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Message from the President and CEO

June 2015

Dear Colleagues:

It is my privilege and responsibility to support our Code of Ethics which was initially adopted by our Board of Trustees in 1998. All employees, vendors and medical staff are expected to live by our Code in the way we treat patients and their families, work with colleagues and conduct business. We are committed to providing the best quality health care and services in full compliance with the law and with our policies and procedures. The Code of Ethics helps us comply with the law and maintain the highest standards of ethical conduct. The Code does not cover every issue that may arise but it sets out the basic principles that guide our behavior.

One of our most valuable assets is our integrity. Protecting this asset is everyone’s responsibility. Atlantic Health System has established a positive reputation across the healthcare industry. Our patients and their families rely on our reputation when they put their trust in us. Our physicians rely on our reputation when they practice at our facilities. Our employees rely on our reputation when they work here. Our reputation is upheld, enhanced or diminished every day by each person’s decisions, actions, behaviors and sense of ethics. Our reputation is integral to our success. Your performance in a manner that is consistent with the principles contained in the Code will enable us to keep and enhance that reputation.

Please read the Code carefully, understand its contents and apply the principles in the course of your work each day. If you are in a situation that you believe may violate or lead to a violation of the Code, follow the procedures described in the Code.

Thank you for your support.

Brian Gragnolati President and CEO Atlantic Health System
Resolutions of the Board of Trustees

Atlantic Health System, Inc.

WHEREAS, Atlantic Health System, Inc. (the “Corporation”) has developed a comprehensive Code of Ethics and corporate compliance program (the “Corporate Compliance Program”) designed to (a) assist all employees of the Corporation in complying with the increasingly complex rules and regulations governing the health care industry by providing uniform policies and procedures and (b) identify and correct any actual or perceived violations of the applicable rules and regulations, the Corporation’s Code of Ethics or any other policy or procedure of the Corporation; and

WHEREAS, the Corporation desires to adopt the Code of Ethics and Corporate Compliance Program, designate the bodies and Corporation personnel responsible for implementation and enforcement of the Code of Ethics and Corporate Compliance Program and delineate the responsibilities of the respective bodies and Corporation personnel in the corporate compliance effort.

NOW, THEREFORE, BE IT RESOLVED AS FOLLOWS:

1. THAT the Corporation hereby adopts a Code of Ethics in the form attached to this Resolution as Exhibit A, such Code of Ethics to govern all trustees, officers and employees of the Corporation and all of its subsidiaries and affiliates; and

2. THAT the Corporation hereby adopts a Corporate Compliance Program, a summary of which is attached to this Resolution as Exhibit B, such Corporate Compliance Program to govern all trustees, officers and employees of the Corporation and all of its subsidiaries and affiliates; and

3. THAT, pursuant to Article V of the Corporation’s Bylaws, there is hereby created a Management Compliance Committee which is charged with providing oversight, advice and general guidance to the Board of Trustees, the Board’s Executive Committee and/or Executive Compliance Committee, as applicable, the Chief Executive Officer, Chief Operating Officer and senior management on all matters relating to corporate compliance, including compliance with applicable laws, regulations, policies and the Corporation’s Code of Ethics, such Management Compliance Committee to operating in accordance with the provisions of the Management Compliance Committee Charter attached to this Resolution as Exhibit C and the terms of which Management Compliance Committee Charter are hereby approved; and

4. THAT the Management Compliance Committee shall be composed of (a) the two Vice Presidents for Corporate Compliance, who shall discharge their duties in accordance with the description of the duties and responsibilities attached to this Resolution as Exhibit D and which description is hereby approved, and (b) the two Corporate Compliance Coordinators, who shall discharge their duties in accordance with the Corporate Compliance Coordinator Charter attached to this Resolution as Exhibit E and the terms of which Corporate Compliance Coordinator Charter are hereby approved. The Vice Presidents for Corporate Compliance shall be the Co-Chairs of the Committee; and

5. THAT, pursuant to Article V of the Corporation’s Bylaws, the powers of the Board’s Executive Committee are hereby expanded to include (a) review of all matters concerning or relating to the Corporate Compliance Program brought to its attention by the Management Compliance Committee and (b) reporting to the full Board, as necessary, on matters of corporate compliance. In matters of corporate compliance, the Executive Committee shall be acting as an Executive Compliance Committee in accordance with the terms of the Executive Compliance Committee Charter attached to this Resolution as Exhibit F and the terms of which Executive Compliance Committee Charter are hereby approved.

