

Please note that whether some state-specific policies may apply to you may be determined by the number of Pritchard employees in the state. Please see your local HR resource for more information about whether these policies apply to you.

Rhode Island

Earned Sick and Safe Leave

Eligibility

If you are a Rhode Island employee, Pritchard provides you with Earned Sick and Safe Leave time (“ESSL”). If your primary place of work is in Rhode Island and you are eligible for sick time under the general Paid Sick Days policy and/or any other applicable sick time/leave law or ordinance, this policy applies solely to the extent it provides greater benefits/rights on any specific issue or issues than the general Sick Days policy and/or any other applicable sick time/leave law or ordinance.

Accrual and Grant

You are entitled to earn at least one hour of sick/safe leave for every 35 hours worked. Your time starts accruing on the first day of employment. If you are a full-time employee, you may earn and use up to 40 hours per year. Once the annual cap is reached, accrual of ESSL stops.

Usage

If you are a current employee, you may use ESSL as it accrues. If you are a new employee, other than temporary and seasonal employees, you may begin using ESSL on the 90th calendar day of your employment. If you are a temporary employee, you may begin using ESSL on the 180th calendar day of your employment, unless otherwise permitted by the employer. If you are a seasonal employee, you may begin using ESSL on the 150th calendar day of your employment, unless otherwise permitted by the employer. ESSL must be used in a minimum increment of four (4) hours per day, provided such minimum increment is reasonable under the circumstances.

You may not use more than 40 hours of ESSL in a calendar year.

You may use ESSL for the following reasons:

1. Your own mental or physical illness, injury, or health condition; your need for medical diagnosis, care or treatment of a mental or physical illness, injury or health condition; your need for preventive medical care;
2. Care of a family member (which includes a child; a biological, foster or adoptive parent, a stepparent, a legal guardian or other person who stands in loco parentis to you or your spouse or domestic partner when you were a child; spouse; mother-in-law; father-in-law; grandparents; grandchildren; domestic partner; sibling; care recipient; or member of your household) with a mental or physical illness, injury or health condition; care of a family member who needs medical diagnosis, care or treatment of a mental or physical illness, injury or health condition; care of a family member who needs preventive medical care;
3. Closure of your place of business by order of a public official due to a public health emergency or your need to care for a child whose school or place of care has been closed

by order of a public official due to a public health emergency; or care for yourself or a family member when it has been determined by the health authorities having jurisdiction or by a health care provider that you or your family member's presence in the community may jeopardize the health of others because of your exposure to a communicable disease, whether or not you or your family member has actually contracted the communicable disease; or

4. Time off needed when you or a family member is a victim of domestic violence, sexual assault or stalking.

Your use of ESSL will not be conditioned upon searching for or finding a replacement worker.

Notice and Documentation

When your use of ESSL is foreseeable, please make a reasonable effort to schedule your use of ESSL in a manner that does not unduly disrupt the Company's operations. You may request to use ESSL orally, in writing or electronically (e.g., via email) and whenever possible, the request must include the expected duration of your absence. When your use of ESSL is foreseeable, please make a good faith effort to provide notice of the need for such time to your local HR resource in advance of the use of ESSL. When your use of ESSL is not foreseeable, please provide notice to your local HR resource at least one (1) hour prior to the start of your workday or as soon as possible under the circumstances.

For ESSL of three (3) or more consecutive workdays, the Company requires you to provide reasonable documentation that your ESSL has been used for a covered purpose. For reason #1 and #2 above, documentation signed by a health care professional indicating that ESSL is necessary and reasonable but should not explain the nature of your or your family member's health condition or the details of the domestic violence, sexual violence, abuse or stalking. For reason #4 above, you may use any of the following types of documentation, including:

- Your written statement that you or your employee's family member is a victim of domestic violence, sexual assault or stalking and that the leave taken was for one of the purposes in reason #4 above;
- A police report indicating that you or your family member was a victim of domestic violence, sexual assault or stalking;
- A court document indicating that you or your family member is involved in legal action related to domestic violence, sexual assault or stalking; or
- A signed statement from a victim and witness advocate affirming that you or your family member is receiving services from a victim services organization or is involved in legal action related to domestic violence, sexual assault or stalking.

