WarburgPincus Benefits Program

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OVERVIEW

OVERVIEW

This guide is intended to provide you with a brief overview of the benefits program offered to employees by Warburg Pincus LLC. However, it is not intended to provide a full and complete description of these benefits. For a complete description of any benefits program described in this guide, please contact the Human Capital Department.

Please keep in mind that the benefits summarized in this guide are governed by the terms of formal plans or policies adopted by the Firm. In the event of any inconsistency between the terms of this guide and any actual plan or policy, the terms of the plan or policy will govern. Further, the Firm (including the officers and administrators who are responsible for administering the plans) and/or the plan administrators retain full discretionary authority to interpret the terms of the plans as well as full discretionary authority with regard to administrative matters arising in connection with the plans and all issues concerning benefit eligibility and entitlement. The Firm reviews its benefit plans and policies on a regular basis and reserves the right to modify, amend, or discontinue any benefit at any time for any reason. As such, this document may be updated from time to time. Please go to the Human Capital and Benefits webpage for the most recent version.

Questions regarding benefits may be directed to Human Capital.

Note: This guide is not a contract of employment; nor is it intended to alter the employment at-will relationship that exists between the Firm and its employees.

EMPLOYEE BENEFITS SUMMARY

Benefit Category	Description	
Eligibility	Eligible employees on the first working day of the month following date of hire.	
	Regular employees working	at least 30 hours per week.
Employee Monthly	Single Coverage:	\$0 Medical, \$2 Dental, \$1 Vision
Contribution	Family Coverage:	\$30 for Medical, \$3 Dental, \$2 Vision
Medical Plan AETNA POS PLAN	In-Network:	\$10 copay physician, \$25 copay specialist
AETNA POS PLAN	Out-Of-Network:	30% coinsurance and deductible apply
	Teladoc:	\$10 copay
	Maximum Lifetime Benefit:	Unlimited
	Prescription:	Tier 1 - \$5 / Tier 2 - \$25 / Tier 3 - \$60
Hospital Plan	In-Network:	Covered at 100%
AETNA	Out-Of-Network:	30% coinsurance and deductible apply
Dental Plan	Preventive Services:	Covered at 100%
AETNA	Annual Deductible:	\$50 per person, \$150 per family
	Coverage:	80% after deductible
	Orthodontics:	50% after deductible \$2,000 maximum benefit for dependent children under the age of 19.
	Maximum Annual Benefit:	\$2,000
Vision Plan VSP	In-Network Coverage Exam:	Once a calendar year with a \$10 copay
	Prescription Glasses:	Lenses once a calendar year with a \$25 copay (single vision, lined bifocal, lined trifocal lenses and tints)
	Frame:	Once a calendar year a frame of your choice covered up to \$150. Or, if you choose contacts instead of glasses, a \$130 allowance will apply. Copay up to \$60 for fitting.
Flexible Spending Accounts** WEX	Health Care account maximum contribution is \$3,050. Dependent Care account maximum contribution is \$5,000.	
Family Forming Benefit CARROT	Benefits eligible employees and their spouses will be reimbursed up to a lifetime maximum of \$50,000 for family forming services	

^{*} SPVs, Named Directors, Principals, and MDs eligible for additional coverage, benefits reduced at age 70

^{**} Partners not eligible

^{***} LTD is subject to tax unless you participate in the tax choice program. See page 22 for more details.

Benefit Category	Description	
Life Insurance & AD&D* PRUDENTIAL	4 x base salary + \$10,000 up to \$510,000	
Business Travel Accident CHUBB	Coverage:	Insured 24-hour Business Travel Accident Coverage Spouse of insured – Business Travel Children of insured – Business Travel
	Benefit Amount:	\$2 Million USD insured \$100,000 spouse of insured**** \$50,000 dependent children****
Long Term Care UNUM PROVIDENT		as result of loss of functional capacity or es nursing home, assisted living facility and
Long Term Disability***	180 Day Elimination Period	
UNUM PROVIDENT	Coverage Amount:	66 2/3% basic monthly earnings
	Maximum Monthly Benefit:	\$35,000 (subject to tax)
	Basic Monthly Earnings:	Monthly salary does not include bonus or overtime earnings
401(k) &	Eligibility:	Date of hire
Profit Sharing Plan FIDELITY	Employee Contribution:	You can contribute up to 100% of eligible compensation not to exceed the annual IRS limit, \$22,500 (\$30,000 for those 50 and over).
	Employer Contribution:	The Plan provides for discretionary employer contributions, called Profit Sharing contributions, each plan year on behalf of all eligible participants. The Plan also provides for nondiscretionary employer contributions, called Safe Harbor contributions, on behalf of participants who are non-highly compensated employees as defined by the IRS. Historically, the total Firm contribution has been 10% of eligible compensation up to the IRS limits.
	Eligible Compensation: Includes base earnings, bonus and overtime not to exceed \$330,000.	
Gympass	Access to a variety of fitness and wellness plans that provide unlimited access to gyms and fitness classes in the Gympass network.	
Tuition Reimbursement	Up to \$5,250 per year for degree-related programs at an accredited college or university. Post graduate-level courses must be directly related to the Firm's business.	

 $^{^{*}}$ SPVs, Named Directors, Principals, and MDs eligible for additional coverage, benefits reduced at age 70

^{**} Partners not eligible

^{***} LTD is subject to tax unless you participate in the tax choice program. See page 22 for more details.

^{****}Only while traveling with the employee for business

Benefit Category	Description	
Commuter Benefit** WEX	Pre-Tax Deduction Limits:	\$300 maximum monthly deduction for commuting expenses. \$300 maximum monthly deduction for parking expenses. You contribute only once/month via payroll deduction.
Employee Assistance Program <i>LIFEWORKS</i>	Service provided by a third party vendor who offers short-term mental health and financial counseling referral program as well as broader referral services.	
Headspace	Free access to an application that provides guidance on mindfulness, meditation and well-being.	
Bright Horizons Family Support	Back Up Care for children, adults and elders Elder Care Pet Care	

^{*} SPVs, Named Directors, Principals, and MDs eligible for additional coverage, benefits reduced at age 70

COORDINATION OF BENEFITS

*If you or your family are covered under another plan in addition to the Warburg Pincus plan, benefits will be paid accordingly:

FOR YOU

Warburg Pincus will pay benefits first. The other plan will pay benefits according to its own rules after your claim has been processed by the Warburg Pincus plan.

FOR YOUR SPOUSE

His or her plan will pay benefits first. The Warburg Pincus plan will pay claims of benefits, reduced by any claim paid by the other plan. If their plan pays benefits that are greater than or equal to the Warburg Pincus plan, benefits will not be paid by the Warburg Pincus benefits plan.

FOR YOUR CHILDREN

If your child is covered under the Warburg Pincus plan and your spouses plan, the "Birthday Rule" will determine primary coverage. If your birthday occurs before your spouse's in the calendar year, the Warburg Pincus plan pays benefits first. If your spouse's birthday occurs before yours in the calendar year, their plan pays first.

If your child is a subscriber under their own plan, that plan will pay first, the Warburg Pincus plan will pay second.

^{**} Partners not eligible

^{***} LTD is subject to tax unless you participate in the tax choice program. See page 22 for more details.

TERMS AND DEFINITIONS

Coinsurance

The percentage of the medical or dental charge that you owe after you pay the deductible.

Copayment

A flat fee that you pay for in-network medical services.

Deductible

The amount you pay toward benefits before the plan begins reimbursement.

