



PAID TIME OFF (PTO) POLICY

Full-Time and Part-Time employees shall be entitled to paid time off based on length of service, as outlined under the PTO accrual. Whenever possible, PTO will be granted according to the employee's preference, provided this does not interfere with the orderly operation of business.

PTO hours are accrued on weekly basis per pay period. Eligible employees are permitted to use any PTO hours that they accrue for that calendar year. PTO may be taken incrementally (see scheduling PTO leave). Unless an emergency exists, no more than ten (10) days should be taken together. At no point in time is the employee allowed to take PTO in excess of the time accrued. PTO cannot be transferred from one employee to another. PTO time is paid at the employee's regular rate of pay.

SMG reserves the right to change, modify, or cancel this policy at any time, without notice, at its sole discretion.

Full-Time PTO Accrual

PTO accrual is based upon the following schedule:

- Hire date until the fifth-year anniversary date, a full-time employee earns (3.385) PTO hours for each full week worked. The maximum accrual during the first five (5) years of employment is one hundred seventy-six (176) hours per year. New employees are eligible to take this time immediately upon hire.
- The fifth – year anniversary date until the tenth – year anniversary date, a full-time employee earns (4.154) PTO hours for each full week worked for a maximum accrual of two hundred sixteen (216) hours per year.
- The tenth – year anniversary date until the fifteenth – year anniversary date, a full-time employee earns (4.924) PTO hours for each full week worked for a maximum accrual of two hundred and fifty-six (256) hours per year.
- The fifteenth – year anniversary date until the twentieth – year anniversary date, a full-time employee earns (5.693) PTO hours for each full week worked for a maximum accrual of two hundred and ninety-six (296) hours per year.
- The twentieth year anniversary date and beyond, a full-time employee earns (6.462) PTO hours for each full week worked for a maximum accrual of three hundred thirty-six (336) hours per year.

Part-Time PTO Accrual

- Hire date until separation from employment, a part-time employee earns one (1) PTO hour for every thirty (30) hours worked. The maximum accrual annually is seventy-two (72) hours or nine (9) days. New employees will be eligible to take this time immediately upon hire.

When the unused accumulation of PTO hours exceeds the maximum allowable number of hours that can be carried over in a year (see carryover of accrual below), the employee will be paid out the PTO that is in excess of the maximum allowable carryover.



Carryover of Accrued PTO

Accrual carryover, from one calendar year to the next, is limited to the number of hours earned during the prior year. For example, if an employee earns one hundred seventy-six (176) hours of PTO time during a year, he/she can only carryover one hundred seventy-six (176) hours into the New Year, January 1.

Transfer of Accrued PTO

If an employee transfers within the company, the maximum number of hours an employee can transfer is limited to the number of hours earned during the prior year.

Scheduling PTO Leave

Employees are responsible for keeping a record of their PTO and ensuring that it is properly recorded on the appropriate attendance forms sent to the Human Resources department. To obtain information regarding available PTO hours, employee may speak with the immediate Supervisor, Manager, Department Director, Payroll, or Human Resources.

If utilizing PTO hours for the reason of vacation or personal time the employee should contact his/her Supervisor for a Leave Requisition Form at least two (2) weeks prior to the desired vacation/personal dates to ensure that the request will be approved and that vacation/personal time is properly scheduled within the needs of the department. In scheduling vacation/personal time the employee should keep in mind that vacations/personal time must not interfere with the demands of the employee's work schedule. If any conflicts arise in requests to utilize PTO hours for the reason of vacation/personal, preference will be given to the employee with the most seniority, taking into consideration the needs of the business.

If utilizing PTO hours for the reason of sick leave, that is the employee is unable to report to work due to their own physical or mental health condition. Using PTO for sick leave also encompasses obtaining a medical diagnosis, care, or treatment or a mental or physical illness, injury, or health condition or obtaining preventative medical care. Using PTO for sick leave also encompasses caring for a family member who has a physical or mental illness, injury, or health condition, who needs to obtain a medical diagnosis, care or treatment of a mental or physical illness, injury, or health condition, or who needs to obtain preventative medical care. Using PTO for sick leave also encompasses situations where the employee or the employee's family member has been the victim of domestic abuse, sexual assault, or harassment and the use of the leave is to: seek medical attention; obtain services from a victim services organization; obtain mental health or other counseling; seek relocation; or seek legal services. Finally, using PTO for sick leave also encompasses using leave because, due to a public health emergency, a public official has closed the employee's place of business or the school or place of care of the employee's child and the employee needs to be absent from work to care for the employee's child. PTO hours for the reason of sick may be used in minimum increments of one (1) hour. When the use of PTO for sick leave is foreseeable, the employee must telephone their Supervisor or Department Director directly, each day of their absence, as far in advance as possible. If an employee is unable to call personally, due to accident or illness that requires hospitalization, a family member or friend should contact the Supervisor or Department Director to the extent possible. An employee that fails to contact their Supervisor or Department Director may be considered as having voluntarily resigned.

