

KNOW THE VALUE

TOTAL REWARDS STATEMENT 2015

Welcome

My Total Rewards

Medical

Dental & Vision

Wellness

Life & Disability

401(k)

RAP

Voluntary Benefits

Time Off

Tuition Assistance

Contacts & Links

About Your Statement

your Company



MY 2015 TOTAL REWARDS PACKAGE

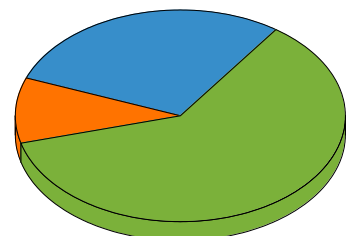
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	your cost	Company cost
KNOW YOUR PAY		
Annual Earnings + Incentives¹ (your base annual salary: \$67,340.66)		\$69,498.91
SEEK GOOD HEALTH & WELLBEING		
Medical	\$361.14	\$12,557.76
Company Contribution to your HSA	\$0.00	\$1,000.00
Non-Tobacco Premium Savings	\$0.00	\$390.00
Dental	\$219.96	\$876.72
Vision	\$134.42	\$96.24
Wellness Plan Incentives	\$0.00	\$310.00
ENSURE PEACE OF MIND		
Life Insurance	\$0.00	\$168.00
Short-Term Disability	\$0.00	provided for you
Long-Term Disability	\$0.00	\$194.64
Estimated Social Security & Medicare	\$5,037.97	\$5,037.97
State & Federal Unemployment	\$0.00	\$87.60
Estimated 401(k) Contribution	\$3,474.95	\$2,779.96
Estimated RAP Contribution	\$0.00	\$2,432.46
DEVELOP YOU		
Tuition Reimbursement	\$0.00	\$2,422.50
Total Benefits Cost	\$9,228.44	\$28,353.85

My 2015 Total Rewards Value: \$97,852.76

BALANCE WORK + LIFE		
Paid Time Off (22.0 days)		\$5,698.06
Holidays (9.0 days)		\$2,331.02
Floating Holiday (1.0 day)		\$259.00
Total Time Off Value		\$8,288.08
<small>(value included as part of base salary shown above)</small>		

- earned income - 62.6%
- company-paid benefits - 29.0%
- paid time off - 8.5%



¹Base Annual Earnings plus prior year's incentive bonus. Most benefit calculations are based on these earnings.

SEEK GOOD HEALTH AND WELL-BEING

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MY MEDICAL ELECTION

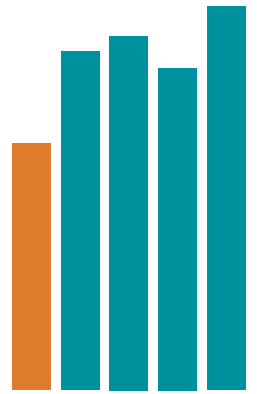
HDHP Network S
 Family Coverage
 Company Share of the Premium \$12,557.76
 Company Contribution to my HSA \$1,000.00
 Non-Tobacco Premium Savings: \$390.00
 Annual Premium Differential Savings: \$650.00
 (for completing health assessment and biometric screening)

Good for you...
 You save \$25 per pay period because you completed the online health assessment and biometric screening!

HDHP PLAN HIGHLIGHTS

In-Network Services:	
Physician Office Visits	80% after deductible
Emergency Care Services	80% after deductible
Pre-approved Hospital Inpatient Services	80% after deductible
Outpatient Services	80% after deductible
Well Child Care	100% no co-payment
Routine Well Care (one exam per year)	100% no co-payment
Annual Deductibles:	
Individual / Family	\$1,500 / \$3,000
Annual Out-of-Pocket Maximum:	
Individual / Family	\$2,500 / \$5,000
Prescriptions: - (preventive drug list only)	
Generic	\$10 co-pay
Preferred Brand Name Drugs	\$35 co-pay
Brand Name Drugs	\$50 co-pay
Home Delivery (3-month supply)	\$8 / \$70 / \$100
Prescriptions - (other than preventive drug list)	80% after deductible

DID YOU KNOW?



