work etc. Many personal injury claims are tried in the legal system, and over time the level of compensation for such claims has increased. This will also have consequences for claims that have been incurred in previous years and that have not yet been settled. The risk associated with provisions for industries with personal injuries is thus affected by external conditions. To reduce this risk, Gjensidige calculates its claim liability based on various methods and ensures that the registered provisions relating to ongoing claims are updated at all times based on the applicable calculation rules. See chapter's IV, part "Insurance risks" and notes 6,7.

Risk adjustment

The risk adjustment for non-financial risk (RA) reflects the compensation required by the insurer to bear the uncertainty of the amount and timing of cash flows arising from non-financial

risk. Sources of the uncertainty about the amount and timing of the cash flows are linked to the determination of the LIC, stated above, and the estimation of the future cash flows, i.e. when the claims payments take place. Gjensidige uses extensive data material and recognized statistical methods to reduce this uncertainty.

RA is calculated for the Company and represents the final probability distribution for the claim's provisions. Ultimate risk is chosen as the accounting balance shows the liabilities as estimated up to final liquidation.

The RA percentile is derived from the probability distribution for reserve risk. To determine RA the Company implemented its own model based on the Solvency II risk margin. The calculation of RA has been adjusted to follow the Gjensidige group principle of a percentile of 80 per cent and based on ultimate risk.

Discount rates

Insurance contract liabilities are calculated by discounting expected future cash flows with a risk-free interest rate (swap interest), the illiquidity premium is set equal to zero. The yield curve reflects expected future payments. The discounting effects are mainly linked to long-tailed products, such as motor traffic insurance, occupational injury insurance and other personal insurance.

IV. RISKS AND RISK MANAGEMENT

The Company's risk management is centralized at all Company's levels and includes the development, implementation and control of risk management activities related to the Company's goals. Given the level of competence and responsibility, risk management functions are distributed from the Company's Board to employees, defining them in the approved Company's Board's and the administration's work regulations, as well as in the job descriptions of employees.

The Company's risk management strategy is based on capital adequacy assessment principles, the aggregation of the types of risks faced into the overall assessment, and the assurance of solvency needs to cover them, in accordance with the principles of precaution, conservatism and prudence.

The main objectives of capital management strategy are to ensure continuous capital management and capital adequacy, timely response to the changes in capital size and assessment of the effect on capital of important decisions. The Company measures solvency capital requirement under Solvency II using a standard formula.

The Company, according to the requirements of the Solvency II Directive and overall risk management strategy of Gjensidige group, ensures the Company's risk management system on the implementation of the three level protection principles.

Risk is limited by the legislation regulating the operations of insurance companies and internal regulations, as well as by Solvency II Directive and its implementing documents. The Company's risk appetite and risk limits are approved by the Company's Board in order to determine the maximum level of the risk to be tolerated. When this limit is exceeded, the Company takes actions to manage and prevent further increases in risks.

The Company applies risk management measures having assessed the significance of identified risks to achieving the Company's goals taking account of the costs and effectiveness of risk reduction measures:

1. Risk avoidance – motivated decision not to take risky activities.

2. Risk mitigation – process whereby the Company applies internal controls to reduce the probability of the risk of the Company's processes and operations and/or their potential effect to the tolerated level.
3. Risk transfer – risk sharing/transfer to the third party.
4. Risk accepting – assuming of possible gains or losses from certain risks.

Detailed rules of management of specific risk types (identification, measurement, key indicators, monitoring, control, reporting and management measures) are set in the internal governing documents detailing the management of a specific risk type.

The Company is exposed to various risks which can be categorized as underwriting (insurance) risk, financial risks (market risk, credit risk, liquidity risk), operational (including compliance) risk and business and strategic risk, emerging and sustainability risks. The Company assumes a different level of each risk category and establishes a risk assessment methodology individually for each risk category.

Capital risk management

The core function of insurance is the transfer of risk, and the Company is exposed to risk in both its insurance and investment operations. Identification, measurement and management of risk are essential parts of the operations. Risk and capital are and must be interlinked. Any insurance company must adapt its risk exposure to its capital base. On the other hand, solvency capital, or equity, has a cost. A key objective of capital management is to balance these two aspects. Company's overall capital management objectives are firstly to ensure that the capitalization of the Company can sustain an adverse outcome without creating a financially distressed situation and secondly that the Company's capital is used in the most efficient way. The Company defines capital as equity which is disclosed in the statement of financial position.

Pursuant to the Law on Insurance the authorized share capital of a joint stock company must be not less than EUR 1,000,000, and pursuant to the Lithuanian Law on Companies the shareholders' equity should not be lower than 50% of the company's registered share capital. As at 31 March 2025 and 31 December 2024 the Company complied with these requirements.

The Company is in compliance with both the Minimum Capital Requirement and the Solvency Capital Requirement as at 31 March 2025 and 31 December 2024.

Insurance risks

The risk under any insurance contract is the probability that the insured event occurs and the uncertainty of the amount of the resulting claim. By the very nature of an insurance contract, this risk is random and must therefore be estimated.