You may not use ESSL as an excuse to be late for work without an authorized purpose. If you are committing fraud or abuse by engaging in an activity that is not consistent with allowable purposes for ESSL, you will be disciplined, up to and including termination of employment for misuse of ESSL.

If you are exhibiting a clear pattern of taking ESSL on days just before or after a weekend, vacation or holiday, you may be subject to discipline for misuse of ESSL, unless you provide reasonable documentation that the ESSL has been used for a purpose listed above.

You will need to provide written documentation for your use of ESSL that occurs within two (2) weeks prior to your final scheduled day of work before termination of employment.

Carryover

You are permitted to carry over up to 40 hours of accrued but unused sick and safe leave from one year to the next year.

Enforcement and Retaliation

Retaliation or discrimination against you for requesting ESSL or using ESSL, or both, is prohibited, and you may file a complaint with the Rhode Island Department of Labor and Training against an employer who retaliates or discriminates against the employee.

If you have questions about ESSL, please contact your local HR resource.

Family and Medical Leave

You may be entitled to a leave of absence under the Family and Medical Leave Act ("FMLA") and/or the Rhode Island Family Leave Act ("RIFLA"). This policy provides you with information concerning FMLA and/or RIFLA entitlements and obligations you may have during such leaves. Whenever permitted by law, FMLA leave will run concurrently with RIFLA, and any other leave provided under state or local law. If you have any questions concerning FMLA and/or RIFLA leave, please contact your local HR resource.

I. Eligibility

FMLA leave is available to "FMLA eligible employees." To be an "FMLA eligible employee," you must: 1) have been employed by the Company for at least 12 months (which need not be consecutive); 2) have been employed by the Company for at least 1,250 hours of service during the 12-month period immediately preceding the commencement of the leave; and 3) be employed at a worksite where 50 or more employees are located within 75 miles of the worksite.

Special hours of service eligibility requirements apply to airline flight crew employees.

RIFLA leave is available to "RIFLA eligible employees." To be a "RIFLA eligible employee," you must: 1) be a full-time employee and have worked for the Company for an average of 30 or more hours a week for 12 consecutive months; **and** 2) be employed by an employer that has 50 or more employees in Rhode Island.

II. Entitlements

As described below, the FMLA and RIFLA provide eligible employees with a right to leave, health insurance benefits and, with some limited exceptions, job restoration.

A. Basic FMLA and RIFLA Leave Entitlement

The FMLA provides eligible employees up to 12 workweeks of unpaid leave for certain family and medical reasons during a 12-month period. If eligible, RIFLA provides you with up to 13 weeks of consecutive unpaid leave within any two-calendar year period. The 12-month FMLA period and the 24-month RIFLA period are determined **on a calendar year basis**. It is our policy to provide

the greater leave benefit provided under the FMLA or RIFLA and to run leave concurrently under the FMLA and RIFLA whenever possible.

You may take leave for any one, or for a combination, of the following reasons:

- To care for your child after birth, or placement for adoption (of a child 16 years of age or younger - RIFLA) (or foster care - FMLA only);
- To care for your spouse, child, or parent (or parent-in-law - RIFLA only) who has a serious health condition (FMLA only) or serious illness (RIFLA only);
- For your own serious health condition (including any period of incapacity due to pregnancy, prenatal medical care or childbirth) that makes you unable to perform one or more of the essential functions of your job (FMLA only) or serious illness (RIFLA only); and/or
- Because of any qualifying exigency arising out of the fact that your spouse, child, or parent is a military member on covered active duty or called to covered active-duty status (or has been notified of an impending call or order to covered active duty) in the Reserve component of the Armed Forces for deployment to a foreign country in support of contingency operations or Regular Armed Forces for deployment to a foreign country (FMLA only).

Under the FMLA, a serious health condition is an illness, injury, impairment or physical or mental condition that involves either an overnight stay in a medical care facility, or continuing treatment by a health care provider for a condition that either prevents you from performing the functions of your job or prevents your qualified family member from participating in school or other daily activities. Subject to certain conditions, the continuing treatment requirement may be met by a period of incapacity of more than 3 consecutive calendar days combined with at least two visits to a health care provider or one visit and a regimen of continuing treatment, or incapacity due to pregnancy, or incapacity due to a chronic condition. Other conditions may meet the definition of continuing treatment.

