



# **Marathon Petroleum Family Leave Policy**

**Effective January 1, 2024**



# Family Leave Policy



## Table of Contents

I. Introduction .....	1
II. Eligibility.....	1
III. Reasons for Leave .....	2
IV. Definition of Terms.....	2
V. Duration of Leave.....	4
VI. Secondary Employment While on Leave.....	5
VII. Notification Requirements.....	5
VIII. Documentation.....	5
IX. Approval Requirements and Considerations .....	8
X. Use of Paid Time While on Family Leave.....	8
XI. Benefits Status During Family Leave .....	8
XII. Intermittent Leave or Reduced Schedule Leave.....	8
XIII. Job Reinstatement.....	9
XIV. Anti-Discrimination/Retaliation .....	10
XV. Participation by Affiliates .....	10
XVI. Further Information.....	10
Appendix A – California Family Care .....	11
Appendix B – Washington State Paid Family Leave .....	14
Appendix C – Colorado Family and Medical Insurance Leave Act (“FAMLI”) .....	17
Appendix D – Marathon Petroleum Family Leave Expanded Coverage to Care for Certain Family Members and Similar Relationships .....	19



# Family Leave Policy

## I. Introduction

The Family Leave Policy (“Family Leave” or “Policy”) provides employees the ability to balance their work and family life by taking reasonable time off for certain family and medical reasons. Family Leave covers absences beyond exhaustion of Paid Parental Leave to care for a child following birth (including birth via surrogacy arrangement), adoption, or foster care placement. Family Leave is also intended to provide time off for absences to care for a covered seriously-ill family member, absences to address certain Qualifying Exigencies arising from a covered family member’s active duty, absences to care for a covered family member who has suffered a serious injury or illness in the line of duty while on active duty in the United States Armed Forces and for a covered veteran undergoing medical treatment, recuperation, or therapy for a serious injury or illness.

The Policy shall, at a minimum, conform to the requirements of the Family and Medical Leave Act of 1993 (FMLA), as amended, any regulations issued by the Department of Labor, and any applicable state or local laws that are more generous than the FMLA that are in effect at the time the leave is granted. Although Family Leave conforms to the requirements of FMLA, it is a separate leave policy, and in some situations could run concurrently with other state and federal job protected leave. Where state or local family leave laws offer more protections or benefits to employees, the protections or benefits that are more favorable to the employee, as provided by these laws, will apply. Refer to Appendix A for California Family Rights Act requirements. Refer to Appendix B for Washington Paid Family and Medical Leave Act requirements. Refer to Appendix C for states where expanded coverage is provided to care for certain family members and similar relationships. For leave due to an employee’s own serious health condition, please refer to the FMLA Policy and the Medical Leave Policy.

## II. Eligibility

All Regular and casual employees who have worked for the Company for at least 12 months (prior service with the Company counts unless a break of over 7 years occurred), who have worked at least 1,250 hours (1,000 hours for employees in Wisconsin) during the previous 12-month period and are eligible to apply for an unpaid Family Leave. The service requirement for Family Leave related to care for a child following birth (including birth via surrogacy arrangement), adoption, birth via surrogacy arrangement, or foster care placement will be waived.

Special hours of service eligibility requirements apply to airline flight crew employees. These employees should seek direct assistance from Human Resources.

The Uniformed Services Employment and Reemployment Rights Act (USERRA) requires that employees covered under its provisions be given credit for any months and hours of service he or she would have been employed but for the USERRA-covered service in determining eligibility for FMLA leave. These protections extend to all military members (active duty and reserve), and all periods of absence from work due to or necessitated by USERRA-covered service is counted in determining the employee’s eligibility for FMLA leave.

This Policy does not apply to employees subject to collective bargaining agreements, unless the collective bargaining agreements expressly provide for participation in the Policy. In other cases where approved local practices differ from this Policy, those practices shall govern.



# Family Leave Policy

## III. Reasons for Leave

Reasons for **Family Leave** are specifically defined and limited to the following:

- The birth of your child, including birth via surrogacy arrangement, in order to care for that child within the 12-month period following the birth;
- The placement of a child with you for adoption or foster care, within the 12-month period following the placement;
- The care for your spouse, domestic partner, son, daughter, parent, or other dependent household member or individual who depends on you for at least half of their support, or other individual as otherwise required by law (refer to Attachment C for expanded family member coverage), who has a documented serious health condition. **Note:** For leaves due to your own serious health condition, refer to the Medical Leave Policy;
- A covered Qualifying Exigency arising out of the active duty, or call to active duty to a foreign country, of a lawful spouse, domestic partner, son, daughter or parent in the United States Armed Forces in support of a contingency operation (also referred to as Qualifying Exigency leave, further described below); or
- The care for a spouse, domestic partner, son, daughter, parent, or next of kin who suffers a serious injury or illness in the line of duty while serving on active duty in the United States Armed Forces or covered veteran undergoing medical treatments, recuperation or therapy for a serious injury or illness (also referred to as Wounded Warrior leave).

## IV. Definition of Terms

The Company may require that an employee who requests a Family Leave to care for a “dependent household member or individual” with a documented serious health condition submit proof that they provide at least half the support of that dependent household member or individual. Please note that where required, the Company will follow state and local leave definitions for those listed in this section.