The Company operates in Lithuania, Latvia and Estonia. The core business of the Company is acceptance and management of insurance risks. For a portfolio of insurance contracts where the theory of probability is applied to pricing and provisioning, the principal risk that the Company faces under its insurance contracts is that the actual claims and benefit payments exceed the carrying amount of the insurance liabilities. This could occur because the frequency and/or severity of claims and benefits are greater than estimated. Insurance events are random, and the actual number and amount of claims and benefits will vary from year to year from the level calculated using statistical techniques. Calculation of the tariffs and prices on insurance products reflects current market conditions and covers the most probable assumptions necessary for the adjustment of future results, aiming to significantly mitigate financial risks.

Experience shows that the larger the portfolio of similar insurance contracts, the smaller the relative variability around the expected outcome will be. In addition, a more diversified portfolio is less likely to be affected by a change in any subset of the portfolio.

The Company has an overall underwriting policy, approved by the Board, with more detailed underwriting guidelines for each of the product segments, supported by strictly defined authorization rules. Factors that aggravate insurance risk include lack of risk diversification in terms of type and amount of risk, geographical location and type of industry covered.

General insurance

FREQUENCY AND SEVERITY OF CLAIMS

The frequency and severity of claims can be affected by several factors. The different factors will depend on the products, or lines of business (LOB) considered.

An increase in the frequency of claims can be due to seasonal effects and more sustainable effects. During the winter season snow and cold weather will cause an increase in the frequency of claims in Motor insurance. In Property insurance cold winter will cause an increase in the frequency of claims due to frozen water pipes and increased use of electrical power and open fire places for heating of the houses. More permanent shifts in the level of frequency of claims may occur due to e.g. change of customer behaviour and new types of claims. The effect on the profitability of permanent changes in the level of the frequency of claims will be significant.

The severity of claims is affected by several factors. In some LOBs, with relatively few claims, the severity may be heavily influenced by large claims. The number of large claims incurred during a year varies significantly from one year to another. This is typically for the commercial market. In most LOBs the underlying development of the severity of claims is influenced by inflation. Growth in severity of claims may be driven by the development of consumer price index (CPI), salary increases, social inflation and the price for material and services purchased with claims settlement. In Property insurance the inflation will consist of CPI and an increase in building costs. For accident and health, the insurance policies are divided into two main groups, one with a fixed sum insured and another part where the compensation is adjusted by CPI in health care sector.

The Company manages these risks mainly through close supervision of the development for each LOB, underwriting guidelines and proactive claims handling. The monthly supervision of the results for each LOB contains an overview of both premium and loss development. If there is an adverse development of the profitability, sufficient measures will be put in place. This includes necessary premium increases to ensure that the profitability is within the accepted level. The analysis of the profitability can be tracked further into different groups of customers and portfolios. The underwriting guidelines attempt to ensure that the underwritten risks are well diversified in terms of type and amount of risk, industry and location of the risks. Underwriting limits are in place to enforce appropriate risk selection criteria and to ensure that accepted risks are within the limits of the reinsurance contracts.

Premiums, deductibles and elements in the conditions may be changed at the yearly renewal of policies. Insurance companies have the right to reject the payment of a fraudulent claim. The Company has the right not to renew individual policies in cases of insurance fraud, and in some instances legislation or policy conditions give the Company the right to terminate or not to renew individual policies in cases where special reasons indicate that such termination is reasonable. In cases where a claim has

been paid, the Company is entitled to pursue any third parties liable for the damage, for payment of some or all costs (recourse claim). The claims handling procedures also include a clear strategy and routines for purchasing material and services in an optimal manner. The routine is to use purchase agreements to ensure the quality of our benefits to our customers and to reduce the inflation risk.

i) Basic product features

The terms and conditions of insurance contracts that have a material effect on the amount, timing and uncertainty of future cashflows arising from insurance contracts are set out below. In addition, the following gives an assessment of the Company's main products and the ways in which it manages the associated risks.

PROPERTY INSURANCE

This insurance covers losses incurred as a result of damage to the property of the insured if the cause is one of the following insured risks:

- Fire;
- Natural disasters (storm, flood);
- Theft;
- Water;
- Other.

The risk inherent under property insurance is the rapid increase in prices for construction and renovation, as a result of which the policy holder may not be able to fully restore the property using the claim proceeds. This has an indirect impact on the relationship between the Company and policy holders.

Risk management is carried out by precisely defined assessment of the insured property to determine which property should be insured, which should be insured on special terms and which should not be accepted for insurance at all in line with the authority of the underwriter in the respective line of insurance.

In terms of loss adjustment, the Company is exposed to the risk of unfair actions on the part of policy holders. In order to reduce this risk, the Company has set claim settlement administration limits for separate units and introduced high requirements for review of claim supporting documents.

The claim will usually be notified promptly and can be settled in the short term. Property business is therefore classified as 'short-tail', contrasted with the 'long-tail' classes where the ultimate claim cost takes longer to determine. The key risks associated with this product are underwriting risk and claims experience risk.