A RECENT EMPLOYEE BENEFITS BENCHMARKING SURVEY REVEALED THAT EMPLOYEE CONTRIBUTIONS FOR OUR MEDICAL PLANS ARE CONSIDERABLY LOWER THAN THOSE OF COMPANIES OF LIKE SIZE AND INDUSTRY!

SEEK GOOD HEALTH AND WELL-BEING



MY DENTAL ELECTION

Family Coverage
Company Share of the Premium \$876.72

THE SURVEY ALSO REVEALED THAT WHILE MOST PLANS COVER MAJOR SERVICES, SUCH AS FILLINGS AND CROWNS, AT 50% AFTER A DEDUCTIBLE, WE COVER MAJOR SERVICES AT 80% WITH NO DEDUCTIBLE! AND, LIKE OUR MEDICAL PLANS, EMPLOYEE CONTRIBUTIONS ARE LOWER THAN THOSE OF COMPARABLE COMPANIES!

DENTAL PLAN HIGHLIGHTS

In-Network Services:

Preventive (cleaning, exams, x-rays)	100% of allowable charges
Prosthetic & Restorative (fillings, crowns)	80% of allowable charges
Orthodontics	50% of allowable charges

Annual Deductibles & Maximum Benefits:

Annual Deductible	\$0 individual / \$0 family
Annual Maximum	\$1,500 per person per year
Orthodontia	\$2,000 lifetime per dependent child

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MY VISION ELECTION

Employee / Child
Company Share of the Premium \$96.24

VISION PLAN HIGHLIGHTS

Routine Care: \$30 co-pay
Lenses & Contacts: \$10 co-pay; 1 set of contacts, 100% up to \$200 per calendar year; lenses for eyeglasses, 100% up to \$300 per calendar year
Frames: No co-pay, Up to \$120 once every two years

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WELLNESS

To encourage healthy habits for employees, The Company offers a points-based wellness incentive program. This program is offered to all employees and provides incentives of up to \$200 per quarter (\$800 annually) for participation in activities designed to promote a healthier lifestyle. Each point you earn translates to \$1.00 and in 2015, you can earn points through even more eligible activities such as walking with a Pebble, working with a health coach or participating in an event such as a 5k.

REMEMBER..
 DURING OPEN ENROLLMENT, YOU CAN ELECT TO HAVE YOUR WELLNESS DOLLARS DEPOSITED DIRECTLY INTO YOUR HEALTH SAVINGS ACCOUNT!

year-to-date wellness dollars \$310.00

“ HAVING ALL OF THE RESOURCES AT MY FINGERTIPS LIKE OUR REGISTERED DIETITIAN, STATE-OF-THE-ART FITNESS CENTER AND THE SUPPORT OF THEIR STAFF, I AM WELL ON MY WAY TO ACHIEVING MY GOALS OF LIVING A HEALTHIER LIFESTYLE. I AM DOWN 120 POUNDS AND KNOW I WILL REACH MY GOAL THANKS TO BEING A MEMBER OF THE COMPANY TEAM. ”

JOHN B.



ENSURE PEACE OF MIND

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LIFE INSURANCE

The Company provides you with two-times your eligible annual earnings in group term life insurance. *Benefits are rounded up to the nearest \$10,000.00.* If your death is accidental, the Accidental Death benefit will be paid in addition to your Insurance Benefit.

your life insurance benefit is:	\$140,000.00
your accidental death benefit is:	\$140,000.00

30%

THE BENCHMARKING SURVEY REVEALED THAT OUR LIFE INSURANCE PLAN AT 2 TIMES EARNINGS PROVIDES 30% MORE BENEFITS THAN THOSE OF COMPARABLE COMPANIES WITH AN AVERAGE 1.4 TIMES EARNINGS!

IN ADDITION, OUR LIFE AND LONG-TERM DISABILITY PLANS INCLUDE BONUSES IN THE BENEFIT CALCULATION VERSUS BASE EARNINGS ONLY WITH MOST COMPARABLE COMPANIES!

DISABILITY INCOME

SHORT-TERM DISABILITY

You become eligible for this benefit after one year of service. After two weeks of disability, you may be eligible to receive up to 100% of weekly earnings for each full year of service (maximum of 5 weeks) followed by 60% of weekly earnings for the remainder of a 24 week period. This benefit is provided at no cost to you.