Under the RIFLA, a serious illness is a disabling physical or mental illness, injury, impairment or condition that involves inpatient care in a hospital, a nursing home or a hospice or outpatient care requiring continuing treatment or supervision by a health care provider.

Qualifying exigencies for FMLA leave may include attending certain military events, arranging for alternative childcare, addressing certain financial and legal arrangements, attending certain counseling sessions, caring for the parents of the military member on covered active duty and attending post-deployment reintegration briefings.

B. Additional Military Family Leave Entitlement (Injured Servicemember Leave) (FMLA only)

In addition to the basic FMLA leave entitlement discussed above, if you are an eligible employee who is the spouse, child, parent, or next of kin of a covered servicemember, you are entitled to take up to 26 weeks of leave during a single 12-month period to care for the servicemember with a serious injury or illness. FMLA leave to care for a servicemember shall only be available during a single 12-month period and, when combined with other FMLA-qualifying leave, may not exceed

26 weeks during the single 12-month period. The single 12-month period begins on the first day you take leave to care for the injured servicemember.

A "covered servicemember" is a current member of the Armed Forces, including a member of the National Guard or Reserves, who is undergoing medical treatment, recuperation or therapy, is otherwise in outpatient status or is on the temporary retired list, for a serious injury or illness. These individuals are referred to in this policy as "current members of the Armed Forces." Covered servicemembers also include a veteran who is discharged or released from military service under conditions other than dishonorable at any time during the five-year period preceding the date you take FMLA leave to care for the covered veteran, and who is undergoing medical treatment, recuperation or therapy for a serious injury or illness. These individuals are referred to in this policy as "covered veterans."

The FMLA definitions of a "serious injury or illness" for current Armed Forces members and covered veterans are distinct from the FMLA definition of "serious health condition" applicable to FMLA leave to care for a covered family member.

C. Intermittent Leave and Reduced Leave Schedules

FMLA and/or RIFLA leave usually will be taken for a period of consecutive days, weeks or months. However, you also may be entitled to take FMLA leave intermittently or on a reduced leave schedule when medically necessary due to your or your covered family member's serious health condition, due to a qualifying exigency or the serious injury or illness of a covered servicemember.

D. No Work While on Leave

The taking of another job while on FMLA/RIFLA or any other authorized leave of absence is grounds for immediate discharge, to the extent permitted by applicable law.

E. Protection of Group Health Insurance Benefits during Leave

During leave, you are entitled to receive group health plan coverage on the same terms and conditions as if you had continued to work. You may be required to make pre-payments of premiums under RIFLA.

F. Restoration of Employment and Benefits

At the end of FMLA leave, subject to some exceptions including situations where job restoration of "key employees" will cause the Company substantial and grievous economic injury, you generally have a right to return to the same or equivalent positions with equivalent pay, benefits and other employment terms. We will notify you if you qualify as a "key employee," if we intend to deny reinstatement and of your rights in such instances. A "key employee" is defined under the FMLA as the employee among the highest paid 10 percent of all employees who is employed within 75 miles of the worksite. Your use of FMLA leave will not result in the loss of any employment benefit that accrued prior to the start of your FMLA leave.

As with FMLA leave, at the end of RIFLA leave, subject to limited exceptions, you generally have the right to return to the same or equivalent position with equivalent pay, benefits and other terms. There is no key employee exception under the RIFLA.

G. Notice of Eligibility for, and Designation of, FMLA and RIFLA Leave

If you are requesting FMLA leave, you are entitled to receive written notice from the Company telling you whether you are eligible for FMLA leave and, if not eligible, the reasons why you are not eligible. When eligible for FMLA leave, you are entitled to receive written notice of: 1) your rights and responsibilities in connection with such leave; 2) the Company's designation of leave as FMLA-qualifying or non-qualifying, and if not FMLA-qualifying, the reasons why; and 3) the amount of leave, if known, that will be counted against your leave entitlement.