“Domestic partner” means a person who is in a long-term, committed relationship with someone of the same or opposite sex, similar to that of a legally recognized marriage (in that the partners agree to be jointly responsible for each other’s common welfare and financial obligations), but who is not legally married. For purposes of this Policy, a domestic partner is one who meets the terms and conditions of the Marathon Petroleum Certification of Domestic Partnership, including one who has legally registered domestic partnership or other similar legal union in a state that provides for such registrations. To be considered a “domestic partner,” the employee must complete and return to the Company a completed and notarized Marathon Petroleum Company LP Certification of Domestic Partner Relationship form.

“Parent” means a biological parent (including a surrogacy arrangement), adoptive, step or foster care parent or any other individual who stands or stood in for the day-to-day responsibility and/or financial support (in loco parentis) of an employee when the employee was under the age of 18, or age 18 or older and incapable of self-care because of a mental or physical disability, or the spouse of an employee’s parent. Unless otherwise required by state or local family and medical leave laws, “Parent” does not include “in-laws.”

# Family Leave Policy

“Serious health condition” means an illness, injury, impairment, or physical or mental condition that involves:

- In-patient care (an overnight stay unless otherwise required by law) in a hospital, hospice or residential medical care facility, and/or any subsequent treatment in connection with such inpatient care;
- A period of incapacity of more than three consecutive calendar days and either:
  - 2 visits to a health care provider within 30 days, unless otherwise required by law, of the first day of incapacity, with the first visit occurring within 7 days of the first day of incapacity; or
  - 1 visit to a health care provider within 7 days of the first day of incapacity that results in a regimen of continuing treatment (i.e., a prescription or physical therapy) under the supervision of a health care provider;
- Any period of incapacity due to pregnancy or for prenatal care;
- Any period of incapacity or treatment for incapacity due to a chronic serious health condition. A “**chronic** serious health condition” means a health condition in which a single underlying condition triggers episodic periods of incapacity which may last only a brief time and requires at least 2 visits to a health care provider annually, unless otherwise required by law, for treatment. Examples may include asthma, diabetes, and epilepsy;
- A period of incapacity which is permanent or long-term due to a condition for which treatment may not be effective. Examples may include Alzheimer’s, stroke, and terminal illnesses. In such instances, the covered family member must be under the continuing supervision of a health care provider, but need not be receiving active treatment;
- Absences to receive multiple treatments by, or under the order of a provider of health care services, or for a condition that would likely result in a period of incapacity of more than three consecutive calendar days in the absence of medical intervention or treatment. Examples may include chemotherapy, and dialysis;
- **Exceptions:** Unless complications arise, absences for minor ailments such as the common cold, the flu, earaches, upset stomach, minor ulcers, headaches other than migraines, routine dental or orthodontia problems, and periodontal disease do not qualify as “serious health conditions.”

“Serious injury or illness” means any injury or illness that existed before the beginning of the current servicemember or covered veteran’s active duty and was aggravated by his or her military service. For covered veterans, the injury or illness must also meet one of the following conditions:

- The injury/illness was incurred or aggravated when the covered veteran was a member of the Armed Forces and rendered the veteran unable to perform his or her duties;
- The injury/illness is a physical or mental condition for which the covered veteran has received a U.S. Department of Veterans Affairs Service Related Disability (VASRD) ranking of 50% or greater and such ranking is based, at least in part, on the condition precipitating the need for Wounded Warrior leave;



## Family Leave Policy

- The injury/illness is a physical or mental condition that substantially impairs the covered veteran's ability to secure gainful employment by reason of a disability related to military service, or would do so absent treatment; or
- The covered veteran has been enrolled in the U.S. Department of Veterans Affairs Program of Comprehensive Assistance for Family Caregivers (The VA assistance Program) on the basis of his or her injury, including a psychological injury.

“Son” or “daughter” or “child” means a biological, adopted, or foster child, a stepchild, a legal ward, or a child of a person standing in loco parentis for whom the employee has day-to-day care giving and financial support responsibilities, who is either under age 18 or, is age 18 or over and incapable of self-care because of a mental or physical disability at the time the leave is to commence.

“Spouse” means a lawful spouse — wife or husband. Lawful spouse shall also include a common law spouse established under the laws of a state in which common law marriage is legal and for which the member can provide confirmation of such common law marriage as required in the Marathon Petroleum Certification of Common Law Marriage form.

“Wounded Warrior (a.k.a. Military Caregiver) leave” means leave available to eligible employees on a “per covered servicemember, per injury” basis. However, multiple injuries incurred during the same incident (i.e, a broken leg and a punctured lung) would be considered a single injury.

### **V. Duration of Leave**

The duration (Start Date and End Date) of the leave should be established before the leave commences. Unless a longer duration is required by law, eligible employees are entitled to take up to a total of 12 unpaid workweeks of Family Leave during any 12-month period, except in the case of Wounded Warrior leave which entitles eligible employees to take up to a total of 26 unpaid workweeks of Family Leave during a single 12-month period. In no case may an employee take any more than a maximum 26 workweeks (total) of FMLA-qualifying leave during any 12-month period under Wounded Warrior leave.

There are special rules for the calculation and duration of leave for airline flight crew employees. These employees should seek direct assistance from Human Resources.