Underwriting risk is the risk that the Company does not charge premiums appropriate for the insurance contracts. The pricing processes for the different insurance products involve estimates of future frequency and severity of claims, based on statistics from internal and external sources. Even if the underwriting criteria are adequate and the premium calculations are performed on a good statistical basis, the claims cost may deviate from the expected level, due to large claims, natural catastrophes etc. For private property insurance, it is expected that there will be large numbers of properties with similar risk profiles. However, for commercial business this may not be the case. Many commercial property proposals comprise a unique combination of location, type of business, and safety measures in place. Calculating a premium commensurate with the risk for these policies will be subjective, and hence risky.

Property classes are exposed to the risk that the insured will make false or invalid claims, or exaggerate the amount claimed following a loss. Insurance risk is managed primarily through

pricing, independent assessment of property under international standards, product design, risk selection and reinsurance. The Company therefore monitors and reacts to changes in the general economic and commercial environment in which it operates.

MOTOR OWN DAMAGE INSURANCE (CASCO)

This insurance covers losses incurred as a result of damage to the vehicle if the cause is one of the following insured risks:

- road accident
- weather claims
- fire
- falling of various objects
- illegal activities of third parties
- theft and/or robbery
- Various extensions of cover are possible.

Insurance premiums are set in line with applicable insurance methodology.

The largest losses are incurred in the event of complete destruction and theft of the vehicle, but such cases are infrequent.

In order to prevent unfair dealing of policy holders, the Company performs detailed review of claim supporting documents and ask competent institutions to perform additional investigation if necessary.

The claim will usually be notified promptly and can be settled in the short term. Casco is therefore classified as 'short-tail', contrasted with the 'long-tail' classes where the ultimate claim cost takes longer to determine.

MOTOR COMPULSORY THIRD PARTY LIABILITY (MTPL)

Motor compulsory third party liability insures the vehicle owner's or authorized user's liability for damages caused to third parties as a result of a road accident. The objective of this line of insurance is to protect the interests of third parties who have suffered in road accidents and this line of insurance is regulated by the laws on motor third party liability compulsory insurance that regulate the legal relationship between vehicle owners, authorized users and insurers in relation to the compulsory insurance of third-party liability of the vehicle owners and authorized users.

In view of the risk of inflation which impacts the amount of claims paid, the Company performs tariff analyses for this line of insurance and the assessment of the impact on the financial ratios on a regular basis.

Even if statistics reflect that previous claims have been notified promptly and can be settled without undue delay, Motor third party liability insurance is classified as 'long-tail' classes where the ultimate claim cost takes longer to determine.

HEALTH INSURANCE

Health insurance is developing into a stable line of business. The Company's identified risk in this line of business is the weak health care system and the obscure government policy in this area as well as changes in economic environment.

The Company monitors and reacts to changes in prices for medical services, monitors the claim ratios on employer's bases and adjusts prices accordingly each year when renewal takes place.

Health insurance is short-tail business with regular short-term reporting delays.

ii) Concentration of insurance risks

The concentration of insurance risks is one of the key risk factors in insurance which may have an adverse impact on the Company's liabilities under insurance contracts. The concentration of insurance risks may be caused by the occurrence of a single insurance event involving large liabilities or a number of separate

insurance events which results in significant liabilities for the company towards the policy holders.

Since insurance risks will never be totally independent from each other, then irrespective of the portfolio size there is always a so-called non-diversified risk when the insurer generally pays more claims than planned. Non-diversified risk is related to changes in the external environmental factors such as stages of the country economic development which have a systematic impact on the frequency and amount of claims in certain lines of business. For example, the increase of the inflation rate will increase the amounts of claims in the majority of the portfolio while government amendments relating to one of the types of the compulsory insurance may suddenly increase the insurer's liabilities.

The Company has two key methods in managing these risks.

First, the risk is managed through appropriate underwriting. Underwriters are not permitted to underwrite risks unless the expected profits are commensurate with the risks assumed (refer to Insurance risk management).

Second, the residual risk is managed through the use of reinsurance. The Company purchases reinsurance coverage for various classes of its liability and property business. Management reviews the reinsurance program at least on an annual basis and determines the required changes. The Company assesses the costs and benefits associated with the reinsurance program on an ongoing basis. The Company monitors risk per insurance lines.

GEOGRAPHIC AND OTHER TYPE OF CONCENTRATION

The Company's insured risks are mainly located in Lithuania, Latvia and Estonia except for travel policies being effective only outside the residence country of the insured. However, there are numerous products covering insurance accidents in Baltics and abroad. The risk concentration in motor and property insurance is in the largest cities of Lithuania, Latvia and Estonia. The risk concentration in motor insurance is increasing due to the growing number of vehicles and traffic intensity, resulting in an indirect impact on claim amounts in this line of insurance. Insurance regulations and methodology determines the necessary risk assessment for property, claim amount limits and reinsurance regulations which ensure risk management in the respective insurance lines.

iii) Potential impact of catastrophic events

A significant insurance risk that the Company believes is necessary to evaluate and include in insurance methodologies is the risk of nature or man-made catastrophes which creates the likelihood of the risk of large liabilities. The Baltic market is characterized by a low risk of catastrophes. The most common natural catastrophes are storms and storm ravage, snow pressure, flood and spring inundation. Storm and flood exposed territories include forests, seashore lines and territories adjacent to rivers.

iv) Potential impact of individual events

The biggest possible losses resulting from single events relate to motor third party liability insurance and property insurance. In order to limit possible losses resulting from single events the Company has bought non-proportional reinsurance cover.