6. This Resolution shall take effect immediately.

Dated: March 24, 1998
Resolutions of the Board of Trustees

Atlantic Health System, Inc.

WHEREAS, pursuant to a Resolution of this Board of Trustees adopted on March 24, 1998, Atlantic Health System, Inc. (the “Corporation”) adopted a Code of Ethics and Corporate Compliance Program governing all trustees, officers and employees of the Corporation and all of its subsidiaries and affiliates; and

WHEREAS, it is the intent of this Board of Trustees that the Code of Ethics and Corporate Compliance Program apply not only to trustees, officers and employees of the Corporation and all of its subsidiaries and affiliates but also to all vendors, physicians, volunteers and other third parties providing goods and services to the Corporation and its subsidiaries and affiliates (collectively, “Personnel”).

NOW, THEREFORE, BE IT RESOLVED AS FOLLOWS:

1. THAT the Code of Ethics and Corporate Compliance Program (collectively, the “Policies” and, each, a “Policy”) adopted by the Board of Trustees on March 24, 1998 are hereby amended by the deletion of the word “employee” throughout the Policies and the substitution in its place of the word “Personnel,” unless the context clearly requires otherwise; and

2. THAT for purposes of the Policies, the term “Personnel” shall include, without limitation, all trustees, officers, employees, vendors, physicians, volunteers and other third parties providing goods and services to the Corporation and its subsidiaries and affiliates.

3. THAT a copy of this Resolution be circulated to all Personnel of AHS that have received or will receive a copy of the Policies with instructions that these Resolutions be inserted in the Corporate Compliance Policies and Procedures binder for future reference.

4. THIS Resolution shall take effect immediately.

Dated: January 27, 1999
Introduction

Atlantic Health System, Inc. ("AHS") is committed to conducting its business lawfully, ethically, and truthfully. AHS’ reputation is the sum of the reputations of its personnel. Therefore, all personnel shall meet the highest standards of moral, legal, and ethical conduct in addition to all applicable laws, rules, and regulations. To protect AHS’ reputation and to assure uniformity in standards of conduct, AHS has established this Code of Ethics as the foundation of its Corporate Compliance Program. The Corporate Compliance Program safeguards AHS’ tradition of strong moral, ethical and legal standards of conduct.

All AHS personnel, including for-profit and not-for-profit subsidiaries’ and affiliates’ personnel, regardless of position, must understand and comply fully with the rules and standards established by this Code of Ethics and Corporate Compliance Program. The standards of conduct that govern AHS’ relationship with the government apply to all AHS personnel, whether or not an individual is directly engaged in performing activities relevant to any federal, state or private contracts.

The Code of Ethics demonstrates AHS’ commitment:

- To full compliance with all applicable health care program requirements, including the preparation and submission of accurate claims consistent with such requirements.
- For all personnel to comply with all applicable health care program requirements and all policies and procedures.
- For all personnel to report suspected violations of any applicable health care program requirements and policies and procedures in compliance with Corporate Compliance Policy 2, Mandatory Reporting.
- For all personnel to comply with the Corporate Compliance Policy 3, No Retaliation.

The policies and procedures contained in the Corporate Compliance Program are not meant to cover all situations. Any doubts about a particular situation or whether it is within the Corporate Compliance Program, should be submitted either to your immediate supervisor or to the Vice President, Corporate Compliance and Internal Audit and Chief Compliance Officer.

Any personnel violating any provision of the Corporate Compliance Program, including engaging in any unlawful, unethical or deceitful conduct will be subject to disciplinary action, up to and including termination of employment, termination of contract, or otherwise removed from any relationship or position within AHS.

