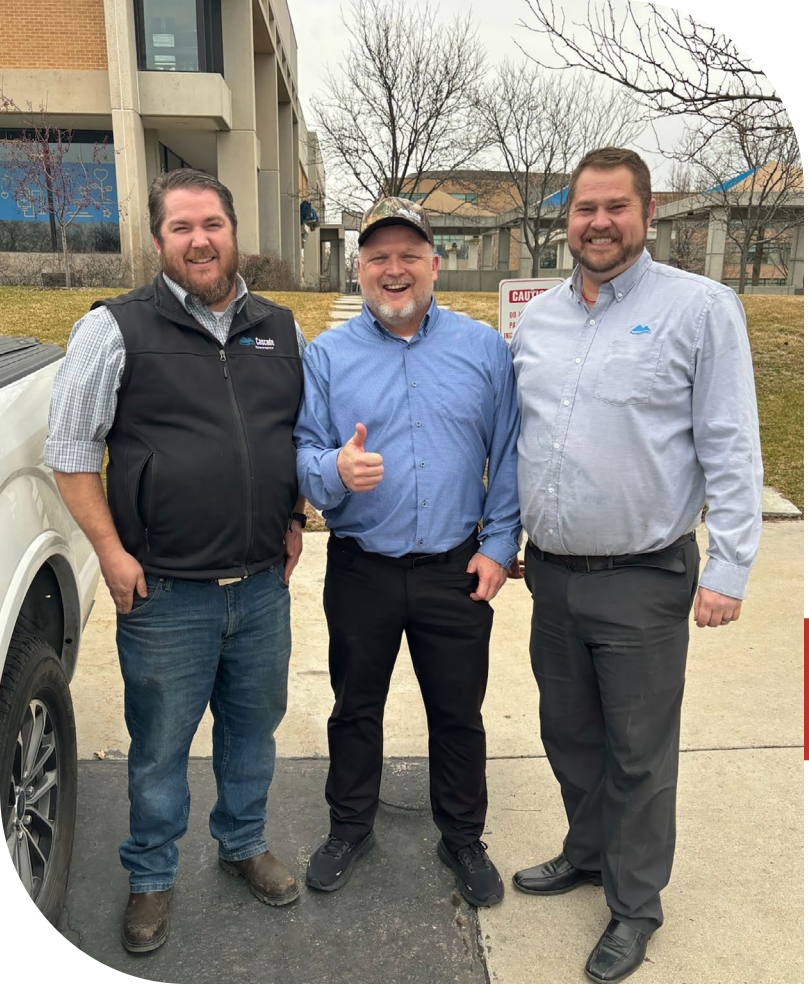
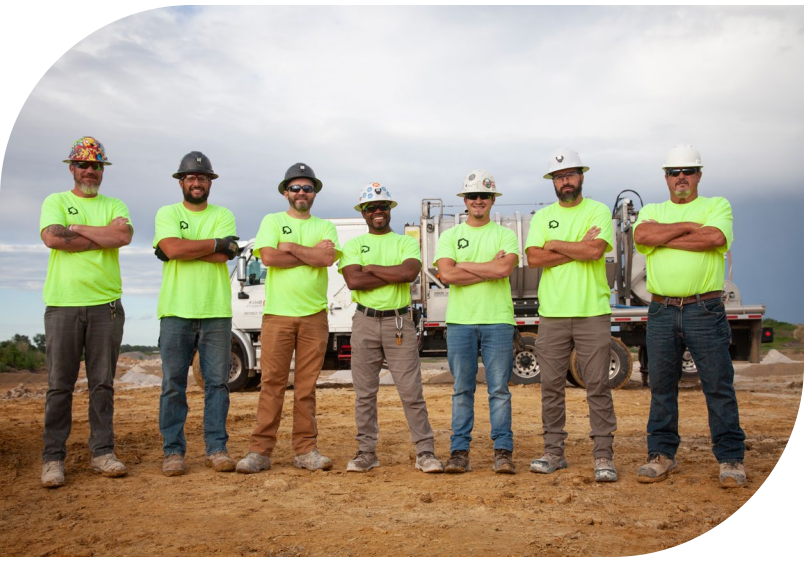
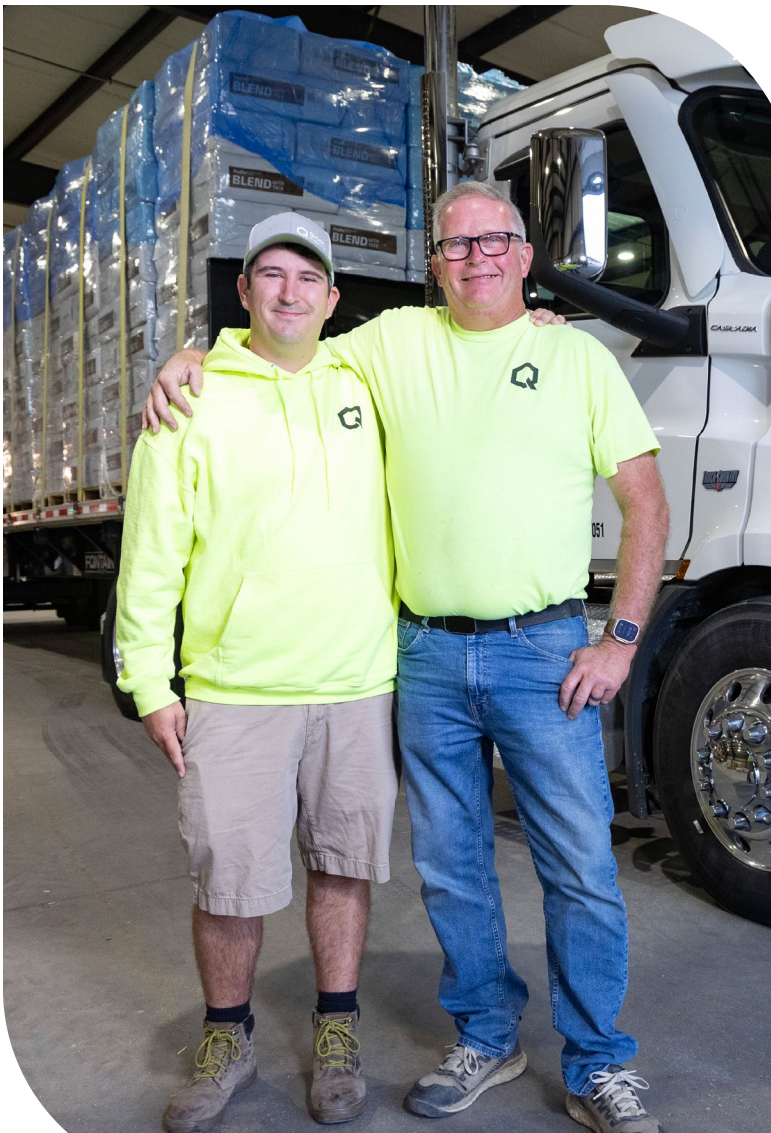


