

	<h2>Speak-Up Policy</h2>
---	--------------------------

Document Type: Policy			
Owning Function:	Compliance & Ethics Office	Document Number and Version:	600.03
Applicable Location:	Global	Effective Date:	02-May-2023

1. Summary

This Speak-Up Policy is intended to encourage and enable employees and others to raise any issues or concerns regarding known or suspected misconduct within the Company, including but not limited to, noncompliance with a business practice that could cause serious harm or give rise to Company liability and violations of the Company's Code of Business Conduct and Ethics or the Code of Ethics for Principal Executive Officer and Senior Financial Officers (collectively, the "Codes"), Company policies, procedures and ethical standards, or any applicable law or regulation including, but not limited to, securities laws and regulations, accounting standards, accounting controls, and audit procedures.

For purposes of this policy, the term "Company" means Syneos Health, Inc., any entity which is at any time the parent or subsidiary of Syneos Health, Inc., and any of its Affiliates. For purposes of this policy, a Company "Affiliate" shall mean an entity which is an affiliate of the Company by virtue of common (although not necessarily identical) ownership and over which the Company directly or indirectly has the power to direct or cause the direction of the management of policies, whether by exercising voting power, by contract or otherwise.

2. Scope

This policy applies globally to all officers, directors, employees, contractor labor and temporary employees wherever located (collectively, "Associates") and to all agents of the Company including but not limited to, contractors, consultants and representatives (collectively, "Associated Persons").

3. Policy

3.1 Report Types and Reporting Responsibility

As further defined below, all reported issues or concerns are referred to in this Policy as "Reported Events", except for reported issues or concerns related to accounting, internal accounting controls and auditing matters (including reported events regarding attempted or actual circumvention of internal accounting controls or reported issues or concerns regarding violations of the Company's accounting policies), which are referred to in this Policy as "Accounting Reported Events".

3.1.1 Reported Events - Definition

This document is confidential. If printed or downloaded, this document is uncontrolled.
For immediate use only; destroy after use.

Reported Events relate to matters including, but not limited to, criminal offences, breaches of legal or regulatory obligations, violations of the Company's Code of Business Conduct and Ethics or other Company policies or ethical standards, dangers to the health or safety of an individual, damage to the environment, or the deliberate covering up of information related to any of these matters.

3.1.2 Accounting Reported Events - Definition

Accounting Reported Events relate to matters including, but not limited to, fraud or deliberate error in the preparation, evaluation, review or audit of any financial statements of the Company, fraud or deliberate error in the recording and maintaining of financial records of the Company, deficiencies in or noncompliance with the Company's internal accounting controls, misrepresentations or false statements to or by a senior officer or accountant regarding a matter contained in the financial records, financial reports or audit reports of the Company, deviation from full and fair reporting of the Company's financial condition, or comparable violations of the Company's Code of Ethics for Principal Executive Officer and Senior Financial Officers.

3.1.3 Individual Reporting Responsibility

Associates and Associated Persons are expected to promptly report Reported Events and Accounting Reported Events for review by representatives of the Company according to the available reporting mechanisms more fully described in Section 3.3 below.

3.2 **No Retaliation**

No Associate or Associated Person who makes a report shall suffer harassment, retaliation, or adverse employment consequence (including, but not limited to, discharge, demotion, suspension, or discrimination in the terms and conditions of employment), if the reporter makes such report in good faith. Good faith means a reasonable belief that the information relayed shows misconduct within the Company, including but not limited to, noncompliance with a business practice that could cause serious harm or give rise to Company liability, known or suspected violations of the Company's Codes, policies or ethical standards, or any applicable law or regulation including, but not limited to, securities laws and regulations, accounting standards, accounting controls, and audit procedures. Any Associate or Associated Person who retaliates against someone who in good faith has reported an event is subject to corrective action, including discipline up to and including possible termination of employment, to the extent permitted by applicable laws.

3.3 **Reporting Mechanisms**

3.3.1 Reported Events Mechanisms

All Reported Events should be reported to the Company using one or more of the following mechanisms:

Management/Human Resources. The Company expects that Associates and Associated Persons share their questions, concerns, issues, or suggestions regarding this policy with, and make Reported Events to, someone who can address them properly. In most cases, an Associate's line manager is in the best position to address these issues or concerns. However, if an Associate is not comfortable speaking with their line manager or is unsatisfied with the line manager's response, the Associate is expected to speak with someone in Human Resources, the Compliance and Ethics Office or anyone else in management with whom they are comfortable approaching regarding the matter. Managers and Human Resources

This document is confidential. If printed or downloaded, this document is uncontrolled.
For immediate use only; destroy after use.

personnel are required to promptly forward any questions, concerns, issues, or suggestions regarding this policy and any Reported Events received to the Compliance and Ethics Office.