Reasonable & Customary (R&C) Charge

The usual amount charged by most doctors for a service in a geographic area. R&C charges apply for out-of-network services.

* If you or any of your dependents participate in a separate plan, in addition to the Warburg Pincus Plan, you will need to inform both providers of dual coverage.

YOUR HEALTH

ELIGIBILITY

All regular part-time (if you work 30 hours or above) or full-time employees are eligible for coverage under the Firm's health plan. Upon timely completion of enrollment procedures, employees become eligible on the first working day of the month following their date of hire. Exclusions may apply.

ELIGIBLE DEPENDENTS

The persons who generally qualify as dependents eligible for plan coverage include:

- Your spouse of the same or opposite sex, provided that your marriage has not ended by divorce or annulment.
- Your children as long as they are your natural, step, foster or adopted children, or children placed with you for adoption (up to age 26).
- Your dependent children unable to support themselves because of mental illness, developmental disability, mental retardation or physical handicap, provided the incapacitating condition commenced before the age at which dependent coverage would otherwise end.

ELIGIBLE QUALIFYING STATUS CHANGES

Benefits can only be elected during the open enrollment period and remain in effect throughout the entire plan year unless you experience a Qualifying Status Change (QSC). QSC events include, but are not limited to the following:

- · Change in legal marital status, death of a spouse, divorce, legal separation or annulment
- · Change in number of dependents, including birth, adoption, death or legal order
- · Change in employment status of you or your spouse resulting in the loss of group benefits
- Change in status for dependent, such as age, marital status, etc.

All enrollment or disenrollment changes due to an event described above must be consistent with the event. In addition, a change form must be submitted to Human Capital within 31 days of the qualifying event.

For more information, please refer to the Summary Plan Description (SPD), which can be obtained on the Firm's intranet site.

COVERAGE LEVELS

You may choose individual coverage for yourself, coverage for yourself and eligible dependents, or you may choose to waive coverage.

MEDICAL BENEFITS

Each time you need to visit a physician you have the choice of selecting an in-network physician from the Aetna network or going to a non-participating physician.

When you visit an in-network provider, present your Aetna ID card and generally you will be charged a copay for service. No referrals are needed. Charges will be covered if you go to an out-of-network physician; however, your costs will be higher and you will need to complete a claim form and submit it to Aetna for reimbursement. You are able to view your secure member information as well as the ability to search for doctors, view your id card, claims, etc. by downloading Aetna's mobile app or you can visit

www.aetna.com/individuals-families.html

The following is a summary of your Warburg Pincus healthcare benefits.

Aetna Point of Service Plan		
Plan Provision	In-Network	Out-Of-Network*
Coverage (plan pays)	100% after copay	70% after deductible
Annual Deductible		
Individual (per person)	\$0	\$1,000
Family (max deductible a family of three or more will pay)	\$0	\$2,500
Out-Of-Pocket Maximum		
Individual (per person)	\$6,350	\$7,500
Family (max out of pocket a family of three or more will pay)	\$12,700 All in-network and RX copays apply to out-of-pocket maximum	\$18,750 Out-of-network deductible applies to the out-of-pocket maximum
Lifetime Maximum	unlimited	Unlimited
Office Visit	\$10	30% after deductible
Specialist Office Visits	\$25	30% after deductible
Well Child Care	\$0	30% after deductible
Preventive Care (Well Adult Care)	\$0	30% after deductible
Hospital Services (inpatient)	100%	30% after deductible
Emergency Room**	100% covered if an emergen	су
Outpatient Mental Health	\$25	30% after deductible
Prescription Drugs: generic/ preferred brand/ non-preferred brand	Tier 1- \$5 Tier 2- \$25 Tier 3- \$60	n/a
Mail Order Drugs	\$5/\$25/\$60 90-day supply	n/a
Physical, Speech, Massage,	\$25	30% after deductible
and Occupational Therapies*** combined in- and out-of-network 40 visits per caler		network 40 visits per calendar year
Chiropractic Therapy	\$25	30% after deductible
	\$2,000 annual limit	

^{*} reasonable and customary limits apply to out-of-network services

^{***}non-emergency care in an emergency room is not covered

***100% coverage, no copay, no dollar limit or visit cap for habilitative services related to
developmental delays and autism. Out of network rules apply.

****Acupuncture covered effective 1/1/2023 - 10 visits annually for pain management only. Must meet medical necessity. In and out of network coverage applies. Click here for Aetna medical requirements.

DENTAL COVERAGE

With the PPO Dental plan, you may choose to receive care from any dentist. Your cost is lower when you use in-network dentists as participating dentists provide discounted rates to members of the plan.

Aetna Dental PPO		
Coverage Feature	In-Network	Out-Of-Network***
Calendar Year Deductible		
Individual (per person)	\$50	\$50
Family	\$150	\$150
Preventive and Diagnostic Care (routine exams, cleanings, fluoride treatments*, sealants**, bitewing X-rays)	100%	100%
Basic Care (fillings, extractions, anesthesia, space maintainers)	80% after deductible	80% after deductible
Major Care (root canals, oral surgery, gum disease treatment, crowns, bridges, dentures)	80% after deductible	80% after deductible
Periodontics (treatment of gum disorders)	80% after deductible	80% after deductible
Prosthodontics (dentures and bridgework)	80% after deductible	80% after deductible
Annual Maximum Benefit (per person)	\$2,000	\$2,000
Orthodontia Lifetime Maximum*	\$2,000	\$2,000

VISION COVERAGE

You can review your vision benefits by downloading the vsp mobile app or visit www.vsp.com

VSP Vision Service Plan		
Coverage Feature	In-Network	Out-Of-Network***
Eye Exams (once a calendar year)	\$10 copay	\$50
Frames (once a calendar year)	\$150 allowance	\$70
Prescription Lenses (once a calendar year)		
Single Vision	\$25 copay	\$50
Lined Bifocal	\$25 copay	\$75
Lined Trifocal	\$25 copay	\$100
Contact Lenses (fit, follow-up, materials each calendar year)	\$130 allowance, \$60 copay (in lieu of glasses)	\$105

^{*} to age 19
** to age 14
** reasonable and customary limits apply
+ younger than 19

PRESCRIPTION PLAN

You may purchase your drugs from either an Aetna participating pharmacy or utilize the Prescription Mail Service. If you choose a participating retail pharmacy, just present your Aetna ID card at the pharmacy and pay the applicable copayment.

If you are currently taking a medication on a daily basis to treat a condition, you may want to consider the mail order program and purchase up to a 90-day supply.

Retail Pharmacy up to a 30-day supply	Mail Order Program up to a 90-day supply
Tier 1 - Generic \$5.00	Tier 1 - Generic \$5.00
Tier 2 - Preferred brand \$25.00	Tier 2 - Preferred brand \$25.00
Tier 3 - Non-preferred brand \$60.00	Tier 3 - Non-preferred brand \$60.00

Covered druglists can be found at **www.aetna.com/formulary**. Select 2023 Plan Year and Standard Opt Out Plans.

RETIREE HEALTHCARE PLAN

Warburg Pincus maintains a Retiree Healthcare Plan that allows eligible employees to choose to maintain medical and dental coverage under the plan after they cease to be employed by the Firm.

ELIGIBILITY

All active, benefits eligible employees who are at least 55 years of age and have at least 15 years of service at Warburg Pincus on the date of retirement are eligible to participate in the plan. A retiring employee must actively elect to participate prior to their retirement date. You can not retroactively enter the plan after retiring from the Firm.