Benefits Guide

2026-2027





HALE HOLDINGS

HALE HOLDINGS

WE ARE COMMITTED to providing competitive benefit programs that are flexible enough to meet your individual needs. Our comprehensive benefits are carefully designed to give you the tools you need to keep you and your family healthy, provide financial protection in the event of unforeseen circumstances and help you build long-term security for retirement. Getting the most from your benefits is up to you. You know your family, your goals and your lifestyle best.

This benefits guide was designed to answer some of the basic questions you may have about your benefits. Please take the time to review this guide to make sure you understand the benefits that are available to you and your family and be sure to act before the enrollment deadline.

Uniting Our Family of Companies Under One Brand Name

When referencing the collective group of our family of companies – Quick Supply Co., Bennett Explosives, ASP Enterprises, Bowman Construction Supply, Cascade Geosynthetics, BulkOne and Hale Development – we will use the name Hale Holdings. Using the Hale Holdings name simplifies how we represent our organization internally and ensures all companies are equally reflected when speaking about the group as a whole. This replaces the use of multiple company logos or referring to Quick Supply Co. as the parent company.

The Hale Holdings name comes from our three generations of owners, Ralph Hale, John Hale & Mike Hale. Hale Holdings represents the legacy of the Hale family business and serves as the foundation that unites us through shared leadership, values, and support.

Quick Supply Co. Bennett Explosives Inc. ASP Enterprises Bowman Construction Supply Inc. Cascade Geosynthetics BulkOne HALE DEVELOPMENT

Welcome to Your Benefits Guide

Use this Benefits Guide to see what's new and to learn about your benefit plan options.

What's Inside

Disclaimer: This guide provides a summary of plan highlights. This is not a binding contract. In the event of any difference between the information contained herein and the plan documents, the plan documents will supersede and control over this guide. Please consult the Summary Plan Description for information on covered charges, limitations, and exclusions.

Getting Started
Annual Enrollment

WHEN IS ANNUAL ENROLLMENT?

The Annual Enrollment period is August 3-14. Elections made during enrollment will be effective September 1, 2026 - August 31, 2027.

ACTIVE ENROLLMENT

This Open Enrollment is an active enrollment for all benefits. All Employees will need to visit the iSolved Enrollment Portal and elect or waive benefit coverages.

ACCESSING YOUR EMPLOYEE PORTAL

Benefit Enrollment can be completed on a computer at work or home, or iSolved mobile App. It's important that you have your login credentials handy to access your employee portal. To get started, refer to ISolved's Employee Benefit Enrollment Guide at the back of the Benefits Guide.

The benefits will be in effect on September 1, 2026, and you will not be able to enroll or make changes until the next Open Enrollment, unless you experience a Qualifying Life Event (QLE).

QUALIFYING LIFE EVENTS

Your benefit elections made during Open Enrollment will be effective September 1, 2026. You may not make changes to your elections unless you experience a qualifying life event, including change in legal marital status (marriage, divorce, death of spouse), change in dependents (birth, adoption), change in employment status (termination, part-time), or if you gain/lose coverage elsewhere.

Important

If you need to make a change before the next Open Enrollment period due to a change in status, you must submit the required documentation WITHIN 30 DAYS of the qualifying life change event.