Should a question arise regarding the legitimacy of an absence or should an employee miss three (3) consecutive days of work in relation to utilizing PTO for the reason of sick, Family Medical Leave Act (FMLA) and/or other State mandated Family Medical Leave may apply. Taking PTO for the reason of sick under false pretenses is a violation of the policy and is subject to disciplinary action, which may include termination.



Families First Coronavirus Response Act (FFCRA) Paid Sick Leave (*only available until December 31, 2020*)

The FFCRA provides some employees with paid sick leave for specified reasons related to COVID-19. These provisions will only apply through December 31, 2020.

Eligible employees experiencing a COVID-19 qualifying reason may receive:

- Two weeks (up to 80 hours) of paid sick leave at a full-time employee's regular rate of pay, or for part-time employees, a number of hours equal to the number of hours that such employee works, on average, over a 2-week period, when the employee is unable to work because the employee is ordered to quarantine or self-isolate (pursuant to Federal, State, or local government order or advice of a health care provider), and/or experiencing COVID-19 symptoms and seeking a medical diagnosis; or
- Two weeks (up to 80 hours) of paid sick leave at two-thirds a full-time employee's regular rate of pay, or for part-time employees, a number of hours equal to the number of hours that such employee works, on average, over a 2-week period, because the employee is unable to work because of a bona fide need to care for an individual ordered to quarantine or isolate (pursuant to Federal, State, or local government order or advice of a health care provider), or to care for a child (under 18 years of age) whose school or child care provider is closed or unavailable for reasons related to COVID-19.

Qualifying reason for FFCRA paid sick leave

An employee may be entitled to take paid sick leave related to COVID-19 if the employee is unable to work or telework, because of the employee:

1. Having COVID-19 symptoms and seeking a medical diagnosis;
2. Being ordered by a government agent (federal, state or local), or advised by a health provider, to quarantine or isolate due to a risk of COVID-19;
3. Taking care of someone else due to COVID-19 precautions – either someone ordered to quarantine or isolate, or a child whose school, place of care, or child care is closed or unavailable.

Pay and Benefits While on Leave

For leave reasons (1) or (2): employees taking leave are entitled to pay at either their regular rate or the applicable minimum wage, whichever is higher, up to \$511 per day and \$5,110 in the aggregate (over a 2-week period).

For leave reason (3): employees taking leave are entitled to pay at 2/3 their regular rate or 2/3 the applicable minimum wage, whichever is higher, up to \$200 per day and \$2,000 in the aggregate (over a 2-week period). Employees may elect to supplement the amount they will receive from paid sick leave with their preexisting accrued but unused vacation time, up to their normal earnings.

Requesting FFCRA Paid Sick Leave

Employees must provide reasonable notice as soon as practicable after the first workday (or portion thereof) when leave is taken. However, if leave is for child care due to a COVID-related closure, advance notice must be provided if the need is foreseeable.

If you believe you are entitled to paid sick leave under the FFCRA, please contact Human Resources and provide the following information, in writing: your name, dates for which leave is requested, qualifying reason



for the leave, and a statement affirming that you are unable to work because of the qualifying reason. The foregoing documentation is not required to take paid sick leave, but is required as soon as you can reasonably provide it. Depending on the circumstances of the request, additional documentation may be required.



PAID TIME OFF POLICY
Certification Form

SMG – Denver

Employee's Understanding and Acceptance:

MY SIGNATURE ON THIS NOTICE CONFIRMS THAT I HAVE RECEIVED AND READ THE **PAID TIME OFF POLICY** AND THAT I UNDERSTAND THAT IF THESE PROCEDURES ARE NOT OBSERVED MY JOB MAY BE IN JEOPARDY.

Acknowledged and Agreed:

Employee **Printed** Name

Employee **Signature** and Date