COVERAGE

Participants in the retiree healthcare plan currently receive the same benefits and have the same co-payments and deductibles that are provided under the Warburg Pincus healthcare plan for active employees, including coverage for spouses and surviving spouses (whether married at retirement or married after retirement) and dependent children as provided under the terms of the plan for active employees. Effective the 1st of the month in which a retiree or their spouse turns 65, the Retiree Healthcare Plan will process claims based on the assumption that Medicare is the primary payer whether the participant is enrolled in Medicare or not. Medicare eligible retirees are strongly encouraged to enroll in Medicare Parts A and B in advance of turning 65.

RETIREE HEALTHCARE RATES FOR EMPLOYEES HIRED ON OR BEFORE DECEMBER 31, 2020

The monthly premiums paid by retirees represent the full cost of coverage paid by the plan and therefore are significantly higher than the monthly contributions paid by active employees. The retiree rates are recalculated annually by a third party and communicated to retirees during the firm's annual open enrollment period.

Based on age and years of service of the eligible employee at the retirement date, the Firm subsidizes a percentage of the retiree healthcare benefit cost and the retiree pays the remaining cost of the annual premium. The percentage of this cost that the Firm subsidizes varies between fifty percent (50%) and one hundred percent (100%). The percentage paid by the Firm is based on an employee's total points, which equal the employee's age at retirement plus one point for each complete year of service with the Firm. Examples of how the subsidy operates are below in Exhibit I.

RETIREE HEALTHCARE RATES FOR EMPLOYEES HIRED ON OR AFTER JANUARY 1, 2021

All employees hired or rehired on or after January 1, 2020 who retire at age 55 or older and with at least 15 years of continued employment with the Firm will still be eligible to elect coverage under the plan but will be obligated to pay 100% of the monthly premium.

EXHIBIT I: RETIREE HEALTHCARE PLAN

Employee Eligibility Requirements and Employer Subsidy Percentages for Employees Hired On or Before December 31, 2020

Age + Service Years = 70 for basic eligibility for Retiree Healthcare Plan Benefit

See chart below for increase in premium subsidy with increase in points for eligibility

Age	Service Years	"Points for Eligibility*"	Premium % Subsidized by Warburg Pincus
55	15	70	50% paid by Warburg Pincus
56	15	71	55% paid by Warburg Pincus
55	17	72	60% paid by Warburg Pincus
55	18	73	65% paid by Warburg Pincus
59	15	74	70% paid by Warburg Pincus
60	15	75	75% paid by Warburg Pincus
55	21	76	80% paid by Warburg Pincus
56	21	77	85% paid by Warburg Pincus
55	23	78	90% paid by Warburg Pincus
64	15	79	95% paid by Warburg Pincus
60	20	80	100% paid by Warburg Pincus
54	20	Not Eligible	0% and not eligible for plan
68	12	Not Eligible	0% and not eligible for plan
56	30	86	100% paid by Warburg Pincus

EXHIBIT II: RETIREE HEALTHCARE PLAN

Employee Eligibility Requirements and Employer Subsidy Percentages for Employees Hired/Rehired On or After Rehired Prior After January 1, 2021 and for All Managing Directors

Age + Service Years = 70 for basic eligibility for Retiree Healthcare Plan Benefit No subsidy applies

Age	Service Years	"Points for Eligibility*"	Premium % Subsidized by Warburg Pincus
55 and 55+	15 and 15+	70	0%; 100% of cost paid by retiree

FLEXIBLE SPENDING ACCOUNTS

Flexible spending accounts (FSAs) let you set aside pretax dollars out of your paycheck to pay for certain health care and dependent care expenses. Each year during open enrollment, you have the option of enrolling in one or both of the following:

HEALTH CARE FSA

You may contribute up to \$3,050 per year to pay for eligible out-of-pocket health and dental care expenses for yourself, your spouse and dependents. For more information on eligible healthcare expenses please visit **www.WEX.com**.

DEPENDENT CARE FSA

You may contribute up to \$5,000 (per household) per year for eligible day care expenses while you (and your spouse, if you are married) are attending school on a full-time basis or working. Typically, these would be for day care expenses for children (before school care, nanny/babysitter, camp), but you can also use this account to reimburse day care for other dependents such as spouses, parents, or grandparents, who cannot care for themselves. Your dependent must live in your home. For more information on eligible dependent care expenses please visit www.WEX.com.

Please note: This benefit is not available to Partners.

HOW A FSA WORKS

Health and Dependent Care accounts work in similar ways:

- The amount you choose to contribute will be deducted from your semimonthly paycheck in equal amounts during the plan year.
- Estimate your expenses carefully because you will forfeit any unused funds at the end of the plan year grace period.
- As you incur eligible expenses during the year (including the grace period), you have access to these accounts for reimbursement of eligible expenses.

FSAs are strictly governed by the IRS regulations. For more details and a list of eligible expenses, you may refer to IRS Publications 502 and 503 available at **www.irs.gov**.

FSA FACTS

- Use it or lose it. You may not carry over an FSA balance from one year to the next
 however a participant who has an unused balance in his/her FSA as of the last day
 of the plan year may submit qualified expenses with proof of payment incurred
 between January 1 and March 15 (the grace period) of the following plan year for
 reimbursement. You may submit claims up to 60 days after the grace period for the
 prior year.
- Money may not be transferred between accounts for expense reimbursements.
- You may not stop or change your FSA contributions during the plan year unless you have a Qualified Status Change. Any changes must be consistent with the qualifying change.
- You must re-enroll in any FSA each year during open enrollment.

- Healthcare and Dependent Care FSA contributions are subject to annual non-discrimination testing per IRS rules, as a result your annual election may be reduced based off participation in the program.
- Healthcare FSA funds can be used prior to employee contributions. Dependent care FSA funds can only be used from accrued employee contributions.
- · You can only incur expenses as an active employee.

FSA DECISION GUIDELINES

Before participating in a flexible spending account (FSA), take some time to ask yourself some of these questions:

- How much were my out-of-pocket health care and dependent care expenses last year?
- Do I expect to pay for some health care costs that are not totally covered by my benefits?
- Do I pay someone to care for my dependents while I work?
- Am I eligible for a tax credit for any health care or dependent care-related expenses?
 If so, will the tax credit or FSA participation be better for me?
- Does my spouse have flexible spending accounts available through an employer?
 If so, how do we want to coordinate our accounts?
- Is my family planning to adopt a child; am I expecting the adoption-related costs to exceed my tax credit maximum?

HOW TO GET REIMBURSED

- 1. WEX Debit card
- 2. You can upload a claim to www.wexinc.com
- 3. Upload your claim through the WEX Mobile app for Android and Apple users
- 4. Fax/mail paper reimbursement form and copies of receipts

When filing a claim, you will need to include date of service, type of service, dollar amount (after insurance, if applicable) and name of provider/merchant. Occasionally documentation will be required to verify the eligibility of an expense on your debit card, which can be done through the **WEX mobile app**, fax/mail or via **WEX website**.

If you do not use your debit card, you will be reimbursed for approved claims by check or you can set up your account to be reimbursed via direct deposit.

FAMILY FORMING BENEFIT

Warburg Pincus provides a fertility health and family forming benefit plan to support eligible employees considering fertility treatment, adoption, and gestational carrier (surrogacy) support. This benefit is administered by Carrot, a global family planning provider that offers personalized guidance and care navigation. Carrot has access to specialists in 3,800 clinics in over 120 countries from fertility and reproductive technology providers that meet strict clinical and regulatory qualifications.

Before using this benefit, please note funds you utilize through Carrot may be considered additional income and taxed as per the IRS. Please review the Tax Implication section at the end of this summary.