A workweek is based on an employee's normal work schedule. The Company will measure the 12-month period as a rolling 12-month period measured backward from the date an employee uses any leave under this Policy, unless state law requires measurement on a calendar year basis. Each time an employee takes leave, the company will compute the amount of leave the employee has taken under this Policy in the last 12 months and subtract it from the 12 weeks of available leave, and the balance remaining is the amount the employee is entitled to take at that time.

“A single 12-month period” for purposes of Wounded Warrior leave means that each entitlement to Wounded Warrior leave must be used within a single 12-month period that begins with the first day of leave taken and ends 12 months from that date. Any portion of the 26 workweeks not used in the single 12-month period is forfeited.

Where both the FMLA and similar state family and medical leave laws apply (ex. CFRA and WA PFMLA), the leave provided by each will count against the employee's entitlement under both laws and must be taken concurrently with Family Leave.



# Family Leave Policy

Any time period during which an employee is disabled and receiving Medical and/or Paid Parental Leave benefits is not counted as part of a Family Leave. For example, the period of time a female employee receives Paid Parental Leave benefits after the birth of a child would not be counted as part of her Family Leave, however, Paid Parental Leave will run concurrently with FMLA.

## **VI. Secondary Employment While on Leave**

Unless otherwise prohibited by state law or if such leave is FMLA-qualified, employees are not permitted to perform in any position of employment with another employer while on a Family Leave, whether paid or unpaid, without prior written authorization from the Company.

## **VII. Notification Requirements**

### **For Birth/Birth via Surrogacy Arrangement/Adoption/Foster Care Placement and for Care of a Seriously Ill Family Member, Including Wounded Warriors**

If the requested Family Leave is foreseeable, employees must provide the Company with at least 30 days advance notice of the anticipated Start Date. If 30 days advance notice is not provided, the employee may be required to explain why it was not provided. Unless otherwise required by state or local law, the Company can deny the taking of Family Leave until at least 30 days after the date the employee provides notice (if the employee fails to give 30 days' advance notice), where the need for leave and the approximate Start Date were clearly foreseeable with no reasonable excuse for the delay.

If the employee's Family Leave is foreseeable based on planned medical treatment due to the serious health condition of a family member, the employee should make a reasonable effort to schedule the treatment so as not to disrupt unduly the operations of the Company, subject to approval of the family member's health care provider.

If the requested Family Leave is/was not foreseeable, employees must provide notice "as soon as practicable." This means within the time prescribed by the Company's usual and customary notice requirements, and not less than the same or next business day, unless there are unforeseen circumstances.

### **For Qualifying Exigency Leave**

Employees requesting Qualifying Exigency Leave must give as much notice as is reasonable and practicable.

## **VIII. Documentation**

An employee must complete a Family Leave Request and provide documentation regarding the reason for the request that is sufficient to demonstrate the leave is FMLA qualifying or otherwise qualifying under applicable state family and medical leave laws. Such documentation shall include the expected Start Date and the anticipated duration of the leave.



## Family Leave Policy

### **For Birth/Adoption/Foster Care Placement and for Care of a Seriously Ill Family Member**

If the requested leave is a Family Leave for the birth (including via surrogacy arrangement), adoption or foster care placement of a child, or to care for a covered family member with a serious health condition, it is the employee's responsibility to return to the Company, within 15 calendar days from receipt of the Notice of Eligibility and Rights and Responsibilities (Form WH-381), a "complete" and "sufficient" medical certification (Form WH-380-E or Form WH-380-F or comparable state form). If no certification is returned within that time period, your request for leave may be denied.

If the medical certification you return is incomplete (i.e., contains one or more blank entries) or insufficient (i.e., contains vague, ambiguous or unresponsive entries), your certification may be rejected. If so, you will be notified in writing of the deficiencies in your certification and given one (1) opportunity to correct those deficiencies. You will have 7 days to do so, otherwise your leave may be denied for failure to submit a complete and sufficient certification.

Should the Company have reason to question, or to doubt the validity of a medical certification, it may require that the employee obtain a second or, if conflicting, a third and final opinion. Third opinions will be obtained from a health care provider designated or approved jointly by the Company and the employee (at the Company's expense). Health Services personnel may be involved in the review process but cannot provide a second or third opinion for certification.

Under certain circumstances, the Company may require (in accordance with any applicable collective bargaining agreement, federal, state and local law) additional recertification on a reasonable basis, but not more often than every 30 days, for Family Leaves due to a family member's serious health condition.

### **For Qualifying Exigency Leave**

If the requested Family Leave is to address a Qualifying Exigency arising from the active duty, or call to active duty, of a covered family member, it is the employee's responsibility to return to the Company, within 15 calendar days from receipt of the Notice of Eligibility and Rights and Responsibilities (Form WH-381), a complete and sufficient Certification of Qualifying Exigency for Military Family Leave (Form WH-384), including written documentation confirming a covered servicemember's active duty, or call to active duty, and any available documentation supporting the need for leave. If the required documentation is not returned within that time period, your request for leave may be denied.

If the certification you return is incomplete (i.e., contains one or more blank entries) or insufficient (i.e., contains vague, ambiguous or unresponsive entries), your certification may be rejected. If so, you will be notified in writing of the deficiencies in your certification and given one (1) opportunity to correct those deficiencies. You will have 7 days to do so, otherwise your leave may be denied for failure to submit a complete and sufficient certification.