We may retroactively designate leave as FMLA and/or RIFLA leave with appropriate written notice to you provided the Company's failure to designate leave as FMLA- or RIFLA-qualifying at an earlier date did not cause you harm or injury. In all cases where leaves qualify for FMLA and/or RIFLA protection, we can mutually agree that leave be retroactively designated as FMLA and/or RIFLA leave.

III. Employee FMLA and/or RIFLA Leave Obligations

A. Provide Notice of the Need for Leave

If you wish to take FMLA and/or RIFLA leave, please notify us of your need for FMLA and/or RIFLA leave in a timely manner. The following describes the content and timing of such employee notices.

1. Content of Employee Notice

To trigger FMLA and/or RIFLA leave protections, you must inform your local HR resource of the need for FMLA/RIFLA-qualifying leave and the anticipated timing and duration of the leave, if known. You may do this by either requesting FMLA and/or RIFLA leave specifically or explaining the reasons for leave so as to allow us to determine that the leave is FMLA/RIFLA-qualifying. For example, you might explain that:

- A condition renders you unable to perform the functions of your job or that you are under the continuing care of a health care provider;
- You are pregnant or have been hospitalized overnight;
- A covered family member (including parent-in-law under RIFLA) is under the continuing care of a health care provider or a condition renders the family member unable to perform daily activities;
- The leave is due to a qualifying exigency caused by a military member being on covered active duty or called to covered active-duty status to a foreign country (FMLA only); or
- A family member is a covered servicemember with a serious injury or illness (FMLA only).

If you call in "sick," without providing the reasons for the needed leave, that will not be considered sufficient notice for FMLA leave under this policy. Please respond to the Company's questions to determine if your absences are potentially FMLA-qualifying.

If you do not explain the reasons for leave, your leave request may be denied. When you seek leave due to FMLA/RIFLA-qualifying reasons for which we have previously provided

FMLA/RIFLA-protected leave, you will need to specifically reference the qualifying reason for the leave or the need for FMLA and/or RIFLA leave.

2. Timing of Employee Notice

Please provide 30 days' advance notice of your need to take FMLA and/or RIFLA leave when the need is foreseeable. When 30 days' notice is not possible, or the approximate timing of the need for leave is not foreseeable, please provide us with notice of your need for leave as soon as practicable under the facts and circumstances of the particular case. If you do not give 30 days' notice for foreseeable leave without a reasonable excuse for the delay, or otherwise fail to satisfy FMLA and/or RIFLA notice obligations, your leave may be delayed or denied, to the extent permitted by applicable law.

B. Cooperate in the Scheduling of Planned Medical Treatment (Including Accepting Transfers to Alternative Positions) and Intermittent Leave or Reduced Leave Schedules

If you are planning medical treatment, please consult with the Company and make a reasonable effort to schedule treatment so as not to unduly disrupt the Company's operations, subject to the approval of your health care provider. You will need to consult with the Company prior to the scheduling of your treatment to work out a treatment schedule that best suits your needs and the needs of the Company, subject to the approval of your health care provider. If your notice of the need to take leave on an intermittent basis for planned medical treatment does not fulfill this obligation, we may need you to attempt to make such arrangements, subject to the approval of your health care provider.

When you take intermittent or reduced work schedule leave for foreseeable planned medical treatment for yourself or a family member, including during a period of recovery from a serious health condition or to care for a covered servicemember, we may temporarily transfer you, during the period that the intermittent or reduced leave schedules are required, to alternative positions with equivalent pay and benefits for which you are qualified and which better accommodate recurring periods of leave, subject to applicable law.

When you seek intermittent leave or a reduced leave schedule for reasons unrelated to the planning of medical treatment, upon request, you will need to advise us of the reason why such leave is medically necessary. In such instances, we shall attempt to work out a leave schedule that meets your needs without unduly disrupting the Company's operations, subject to the approval of your health care provider.

C. Submit Medical Certifications Supporting Need for Leave (Unrelated to Requests for Military Family Leave)

Depending on the nature of leave sought, employees may be required to submit medical certifications supporting their need for FMLA/RIFLA-qualifying leave. As described below, there generally are three types of medical certifications: an initial certification, a recertification and a return to work/fitness for duty certification.