The firm will reimburse eligible employees and spouses for services covered up to a \$50,000 USD lifetime maximum. Carrot will process all claims and reimbursements.

ELIGIBILITY

This benefit is available to all benefit eligible employees and their spouses. In order to use the fertility benefit, you and your spouse must be enrolled in an employer sponsored healthcare plan (whether sponsored by Warburg Pincus or another employer sponsored healthcare plan.) Carrot will validate that each member has employer-sponsored coverage before reimbursing for infertility care.

WHAT SERVICES DOES CARROT OFFER?

The following types of services are generally covered:

- Fertility Preservation for egg, sperm and embryo freezing and annual storage fees
- Reproductive Technology including IUI and IVF
- Fertility Planning
- · Lab Testing
- · Access to Specialists
- Adoption Services

- Legal Fees
- Travel related to Fertility Services
- Pregnancy and Gestational Support
- Carrot Pharmacy Free RX delivery and 24/7 clinician support
- Appointments and referral services
- Menopause and Low Testosterone support

REGISTRATION AND REIMBURSEMENT PROCESS

- You can register by creating an account at get-carrot.com/signup. You will need to
 use your Warburg Pincus email to register. Once enrolled you may change your email
 to a personal account.
- During your setup process, you may add direct deposit information.
- When it's time to receive your family-forming treatments, you will pay out-of-pocket at the time of service, then upload a photo of your itemized bill to Carrot.
- Once it's validated, you'll get reimbursed via direct deposit within the first 30 days or sooner of the following month the request was made.

^{*} Carrot's services exclusively apply to reproductive technology under the supervision of a fertility clinic or to certain gestational carrier and adoption-related expenses. Note basic care from an OB-GYN or primary care doctor is typically covered by the healthcare plan, not Carrot.

TAX IMPLICATION

Funds you utilize through Carrot may be considered additional income and taxed as per the IRS. In the U.S., there is a type of care that may be reimbursed tax free: Qualified Medical Expenses (QMEs). Qualified Medical Expenses include fertility care you or your spouse receive due to an infertility diagnosis or out of medical necessity, such as preservation services in advance of treatment that will result in an impairment of fertility. If you would like help understanding how to determine whether a service is a QME and additionally discuss what qualifies as a taxable or non-taxable reimbursement through Carrot, please reach out to the Care Team at **support@get-carrot.com**. If the reimbursement for your service is considered taxable income, the tax portion you owe will be deducted from your paycheck. Carrot cannot offer tax advice and you should always consult a tax professional for formal guidance on filing and paying taxes.

If you have any questions or would like more information about how your Carrot benefit works, how to select a qualified provider, would like to ask questions from a fertility, adoption, or gestational carrier expert, you may contact your Carrot Care Team at support@get-carrot.com

TELADOC

Teladoc, made available through Aetna, provides you and your eligible dependents with 24/7/365 access to U.S. board- certified doctors and pediatricians by phone or online video. You can use this service for medical, behavioral health or dermatology. You will pay the same in-network \$10 co-pay for regular medical providers or a \$25 specialist co-pay for behavior health or dermatology providers.

HOW THIS BENEFITS YOU AND YOUR ELIGIBLE DEPENDENTS:

MEDICAL SERVICES:

You and your eligible dependents can resolve many common medical issues 24/7 through the convenience of phone or online video consultations. Teladoc does not replace your primary care physician however these U.S. board-certified doctors can diagnose, treat and prescribe medication, when appropriate, for many common medical issues. The cost for your consult is the same as your doctor visit copay. In addition, with your consent, Teladoc will provide information about your consultation to your primary care physician.

CAREGIVER BENEFIT:

You can add your parent, spouse or other loved one you care for to your Teladoc account even if they are not covered by your Warburg Pincus benefits. You are able to request a general medical services visit for that person and even join a three-way visit with your loved one and a doctor once your care recipient is activated. The care recipient can request a visit independently—however, he/she would need to provide a payment method. The care recipient does not have access to any method(s) of payment stored in the caregiver's account. The cost for this visit will always be \$49.

Please note: A caregiver must have authorization via documentation (Power of Attorney) or be authorized by the care recipient. Or you can elect to have Teledoc contact your loved one to obtain authorization. There is no requirement for your loved one to be a member of your household.

To request a medical consultation call 1-855-Teladoc (835-2362). You can also set up an account at **Teladoc.com/Aetna**.

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NYU LANGONE HEALTH

Warburg Pincus employees have dedicated access to physician referrals at NYU Langone Health via the Warburg Pincus Access Line. This access line may be used by all Warburg Pincus employees, family and friends. NYU Langone Health is one of the nation's premier academic medical centers based in Manhattan with more than 300 other sites throughout the region. This benefit is intended to provide quick and easy access to appointments with expert doctors.

HOW DOES IT WORK?

If you or someone you know is looking for a physician or specialist, you can call our dedicated Warburg Pincus Access Line at 855-698-4724 for a referral or to schedule an appointment. Same-day appointments are available for urgent matters. Phone lines are open Monday through Friday from 9 am to 5 pm. Please keep in mind, this is a referral service only. It is the responsibility of users to understand if the services they are seeking are in their insurance network or out of network, and the associated costs.

PRIVATE HEALTH

Private Health Management Clinical Response Services is a supplemental medical benefit designed to provide additional support to you and your family when facing complex or serious health care issues. This program is available to all Warburg Pincus employees globally who receive health care benefits.

Private Health can help you navigate the health care system when facing complex medical conditions or when you need access to top quality physicians for specialized diagnosis, treatment, surgery or second opinions. Private Health is a supplemental service and does not replace your relationship with your local health care providers. You should continue to rely upon your local health care providers for routine referrals and continue to rely on your local office manager/benefits manager as a resource for assistance in resolving insurance related claims issues.

The following services are available as a benefit to all employees and their eligible dependents:

- Physician Referrals: immediate physician and specialist referrals (both in and out of your medical plan) with appointment scheduling, specialist care case coordination and medical records transfer support
- Research: access to current research including updated disease and treatment information to assist in making informed health care choices
- Intensive Case Management: active medical case management for serious conditions including assembly of a physician-led care team to assist in identifying treatment options, experienced specialists and coordination of logistics
- Global physician and hospital referrals: for minor and serious illness and medical emergencies when traveling (similar services are currently provided to WP employees by Chubb MEDEX, however Private Health Management services includes family members)

 Additional: Comprehensive Travel Reports including recommended immunizations, preventive health measures, and pre-identified local medical resources including contact information and notification of local physician are also available for an incremental fee of \$300/report at your own cost

Private Health is responsible for protecting the confidentiality of all health related information. Warburg Pincus will not have access to the health care information for which these services are used.

We hope this program can be helpful to you and your family in addressing health care issues or coping with any complex or serious medical situations. We welcome and are very interested in your feedback on the value of this offering.

Private Health is available 24/7 at 310-248-4050. Additionally, you can call toll free at 833-240-4160 or send an email to **warburgpincus@privatehealth.com**.

If you would like to use Private Health, you will need to register first. Please **click here** for the registration link or you may reach out to Private Health directly.

Password: Warburgpincus2022

FAMILY PROTECTION

Warburg Pincus provides basic life insurance, accidental death & dismemberment insurance, business travel accident insurance, workers compensation insurance, short-term disability, long-term disability coverage, and long-term care insurance to you at no cost.