Only the Vice President, Corporate Compliance and Internal Audit and Chief Compliance Officer, may make decisions regarding requests for interpretation of or exceptions to this Code of Ethics and the Corporate Compliance Program. To the extent that any additional policies are set forth in any other policy manual, including manuals maintained by AHS hospitals and any other subsidiary or affiliate of AHS, those policies must be consistent with the Corporate Compliance Program. In case of any inconsistency, this Code of Ethics and the Corporate Compliance Program shall govern.
Corporate Compliance Program

Scope

The Code of Ethics and Corporate Compliance Program apply to all employees, board members, health care professionals (including medical staffs), volunteers, students, vendors, suppliers and all personnel authorized to act as representatives of AHS and/or its subsidiaries and affiliates (collectively “Personnel”). Within the Code of Ethics or Corporate Compliance Program, any reference to “Atlantic”, “Atlantic Health”, the “System” or “AHS” includes the following entities:

› Atlantic Health System, Inc.;
› Atlantic Health System Hospital Corp.;
› Atlantic Home Care & Hospice;
› Atlantic Rehabilitation;
› Goryeb Children's Hospital;
› Morristown Medical Center;
› Morristown Medical Center Foundation;
› Overlook Medical Center;
› Overlook Medical Center Foundation;
› Atlantic Private Care;
› Newton Medical Center;
› Newton Medical Center Foundation;
› Chilton Medical Center;
› Chilton Medical Center Foundation;
› Hackettstown Medical Center;
› Hackettstown Medical Center Foundation;
› Atlantic Health System Investment Corp.;
› Atlantic Health System Insurance Co., LTD.;
› Practice Associates Medical Group d/b/a Atlantic Medical Group;
› Atlantic Health Management Corp.;
› Atlantic Ambulance Corp.; and
› All subsidiaries, affiliates and business units of the above, now, existing or hereafter.

The Corporate Compliance Program incorporates the seven (7) elements of an effective compliance program identified by the Office of Inspector General (“OIG”) in its Compliance Program Guidance for Hospitals dated February 23, 1998 and the Supplemental Guidance dated January 31, 2005. These elements are:

1. The development and distribution of a Code of Ethics as well as policies and procedures to promote AHS' commitment to compliance;
2. The designation of a compliance officer and compliance committee charged with the responsibility of operating and monitoring the compliance program;
3. The development and implementation of regular, effective education and training programs;
4. A process to receive complaints and procedures to protect the anonymity of complainants and to protect whistleblowers from retaliation;
5. A process to respond to allegations of improper wrongdoing and the enforcement of appropriate disciplinary action against Personnel who have violated the compliance policies, statutes or regulations or any health care program requirements.
6. Use audits or other evaluation techniques to monitor compliance and assist in the reduction of identified problem areas; and
7. The investigation and remediation of identified problem areas and the development of policies addressing the non-employment or retention of sanctioned individuals.

"Hospitals with an organizational culture that values compliance are more likely to have effective compliance programs and, thus, are better able to prevent, detect, and correct problems." (Supplemental Guidance, 70 Fed. Reg., 4874; January 31, 2005)

Chief Compliance Officer

AHS has designated the Vice President, Corporate Compliance and Internal Audit as its Chief Compliance Officer, who is responsible for the oversight of Atlantic Health System's Corporate Compliance Program.

Oversight of the Corporate Compliance Program consists of education regarding the Program; investigation of, response to and reporting of compliance issues; annual evaluation of the Program's effectiveness; periodic (at least quarterly) reports to the Board of Trustees or appropriate Committee thereof, implementation of the seven elements set forth above, and, any other function necessary to ensure that the Program meets its objectives.

By the nature of the function, the Chief Compliance Officer will have access to sensitive information concerning personnel, and patients. The Chief Compliance Officer must respect the privilege and confidence associated with his/her access to this sensitive information.

The Compliance Program includes three (3) levels of Compliance Committees:
1. AHS Board of Trustees’ Compliance Committee.
2. AHS Senior Management Compliance Committee.
3. Site Based and Ancillary Services Compliance Committees which consist of: Morristown Medical Center Compliance Committee, Newton Medical Center Compliance Committee, Overlook Medical Center Compliance Committee, Chilton Medical Center Compliance Committee, Hackettstown Medical Center Compliance Committee, and Ancillary Services Compliance Committee (includes Atlantic Medical Group, Atlantic Ambulance, Atlantic Home Care & Hospice, At Home Medical and Atlantic Private Care Services).