Insurance risk management

i) Underwriting policy

The management of insurance risks is performed by the Company by underwriting risks in accordance with policy. In accordance with the underwriting policy, each line of insurance has a set methodology and rules regulating the risk assessment methods to

be applied, thus decreasing the likelihood of accepting liabilities with respect to risks that are in conflict with the Company's risk insurance policy and internal regulations.

The insurance methodology and rules define criteria and additional information for risk assessment by ensuring a systematic approach to risk assessment. As a result, the Company obtains consistent information in line with its requirements, for regular risk underwriting and introducing the required changes in the documents regulating risk underwriting.

The Company has set insurance limits based on operational experience, market requirements and risk assessment for each line of insurance.

Insurance tariffs are analysed and reviewed based on insurance events and claims paid on a regular basis, and changes are made to the tariffs using actuarial methods which help ensure the ability to meet liabilities. The reinsurance rules regulate the transfer of insurance risks to reinsurers. The Company's insurance type methodology and rules help insurance intermediaries and agents observe the Company's insurance guidelines on all insurance products offered on the Baltic market. The methodology for calculating technical reserves determines that appropriate reserves are created for incurred claims.

ii) Claims development

Information on the claim's development has been provided in the annual company financial statements.

iii) Liability adequacy test

The estimation of technical provisions for an insurance portfolio represents an approximation of future cash flows for the claim's payments, and there will always be an element of uncertainty in such calculations. Provision risks relate to this kind of uncertainty. The uncertainty depends on the nature of the risk. Risk with a short duration is less exposed to changes that will affect future payments. Inflation is an underlying risk in most insurance products. The effect will be different, depending on the characteristics of each product and the terms and conditions that apply for the claims settlement.

On each reporting date, the Company prepares a liability adequacy test by assessing whether the insurance liabilities recognized during the reporting year for valid policies are adequate by comparing the insurance provisions established to the present value of the estimated future cash flows arising on existing insurance policies.

If the liability adequacy test shows a deficiency in the carrying amount of liabilities, the deficiency is recognized as a loss for the financial year by setting additional unexpired risk reserve.

The test is performed on a line of business basis in each country separately and test is applied to the gross amounts of provisions, i.e., the effect of reinsurance is not taken into account.

iv) Sources of uncertainty in the estimation of future claims payments

The Company is liable for insured events that occurred during the term of the contract, even if the loss is discovered after the end of the contract term, and claims are paid according to the policy conditions valid at the time of occurrence. As a result, claims are settled over a long period of time, and there is an element of the claims provision that relates to incurred but not reported claims (IBNR).

There are several variables that affect the amount and timing of cash flows from the insurance contracts. These variables mainly relate to the characteristics of the different types of risks covered and the applied risk management procedures. The compensation

paid is according to the terms specified in the insurance contract. Compensation for claims with respect of bodily injuries are calculated as the present value of lost earnings, rehabilitation expenses and other expenses that the injured party will incur as a result of the accident or disease.

The estimated cost of claims includes expenses to be incurred in settling claims, net of the expected recourse amount and other recoveries. The Company takes all reasonable steps to ensure that it has appropriate information regarding its claim's exposure. However, given the uncertainty in establishing claims provisions, it is likely that the final outcome will prove to be different from the original liabilities established. The liabilities in the financial statements related to these contracts comprise a provision for IBNR, a provision for reported claims not yet paid (RBNS) and a provision for unearned premiums and unexpired risks at the reporting date.

The estimation of IBNR is generally subject to a greater degree of uncertainty than the estimation of the cost of settling claims already notified (RBNS), where information about the claim is available. There may be cases where certain claims may not be apparent to the insured until many years after the event that gave rise to the claims.

In estimating the liability for the cost of reported claims not yet paid, the Company considers any information available from loss adjusters, claims handlers and information about the costs of settling claims with similar characteristics in previous periods. All claims are assessed on a case-by-case basis by a claims handler. Claims with potential for distortive effects of their development are handled separately and projected to their ultimate by an additional provision. Where possible, the Company adopts multiple techniques to estimate the required level of provision. This provides a greater understanding of the trends inherent in the experience being projected. The projections given by the various methodologies also assist in estimating the range of possible outcomes. The most appropriate estimation technique is selected considering the characteristics of the business class and the extent of the development of each accident year.

Insurance contracts are often classified as risks that are short-tail and risks that are long-tail. Short-tail risk is characterized by the period between the occurrences, reporting and final settlement of claims is short. Long-tail risk is the opposite; the period between the occurrence, reporting and settlement of claims is long. In Property and Motor hull insurance the claims are reported soon after occurrence, while bodily injury claims may be reported several years after the occurrence and settled several years after they were reported. The provisions for IBNR for short-tail risks are relatively small, while for long-tail risks the provisions for IBNR may constitute a substantial part of the total loss provision.