PRUDENTIAL LIFE AND ACCIDENTAL DEATH & DISMEMBERMENT (AD&D) INSURANCE

- BASIC LIFE AND AD&D INSURANCE (PAID BY WARBURG PINCUS):
 Four times your base pay + \$10,000 (up to \$510,000). AD&D benefits are paid in addition to any life insurance if you die in an accident or become seriously injured or physically disabled. These amounts are different for SVPs, Principals and MDs.
- OPTIONAL LIFE INSURANCE FOR YOU (PAID BY YOU):
 Up to five times your base pay, in increments of \$50,000, up to \$500,000. If you would like additional information on Optional Life, please visit the Optional Life packet under "External Links" in the benefits section of workday.
- OPTIONAL LIFE INSURANCE FOR YOUR DEPENDENTS (PAID BY YOU):
 Up to 50 percent of your coverage to a maximum of \$250,000 for your spouse and up to \$5,000 or \$10,000 for each child.

*For optional life insurance for you and your dependents, you may have to complete an Evidence of Insurability (EOI) medical questionnaire to determine whether you are insurable for supplemental life insurance amounts. If required, one will be provided to you.

BUSINESS TRAVEL ACCIDENT INSURANCE

ACCIDENTAL DEATH & DISMEMBERMENT INSURANCE

The firm's Accidental Death & Dismemberment insurance provides employees with accidental death, dismemberment, and paralysis coverage if they are involved in an accident while traveling on business (includes personal travel for employee only) 24 hours a day/365 days a year. The death benefit is ten times your base pay, subject to a maximum of \$2 million. In addition, the policy provides the spouse of the insured coverage when accompanying the employee on a business trip up to \$100,000 and dependent children up to \$50,000.

This policy also provides travel assistance through AXA during a medical emergency or if travel guidance is needed. For medical referrals, medical emergency, evacuation and repatriation please call 1-855-327-1414 (toll free) or +44 2039 015895 (UK/FOS)

WORKERS COMPENSATION INSURANCE

The Firm holds workers' compensation insurance, which covers all employees. If an employee's work re-lated injury or illness qualifies for workers' compensation, payments are made to compensate for lost wages and medical expenses during the period of the employee's work-related injury or illness. The amount paid will vary based on the extent of the injury or illness and on the schedule of payments set by the state and the Firm's insurance carrier.

Employees must report any work-related injury immediately to their manager and Human Capital, regardless of the nature or seriousness of the injury. Medical claims for any work-related injury must be filed through our workers' compensation carrier and not through the Firm's health care plan. Failure to follow Firm procedures may affect employees' eligibility to receive Workers' Compensation benefits.

Filing a false or fraudulent Workers' Compensation claim is a violation of Firm policy, and will result in disciplinary action, up to and including immediate termination of employment. Employees should also be aware that both California and New York laws make it a crime to file a knowingly false or fraudulent claim for Workers' Compensation benefits, or to submit knowingly false or fraudulent information in connection with any Workers' Compensation claim. Violation of this law is punishable by imprisonment, a fine or both.

Workers' Compensation is solely a monetary benefit and not a leave of absence.

DISABILITY INSURANCE

SHORT-TERM DISABILITY SALARY CONTINUATION:

A regular full-time employee who is unable to work due to illness, pregnancy or injury (other than a self-inflicted injury) may be eligible for short-term disability benefits for a period of up to 180 calendar days. Please note, short-term disability does not cover your ability to commute to and from work. Disability cases are reviewed on whether you are physically able to do your job. If you are not sure if you would be eligible for disability, please contact Unum or the Human Capital Benefits Manager.

Short-term disability benefits will take effect after the employee has been absent for five consecutive business days for any of the reasons listed above. Any employee receiving workers' compensation benefits is ineligible for this benefit. While receiving short-term disability benefits, the employee must not engage in outside employment and is expected to avoid activities that may delay recovery and return to work. If a disability is expected to continue beyond 180 days, a regular full-time employee should complete a Long-Term Disability benefit application. An employee may not continue receiving short-term disability benefits if he/she has become eligible for long-term disability benefits. Short-term disability benefits end after 180 days. Short-term disability is solely a monetary benefit and not a leave of absence

MEDICAL CERTIFICATION

The employee must provide medical certification of the disability that includes the start and expected ending date of the disability to our disability claims administrator, Unum. Additionally, the employee will need to provide the start and expected end date of the disability to the Human Capital Benefits Manager.

The claim will be reviewed by the Unum claims administrator and/or applicable state agency. In the event that a claim for short-term disability benefits is determined to be unsubstantiated, the claimant will be expected to return to work immediately and to refund to the Firm any short-term disability benefits paid for an absence related to the claim, to the maximum extent permitted by applicable law.

BENEFIT PAYMENT

The short-term disability benefit payment is 100% of the employee's semi-monthly wages for the first 90 days of the disability. The remaining 90 days is paid at 66 2/3% of the employee's semi-monthly wages. Payments are made on regularly scheduled paydays. The benefit is taxable income.

For New York employees, the entire benefit is paid by means of a Firm paycheck. Any New York state disability benefits to which the employee is entitled are paid directly to the Firm and are used to offset the benefit paid by the Firm. In the event that a New York employee receives a state disability payment to which he or she is not entitled, such check must be remitted to the Human Capital Department.

For San Francisco employees, the benefit is paid by means of a California State Disability check paid directly to the employee and a Firm paycheck consisting of the remaining benefit amount. In the event that a San Francisco employee receives any disability payment from the Firm to which he or she is not entitled, such payment must be returned to the Human Capital Department.

LONG-TERM DISABILITY (LTD)

Regular full-time employees who have exhausted their benefits under the Firm's Short-Term Disability Plan may be eligible for benefits under the Firm's Long-Term Disability Plan. Additional information on the Long-Term Disability Plan is available from Human Capital.

Firm-paid salary and health care benefits for regular full-time employees cease on the 181st calendar day of absence due to a medically approved disability. Upon filing of a claim and approval thereof, long-term disability payments begin with the 181st calendar day of absence. You will be eligible for 66 2/3 percent of base monthly earnings, up to \$35,000/month to age 70, if you continue to be disabled as defined by the policy.

LONG-TERM DISABILITY (LTD) TAX CHOICE

Benefits are paid directly by the long-term disability carrier. Since the Firm pays the premium for this benefit, any benefit is taxable unless the recipient elects to pay taxes on the amount the Firm pays for his or her benefit premium. In other words, if you pay the imputed tax you will be eligible to receive your full benefit. Individuals who wish to receive non-taxable long-term disability benefits must complete the appropriate form within 31 days of hire or during open enrollment and return it to Human Capital.

Long-term disability is solely a monetary benefit and not a leave of absence.

LONG-TERM CARE INSURANCE

LONG-TERM CARE (LTC) INSURANCE (PAID BY WARBURG PINCUS) provides coverage for services needed by individuals who are no longer able to care for themselves due to a chronic illness, injury or the effects of aging. These services are generally not covered by health insurance or Medicare and can be expensive. LTC insurance coverage is offered by Unum and provided to you at no cost. Coverage can be purchased for family members at a discounted rate. In addition, individual policies are fully portable. The following is a summary of benefits:

Facility Monthly Benefit	\$3,000
Home Monthly Benefit	\$1,500
Assisted Living	\$1,800
Facility Benefit Duration	3 Years
Home Benefit	50%
Lifetime Maximum	\$108,000

You must be experiencing a loss of two activities of daily living for 90 days in order to qualify for this benefit. Please note UNUM has an approval process before benefits can be paid.