# Family Leave Policy

## **For Wounded Warrior Leave**

If the requested Family Leave is to care for a covered family member who is a covered servicemember who has suffered a serious injury or illness in the line of duty while on active duty in the United States Armed Forces, it is the employee's responsibility to return to the Company, within 15 calendar days from receipt of the Notice of Eligibility and Rights and Responsibilities (Form WH-381), a complete and sufficient Certification for Serious Injury or Illness of Covered Servicemember for Military Family Leave (Form WH-385). If the required documentation is not returned within that time period, your request for leave may be denied.

If the certification you return is incomplete (i.e., contains one or more blank entries) or insufficient (i.e., contains vague, ambiguous or unresponsive entries), your certification may be rejected. If so, you will be notified in writing of the deficiencies in your certification and given one (1) opportunity to correct those deficiencies. You will have 7 days to do so, otherwise your leave may be denied for failure to submit a complete and sufficient certification.

In lieu of the required certification (Form WH-385), an eligible employee may provide to the Company, within 15 calendar days from receipt of the Notice of Eligibility and Rights and Responsibilities (Form WH-381), a copy of an ITO (Invitational Travel Order) or an ITA (Invitational Travel Authorization). These are both government orders that authorize a certain number of family members of a wounded servicemember to travel to the medical facility where the servicemember is being treated. If an ITO or ITA is timely provided, no additional documentation/certification will be required, at least until the expiration date of the ITO or ITA. If the need for leave extends beyond such expiration date, however, a valid Certification for Serious Injury or Illness of Covered Servicemember for Military Family Leave (Form WH-385) will need to be provided within 15 calendar days of the request for same.

## **Information Regarding GINA**

An employer is obligated to comply with the confidentiality requirements of the Genetic Information Non-Discrimination Act (GINA) of 2008. Information obtained for FMLA purposes containing "family medical history" or "genetic information" as defined in GINA must be maintained by the employer in accordance with the confidentiality requirements of Title II of that Act.

The Genetic Information Nondiscrimination Act of 2008 (GINA) prohibits employers and other entities covered by GINA Title II from requesting or requiring genetic information of an individual or family member of the individual, except as specifically allowed by this law. To comply with this law, the Company asks that employees and their medical providers not provide any genetic information when responding to requests for medical information. To the extent information obtained for FMLA purposes contains "family medical history" or "genetic information" as defined by GINA, such information will be maintained in accordance with the confidentiality requirements of Title II of GINA.



# Family Leave Policy

## **IX. Approval Requirements and Considerations**

A Family Leave of 12 workweeks or less in a 12-month period under FMLA will ordinarily be automatically approved by the Company, subject to the employee satisfying the eligibility requirements and other prerequisites. Additional time off after the end of the 12 workweeks, or 26 workweeks in the case of the Wounded Warrior leave in a single 12-month period will be at the discretion of the Company under the Personal Leave Policy or Permissible Absences for Personal Reasons Policy.

## **X. Use of Paid Time While on Family Leave**

Employees have the option to use paid time off, if available, to cover any or all of the Family Leave (vacation, if applicable). Any paid time off taken by the employee while on Family Leave will run concurrently and will not extend the total amount of Family Leave to which the employees is entitled. Applicable collective bargaining agreements will dictate the amount of paid time off available to an employee. The Company also has the option to substitute available paid leave, consistent with state law, to cover any or all of the Family Leave, and any such election by the Company will not extend the employee's total Family Leave.

## **XI. Benefits Status During Family Leave**

Benefit plan status while an employee is on a Family Leave is provided under the terms and conditions of each respective plan. Specific provisions governing the status of each benefit can be found in the respective plan document. A summary of the status of all benefit plans while on any type of leave of absence can be found in the document entitled "Benefit Status for Leaves of Absence."

## **XII. Intermittent Leave or Reduced Schedule Leave**

"Intermittent leave" is leave taken in separate blocks of time due to a single illness or injury, rather than for one continuous period of time, and may include leave of periods from an hour or more to several weeks. Examples of intermittent leave would include leave taken on an occasional basis for medical appointments, or leave taken several days at a time spread over a period of six months, such as for chemotherapy.

A "reduced schedule leave" is a leave schedule that reduces an employee's usual number of working hours per workweek, or hours per workday. In other words, a reduced schedule leave is a change in the employee's schedule for a period of time, normally from full-time to part-time.

Unless otherwise required by law, Family Leave for the birth (including birth via surrogacy arrangement), adoption or foster care placement of a child may NOT be taken intermittently.

Intermittent or reduced schedule leave can be taken to care for a covered family member with a serious health condition as long as (a) there is an FMLA or similar state law equivalent qualifying and documented medical need for leave (as distinguished from voluntary treatments or procedures), (b) the employee is needed to care for the seriously ill family member, and (c) such medical need is best accommodated through an intermittent or reduced schedule leave. Only the amount of leave actually taken may be counted toward the 12 weeks of Family Leave to which the employee is entitled.

# Family Leave Policy



If an employee requests such a leave and it is foreseeable based on planned medical treatment of a family member, including during a period of recovery from a serious health condition, the Company may require (in accordance with any applicable collective bargaining agreement, federal law, and state law) the employee to transfer temporarily to an available alternative position for which the employee is qualified, provided the alternative position has equivalent pay and benefits and better accommodates recurring periods of leave than the employee's regular position but is not required to have equivalent duties. The employee must make a reasonable effort to schedule the family member's treatment so as not to disrupt unduly the operations of the Company, subject to the approval of the health care provider.