Financial risks and risk management

Financial risk is a collective term for various types of risk related to financial assets. The Company's financial assets and liabilities, including investments, insurance receivables and reinsurance assets, may be exposed to financial risk as follows:

- **Market risk:** changes to the market situation may adversely impact the insurer's assets and/or liabilities, investments may be impaired, and return on assets decreased. Market risk includes interest rate, equity, property, currency, spread and concentration risk.
- **Counterparty (credit) risk:** loss arising from an issuer defaulting on its obligations or because of increased risk premiums for bonds with credit risk, and failure of a counterparty to meet contractual obligations;

- **Liquidity risk:** under certain adverse conditions, the insurer may be forced to sell assets at a lower price than their fair value in order to be able to settle liabilities.

Below is a description of each of these financial risks and a summary of methods used by the Company to manage these risks.

Exposure to those risks arises in the normal course of business.

MARKET RISK

Market risk is the risk that movements in market prices, including foreign exchange rates, interest rates, credit spreads and equity prices will affect the Company's income or the value of its portfolios.

Market risks comprise:

- interest rate risk;
- foreign exchange risk;
- price risk.

Market risk arises from open positions in interest rate, currency and equity financial instruments, which are exposed to general and specific market movements and changes in the level of volatility of market prices.

i) Interest rate risk

Interest rate risk is defined as the loss in value resulting from a change in interest rates and is viewed both from the asset-only perspective and in relation to the interest-rate sensitivity of the liabilities.

Measures for management of the interest rate risk in the Company are centralized and based on the assessment of the impact of the interest rate risk on the Company's financial indices. The Company does not have significant interest-bearing liabilities, and the largest share of interest-bearing assets are at a fixed interest rate. The overall exposure to interest rate risk is reduced by matching a portfolio of fixed income instruments to the overall duration and pay-out pattern of insurance liabilities. The Company does not have bonds with variable interest rate. While an increase in interest rates decreases market values of fixed income securities in the portfolio, it also decreases the value of insurance liabilities through discounting effect. Therefore, the Company normally is not exposed to significant interest rate risk and to the effects of fluctuations in interest rates resulting from different maturity or interest re-pricing profile of the Company's interest-bearing assets and liabilities.

ii) Foreign exchange risk

The Company holds assets and liabilities denominated in foreign currency. Foreign exchange risk is the risk of financial losses resulting from fluctuations in foreign exchange.

Part of insurance risks is denominated in foreign currencies. Based on the Company's policies, foreign exchange risk is limited to known or expected transactions in foreign currencies. The management of foreign exchange risk is based on investments into respective currencies. Therefore, profit and loss are most sensitive to fluctuations in PLN exchange rates which are considered insignificant. The Company is not engaged in any speculative transactions that may increase the foreign exchange risk.

iii) Price risk

Price risk refers to the risk of fluctuations in the value of financial instruments resulting from changes in market prices; the changes might impact the factors of an individual financial instrument or of all financial instruments traded on the market. The price risk

occurs when the Company chooses a long-term or short-term position of a financial instrument.

Credit risk

Credit risk is the risk of losses or adverse changes in financial position resulting from changes in the standing of issuers of securities, business partners or debtors as a default of counter party or increase in credit margin. The credit risk is managed by imposing loan restrictions on one entity, a group of entities, a sector or a country, by diversification of assets and the portfolio of financial instruments, by reinsurance of the financial insurance portfolio and other measures.

i) Management of financial investments

To manage its credit risk, the Company mostly invests in markets and investments having high ratings.

ii) Reinsurance

The Company acquires reinsurance in order to secure the Company's share capital; therefore, reinsurance is to be considered as a tool for both risk and capital management. The same models and methodology are used to analyse and acquire reinsurance as to the assessment of internal capital allocation based on risks.

In order to manage risks, the Company has approved the reinsurance program which determines the reinsurance principles and the selection criteria of reinsurers. At least once a year the reinsurance program is reviewed by the administration which also makes the necessary changes. The Company's reinsurance program firstly comprises non-proportional reinsurance. The decisions on the reinsurance program are taken based on the analysis of position, payments archive, and possibility to implement the model and the Company's capitalization. The Company cooperates with the leading reinsurance companies as well as its parent company Gjensidige Forsikring.

Concentration risk is the pooling of risks which might lead to losses threatening the Company's solvency and financial position, the possibility of major losses due to excessive positions exceeding the limits set by the Company. Concentration risk is considered a composite of main risk and as a separate risk category is managed within the main risk types (insurance, market and credit).