Warburg Pincus' paid LTC coverage provides a daily financial benefit, if a physician certifies you may no longer perform at least two Significant Activities of Daily Living (SADLs): bathing, dressing, eating, continence, toileting and transferring. LTC benefits help cover the following types of out-of-pocket expenses:

- · Home Health Care
- · Assisted Living Facility
- · Respite Care
- · Adult Day Care

Your LTC program also lets you decide where you are going to receive care in your home or in a facility.

You can visit www.unuminfo.com/warburgpincus for more information.

YOUR FUTURE

401(K) AND PROFIT SHARING PLAN

EMPLOYEE ELECTED CONTRIBUTIONS

Benefit eligible employees may enroll in the Warburg Pincus LLC Profit Sharing Plan (the Plan) at any time. Fidelity is the record keeper and Trustee of the Plan.

Through automatic payroll deduction, you may contribute 1%-100% of your eligible pay on a pre-tax and/or Roth basis up to the annual IRS dollar limits. Your eligible compensation includes salary, bonus, and overtime. Once you have elected a deferral percentage the salary deduction will begin with your next pay period after Fidelity receives your enrollment information, or as administratively possible. You are always 100% vested in your own contributions as well as rollover contributions you make into the Warburg Pincus LLC Profit Sharing Plan.

Please note, if you do not enroll in the Plan within 30 days from your hire date, you will automatically be enrolled in the Plan at a contribution rate of 6% of your pre-tax eligible earnings. If you are auto-enrolled your contribution will increase each year by 1% up to 10%. Your money will be invested in the Vanguard Target Retirement Fund. If you do not wish to contribute in the Plan, you must change your contribution rate to 0% within the first 30 days of your date of hire.

HOW TO ENROLL

Enroll online at any time through Fidelity at **www.netbenefits.com** or by calling the Warburg Pincus Profit Sharing Service Center at 800-835-5095. If you are outside of the U.S., you can call Fidelity at 877-833-9900.

You will need a username and password to access your account. Online, select "Register as a new user" and follow the instructions to create a username and password. If you already have a Fidelity account you can use the same username and password to access your Warburg Pincus LLC Profit Sharing account.

Once enrolled, employees may view their balance, change investment elections, or adjust their 401k contribution at any time by calling Fidelity or through **www.netbenefits.com**. Participants can also download Fidelity's NetBenefits mobile app **here**.

EMPLOYER CONTRIBUTIONS

The Plan provides for discretionary employer contributions, called Profit Sharing contributions, each plan year on behalf of all eligible participants. The Plan also provides for nondiscretionary employer contributions, called Safe Harbor contributions, on behalf of participants who are non-highly compensated employees as defined by the IRS.

Safe Harbor contributions and any earnings are 100% vested. Profit Sharing contributions and any earnings have a 6 year graded vesting schedule as follows:

Completed Years of Service	Vesting Percentage
Less than 2	0%
2–3	20%
3–4	40%

Completed Years of Service	Vesting Percentage
4–5	60%
5–6	80%
6 or more	100%

Additional information about the Warburg Pincus LLC Profit Sharing Plan is available in the Summary Plan Description.

ADDITIONAL BENEFITS

GYMPASS

Gympass is a fitness and wellness platform available only through employer sponsored plans. Employees will be able to purchase a monthly membership through the platform by choosing a tier plan and will receive unlimited access to gyms, studios, online classes, well-being solutions, personal trainers, and other resources in the Gympass network based on the tier plan they choose. For travelers, Gympass is available nationwide and internationally in some markets.

- Access to 12,000+ gyms throughout the US. Each gym partner grants unlimited
 member level access for the tier you purchase. (Please note the Gold and Platinum
 tiers have visit limitations for the following gyms: SLT, Soul Cycle, Solidcore,
 Bar Method, and Barry's Bootcamp).
- Unlimited access to wellness apps included in your tier plan, which offer meditation, nutrition, fitness and healthy habits.
- Custom virtual workout plans and 1- on- 1 coaching with a fitness trainer available in certain tiers.

To sign up, visit **www.gympass.com/sign-up/company-search**, and type "Warburg Pincus" into the Company Name search bar. You will be prompted to sign up with your company email address. Once you have gained access to the platform, you can select the tier that best suits your wellness journey.

To find gyms in the Gympass network within your area, **visit site.gympass.com/us/ companies**. Scroll down to enter your zip code and filter on plan tiers to see what gyms are available within your area in those tiers.

PARENTAL LEAVE POLICY

The Firm has established the following Parental Leave Policy for U.S. employees (the "Parental Leave Policy") to provide pay during a period of leave pursuant to Firm policy and/or applicable law in order to care for, and bond with, the employee's new son or daughter following birth, adoption or permanent foster care placement. The Parental Leave Policy provides paid leave to both new primary and secondary caregivers as outlined below.

PRIMARY CAREGIVER

A primary caregiver's regular salary will be continued, on the basis of the Firm's usual payroll practices, during a period of up to twenty (20) workweeks of leave that meets all of the conditions described below.

SECONDARY CAREGIVER

A secondary caregiver's regular salary will be continued, on the basis of the Firm's usual payroll practices, during a period of up to four (4) workweeks of leave in the first year of the employee's son or daughter's birth or adoption provided all of the conditions described below.

The secondary caregiver leave must be taken in increments of no less than one (1) workweek, and at least two (2) workweeks must be taken at the birth or adoption of the child. The second two (2) workweeks may be taken anytime in the 12 months following the

birth or adoption of the child, provided they are taken in at least one (1) week increments. Notice of at least one

(1) week notice is expected for taking subsequent weeks of parental leave, except in cases of emergency.

APPLICABLE CONDITIONS FOR PARENTAL LEAVE

For purposes of the Parental Leave, an employee's "son" or "daughter" is an individual who satisfies the definition of "son" or "daughter" under the Family and Medical Leave Act of 1993 (FMLA).

- The monetary benefits described in the Parental Leave Policy applies only upon the following events:
 - The birth of the employee's son or daughter, and care for such son or daughter;
 - The placement with the employee of a son or daughter for adoption or permanent foster care, and care for such newly-placed son or daughter.
- Any monetary benefits provided pursuant to the Parental Leave Policy will be
 reconciled with any other applicable monetary benefits such as Short-Term Disability
 and paid family leave benefits so that a qualifying employee may not receive more
 than one hundred percent (100%) of their regular salary at any time. Employees
 must apply for state paid family benefits in order to receive Parental Leave salary
 continuation. Additionally, leave pursuant to the Parental Leave Policy will not extend
 the length of leave otherwise provided pursuant to Firm policy and/or applicable law
 including leave provided pursuant to FMLA requirements.
 - Other than when beginning and ending an approved leave period, parental
 monetary benefits provided pursuant to the Parental Leave Policy must be
 taken in full workweek increments. For purposes of the Parental Leave Policy,
 "workweek" means the five consecutive day period that the employee is
 regularly scheduled to work.
 - Only one period of new Parental Leave benefits may be received in any nine-month period.
 - Any Parental Leave received pursuant to the Parental Leave Policy must be
 concluded within twelve months of the birth, adoption or placement of the new
 son or daughter for the primary or secondary caregiver. Only one parent can be
 deemed the primary or secondary caregiver and employees are not permitted
 to receive benefits as both the primary and secondary caregiver,
 - The Firm reserves the right to seek documentation confirming primary/ secondary caregiver status as a condition of receiving Parental Leave pursuant to this policy.