It is the employee's responsibility to provide the Company with timely, complete, and sufficient medical certifications. Whenever the Company requests employees to provide medical certifications, employees must provide the requested certifications within 15 calendar days after the Company's request, unless it is not practicable to do so despite the employee's diligent, good faith efforts. The Company will inform employees if submitted medical certifications are

incomplete or insufficient and provide employees at least seven calendar days to cure deficiencies. The Company will deny leave to employees who fail to timely cure deficiencies or otherwise fail to timely submit requested medical certifications.

With the employee's permission, subject to applicable law, the Company (through individuals other than the employee's direct supervisor) may contact the health care provider to authenticate or clarify completed and sufficient medical certifications. If the employee chooses not to provide the Company with authorization allowing it to clarify or authenticate the certification with the health care provider, the Company may deny leave if the medical certification is unclear, to the extent permitted by applicable law.

Whenever the Company deems it appropriate to do so, it may waive its right to receive timely, complete and/or sufficient medical certifications.

1. Initial Medical Certifications

Employees requesting leave because of their own, or a family member's serious health condition, or to care for a covered servicemember, must supply medical certification supporting the need for such leave from their health care provider or, if applicable, the health care provider of their covered family member or servicemember. If employees provide at least 30 days' notice of medical leave, they should submit the medical certification before leave begins. A new initial medical certification will be required on an annual basis for serious medical conditions lasting beyond a single leave year.

If the Company has reason to doubt initial medical certifications, it may require employees to obtain a second opinion at the Company's expense, subject to applicable law. If the opinions of the initial and second health care providers differ, the Company may, at its expense, require employees to obtain a third, final and binding certification from a health care provider designated or approved jointly by the Company and the employee.

2. Medical Recertifications

Depending on the circumstances and duration of FMLA leave, subject to applicable law, the Company may require employees to provide recertification of medical conditions giving rise to the need for leave. The Company will notify employees if recertification is required and will give employees at least 15 calendar days to provide medical recertification.

3. Return to Work/Fitness for Duty Medical Certifications

Unless notified that providing such certifications is not necessary, where permitted by law, the employee returning to work from leave that was taken because of his/her own serious health condition that made the employee unable to perform his/her job must provide the Company medical certification confirming the employee is able to return to work and the employee's ability to perform the essential functions of the employee's position, with or without reasonable accommodation. The Company may delay and/or deny job restoration until the employee provides a return to work/fitness for duty certification, subject to applicable law.

D. Submit Certifications Supporting Need for Military Family Leave

Upon request, the first time employees seek leave due to qualifying exigencies arising out of the covered active duty or call to covered active duty status of a military member, the Company may

require employees to provide: 1) a copy of the military member's active duty orders or other documentation issued by the military indicating the military member is on covered active duty or call to covered active duty status and the dates of the military member's covered active duty service; and 2) a certification from the employee setting forth information concerning the nature of the qualifying exigency for which leave is requested. Employees shall provide a copy of new active-duty orders or other documentation issued by the military for leaves arising out of qualifying exigencies arising out of a different covered active duty or call to covered active-duty status of the same or a different military member.

When leave is taken to care for a covered servicemember with a serious injury or illness, the Company may require employees to obtain certifications completed by an authorized health care provider of the covered servicemember. In addition, and in accordance with the FMLA regulations, the Company may request that the certification submitted by employees set forth additional information provided by the employee and/or the covered servicemember confirming entitlement to such leave.

E. Substitute Paid Leave for Unpaid FMLA and RIFLA Leave

Employees may elect to use any accrued paid time while taking unpaid FMLA and /or RIFLA leave. The substitution of paid time for unpaid FMLA and/or RIFLA leave time does not extend the length of FMLA and/or RIFLA leaves, and the paid time will run concurrently with the employee's FMLA and/or RIFLA entitlement.

During the leave, employees may be eligible for compensation, such as temporary disability benefits, or workers' compensation benefits. Any compensation or leave taken in connection with any other policy/plan shall run concurrently with any FMLA/RIFLA leave entitlement.