Liquidity risk is the risk that the Company will be unable to meet its financial obligations on time and/or that it may be forced to sell financial assets in order to fulfil its obligations and will suffer a loss due to a lack of liquidity in the market. In managing liquidity risk, the Company seeks to ensure the timely execution of the Company's financial liabilities and the effective use of liquid funds. For managing liquidity risk, the Company uses the cash flows method, which is reasoned by planning and forecasting the cash flows. The Company has established the Routine for Liquidity Management which defines responsibilities, controls, reporting and risk limits applicable to liquidity management and is approved as a part of the Investment Strategy.

The Company is able to carry out its financial obligations, because its financial assets are held till maturity and from underwriting cash flows from policyholders, reinsurers.

Operational risk is the risk of direct or indirect loss resulting from inadequate or failed internal processes, systems, technologies, employees' actions or external factors. Operational risk management is a continuous process for operational risk management, which is typical to all Company's products, operations, processes and systems, which are important to the Company, including such areas as transfer of essential or important Company's functions or operations to a service provider based on a contract, implementation of new product of service, and functioning of the Company's IT systems. The Company, managing its operational risk, considers both internal and external factors which might lead to operational risks. The Company's measures of operational risk management focus on risk aversion, mitigation, transfer and/or assuming considering their effect on the achievement of the Company's goals, business continuity, considering the costs of risk mitigating measures and their effectiveness. The main goal of operational risk management is improvement of the Company's processes seeking to minimize the possible effect of operational risk to the tolerated level. The Company applies the following measures to mitigate the operational risk: implementation of control procedures, limitation of authorizations, four-eye principle, segregation of functions/duties, automation and other organizational and technical measures.

Operational risk incidents are registered in the register of the Operational risk incidents when the Company's employee notices such an incident.

The effectiveness of risk management system is regularly assessed by an independent Internal Audit Service, which performs an audit of the effectiveness of risk management system.

Sustainability including climate related risks means an environmental, social or governance event or condition that, if it occurs, could cause an actual or a potential negative impact on the value of the investment or on the value of the liability (ref. Solvency II)

In line with the ESG, climate related - risks for sustainable economic activities, we will work on adapting relevant products and services to meet the criteria for sustainable general insurance.

We are covered by the following criteria in the EU taxonomy, and will further develop measures to accommodate them:

- Gjensidige uses a forward-looking modelling of climate risk as the basis for pricing;
- In cooperation with Gjensidige Group we aim to further develop the use of such models and scenarios to achieve the best possible basis for pricing.

Some of our insurance products contain incentives for damage prevention measures

V. NOTES

1. Property and equipment, Intangible assets

The movement of intangible assets, property and equipment for the period ended 31 March 2025, was:

Items, EUR'000	Intangible assets	Property	Other fixed assets	Total
Acquisition cost				
Balance on 1 January 2024	12.124	90	4.202	16.416
Assets acquired	555	-	152	707
Assets disposed (-)	-	-	-147	-147
Balance on 31 December 2024	12.679	90	4.207	16.976
Assets acquired	146	-	26	172
Assets disposed (-)	-	-	-40	-40
Balance on 31 March 2025	12.825	90	4.193	17.108
Revaluation				
Balance on 1 January 2024	-	22	-	22
Change in revaluation result on disposals +/-	-	-1	-	-1
Balance on 31 December 2024	-	21	-	21
Change in revaluation result on disposals +/-	-	-	-	-
Balance on 31 March 2025	-	21	-	21
Accumulated depreciation				
Balance on 1 January 2024	8.387	48	3.247	11.682
Charge for the year	1.065	1	464	1.530
Reversals of depreciation after write-off (-)	-	-	-143	-143
Balance on 31 December 2024	9.452	49	3.568	13.069
Charge for the year	256	-	90	346
Reversals of depreciation after write-off (-)	-	-	-39	-39
Balance on 31 March 2025	9.708	49	3.619	13.376
Net book value				
Balance on 31 December 2024	3.227	62	639	3.928
Balance on 31 March 2025	3.117	62	574	3.753

2. Financial assets designated at fair value through profit or loss

EUR'000	Financial instruments at fair value through profit or loss (FVTPL)
Balance on 1 January 2024	138.282
Assets acquired	119.417
Assets disposed	-113.944
Increase(decrease) Value	4.865
Balance at 31 December 2024	148.620
Assets acquired	-
Assets disposed	-729
Increase(decrease) Value	827
Balance on 31 March 2025	148.718

Valuation hierarchy 2025

EUR'000	Level 1	Level 2	Total
Financial instruments designated at fair value through profit or loss	148.718	-	148.718

Valuation hierarchy 2024

EUR'000	Level 1	Level 2	Total
Financial instruments designated at fair value through profit or loss	148.620	-	148.620

3. Other receivables

As of 31 March 2025, other receivables comprised:

Items, EUR'000	31.12.2025	31.12.2024
Intermediaries' debts	2.042	1.498
Other receivables	499	437
Total	2.541	1.935

4. Cash and cash equivalents

Items, EUR'000	31.03.2025	31.12.2024
Current accounts at banks	8.345	7.632
Total	8.345	7.632

As of 31 March 2025, cash deposited in SEB bank AB for issued guarantees amounted to EUR 25 thousand (31 December 2024: EUR 57 thousand).