Intermittent or reduced schedule leave may also be taken under the Qualifying Exigency and the Wounded Warrior types of Family Leave.

Employees needing intermittent/reduced schedule leave for foreseeable medical treatment should work with their supervisor and Human Resources to schedule the leave. All leave schedules are subject to review and authorization by the Company.

An employee on intermittent leave or a reduced schedule leave maintains eligibility status under the benefit plans as an active employee (rather than benefit eligibility as an employee on a continuous leave).

## **XIII. Job Reinstatement**

An employee on Family Leave has the right to return to the same or an equivalent position with equivalent benefits, pay, and other terms and conditions of employment upon return to active status, provided the leave was not in excess of 12 workweeks within any 12-month period (or 26 workweeks in the case of the Wounded Warrior leave) unless a longer duration is required by law. Other laws that provide for reinstatement may apply, and the Company will comply with all applicable reinstatement requirements.

For a Casual employee, job reinstatement means that such employee shall be returned to casual status, which by definition does not require the Company to provide additional employment.

The Company has the right to recover all employer-paid health plan premiums for maintaining coverage during the leave in the event the employee fails to return from leave, provided the reason is not due to the continuation, recurrence or onset of a serious health condition which entitles the employee to leave, or other circumstances beyond the control of the employee. An employee who returns to work for at least 1 calendar day is considered to have "returned" to work.

### **USERRA Protections for All Military Members Including Active and Reserves**

The Uniformed Services Employment and Reemployment Rights Act (USERRA) requires that a person reemployed under its provisions be given credit for any months and hours of service he or she would have been employed but for the USERRA-covered service in determining eligibility for Family and Medical Leave Act (FMLA) leave. These protections extend to all military members (active duty and reserve), and all periods of absence from work due to or necessitated by USERRA-covered service is counted in determining the employee's eligibility for FMLA leave.



## Family Leave Policy

### **XIV. Anti-Discrimination/Retaliation**

Employees will not have their leave unlawfully interfered with, be discriminated or retaliated against for using or requesting Family Leave or FMLA leave (or similar state family and medical leave laws).

### **XV. Participation by Affiliates**

Upon specific authorization and subject to such terms and conditions as it may establish, Marathon Petroleum Company LP may permit subsidiaries and affiliated companies to participate in the Policy. Currently, these participating companies include Marathon Petroleum Service Company, Marathon Petroleum Logistics Services LLC, and Marathon Refining Logistics Services LLC.

For purposes of the Policy: (i) the term “Company” and other similar terms means Marathon Petroleum Company LP and, where the context requires, such participating affiliates; and (ii) the term “Employee” and other similar terms mean an eligible employee of Marathon Petroleum Company LP, and, where the context requires, an eligible employee of a participating affiliate.

### **XVI. Further Information**

Benefits Administration and Human Resources personnel coordinate the administration of this Policy throughout the Company. The Health and Welfare Benefits Manager, reviews all leave requests for completeness and compliance with Policy provisions.

The Company may terminate Family Leave under this Policy and take disciplinary action, up to and including termination, against an employee who use Family Leave for purposes other than those described in this Policy.

Marathon Petroleum Company LP may modify or terminate this Policy, in whole or in part, in such manner as it shall determine, at its sole discretion.

## **Appendix A**

### **California Family Care**

The Company will grant time off to employees in accordance with the requirements of the California Family Rights Act (“CFRA”) in addition to applicable federal law in effect at the time the leave is granted. The following addresses employee rights under the CFRA only and supplements the Marathon Petroleum Family Leave Policy. Employees should refer to the Marathon Petroleum FMLA Policy and Family Leave Policy for additional detail regarding federal-FMLA and Family Leave. An employee who is eligible for family leave under any of these policies will be eligible for the most generous benefits available under applicable law. For leave due to an employee’s own serious health condition, please refer to the FMLA Policy and the Medical Leave Policy.

Where both the CFRA and federal Family and Medical Leave Act (“FMLA”) apply, the leave provided by each will count against the employee’s entitlement under both laws and must be taken concurrently. Similarly, to the extent leave under the Family Leave Policy also qualifies for CFRA leave, both leaves shall run concurrently.

#### **Employee Eligibility**

To be eligible for family leave under the CFRA, employees must have been employed by the Company for a total of at least 12 months (52 weeks) at any time prior to the commencement of the leave and have worked at least 1,250 hours over the previous 12 months as of the start of the leave.