F. Pay Employee's Share of Health Insurance Premiums

During FMLA/RIFLA leave, employees are entitled to continued group health plan coverage under the same conditions as if they had continued to work. Unless the Company notifies employees of other arrangements, whenever employees are receiving pay from the Company during leave, the Company will deduct the employee portion of the group health plan premium from the employee's paycheck in the same manner as if the employee was actively working. If leave is unpaid, employees must make arrangements to pay their portion of the group health premium. Pre-payment of premiums may be required under RIFLA.

IV. Coordination of FMLA/RIFLA Leave with Other Leave Policies

The FMLA and RIFLA do not affect any federal, state or local law prohibiting discrimination, or supersede any State or local law that provides greater family or medical leave rights. However, whenever permissible by law, the Company will run FMLA leave concurrently with RIFLA, and any other leave provided under state or local law. For additional information concerning leave entitlements and obligations that might arise when FMLA/RIFLA leave is either not available or exhausted, please consult the Company's other leave policies in this Handbook or contact your HR resource.

V. Questions and/or Complaints about FMLA/RIFLA Leave

If employees have questions regarding this FMLA/RIFLA policy, please contact your local HR resource. The Company is committed to complying with the FMLA and, whenever necessary, shall interpret and apply this policy in a manner consistent with the FMLA/RIFLA.

The FMLA makes it unlawful for employers to: 1) interfere with, restrain or deny the exercise of any right provided under FMLA; or 2) discharge or discriminate against any person for opposing any practice made unlawful by FMLA or involvement in any proceeding under or relating to FMLA. If employees believe their rights have been violated, please contact your local HR resource immediately. The Company will investigate any complaints and take prompt and appropriate remedial action to address and/or remedy any violation. Employees also may file FMLA complaints with the United States Department of Labor or may bring private lawsuits alleging FMLA violations.

Non-Harassment

It is Pritchard's policy to prohibit intentional and unintentional harassment of or against job applicants, contractors, interns, volunteers or employees by another employee, supervisor, vendor, customer or any third party on the basis of actual or perceived race, color, creed, religion, national origin, ancestry, citizenship status, age, sex or gender (including pregnancy, childbirth and pregnancy-related conditions), gender identity or expression (including transgender status), sexual orientation, marital status, military service and veteran status, physical or mental disability, genetic information or any other characteristic protected by applicable federal, state or local laws (referred to as "protected characteristics"). Such conduct will not be tolerated by Pritchard.

The purpose of this policy is not to regulate our employees' personal morality, but to ensure that no one harasses another individual in the workplace, including while on Company premises, while on Company business (whether or not on Company premises) or while representing the Company. In addition to being a violation of this policy, harassment or retaliation based on any protected characteristic as defined by applicable federal, state or local laws also is unlawful. For example, sexual harassment and retaliation against an individual because the individual filed a complaint of sexual harassment or because an individual aided, assisted or testified in an investigation or proceeding involving a complaint of sexual harassment as defined by applicable federal, state, or local laws are unlawful.

Harassment Defined

Harassment generally is defined in this policy as unwelcome verbal, visual or physical conduct that denigrates or shows hostility or aversion toward an individual because of any actual or perceived protected characteristic or has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile or offensive working environment.

Harassment can be verbal (including slurs, jokes, insults, epithets, gestures or teasing), visual (including offensive posters, symbols, cartoons, drawings, computer displays, text messages, social media posts or e-mails) or physical conduct (including physically threatening another, blocking someone's way, etc.). Such conduct violates this policy, even if it does not rise to the level of a violation of applicable federal, state or local laws. Because it is difficult to define unlawful

harassment, employees are expected to behave at all times in a manner consistent with the intended purpose of this policy.

Sexual Harassment Defined

Sexual harassment can include all of the above actions, as well as other unwelcome conduct, such as unwelcome or unsolicited sexual advances, requests for sexual favors, conversations regarding sexual activities and other verbal, visual or physical conduct of a sexual nature when:

- Submission to that conduct or those advances or requests is made either explicitly or implicitly a term or condition of an individual's employment; or
- Submission to or rejection of the conduct or advances or requests by an individual is used as the basis for employment decisions affecting the individual; or
- The conduct or advances or requests have the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile or offensive working environment.