5. Share capital

The share capital of the Company is divided into 7.623.384 ordinary registered shares with the nominal value of EUR 7,37 each. All shares were fully paid as of 31 March 2025 and 31 December 2024.

	31.03.2025		31.12.2024	
	Amount	EUR'000	Amount	EUR'000
Ordinary shares with voting rights	7.623.384	56.184	7.623.384	56.184

Company's shareholders	31.03.2025		31.12.2024	
	Number of shares	% Of share capital	Number of shares	% Of share capital
Gjensidige Forsikring	7.623.384	100	7.623.384	100
Total	7.623.384	100	7.623.384	100

According to the Law on Insurance of the Republic of Lithuania, the share capital of an insurance company should be not less than EUR 1 million. As of 31 March 2025, and 31 December 2024, the Company complied with the requirement.

6. Insurance contract liabilities

Reconciliation of the liability for insurance contracts issued showing the liability for remaining coverage and the liability for incurred claims 2025:

EUR thousands	Liabilities for remaining coverage (LRC)			Liabilities for incurred claims (LIC)	
	Excluding loss component	Loss component	Estimates of the present value of future cash flows	Risk adjustment	Total
Insurance contract liabilities as at opening balance	50.947	1.268	66.751	4.053	123.019
Insurance revenue	-39.190	-	-	-	-39.190
Incurred claims	-	-	24.586	568	25.154
Incurred other insurance service expenses	-	-	10.363	-	10.363
Changes that relate to past service - adjustments to LIC	-	-	202	-1.221	-1.019
Losses on onerous contracts	-	144	-	-	144
Insurance finance expenses through profit or loss	-	-	-357	-8	-365
Total changes in the statement of profit or loss	-39.190	144	34.794	-661	-4.913
Premiums received	39.629	-	-	-	39.629
Claims paid			-28.786	-	-28.786
Expenses paid			-10.363	-	-10.363
Total cash flows	39.629	-	-39.149	-	480
Insurance contract liabilities as at closing balance	51.386	1.412	62.396	3.392	118.586

Reconciliation of the liability for insurance contracts issued showing the liability for remaining coverage and the liability for incurred claims 2024:

EUR thousands	Liabilities for remaining coverage (LRC)		Liabilities for incurred claims (LIC)		Total
	Excluding loss component	Loss component	Estimates of the present value of future cash flows	Risk adjustment	
Insurance contract liabilities as at opening balance	48.876	1.836	66.785	4.699	122.196
Insurance revenue	-158.874	-	-	-	-158.874
Incurred claims	-	-	107.859	1.192	109.051
Incurred other insurance service expenses	-	-	42.193	-	42.193
Changes that relate to past service - adjustments to LIC	-	-	8.803	-1.975	6.828
Losses on onerous contracts	-	-568	-	-	-568
Insurance finance expenses through profit or loss	-	-	2.373	137	2.510
Total changes in the statement of profit or loss	-158.874	-568	161.228	-646	1.140
Premiums received	160.945	-	-	-	160.945
Claims paid	-	-	-119.069	-	-119.069
Other insurance service expenses	-	-	-42.193	-	-42.193
Total cash flows	160.945	-	-161.262	-	-317
Insurance contract liabilities as at closing balance	50.947	1.268	66.751	4.053	123.019

7. Reinsurance contracts assets

Reconciliation of the assets for reinsurance contracts issued showing the assets for remaining coverage in reinsurance share and the assets for incurred claims in reinsurance share 2025:

EUR thousands	Liabilities for remaining coverage (LRC)		Liabilities for incurred claims (LIC)		Total
	Excluding loss component	Loss compo- nent	Estimates of the present value of future cash flows	Risk adjustment	
Reinsurance contract assets as at opening balance	1.442	-	19.770	1.272	22.484
Reinsurance premiums paid	-1.927	-	-	-	-1.927
Amounts recovered from reinsu- rers for incurred claims	-	-	46	2	48
Reinsurance commissions	-	-	27	-	27
Changes in amounts recoverable that relate to past service - adjustments to LIC	-	-	96	-441	-345
Reinsurance finance expenses through profit or loss	-	-	-79	-	-79
Total changes in the statement of profit or loss	-1.927	-	90	-439	-2.276
Premiums paid	3.250	-	-	-	3.250
Recoverable claims	-	-	-3.899	-	-3.899
Received reinsurance commissi-ons	-	-	-27	-	-27
Total cash flows	3.250	-	-3.926	-	-676
Reinsurance contract assets as at closing balance	2.765	-	15.934	833	19.532

Reconciliation of the assets for reinsurance contracts issued showing the assets for remaining coverage in reinsurance share and the assets for incurred claims in reinsurance share 2024:

EUR thousands	Liabilities for remaining coverage (LRC)			Liabilities for incurred claims (LIC)	
	Excluding loss component	Loss component	Estimates of the present value of future cash flows	Risk adjustment	Total
Reinsurance contract assets as at opening balance	1.323	-	21.542	1.547	24.412
Reinsurance premiums	-8.627	-	-	-	-8.627
Amounts recovered from reinsurers for incurred claims	-	-	4.152	43	4.195
Reinsurance commissions	-	-	364	-	364
Changes in amounts recoverable that relate to pastservice - adjustments to LIC	-	-	7.411	-361	7.050
Reinsurance finance expenses through profit or loss	-	-	734	43	777
Total changes in the statement of profit or loss	-8.627	-	12.661	-275	3.759
Premiums paid	8.746	-	-	-	8.746
Recoverable claims	-	-	-14.069	-	-14.069
Received reinsurance commissions	-	-	-364	-	-364
Total cash flows	8.746	-	-14.433	-	-5.687
Reinsurance contract assets as at closing balance	1.442	-	19.770	1.272	22.484

8. Other liabilities

Items, EUR'000	31.03.2025	31.12.2024
Liabilities to customers	2.943	2.962
Salaries and other	973	549
Total	3.916	3.511

9. Provisions

Items, EUR'000	Restructuring	Bonuses of employees	Total
Balance on 1 January 2024	339	1.331	1.670
New provisions	130	2.489	2.619
Release	-45	-	-45
Reclassification	-	45	45
Provisions used during the year	-424	-923	-1.347
Balance on 31 December 2024	-	2.942	2.942
New provisions	-	416	416
Provisions used during the year	-	-207	-207
Balance on 31 March 2025	-	3.151	3.151

Restructuring provisions

During 2024 the Company committed to a plan to restructure the Company's activities to improve the efficiency. Following the announcement of the plan, the Company recognised a provision of EUR 130 thousand for expected restructuring costs, including employees' termination benefits. Estimated costs were based on the terms of the relevant contracts. The provision of EUR 424 thousand was used during the year. The rest of the amount was reclassified to employees' bonuses.

Bonuses of employees

Bonuses of employees are accrued according to the valid motivation system in the Company.

10. Insurance revenue

Country, where insurance agreement was concluded	Insurance revenue, EUR'000	
	2025	2024
Republic of Lithuania	23.711	22.821
Other EU countries	15.479	14.656
Total	39.190	37.477

11. Transactions with related parties

Related parties are defined as shareholder of the Company, its subsidiaries, members of the Board and Council, their closerelatives and companies in which they have a significant influence or control.

All members of the Board, except for Aysegül Cin, are employees of Gjensidige Forsikring ASA (Group).

During the financial period the Company had transactions with the following related parties - Gjensidige Forsikring ASA, GjensidigeBusiness Services ASA and UAB Redgo Lithuania.

12. Compliance with legal regulations

As of 31 March 2025, and as of 31 December 2024, the Company complied with the legal requirements of the Republic of Lithuania that are applied to the insurance companies for investment structure.

As of 31 March 2025, and as of 31 December 2024, the Company complied with capital requirements, including Solvency II and share capital requirements.

13. Right-of-use assets and lease liability

Gjensidige recognize its lease liabilities at the present value of the remaining lease payments, discounted using the lessee's incremental borrowing rate at the date of initial application, as well as the recognition of related right-of-use assets to an amount corresponding to the lease liability.

Gjensidige assesses lease agreements concluded during the financial period to determine whether they meet the criteria for right-of-use assets under IFRS 16. In assessing a lease, the leased asset is identified, the consideration for the use of the property, the contractual right to control the use of the property and the right to receive full economic benefits from its use over a period of time.

Right-of-use assets

EUR'000	Land and buildings	Total
Costs on 1 January 2024	7.707	7.707
Changes contracts conditions (+-)	440	440
Costs on 31 December 2024	8.147	8.147
Changes contracts conditions (+-)	126	126
Costs on 31 March 2025	8.273	8.273
Depreciation on 1 January 2024	-4.293	-4.293
Depreciation expenses per period	-961	-961
Changes contracts conditions (+-)	277	277
Depreciation on 31 December 2024	-4.977	-4.977
Depreciation expenses per period	-242	-242
Changes contracts conditions (+-)	-34	-34
Depreciation on 31 March 2025	-5.253	-5.253
Balance on 31 December 2024	3.170	3.170
Balance on 31 March 2025	3.020	3.020

Lease liability

EUR'000	Land and buildings	Total
Balance on 1 January 2024	3.503	3.503
Changes contracts conditions (+-)	719	719
Payments	-1.016	-1.016
Interests' expenses	69	69
Balance on 31 December 2024	3.275	3.275
Changes contracts conditions (+-)	83	83
Payments	-258	-258
Interests' expenses	16	16
Balance on 31 March 2025	3.116	3.116

14. Contingencies and commitments

Legal disputes – as of 31 March 2025, and as of 31 December 2024 the Company did not participate in any legal dispute cases that, in the opinion of the management would have a significant impact on these financial statements.

15. Events after the date of the statement of financial position

There were no events in the Company from 31 March 2025 until the date of issue of the financial statements that might have a significant impact on the financial statements.

Financial statements were signed on behalf of the Company's management on 25 April 2025.

Akshay Chandrakant Sankpal
General Director

Jolanta Markelienė
Chief Accountant

Jurgis Navikas
Chief Actuary