LONG-TERM DISABILITY

After 180 days of disability, you may be eligible to receive a monthly benefit of 60% of your eligible earnings, less other income benefits. This benefit is provided at no cost to you. Based on current earnings, this plan could provide you with a benefit of:

estimated monthly benefit:	\$3,475.00
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401(k) RETIREMENT

The Company encourages employees to save for retirement by offering a 401(k) plan. In 2015 you may contribute up to 50% of your earnings to a maximum of \$18,000.00 (plus a catch-up contribution if age 50 or older) and invest those contributions in different funds available in the plan. The Company plan allows you to make traditional pre-tax contributions which along with investment earnings grow tax-deferred until withdrawn at retirement. You may also choose to make after-tax Roth contributions where qualified withdrawals, including investment earnings, are tax-free at retirement.

PLAN ADVANTAGES

-  IMMEDIATE VESTING
-  TRADITIONAL & ROTH OPTIONS
-  HIGHER THAN AVERAGE MATCH

We will match \$1.00 for \$1.00 up to the first 3% of your contribution and \$.50 for every dollar on the next 2% of your contribution. You are always 100% vested in your pre-tax or Roth contributions, as well as the Company matching contributions. Please see your plan summary for further details.

YOU ARE CURRENTLY CONTRIBUTING TO THIS PLAN

My 401(k) Account Balance as of 9/1/2015	\$57,573.03
My Contribution Level	5.0%
My Estimated Total Annual Contribution	\$3,474.95*
Company's Estimated Annual Match	\$2,779.96*

*estimated annual figures based on your contribution level, your annual income shown on this statement, the company match and IRS guidelines

HOW MUCH COULD I HAVE AT RETIREMENT?

Although future value cannot be accurately predicted, your 401(k) account is expected to grow over time. Below are hypothetical projections based on the figures above. These projections assume that your contribution and the contributions made by the Company will continue and remain constant. Your investment performance will vary.

annual rate of growth	estimated value in 10 years	estimated value at Age 65
4.0%	\$163,323.05	\$497,688.46
6.0%	\$190,495.78	\$748,650.10
8.0%	\$222,156.84	\$1,140,730.48

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RETIREMENT ACCUMULATION PROGRAM (RAP)

To further help you plan for retirement, the Company sponsors the Retirement Accumulation Program or RAP. Upon eligibility, the Company will make bi-weekly contributions of 3.5% of your eligible earnings to the RAP plan. These contributions may be invested in different investment options available in the plan. You are fully vested after three years of credited service. Please see your plan summary for details. *Estimated figure assumes eligibility and is based on your income shown in this statement and IRS guidelines.

MY RAP ACCOUNT

Company's Estimated RAP Contribution	\$2,432.46*
RAP Account Balance as of 9/1/2015	\$22,584.53

MOST EMPLOYER CONTRIBUTIONS TO A NON-CONTRIBUTORY PLAN LIKE OUR RAP, ARE CALCULATED ON BASE EARNINGS ONLY. OUR CONTRIBUTIONS ARE CALCULATED ON YOUR BASE AND BONUS FOR EVEN GREATER SAVINGS!

VOLUNTARY BENEFITS

Additional employee paid supplemental insurance plans are available through payroll deduction. The plans listed here may be available during designated enrollment periods and our records indicate your participation as noted.

Voluntary Term Life Insurance	\$210,000	Enrolled
Spouse Term Life Insurance	\$20,000	Enrolled
Dependent Term Life Insurance ¹	\$15,000	Enrolled
Voluntary AD&D	\$210,000	Enrolled
Cancer Insurance*		Not Enrolled
Accident Insurance*		Not Enrolled
Critical Care*		Not Enrolled
Medical FSA*		Not Enrolled
Dependent Care FSA*		Not Enrolled
Health Savings Account (HSA)*	\$3,000.00 annually	Enrolled
Supplemental Disability		Not Enrolled
Long Term Care		Not Enrolled

*indicates premiums/contributions can be paid pre-tax through 125 Plan

¹ If you are enrolled in dependent term life insurance, maximum benefit is \$15,000 for spouse coverage and \$5,000 per covered child.