The Compliance Committees shall support the Chief Compliance Officer in fulfilling his/her responsibilities and shall assist in the analysis of AHS’ risk areas. These Compliance Committees shall meet at least quarterly.

**Mandatory Reporting**

AHS is committed to ensuring that it properly addresses suspected violations of law, regulation, policy, procedure, or the Code of Ethics. Atlantic Health System relies upon its Personnel to report possible issues so that it may take appropriate action.

AHS Personnel must report actual or suspected violations of law or any AHS policy. AHS includes language in all contracts which requires its business partners to report actual or suspected violations of law or AHS policy.

An individual shall report a suspected violation by one of the following:

1. Personnel may report a suspected violation to his/her supervisor, manager, director or site HR representative. The supervisor, manager, director or site HR representative must forward the report to the Vice President, Corporate Compliance and Internal Audit and Chief Compliance Officer.
2. Personnel may report a suspected violation directly to the Vice President, Corporate Compliance and Internal Audit and Chief Compliance Officer at 973-660-3143.
3. Personnel may report a suspected violation directly to the Director, Corporate Compliance at 973-660-3264.
4. Personnel may report a suspected violation directly to the Manager, Privacy Compliance at 973-660-3178.
5. Personnel may report a suspected violation directly to the Vice President, Legal Affairs and Chief Legal Officer at 973-660-3169.
6. Personnel may report a suspected violation by calling the anonymous Corporate Compliance Program Hotline’s toll-free phone number at 888-213-0837.
7. Personnel may report a suspected violation anonymously by direct web access at atlantichealth.alertline.com.
8. Personnel may report a suspected violation by sending an email to the Corporate Compliance Program email at compliance@atlantichealth.org. Use of this option is not anonymous.
9. Personnel may also report a suspected violation by sending a fax to the Corporate Compliance Program secure fax machine (located in the Vice President, Corporate Compliance and Internal Audit and Chief Compliance Officer’s office) at 973-660-9059. Use of this option is not anonymous.

AHS will attempt to treat all reports confidentially to the maximum extent consistent with fair and rigorous enforcement of the Code of Ethics and within the limits of any subsequent investigation. AHS will not take adverse action against any Personnel if they, in good faith, report a suspected violation or other Personnel.

**No Retaliation**

No AHS Personnel may retaliate, harass or otherwise engage in retribution or discrimination against any individual who, in good faith, reports a possible violation of law, regulation, policy, procedure, the Code of Ethics, Corporate Compliance Program or who assists or cooperates with any investigation conducted with respect to such a possible violation.

No AHS Personnel may retaliate, harass, or otherwise engage in retribution or discrimination against any individual who objects or refuses to participate in any action or activity that the individual reasonably believes is in violation of any law, rule or regulation is fraudulent or criminal or is incompatible with a public policy concerning public health, safety or the environment.

AHS shall take disciplinary action, up to and including termination of employment, against any supervisor, manager or other personnel who conducts or condones such retribution, discrimination, retaliation or harassment.

If an individual reports a concern regarding his/her own inappropriate or inadequate actions, reporting those concerns does not exempt such individual from the consequences of those actions, although AHS may consider that self-reporting when determining the appropriate action.
Enforcement

AHS’ Corporate Compliance Program incorporates a comprehensive strategy to promote compliance with all applicable laws, regulations and standards of practice in all business activities.

It is AHS’ policy to fully comply with the United States Sentencing Commission “Guidelines for Organizations” that require consistent enforcement through appropriate disciplinary mechanisms including, as appropriate, the disciplining of individuals responsible for the failure to detect or act upon an offense. This is also consistent with the U.S. Department of Health and Human Services’ OIG guidance that compliance programs contain a system of enforcement and discipline.

Some laws mandate enforcement of sanctions against Personnel who violate legally required policies. AHS has developed uniform guidance and practices for disciplining Personnel who are found in violation of the Code of Ethics, the Corporate Compliance Program, Human Resources or operational policies, laws or regulations. AHS has adopted this policy and supporting procedures to ensure that general guidance is available for all Personnel including supervisors and executives. Specific guidance as to existing policies and procedures can be found in AHS’ various operations and Human Resources policy and procedure manuals, as well as on AHS’ intranet.