Examples of conduct that violate this policy include:

1. Unwelcome flirtations, leering, whistling, touching, pinching, assault, blocking normal movement;
2. Requests for sexual favors or demands for sexual favors in exchange for favorable treatment;
3. Obscene or vulgar gestures, posters or comments;
4. Sexual jokes or comments about a person's body, sexual prowess or sexual deficiencies;
5. Propositions or suggestive or insulting comments of a sexual nature;
6. Derogatory cartoons, posters and drawings;
7. Sexually-explicit e-mails or voicemails;
8. Uninvited touching of a sexual nature;
9. Unwelcome sexually-related comments;
10. Conversation about one's own or someone else's sex life;
11. Conduct or comments consistently targeted at only one gender, even if the content is not sexual; and
12. Teasing or other conduct directed toward a person because of the person's gender.

Reporting Procedures

If you have been subjected to or witnessed conduct which violates this policy, you should immediately report the matter to your local HR resource. (Phone numbers and addresses are available through the Company directory.) If you are unable for any reason to contact this person, or if you have not received an initial response within five (5) business days after reporting any incident of what you perceive to be harassment, you should contact the HR Department (Phone numbers and addresses are available through the Company directory.) If the person toward whom the complaint is directed is one of the individuals indicated above, they should contact any higher-level manager in the reporting hierarchy.

Investigation Procedures

Every report of perceived harassment will be fully investigated, and corrective action will be taken where appropriate. All complaints will be kept confidential to the extent possible, but confidentiality

cannot be guaranteed. All employees must cooperate with all investigations conducted pursuant to this policy.

Retaliation Prohibited

In addition, we will not allow any form of retaliation against individuals who report unwelcome conduct to management or who cooperate in the investigations of such reports in accordance with this policy. If you feel they have been subjected to any such retaliation, you should report it in the same manner in which they would report a claim of perceived harassment under this policy.

Violation of this policy including any improper retaliatory conduct will result in disciplinary action, up to and including termination.

While employees are encouraged to report claims internally, if you feel subjected to sexual harassment or other harassment in violation of state law, you may file a formal complaint with the government agency or agencies set forth below. Using the Company's complaint process does not prohibit you from filing a complaint with these agencies.

Rhode Island Commission for Human Rights 10 Abbot Park Place Providence, Rhode Island 02903 (401) 277-2661 The United States Equal Employment Opportunity Commission (EEOC) JFK Federal Building, Room 475 Boston, Massachusetts 02203 (617) 565-3200 (voice).

Paid Temporary Disability and Temporary Caregiver Insurance Benefits and Leave

Temporary Disability Insurance (TDI) provides benefit payments to insured Rhode Island workers for weeks of unemployment resulting from a non-work-related illness or injury.

Temporary Caregiver Insurance (TCI) provides benefit to eligible insured Rhode Island workers to care for a seriously ill family member or bond with a child.

Employees may be eligible for up to six (6) weeks of caregiver leave and temporary caregiver benefits within any 52-week period to care for a seriously ill child, spouse, domestic partner, parent, parent-in-law or grandparent — or to bond with a newborn child, new adopted child or new foster-care child.

Employees may be eligible for up to thirty (30) weeks of disability benefits within any 52-week period as a result of their own serious medical condition.

Temporary disability and caregiver benefits are available through programs administered by the Rhode Island Department of Labor and Training ("DLT"). These benefits are financed solely through employee contributions to the TCI program. That program is solely responsible for determining if the employee is eligible for such benefits.

Employees may be eligible for temporary caregiver benefits for any week in which they are unable to perform their regular and customary work because they are:

1. Bonding with a newborn child or a child newly placed for adoption or foster care with the employee or domestic partner (available during the first 12 months of parenting only); or
2. Caring for a child, a parent, parent-in-law, grandparent, spouse, or domestic partner, who has a serious health condition, subject to a waiting period.

Employees may use accrued sick time during any eligibility waiting period in accordance with the Company's sick day policy.

Employees must file a written intent with the Company with a minimum of 30 days' notice prior to commencement of the disability or caregiver leave. Failure by the employee to provide the written intent may result in delay or reduction in the claimant's benefits, except in the event the time of the leave is unforeseeable or the time of the leave changes for unforeseeable circumstances.