SECTION 125 CAFETERIA PLAN

The Company offers a 125 plan, which allows your share of the premium for medical, dental and certain voluntary benefits as well as contributions to FSAs and HSAs to be paid with pre-tax dollars. This lowers your taxable income and therefore your federal taxes. Based on your participation in eligible plans, your estimated tax savings is shown here (assumes all eligible premiums paid by you are paid through this plan).

your estimated annual tax savings: \$1,189.49

STATUTORY BENEFITS

Social Security & Medicare: Both employers and employees in the U.S. are required to pay taxes to help fund Social Security and Medicare (FICA taxes).

Unemployment: The Company provides Unemployment Insurance as required by current laws. Unemployment insurance provides eligible employees unemployment pay in the event they are laid off from work for reasons other than misconduct.

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PAID TIME OFF

Paid Time Off (PTO) is earned based on your length of service. In addition, the Company celebrates 9 holidays and one floating holiday annually. Please see information on the web portal for further details. *The number of days below are the estimated number of days you earn in a 12-month period based on length of service and do not include any hours accumulated in your bank. The value of time off benefits is included as part of your base annual income.

OUR TIME OFF SCHEDULE PROVIDES NEW EMPLOYEES WITH 17 PTO DAYS (INCLUDING 2 BEREAVEMENT DAYS) AS COMPARED TO 15 DAYS FOR MOST COMPANIES IN THE BENCHMARKING SURVEY.

	<u>annual # of days*</u>	<u>dollar value</u>
paid time off	22.0	\$5,698.06
holidays	9.0	\$2,331.02
floating holiday	1.0	\$259.00
 total value of time off benefits:		 \$8,288.08

EMPLOYEE ASSISTANCE PROGRAM

In an effort to help employees balance the demands of work, life and personal issues, the Company provides an Employee Assistance Program (EAP). This program provides confidential professional counseling services to you, your dependents and your household family members. The EAP provides six free counseling sessions per family, per calendar year with no office visit charges, co-pays or deductibles. Services include but are not limited to:

- Marriage counseling
- Substance abuse
- Bereavement counseling
- Family counseling
- Parental counseling
- Personal counseling
- Anger management
- Consumer credit counseling
- Stress relief



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TUITION ASSISTANCE

The Company believes in and promotes professional growth and continuing education for all its employees. The Tuition Assistance Program was established to encourage employees to further their education and enhance their job skills by assisting with tuition costs at accredited institutions.

After six months of continuous service, full-time employees are eligible to apply for tuition reimbursement; part-time employees are eligible after 12 months of continuous service. Courses of study must be preapproved by your supervisor and related to your present position and/or overall career plans with the Company. The reimbursement allowance is dependent on successful course completion, set rates and is based on credit hours and individual grades.

year-to-date tuition assistance

\$2,422.50

“ WITHOUT OUR TUITION ASSISTANCE PROGRAM, I DON'T KNOW THAT I WOULD HAVE BEEN ABLE TO GO BACK TO SCHOOL AND BE THE EXAMPLE MY SON NEEDED TO INSPIRE HIM TO GO TO COLLEGE. I AM LUCKY BECAUSE I HAD 100 PERCENT SUPPORT FROM MY FAMILY AND MY MANAGER, WHO ALSO WENT THROUGH THE SAME PROGRAM. ”

JOEY L.

CONTACTS & LINKS

Unum (STD, LTD)	1-866-892-2278
USABLE (Voluntary Insurance Products)	1-800-370-5856
Long-Term Care	1-888-400-1118
Eye Med	1-877-342-0737

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ABOUT YOUR STATEMENT

Most of the data on your statement is reported as of 9/1/2015 and may not reflect changes made between the compilation date and the date of statement delivery. Your employee benefits contribute greatly to your annual compensation and to your personal well being. The purpose of this report is to help you better understand the value of your benefits program. Every effort has been made to accurately communicate our benefits in this report. Please note that errors do occasionally occur. If you should discover any discrepancies in your report, or if you need help in understanding its contents, please contact. This report is only a summary. The actual determination of your benefits is based solely on the plan documents provided by the carrier of each plan. In case of a discrepancy between this statement and the plan documents, the plan documents will prevail.