There will be consistent enforcement and disciplinary actions will be taken for violations of rules, regulations, compliance policies, the Code of Ethics and the Corporate Compliance Program. Management is responsible for ensuring that all Personnel under their supervision receive adequate training on compliance relevant to specific job duties and responsibilities. Management must take reasonable steps to prevent violations of the Code of Ethics and the Corporate Compliance Program through the provision of proper guidance and monitoring of Personnel activities. Management is held to be responsible for foreseeable failures of their subordinates to comply with all policies, laws and regulations. All Personnel, regardless of position, who fail to comply, will receive consistent and appropriate discipline.

Research Compliance

AHS coordinates clinical trials through the Atlantic Center for Research.

AHS’ Institutional Review Board (“IRB”) approves all research conducted clinical trials and ensures compliance with FDA regulations, study and sponsor protocols and all applicable laws, regulations, policies and standard operating procedures. The primary responsibility of the IRB is to protect the rights and welfare of human research participants.

Quality of Care and Services

We provide high quality care and skilled, courteous, compassionate, reliable service to all patients, customers, visitors and our fellow colleagues.

We respect the dignity, comfort and privacy of every individual while providing them with consideration, courtesy and respect.

We provide appropriate and timely care, by qualified health care professionals including emergency care to all patients without regard to race, religion, disability, age, sex, national origin or ability to pay for such care.

We maintain complete and thorough records of patient information and protect the privacy of our patient’s health records to fulfill the requirements set forth in applicable Federal and state laws and regulations and AHS policies.

Privacy and Confidentiality

We maintain the privacy and confidentiality of information entrusted to us in accordance with legal and ethical standards.

We respect and protect the privacy of our patients, employees and customers and safeguard their information and health records according to all applicable laws and regulations and AHS policies.

We appropriately maintain medical and business documents and follow our record retention policy in accordance with the law and other applicable guidelines.

We do not discuss patient, employee and customer information in any public area, including elevators, hallways, stairwells, restrooms, lobbies and dining areas, or in any other area where conversation may be overheard.

We exercise care to ensure that confidential and proprietary information is carefully maintained and managed to protect its value including salary, benefits, payroll, personnel files and information on disciplinary matters as confidential information while maintaining computer passwords and access codes in a confidential and responsible manner.
Workplace Conduct and Employment Practices
We recognize that the greatest strength of our organization lies in the efforts and talents of our Personnel, who create our success and our reputation. We treat each other with respect, dignity and courtesy.

We provide equal employment opportunities to prospective and current employees, based solely on merit, qualifications and abilities. AHS will not tolerate discrimination or harassment of any kind.

We support and observe a workplace free of alcohol, drugs, tobacco and smoking.

We do not employ, engage or do business with Personnel who have been sanctioned by any regulatory agency and are not able to perform their designated responsibilities.

We do not tolerate any act of retaliation or retribution against any individual who in good faith reports suspected violations of law, regulation, AHS policies, our Code of Ethics or our Corporate Compliance Program. We have a management team who fosters an “open door policy” and creates a work environment in which ethical concerns will be addressed.

All Personnel receive appropriate training and orientation and have the proper qualifications, experience and expertise to perform their duties and meet the needs of our customers.

Information Technology
We safeguard AHS information technology and proprietary information and protect it from improper use and access.

We follow the laws regarding intellectual properties, including patents, trademarks, marketing, copyrights, and software and do not copy computer software unless it is specifically permitted.

We maintain and monitor security systems, data backup systems and storage capabilities to ensure that information is maintained safely in accordance with federal and state requirements and AHS policies and procedures.

We only allow authorized Personnel to have access to AHS computer systems and software on a “need to know” basis.

Environmental and Safety Considerations
We are committed to providing a safe and secure environment for Personnel and patients.

We maintain policies and procedures with regard to the environmental aspects of the use of AHS buildings, property, laboratory processes and medical products in accordance with applicable regulations.

We comply with established safety and infection control policies and procedures, which are intended to prevent job-related hazards, consistent with ergonomic standards and ensure a safe work environment.

We comply with permit requirements that allow for the safe discharge of pollutants into the air, sewage systems, water or land and comply with all laws and regulations governing the handling, storage, use and disposal of hazardous materials, other pollutants and infectious wastes.