#### **Qualifying Reasons for Family Leave and Length**

Eligible employees may request family leave of up to 12 workweeks in a rolling 12-month period under CFRA for one or more of the following reasons:

- For the birth of an employee’s child or the placement of a child with the employee for foster care or adoption, so long as the leave is completed within 12 months of the birth or placement of the child (otherwise referred to as “Bonding Leave”; CFRA leave is not available when an employee is disabled by pregnancy, childbirth or a related condition);
- To care for the employee’s spouse or registered domestic partner, child (regardless of age or dependency status), parent, parent-in-law, grandparent, grandchild, sibling or designated person as defined in Appendix C, with a serious health condition;
- For a qualifying exigency related to the covered active duty or call to covered active duty of an employee’s spouse, domestic partner, child, parent, or parent-in-law in the Armed Forces of the United States;



# Family Leave Policy

“Serious health condition” means an illness, injury (including, but not limited to, on-the-job injuries), impairment or physical or mental condition that involves either:

- Inpatient care (including, but not limited to, substance abuse treatment) in a hospital, hospice or residential medical care facility, including any period of incapacity (that is, inability to work, attend school or perform other regular daily activities) or any subsequent treatment in connection with this inpatient care; or
- Continuing treatment (including, but not limited to, substance abuse treatment) or continuing supervision by a health care provider that includes one or more of the following:
  - A period of incapacity (that is, inability to work, attend school or perform other regular daily activities due to a serious health condition, its treatment or the recovery that it requires) of more than three consecutive calendar days, and any subsequent treatment or period of incapacity relating to the same condition, that also involves treatment two or more times via an in-person visit to a health care provider, or at least one visit to a health care provider that results in a regimen of continuing treatment under the supervision of the health care provider;
  - Any period of incapacity or treatment for incapacity due to a chronic serious health condition that requires periodic visits to a health care provider, continues over an extended period of time and may cause episodic incapacity;
  - A period of incapacity that is permanent or long-term due to a condition for which treatment may not be effective, such as Alzheimer’s, a severe stroke and the terminal stages of a disease; or
  - Any period of absence to receive multiple treatments (including any period of recovery) by a health care provider either for (a) restorative surgery after an accident or other injury; or (b) a condition that would likely result in a period of incapacity of more than three consecutive calendar days in the absence of medical intervention or treatment.

Like under the Family Leave Policy, the rolling 12-month period is measured backward from the date an employee uses any CFRA leave under this Policy.

Leave taken for the birth, adoption, or foster care placement of a child (Bonding Leave) does not have to be taken in one continuous period of time, but the basic minimum duration of the leave is two weeks (exceptions may be granted, at a minimum, on any two occasions).

## Requesting Leave

When the need for the leave is foreseeable (such as for the expected birth or placement of a child) employees must, if possible, provide at least 30 days’ advance notice,) and identify the planned dates of leave. For events that are unforeseeable, employees should notify the Company, at least verbally, as soon as they learn of the need for the leave. In addition to other notice provisions, employees requesting leave for CFRA qualifying reasons must respond to any questions designed to determine whether an absence is potentially qualifying for leave under CFRA. Failure to respond to permissible inquiries regarding the leave request may result in denial of CFRA leave protections.

When the leave relates to medical issues (i.e., the serious health condition of a family member), employees will be required to provide a medical certification within 15 calendar days of the Company’s request, unless it is not practicable to do so. Employees on CFRA leave for a family member’s serious health condition may be required to provide a recertification when the original certification expires, if additional leave is requested. Certification forms are available from Absence Management.



## Family Leave Policy

Absent unusual circumstances, failure to comply with these notice and certification requirements may result in a delay or denial of the leave. If an employee fails to return to work at the leave's expiration and has not obtained an extension of the leave, the Company may presume that the employee does not plan to return to work and has voluntarily terminated their employment.

### **Compensation and Benefits**

Leave taken under this policy is generally unpaid, although depending upon the circumstances, employees may be eligible to receive benefits through state-sponsored programs or the Company's sponsored wage-replacement benefit programs. Also, employees may choose to use accrued vacation and medical leave, to the extent permitted by law and the Company's policy. If employees elect to have wage-replacement benefits and accrued paid leave integrated, the integration will be arranged such that employees will receive no greater compensation than their regular compensation during this period. The use of paid benefits will not extend the length of CFRA leave.

Taking CFRA leave may impact certain employee benefits and seniority dates. All questions regarding the impact of CFRA leave on seniority and benefits, should be directed to Human Resources professionals assigned to your worksite.

All questions concerning eligibility for CFRA leave should be directed to Absence Management at 1-888-421-2199, option 3.

**Note:** Authority cited: Section 12935, Government Code. Reference: Sections 12940, 12945, 12945.2 and 12945.6, Government Code; Family and Medical Leave Act of 1993, 29 U.S.C. § 2601 et seq.; and 29 C.F.R. § 825.

## **Appendix B**

### **Washington State Paid Family Leave**

The Company will grant paid time off to employees in accordance with the requirements of the Washington Paid Family and Medical Leave Act (“WA PFMLA”), pursuant to which eligible employees may be entitled to a leave of absence with partial wage replacement benefits from the State of Washington Employment Security Department (“Department”) for absences due to their own serious health condition, or to care for a family member with a serious health condition, bond with a new child, or assist with obligations that arise when a family member is called into active military service.

The following addresses employee rights to paid family leave under the WA PFMLA only and supplements the Marathon Petroleum Family Leave Policy. Employees should refer to the Marathon Petroleum FMLA Policy and Family Leave Policy for additional detail regarding federal-FMLA and Family Leave requirements. An employee who is eligible for family leave under any of these policies will be eligible for the most generous benefits available under applicable law. For leave due to an employee’s own serious health condition, please refer to the FMLA Policy and the Medical Leave Policy

Where both the WA PFMLA and federal Family and Medical Leave Act (“FMLA”) apply, the leave provided by each will count against the employee’s entitlement under both laws and must be taken concurrently. Similarly, to the extent leave under the Family Leave Policy also qualifies for WA PFMLA leave, both leaves shall run concurrently.