POSTPARTUM SUPPORT

Warburg Pincus provides postpartum support through Anya. All new mothers who are on Warburg Pincus's health insurance plan will receive a postpartum gift box from Anya that includes an assortment of products to help mothers recover and feel better faster. The gift includes products to help with energy levels, hair loss, skincare and more. New mothers can try the products and can opt into a 6-month subscription — as a gift from Warburg

Pincus (no cost to the new mom) – if desired. If you're interested in learning more about this gift, feel free to check out the **Anya website**.

The Parental Leave Policy will be administered by the Firm in a uniform and nondiscriminatory manner. The Parental Leave Policy shall not affect any rights an employee may have under the terms of the FMLA and/or any other state or local leave law.

The Firm reserves the right to amend or terminate the Parental Leave Policy at any time, for any reason, in its sole discretion. Inquiries regarding exceptions should be directed to Human Capital.

BRIGHT HORIZONS BACKUP CARE

Warburg Pincus has partnered with Bright Horizons® to offer back up care for children, adults, and elders as well as other benefits to support your family.

This benefit provides back-up care for both your children, adult, and elder family members during a lapse or breakdown in normal care arrangements. Warburg Pincus employees may utilize the back-up care benefit free of charge up to 20 times for each dependent (child or adult) per year. Also, parents can use an additional 10 days during the child's first 12 months. To access the additional 10 days, please reference the Return to Work Program when reserving care or visit the Special Programs tab on the back-up care site to access extra days.

Center-based Child Back-Up Care – access to a nationwide network of Bright Horizons and partner centers. Bright Horizons will accept children from six weeks up to 12 years old (ages vary by center).

In-Home Back-Up Care for Children, Adults, or Elders- access to licensed care givers that can come to your home or the home of your loved one across town or across the country. There is no age limit for in-home care, but children must be at least six weeks old.

Registration - In order to use the back-up care benefit you must register all children or adults in advance. Reservations can be made up to one month in advance of the date requested. Work e-mail and last name are required to register.

To register:

- Online at: clients.brighthorizons.com/warburgpincus
- Click "Join Today" and fill out your information
- OR CALL: 877-242-2737
- BACK-UP CARE APP: Search "Back-Up Care" in the App Store or Google play.

If prompted, below are the employer credentials:

Username: warburgpincus Password: wp4backup

ENHANCED FAMILY SUPPORT

Free membership to Sittercity when accessed through the Warburg Pincus Bright
Horizons website. You can find services such as babysitters, nannies, virtual sitters for
school aged children, virtual or in-home learning pods for children, elder caregivers,

dog walkers, and housekeepers. You may search for a caregiver or post a job yourself. Free background checks and targeted search functions ensure you find the best match for your family.

- Discounted high-touch nanny placement service
- Childcare tuition discounts at participating centers in the network
- · Preferred enrollment and registration fee credit at Bright Horizons-branded centers
- Tutoring discounts, test prep, and homework help
- Elder care resources
- Family Matters webinars

To access these benefits, you will need to visit clients.brighthorizons.com/warburgpincus. Please note, employees are responsible for the full cost of these additional services.

BRIGHT HORIZONS ELDER CARE

Bright Horizons Elder Care will help you navigate care giving plans and coordination for your elderly loved ones. This benefit gives you access to the below. Please note these services are consultative and any third party services may be subject to a fee.

- · Unlimited use of an online platform that will help you plan and coordinate care. You can create and manage a detailed daily caregiving schedule. To access the platform through a mobile app, download the Bright Horizons Elder Care App. Search "Bright Horizons Elder Care" in the App Store or Google Play.
- Ongoing support and personalized guidance from a dedicated Care Coach. A Care Coach is an expert in the field of elder care and will help by facilitating family conversations, sharing timely resources, and offering support through phone consultations and family conference calls.
- In-home assessments to determine a customized care plan based on your loved one's needs. You can request on-site assessment services and related assistance through your Care Coach.
- · Referrals to legal and financial counselors, including recommendations for discounted legal services. Your Care Coach can recommend an accredited financial advisor. Legal and financial consultants will answer your specific questions regarding eligibility for Medicare/Medicaid.
- · Specialized referrals to local service providers. Your Care Coach can help find local providers in your area with the specialties you are looking for.

As a reminder you have access to adult and elder back-up care through our standard back-up care program. To access details on your benefit, visit backup.brighthorizons.com. You can also call 877-242-2737 for any questions.

PET CARE

All employees will receive 10 separate Pet Care uses per year through the Rover app. Each Pet Care Use is equal to \$150 that can be used towards services provided by Rover. You can request up to 10 separate uses per year. The Rover website and application connects dog and cat owners with caregivers across the US. Rover's services include:

- Dog walking
- · Cat drop-ins
- · Overnight Boarding
- Pet sitting

In order to utilize this benefit, you must register for Bright Horizons Back-Up Care. It is strongly recommended that you register in advance so that you are ready to use the benefit when you need it. To register visit **backup.brighthorizons.com**.

Once on the Bright Horizons Back-Up Care site, you will see a Pet Care button on the homepage that will take you to the Pet Care website to redeem your pet care use. A coupon code will be displayed on the site. An email will also be sent to you with instructions on how to use your code and register with the Rover app. You will enter the code in your Rover app to redeem your back up pet session. Please note the code must be redeemed within 90 days.

COMMUTER BENEFIT

Whether you pay to ride the train, bus, ferry, vanpool or pay to park, the Firm's Commuter Benefit program allows employees to set aside up to \$300 per month from their paycheck, on a pre-tax basis, to pay for commuting costs and up to \$300 per month for parking expenses. (Please note: This benefit is not available to Partners.)

WEX CARD FOR MASS TRANSIT AND PARKING

You will receive a debit card with your pre-tax and post-tax deductions to pay for mass transit and commuter parking.

You can use your debit card on mass transit, vanpooling and work-related parking costs such as transit passes, fare cards, vouchers, parking passes. This includes expenses paid at the transit or parking authority or their website or mobile app. Additionally, the WEX debit card can be added as a payment method in the Uber and Lyft apps as well as uberPOOL and Lyft Shared rides. Please note, individual Uber/Lyft or individual cab rides are not eligible expenses.

If your parking vendor does not accept debit cards, you will pay out of pocket and then request reimbursement through the Benefits Mobile App by WEX or your online account.

TRANSIT ENROLLMENT:

You will enroll in the commuter benefits in your Workday Benefits Worklet. Once
logged into Workday go to the Benefits Worklet then elect to Change Your Benefits.
You will then elect the Parking/Commuter Change button and follow the prompts.
You can elect pre and post-tax dollars to cover both your commuter and parking
expenses. Please note, Workday requires a semi-monthly deduction amount so you
will need to divide your monthly amount in half and the system will calculate the
monthly rate when your payroll is processed.

- · Enrollment information will be sent to WEX on a weekly basis. Once WEX has your information you will receive a WEX debit card 14 business days from the date you receive your registration/notification email from WEX.
- · Please note, if you have a WEX Warburg Pincus flexible spending account, you will use your WEX debit card to pay for your commuter expenses.

HOW IT WORKS

- You contribute once monthly via payroll deductions for Commuter Benefits. The deduction occurs with the 15th of the month paycheck.
- Your commuter contributions are sent to WEX and will be uploaded to your debit card. These funds should be used for the following month's commuting expenses. For example, you elect \$125 for your commuting expenses on July 1 this money will be deducted on July 15 and should be used for your August commuting expenses.
- · Any deduction changes should be made by the 5th of the month in your Workday Benefits Worklet in order for your changes to be implemented with the upcoming payroll.
- You can log into your WEX account to view your balance at www.wexinc.com. Your online account provides plan information and your account history.
- · If you have issues with your online account or debit card you should call WEX at 866-451-3399.