We do not tolerate violence or threatening behavior from AHS Personnel.

We hold each employee responsible for maintaining a safe and healthy workplace for all employees by following AHS safety and health rules and practices and reporting accidents, injuries and unsafe equipment, practices or conditions.

Coding and Billing
We ensure that coding and billing are performed accurately, in accordance with Medicare, Medicaid and other applicable federal and state program regulations and requirements as well as any other payer coverage and billing requirements. It is physicians’ and other health care practitioners’ responsibility to ensure that the information required for the proper coding and billing is documented in patients’ medical records and accurately reflects the care provided to our patients.

We process and submit accurate and complete claims using the appropriate forms.

We use appropriate physician and other health care practitioner billing identification numbers on all claims.

We only bill for services and care provided, according to medical necessity guidelines.

We train all employed physicians and other health care practitioners and their staff.

We ensure that all payments and other transactions are properly authorized by management and properly documented in our records and notify the payer of payment errors and process refunds in accordance with law.

Co-payments, coinsurance and deductibles are only waived in accordance with established rules, policies and procedures.

We maintain complete and accurate records to fulfill requirements set forth by our policies and procedures, as well as applicable laws and requirements.

We regularly review, update and maintain all coding and billing forms, including, but not limited to, encounter forms, registration forms and consent/authorization forms, in accordance with applicable laws and regulations.

We issue statements, and other communications, that are accurate, complete and truthful and in compliance with applicable laws and regulations.

Personnel report errors to the appropriate management authority for correction in a timely and appropriate manner.
We do not knowingly employ, contract or do business with providers who are under federal or state sanctions.

We provide financial assistance to all who need it based upon our policies and procedures.

**Adhering to Laws and Regulations**

We follow applicable laws and regulations, conduct our business and clinical activity with high standards of ethics, integrity, honesty and responsibility and act in a timely manner, enhancing Atlantic Health System’s standing in the community.

We provide health care services consistent with Federal, state, and local laws and regulations that apply to our business.

We do not give or receive any form of payment, kickback or bribe to induce the referral or the purchase of any service.

We do not offer any improper inducements or favors to patients, providers or others to encourage the referral of patients to our facilities or to use a particular product or service.

We avoid inappropriate discussions with competitors regarding business issues.

We procure, maintain, dispense and transport drugs or other controlled substances used in the treatment of patients according to applicable laws and regulations and AHS policies and procedures.

We do not knowingly make false statements, verbal or written, to government agencies or other payers.

**Protecting Assets**

We protect our assets and the assets of others entrusted to us, including physical and intellectual property, and protect information against loss, theft or misuse.

We establish policies and practices within our areas of responsibility to ensure the safeguarding of our assets, the accuracy of financial statements and all other records and reports.

We use AHS property appropriately and with approval. We take measures to prevent any unexpected loss of equipment, supplies, materials or services and adhere to established policies regarding approval for disposing of AHS properties.

We report time and attendance accurately.

We report expenses accurately and consistent with and justified by our job responsibilities and AHS policies, procedures and required needs.

We adhere to established policies and procedures governing record management and comply with applicable record retention and destruction policies and schedules.

**Conflicts of Interest**

We avoid conflicts of interest or the appearance of conflicts of interest between our own individual interests and the interests of AHS.

We avoid engaging in any activity, practice or act that creates an actual, apparent or potential conflict with the best interests of AHS.

We act in the best interest of AHS in our dealings with suppliers, customers, government agencies and third parties. This includes those acts formalized in written contracts, as well as everyday business relationships with vendors, customers, government officials and third parties.

No Personnel may have any employment, consulting or other business relationship with a competitor, customer or supplier, or invest in any competitor, customer or supplier unless the Vice President, Corporate Compliance and Internal Audit and Chief Compliance Officer grants advance written permission after such Personnel fully discloses the nature and extent of the relationship.

No Personnel shall accept any gifts, business courtesies, or gratuities of material value unless reported to the Vice President, Corporate Compliance and Internal Audit and Chief Compliance Officer and found not to constitute a violation of Ethical Compliance Policy 2, Gifts and Courtesies.