#### **Employee Eligibility**

Employees are eligible for WA PFMLA leave and partial wage replacement benefits if they meet the eligibility requirements as determined by the Department. Generally, this means that employees must have worked 820 hours in “employment” (as defined by the WA PFMLA), for any employer in Washington State, during the qualifying period (i.e., first four of the last five completed calendar quarters or, if eligibility is not established, the last four completed calendar quarters immediately preceding the application for leave).

#### **Reasons for and Length of Leave**

During a benefit year, eligible employees may be entitled to up to a maximum of 12 weeks of paid family leave to: (1) participate in providing care for a “family member” of the employee made necessary by the family member’s serious health condition; (2) bond with the employee’s child under the age of 18 during the first 12 months following the child’s birth, adoption or foster care placement of a child under the age of eighteen; or (3) attend to a “qualifying exigency,” as defined under the federal Family and Medical Leave Act (“FMLA”), arising from the “covered active duty” (as defined below) of an employee’s family member as a member of the military reserves, National Guard, or Armed Forces. Additionally eligible employees may be entitled to use up to seven calendar days of the available 12 weeks of paid family leave following the death of a child during their first 12 months after birth or placement if: (1) the employee would have qualified for family leave to bond with the child and/or (2) would have qualified for medical leave related to the expected birth or placement of a child. Any time off for this purpose runs concurrent with the Marathon Petroleum Bereavement Leave Policy.

# Family Leave Policy

An eligible employee may receive up to a combined total of 16 weeks of medical and family leave, which may be extended to 18 weeks if the employee experiences a pregnancy-related serious health condition that results in an incapacity. For clarification purposes, for a parent giving birth, the first six weeks after birth will be presumed to be a medical leave under the WA PFMLA and will generally run concurrent with available leave under the Parental Leave Program, unless the employee chooses to use paid family leave, if available, during that period, and a medical certification is not required for that postnatal period.

An employee is not entitled to WA PFMLA benefits for (a) absences caused by the employee's willful intent to bring about injury to or sickness of the employee or another; (b) absences resulting from an injury or sickness sustained in the employee's perpetration of an illegal act; (c) any family or medical leave beginning before the employee is eligible for such benefits; (d) a period during which the employee is on suspension from employment; or (d) any period of time during which the employee works for remuneration or profit.

## Definitions

- **“Benefit year”** means a period of 52 consecutive calendar weeks beginning on Sunday of the week of the employee's timely and complete application to the Department. Employees will only have one “Benefit Year” at a time.
- **“Child”** means a biological, adopted, or foster child, a stepchild, a child's spouse, or a child to whom the employee stands in loco parentis, is a legal guardian, or is a de facto parent, regardless of age or dependency status.
- **“Covered Active Duty”** means (1) in the case of a member of a regular component of the Armed Forces, duty during the deployment of the member with the Armed Forces to a foreign country; and (2) in the case of a member of a reserve component of the Armed Forces, duty during the deployment of the member with the Armed Forces to a foreign country under a call or order to active duty (or notification of an impending call or order to active duty) in support of a contingency operation as defined by applicable law.
- **“Family Member”** means the employee's spouse or state registered domestic partner, child, parent, grandparent, grandchild, or sibling. “Family member” also includes any individual who depends on the employee for care and either: (1) regularly resides in the employee's home; or (2) is in a relationship that creates an expectation that the employee will care for the person. “Family member” does not include an individual who simply resides in the same home as the employee with no expectation that the employee care for them.
- **“Grandchild”** means a child of the employee's child.
- **“Grandparent”** means a parent of the employee's parent.
- **“Parent”** means the biological, adoptive, de facto, or foster parent, stepparent, or legal guardian of an employee or the employee's spouse or state registered domestic partner, or an individual who stood in loco parentis to an employee when the employee was a child.



# Family Leave Policy

## **Wage Replacement Benefits**

Eligible employees may receive wage replacement benefits from the Department. Wage replacement benefits are determined and administered by the Department, not the Company. The amount of wage replacement benefits is calculated based upon an employee's average weekly wage in relation to the state average weekly wage and is capped at a maximum weekly benefit amount that is adjusted annually. When taking WA PFMLA for reasons other than family leave for a qualifying exigency or for the birth or placement of the employee's child, payment of wage replacement benefits is subject to a waiting period of seven consecutive calendar days. The waiting period begins on the Sunday of the first week an eligible employee starts taking paid family or medical leave. Employees may use available vacation, medical leave (if applicable), or other paid time off during the waiting period.

The minimum claim duration is eight consecutive hours of leave meaning the employee claims at least eight consecutive hours at some point during the week beginning on Sunday at 12:00 a.m. and ending at 11:59 p.m. the following Saturday.

In any week in which an employee is eligible to receive benefits under federal or state unemployment compensation, industrial insurance, or disability insurance laws, the employee is disqualified from receiving WA PFMLA wage replacement benefits.

## **Payroll Deductions**

WA PFMLA benefits are funded by both a Company contribution and an employee contribution.

## **Requesting Leave**

Employees must file an application for WA PFMLA benefits directly with the Department using the Department's forms. Employees applying for WA PFMLA benefits must provide the Department supporting documentation or certification as required by the Department. Failure to provide timely notice and supporting documentation may result in the Department denying WA PFMLA benefits.