Business Ethics Helpline. Reported Events can be made by calling the Company's Business Ethics Helpline. Local country Helpline phone numbers can be found at syneoshealth.ethicspoint.com.

Business Ethics Web Form. Reported Events can be made online via the Company's Business Ethics Web Form located at syneoshealth.ethicspoint.com.

Compliance and Ethics Office. Email or send a letter to the Compliance and Ethics Office.

Email: complianceandethics@syneoshealth.com. Mailing address: Syneos Health, Compliance and Ethics Office, c/o Office of the General Counsel, 1030 Sync Street, Morrisville, NC 27560.

3.3.2 Accounting Reported Events Mechanisms

All Accounting Reported Events should be reported to the Audit Committee of the Board of Directors of the Company using one or more of the following mechanisms:

Letter to the Audit Committee. Send a letter to the Chair of the Audit Committee, c/o Syneos Health, Office of the General Counsel, 1030 Sync Street, Morrisville, NC 27560.

Business Ethics Helpline. Accounting Reported Events can be made by calling the Company's Business Ethics Helpline. Local country Helpline phone numbers can be found at syneoshealth.ethicspoint.com.

Business Ethics Web Form. Accounting Reported Events can be made online via the Company's Business Ethics Web Form located at syneoshealth.ethicspoint.com.

Email/Letter to the General Counsel. Email or send a letter to the General Counsel and clearly indicate the communication is an urgent matter for consideration only by the Audit Committee.

Email: legal@syneoshealth.com. Mailing address: Syneos Health, c/o Office of the General Counsel, 1030 Sync Street, Morrisville, NC 27560.

3.3.3 Business Ethics Helpline Legal Restrictions

Laws in some countries impose specific restrictions on reports, such as what may be reported, whether personal data on an individual may be maintained, or whether or not a report is allowed to be submitted anonymously. Such specifications are incorporated into the Company's Business Ethics Helpline reporting system. Reported Events or Accounting Reported Events that may not be reported through the Business Ethics Helpline due to such restrictions should be directed to the other reporting mechanisms outlined in Section 3.3 above, as appropriate.

3.4 **Review of Reports and Treatment of Reporter**

All Reported Events and Accounting Reported Events will be reviewed upon receipt, investigated and appropriate corrective action will be instituted as warranted. The Company will protect the confidentiality and anonymity of the reporting Associate or Associated Person to the extent allowed by law and consistent with the need to conduct an adequate investigation.

3.4.1 Review and Investigation of Reported Events

The Chief Compliance Officer shall ensure that all Reported Events received by the Compliance and Ethics Office are promptly reviewed, investigated and appropriately resolved in accordance with applicable Company policy and standard operating procedures. On a quarterly basis, the Chief

This document is confidential. If printed or downloaded, this document is uncontrolled.
For immediate use only; destroy after use.

Compliance Officer shall provide a report to the Audit Committee of Reported Events received, including the findings of any material investigations conducted.

The Chief Compliance Officer shall promptly refer to the General Counsel or the Chair of the Audit Committee, as applicable, any issues or concerns received by the Compliance and Ethics Office that are determined to be Accounting Reported Events. The Chief Compliance Officer shall also promptly refer to the General Counsel or the Chair of the Audit Committee, as applicable, any issues or concerns received by the Compliance and Ethics Office that are suspected violations of the Company's Code of Ethics for Principal Executive Officer and Senior Financial Officers.

3.4.2 Review and Investigation of Accounting Reported Events

The Chair of the Audit Committee shall review all Accounting Reported Events and may, in their discretion, return the Accounting Reported Event to the General Counsel for investigation or retain the Accounting Reported Event for investigation by the Audit Committee. Ordinarily, the practice of the Chair will be to return Accounting Reported Events to the General Counsel for investigation. In all cases when possible, the Chair of the Audit Committee will acknowledge receipt of the Accounting Reported Event to the Associate or Associated Person making such report and specify whether the Audit Committee or General Counsel is addressing the matter.

The General Counsel or the Chair of Audit Committee, as applicable, shall determine the method of investigation, including whether to conduct an internal investigation or secure the services of outside counsel or another third party to conduct the investigation. Such determinations shall include whether to direct that any individual assigned to investigate the Accounting Reporting Event work at the direction of, or in conjunction with, the Company's Office of the General Counsel, designated outside counsel or any other attorney in the course of the investigation.

Unless otherwise directed by the General Counsel or the Audit Committee, as applicable, the person assigned to investigate will conduct an investigation of the Accounting Reported Event and report their findings or recommendations to the General Counsel or the Audit Committee, as applicable. If determined to be necessary by the General Counsel or the Audit Committee, as applicable, the Company shall provide for appropriate funding to obtain and pay for additional resources that may be necessary to conduct the investigation, including without limitation, retaining outside counsel and/or expert witnesses.