Individuals who exercise their rights to leave covered by the TCI program must file a certificate form with the DLT containing all information required by the DLT. For leave for reason of caring for a seriously ill family member, employees must file a certificate with the DLT that must contain:

1. A diagnosis and diagnostic code prescribed in the international classification of diseases, or where no diagnosis has yet been obtained, a detailed statement of symptoms;
2. The date if known, on which the condition commenced;
3. The probable duration of the condition;
4. An estimate of the amount of time that the licensed qualified health care provider believes the employee is needed to care for the family member;
5. A statement that the serious health condition warrants the employee's participation to provide care for the family member. Such reasons may include, but are not limited to, providing psychological comfort, arranging third-party care for the family member as well as directly providing, or participating in the medical and physical care of the patient; and
6. A certificate filed to establish medical eligibility of the serious health condition of the employee's family member shall be made by the family member's treating licensed qualified health care provider.

In the case of a parent, or persons who are in loco parentis caring for the serious health condition of a foster care child, the employee must submit all required information, with a written request to the Department of Children, Youth and Families for the release of medical information by the child's treating licensed qualified health care provider. The Department of Children, Youth and Families will transmit the requested medical information, pending all properly submitted forms, to the DLT, within 10 business days of request. In the absence of the requested transmitted medical information by the Department of Children, Youth and Families within 10 business days, the employee may request the licensed qualified healthcare provider to directly transmit the medical eligibility of the serious health condition to the DLT.

Any employees who exercise their rights to leave covered by TDI or TCI will, upon the expiration of that leave, be entitled to be restored by the Company to the position held when the leave commenced, or to a position with equivalent seniority, status, employment benefits, pay and other terms and conditions of employment including fringe benefits and service credits that the employee had been entitled to at the commencement of leave.

During any disability or caregiver leave taken pursuant to this policy, we will maintain any existing health benefits in force for the duration of the leave as if the employee had continued in employment continuously from the date the leave commenced until the date the caregiver benefits terminate; provided, however, that the employee shall continue to pay any employee shares of the cost of health benefits as required prior to the commencement of the caregiver benefits.

We may require employees who are entitled to leave under the Family & Medical Leave Act (FMLA) and/or the Rhode Island Family Leave Act (RIFLA), who exercise their rights to benefits

under the temporary disability or caregiver insurance programs, to take any temporary disability or caregiver benefits received, concurrently, with any leave taken pursuant to the FMLA and/or RIFLA.

If you have questions regarding this policy, please contact your local HR resource.

Pregnancy Accommodations

In compliance with Rhode Island law, we will not discriminate against employee in relation to pregnancy, childbirth, and related conditions.

We will endeavor to provide reasonable accommodations for conditions related to pregnancy, childbirth or related conditions, unless the accommodation would pose an undue hardship on the business. Such accommodations include but are not limited to: more frequent or longer breaks; time off to recover from childbirth; acquisition or modification of equipment or seating; temporary transfer to a less strenuous or hazardous position; job restructuring; light duty; assistance with manual labor; break time and private non-bathroom space for expressing breast milk; or modified work schedules.

We will not require an individual with a need related to pregnancy, childbirth or a related medical condition to accept an accommodation that the individual chooses not to accept. This includes, but is not limited to, taking leave if another reasonable accommodation can be provided.

The Company will not deny employment opportunities to the employees or prospective employee, if such denial is based on the Company's inability to reasonably accommodate the employee's or prospective employee's condition related to pregnancy, childbirth or a related medical condition.

If you have questions regarding this policy, please contact your local HR resource.

School Involvement Leave

Pritchard will grant Rhode Island employees who have been employed for 12 consecutive months up to 10 hours of unpaid leave during any 12-month period to attend school conferences or other school-related activities for a child of whom the employee is the parent, foster parent or guardian. Twenty-four hours' notice is required, and the employee must make a reasonable effort to schedule the leave so as not to unduly disrupt the Company's operations. Employees may use accrued paid time off for this purpose.

If you have questions regarding this policy, please contact your local HR resource.