Employees must also provide notice to the Company as provided in the Family Leave Policy.

When using WA PFMLA concurrently with FMLA and/or leave under the Family Leave Policy, employees must comply with the notice and certification requirements provided in the Family Leave Policy.

Whenever an employee who is qualified for WA PFMLA benefits is absent from work for family leave for a period of more than seven consecutive days, the Company will provide the employee with a written statement of the employee's rights. The notice will be provided to the employee within five business days after the employee's seventh consecutive day of absence due to family leave, or within five business days after the Company has received notice that the employee's absence is for such reasons, whichever is later.

## **Health Benefits**

To the extent required by applicable law, if an employee takes WA PFMLA and there is at least one day of concurrent use with FMLA, the Company will continue making contributions to employee group health benefits during the WA PFMLA leave on the same terms as if the employee had continued to actively work. The Company will maintain health benefits from the date WA PFMLA began until the earlier of when WA PFMLA ends, or the employee returns from leave to any employment.



## **Appendix C**

### **Colorado Family and Medical Insurance Leave Act (“FAMLI”)**

The Company will grant paid time off to employees in accordance with the requirements of the Colorado Family and Medical Insurance Leave Act (“FAMLI”), pursuant to which eligible employees may be entitled to a leave of absence with partial wage replacement benefits from the State of Colorado FAMLI Division for absences related to qualifying events as defined by the federal Family and Medical Leave Act and for obtaining safe housing, care, and/or legal assistance in response to domestic violence, stalking, sexual assault, or sexual abuse.

#### **Employee Eligibility**

An employee is eligible for FAMLI if they have worked as a full-time or part-time employee and earned \$2,500 in wages within the state within the last four calendar quarters.

#### **Reasons and Length of Leave**

Employees may take leave to care for a new child during the first year after the birth, adoption, or foster care placement of that child, care for a family member with a serious health condition, care for your own serious health condition, make arrangements for a family member’s military deployment, and to obtain safe housing, care, and/or legal assistance in response to domestic violence, stalking, sexual assault, or sexual abuse.

Covered employees are entitled up to 12 weeks of paid family and medical leave per year. Individuals with serious health conditions caused by pregnancy complications or childbirth complications may be entitled to up to 4 more weeks of paid leave per year for a total of 16 weeks.

#### **Usage**

FAMLI leave may be taken continuously, intermittently, or in the form of reduced work schedule. Employees may not be required to utilize accrued paid time off before or during FAMLI leave. However, if FAMLI leave is used for a reason that also qualifies as leave under the federal FMLA, then the leave will also count as FMLA leave.

#### **Wage Replacement Benefits**

During FAMLI leave, benefits are calculated on a sliding scale using the individual’s average weekly wage from the previous five calendar quarters in relation to the average weekly wage for the state of Colorado and may increase over time. Benefits provided by the state are capped at \$1,100 per week.

#### **Payroll Deductions**

FAMLI benefits are funded by both a Company contribution and an employee contribution.



# Family Leave Policy

## **Requesting Leave**

In the event the need for leave is foreseeable, an employee shall provide notice to the Company at least 30 days before the date the leave is to begin. If the necessity for leave is not foreseeable or providing 30 days' notice is not possible, employees shall provide notice as soon as practicable.

Eligible employees may submit an application for FAML I benefits by submitting an application, along with required documentation, directly to the FAML I Division. Applications may be submitted in advance of the absence from work and in some emergency circumstances they may be submitted after the absence has begun. Approved applications will be paid by the FAML I Division within two weeks after the claim is properly filed, and every two weeks thereafter for the duration of the approved leave. Employees can appeal claim determinations to the FAML I Division.

When using FAML I concurrently with FMLA and/or leave under the Family Leave Policy, employees must comply with the notice and certification requirements provided in the Family Leave Policy.

## **Health Benefits**

The Company will maintain health benefits while an employee is on FAML I leave, and the employee remains responsible for paying their portion of those benefits in the same amounts as before the leave began.

## **Reinstatement**

An employee who has worked for the Company for at least 180 days is entitled to return to the same position, or an equivalent position, upon their return from FAML I leave.



## **Appendix D**

### **Marathon Petroleum Family Leave Expanded Coverage to Care for Certain Family Members and Similar Relationships**

#### **California**

Provides expanded coverage to care for a grandparent, grandchild, sibling or a designated person identified by the employee at the time of the leave request who has a documented serious health condition. A designated person is defined as any individual related by blood or whose association with the employee is the equivalent of a family relationship. Employees are limited to one designated person per 12-month period.

#### **New York**

Provides expanded coverage to care for parent in-law, stepparent, parent of a domestic partner, sibling (biological, adopted, half- or step-sibling), grandparent, grandchild, and child of a domestic partner who has a documented serious health condition.

#### **Washington**

Provides expanded coverage to care for a child's spouse, de facto parent, stepparent, parent of a state registered domestic partner, grandparent, grandchild and sibling, and any individual who depends on the employee for care and either: (1) regularly resides in the employee's home; or (2) is in a relationship that creates an expectation that the employee will care for the person who has a documented serious health condition. Coverage does not include an individual who simply resides in the same home as the employee with no expectation that the employee care for them.