On a quarterly basis, and whenever else as deemed necessary, the General Counsel shall provide a report to the Audit Committee and members of Company management that the Audit Committee directs to receive such report, of all Accounting Reported Events received, including the findings and resolution of any material investigations conducted.

At any time with regard to any Accounting Reported Event received by the General Counsel or the Audit Committee, as applicable, the General Counsel or Audit Committee may specify a different procedure for investigating and treatment of such Accounting Reported Event.

This document is confidential. If printed or downloaded, this document is uncontrolled.
For immediate use only; destroy after use.

3.5 Retention of Records

All Reported Events and Accounting Reported Events and documents relating to such events shall be retained in accordance with the Company's Records Management Policy and Records Retention Schedule. In addition, any information that may be relevant to any pending or potential litigation, inquiry or investigation, may not be destroyed and must be retained for the duration of that litigation, inquiry or investigation and thereafter as necessary.

3.6 Modification and Amendment

The Audit Committee reserves the right to modify or amend this Policy, as it may deem necessary.

4. Forms and Templates

None

5. References

Rule 10A-3(b)(3) under the U.S. Securities Exchange Act of 1934, as amended

U.S. Federal Sentencing Guidelines Manual, §8B2.1 (Effective Compliance and Ethics Program)

U.S. Department of Justice Criminal Division, Evaluation of Corporate Compliance Programs

EU Whistleblower Protection Directive

Records Management Policy (POL 726)

Records Retention Schedule (726A)

6. Appendices

None

This document is confidential. If printed or downloaded, this document is uncontrolled.
For immediate use only; destroy after use.

7. Revision History

Superseded Document	Revision Summary
LEG-POL-001.02A	Integration of legacy policies from INC Research and inVentiv Health
600.00	<p>Revisions to this policy were reviewed and approved by the Audit Committee of the Syneos Health, Inc. Board of Directors on November 16, 2020.</p> <ul style="list-style-type: none"> • Updated language (Section 3.1.3) to provide that employees are expected to promptly report issues and concerns to align with the Code of Business Conduct and Ethics. • Updated reporting mechanisms language (Section 3.3) to reflect current reporting mechanisms. • Added new sections (Sections 3.4.1 and 3.4.2) to specify the review, referral, and investigation processes and procedures for Reported Events and Accounting Reported Events, respectively. • Updated record retention language (Section 3.5) to reference Company records management policy and retention schedule. • Added references (Section 5) to SEC Rule 10A-3(b)(3), DOJ Compliance Program requirements and Company records management policy/retention schedule. • Updated language to increase readability and understanding, where appropriate. • Additional non-substantive clean-up edits
600.01	<p>Revisions to this policy were reviewed and approved by the Audit Committee of the Syneos Health, Inc. Board of Directors on May 24, 2022.</p> <ul style="list-style-type: none"> • Updated language (Section 3.1.1) to remove reference to “miscarriages of justice”. • Updated language (Section 3.1.2) for “Accounting Reported Events” definition to clarify that comparable violations of the Code of Ethics for Principal Executive Officer and Senior Financial Officers Code are included in the scope of this definition. • Added reference (Section 5) to new EU Whistleblower Protection Directive.
600.02	<p>Revisions to this policy were reviewed and approved by the Audit Committee of the Syneos Health, Inc. Board of Directors on March 22, 2023. The Board of Directors approved updates to the Speak-Up Policy to implement the EU Directive, which will be included as member states draft legislation and the Company drafts appropriate addenda.</p> <ul style="list-style-type: none"> • Changed Title from “Whistleblower Policy” to “Speak-Up Policy”.

This document is confidential. If printed or downloaded, this document is uncontrolled.
For immediate use only; destroy after use.

Approval Certificate

Pursuant to Section 11.100 of Title 21 of the Code of Federal Regulations, this is to certify that I intend that this electronic signature is to be the legally binding equivalent of my hand-written signature. The signers have reviewed this document and agree with its contents.

UserName: Bert Dickinson (ent\087338)
Title: Mgr, Corp Comp & Ethics
Date: Monday, 01 May 2023, 10:07 AM Eastern Daylight Time
Meaning: I have developed the contents of this document.
=====

UserName: Deborah Penza (ent\248014)
Title: SVP, Chief Compliance Officer
Date: Monday, 01 May 2023, 11:53 AM Eastern Daylight Time
Meaning: I have reviewed and approve this document.
=====

UserName: Karen Stringer (ent\224523)
Title: VP, Deputy CCO
Date: Monday, 01 May 2023, 12:51 PM Eastern Daylight Time
Meaning: I have reviewed and approve this document.
=====

UserName: Michelle Ho (ent\135207)
Title: Exec Dir, Quality Management
Date: Wednesday, 03 May 2023, 08:30 PM Eastern Daylight Time
Meaning: I have reviewed and approve this document.
=====

APPROVED