IMPORTANT PLAN INFORMATION:

- · You should keep track of your pre-tax balance to prevent a large balance from accumulating. In the event of your termination, your debit card will be deactivated, and you'll have a run-out period of 60 days to submit mass transit or parking claims incurred while you were still actively employed. After the run-out period ends, any remaining pre-tax funds in your account are forfeited.
- If you need to suspend your commuter or parking deductions enter a zero-dollar deduction. Do not waive the benefit as this will cause you to forfeit your balance in your account.

EMPLOYEE ASSISTANCE AND WELLNESS

The EAP and Work-Life Services are provided by LifeWorks. This is offered as an added personal "life management resource." Through the EAP, you and your immediate family members can receive information, advice and support on a wide range of issues, including:

- Everyday needs and life events
- Emotional issues
- Relationship concerns
- Coping with a serious illness
- · Loss of a loved one
- Workplace concerns
- Life coach services
- Legal/financial Services

- · Housing options/home ownership
- · Child care/child development
- · Financing college/finding colleges and universities
- · Moving and relocation
- Locating services and care for older adults
- Wellbeing and Fitness

HOW TO USE THE EAP

If you need assistance, you may call and speak to an EAP professional or schedule a face-to-face session (1-844-664-0379). An EAP professional will assess any problem(s), help you sort through the issues(s), and often provide a referral to a local provider for follow-up counseling when needed. Services provided are completely confidential and free-of-charge.

YOU CAN ALSO VISIT: login.lifeworks.com

USERNAME: Warburg PASSWORD: EAP

Download the free app on Adroid or iOS, simply search "LifeWorks" and enter your username and password.

Please Note: Any services received from a provider outside the EAP are not covered under this benefit.

HEADSPACE

In uncertain times, many of us may be feeling anxious, overwhelmed, restless or isolated. For those interested, we are pleased to offer you a membership to Headspace, which is an application that provides guidance on mindfulness, meditation and well-being. Headspace has easy-to-use modules on meditation, focus, sleep and movement. You now have premium access to Headspace's award-winning application at no cost to you.

Once you enroll, you'll be able to access 1000+ hours of content designed to help manage stress, fall asleep, exercise mindfully, remain focused and more. You may sign up at anytime however, if you are already a paying member of Headspace, you can transition your account so that you do not have to pay for it.

In order to access your account, you must enroll by visiting here, and then you can download the Headspace app, or transition your existing membership. Using this link enables the firm to pay for it.

TUITION REIMBURSEMENT

Warburg Pincus encourages full-time employees to take advantage of our tuition reimbursement program. The program provides assistance to those employees who are enrolled in approved accredited degree programs. Employees must have a minimum of six months of employment service and be satisfactorily performing their job responsibilities to be eligible for tuition reimbursement. The maximum annual reimbursement is \$5,250 per year consistent with IRS regulations. Currently, reimbursement is nontaxable for undergraduate degrees and advanced business-related degrees. These reimbursement guidelines are subject to change by Congress. Warburg Pincus advances tuition as a loan and excuses the loan upon successful course completion. Proof of course completion is required. You must receive a passing grade for the loan to be forgiven.

HOW TO APPLY

If you intend to take a course, you should apply for the program before classes begin. Once you have completed the Tuition Reimbursement application form, simply return it and the course description to your HR department so they can let you know if you are approved.

HOW TO GET REIMBURSED

To receive reimbursement for eligible courses:

- The course(s) must be part of a degree-related program at an accredited college or university.
- A tuition reimbursement application (available on the Firm's intranet) must be completed, submitted and approved by your Department Manager and Human Capital prior to beginning a class. After approval, a check will be issued from the Accounting Department.
- Courses and study must be taken outside of normal working hours and must not interfere with the employee's current job responsibilities and work schedule.
- Upon completion of the course(s), you must submit an official transcript to Human Capital.
- Upon completion of the course(s), you must still be an active employee.

The Following are not covered under the Tuition Reimbursement Program:

- Postgraduate degrees not directly related to the Firm's business
- · Certificate programs
- Preparatory or proficiency courses such as GMATs
- · Application fees
- Deposits
- Books

- Computer and/or lab fees
- · Student activity fees
- · Insurance fees
- Late fees
- Graduation fees
- Graduate records
- Exam fees
- · Study courses

Job-related, non-degreed courses and related expenses are NOT covered under this Program. Such costs and related expenses may be reimbursed, at the discretion of the employee's manager and Human Capital, as a business expense.

Examples of this type of expense include:

- New York Institute of Finance courses
- Professional certification expenses (e.g., CPA, professional development, etc.)
- Secretarial courses
- · Computer courses
- · Training seminars

IMPORTANT CONTACTS

Please contact the individual company/provider listed below to learn more about a specific benefit plan. We also invite you to speak with a Warburg Pincus HR representative.

When You Have Questions About	Contact	Phone Number	Web Site
Medical Insurance	Aetna Member Services GROUP NUMBER: 479708	1-800-962-6842	www.aetna.com
Aetna Pharmacy Management-Retail	Aetna Member Services	1-800-238-6279	www.aetna.com
Aetna Rx Home Delivery-Mail Order	Aetna Member Services	1-866-612-3862	www.aetna.com
Aetna Specialty Pharmacy	Aetna Member Services	1-866-782-2779	www.aetna.com
24 Hour Informed Health Line	Aetna Registered Nurses	1-800-556-1555	
Teladoc	Aetna Doctors		www.teladoc.com/ Aetna
NYU Langone Health	Warburg Pincus Access Line	1-855-698-4724	
Private Health	Member Services	310-248-4050	warburgpincus@ privatehealth.com Registration Link Password: Warburgpincus2022
Dental Coverage	Aetna Member Services GROUP NUMBER: 479708	1-877-238-6200	www.aetna.com
Vision Coverage	VSP GROUP NUMBER: 30001298	1-800-877-7195	www.vsp.com
Flexible Spending Accounts	WEX GROUP NUMBER: 35652	1-866-451-3399	www.wexinc.com
Carrot	Carrot Care Team		support@get-carrot.com Registration Link
Life and AD&D Insurance	Prudential GROUP NUMBER: 44358	1-800-778-3827	www.prudential.com
Optional Life Insurance	Prudential GROUP NUMBER: 44358	1-800-778-3827	www.prudential.com
Disability Insurance	UNUM GROUP NUMBER: 221889	1-800-421-0344	www.unum.com/ employees
Long-Term Care Insurance	UNUM GROUP NUMBER: 546905	1-800-227-4165	www.unuminfo.com/ warburgpincus
401(k) Plan and Profit Sharing Plan	Fidelity PLAN NUMBER: 32095	1-800-835-5095 1-877-833-9900	www.netbenefits.com
Tuition Reimbursement	Warburg Pincus HR	1-212-878-9240	

IMPORTANT CONTACTS

Please contact the individual company/provider listed below to learn more about a specific benefit plan. We also invite you to speak with a Warburg Pincus HR representative.

When You Have Questions About	Contact	Phone Number	Web Site
Commuter Benefit	WEX COMPANY CODE: 35652	1-866-451-3399	www.wexinc.com
Employee Assistance Program (EAP)	LifeWorks	1-844-664-0379	login.lifeworks.com Username: Warburg Password: EAP
Backup Care Elder Care Pet Care	Bright Horizons	1-866-273-2773	clients.brighthorizons. com/warburgpincus
Headspace			work.headspace. com/warburgpincus/ member-enroll
Gympass			site.gympass.com/us