Contact Human Resources by emailing HR@quicksupplyco.com to process a Qualifying Life Event.

Eligibility

BENEFIT ELIGIBILITY

You and your eligible family members may participate in the 2026-27 employee benefits program if you're a full-time employee working 30 or more hours.

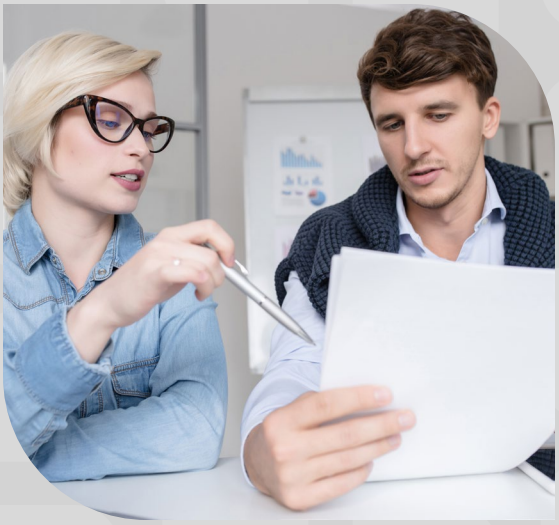
NEW HIRE ELIGIBILITY

New hires can join the plan the first of the month following 60 days of employment. Spouses and dependent children of the employee are also eligible to participate in our benefit plans.

WHO IS ELIGIBLE FOR ENROLLMENT?

You can enroll the following dependents in our group benefit plans:

- Your legal spouse or domestic partner
- Children
  - A child under the age of 26 who is your natural child, stepchild, legally adopted child, or child for whom you have obtained legal guardianship
  - Unmarried children of any age if totally disabled and claimed as a dependent on your federal income tax return (documentation of handicapped status must be provided)
  - Unmarried, over the age of 26 and a full-time student

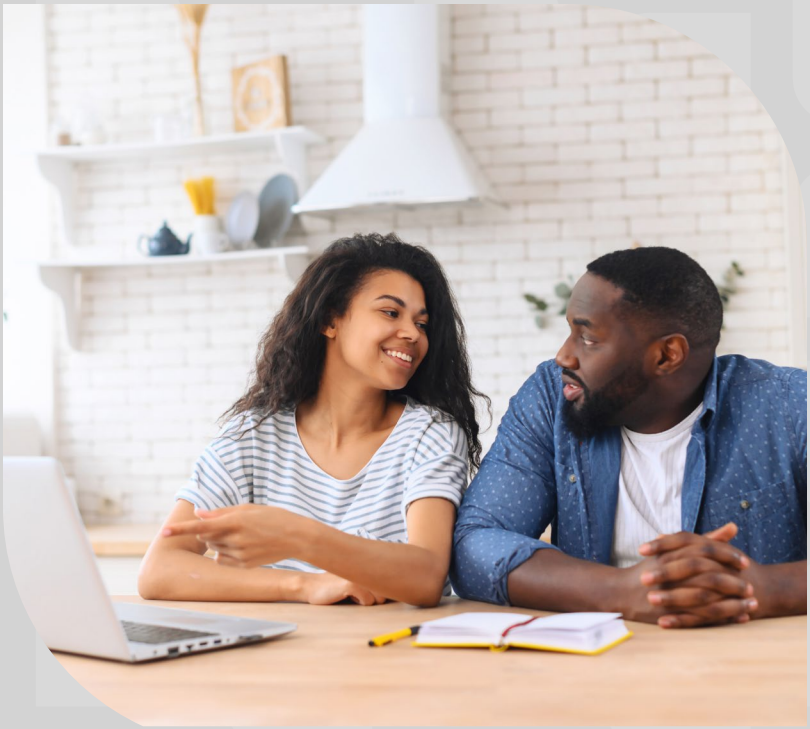


Choose Your Medical Plan

GROUP NUMBER: 53544-0201

Your medical plans will be offered through Wellmark BCBS. Please review your Summary of Benefits and Coverage (SBC) for additional coverage information and full plan details.

Elections you make during Open Enrollment will be effective September 1, 2026, and remain in effect until August 31, 2027, unless you experience a qualifying life event.



You may visit any medical provider you choose, but in-network providers offer the highest level of benefits and lower out-of-pocket costs. In-network providers charge members reduced, contracted rates instead of their typical fees. Providers outside the plan's network set their own rates, so you may be responsible for the difference if a provider's fees are above the Reasonable and Customary (R&C) limits.

Medical Benefits

WELLMARK BLUE CROSS BLUE SHIELD

REGISTER ONLINE AT MYWELLMARK.COM

Your connection to great healthcare is only a click away. Register for an online account at myWellmark.com so you can access timesaving tools, tips for healthy living, view claims information, choose a doctor, manage your EOBs, and more!

DOWNLOAD THE MYWELLMARK MOBILE APP

With the myWellmark mobile app, you've got the tools you need to manage your healthcare all from your smartphone. The mobile app is available in the Apple and Google Play store.

APP STORE

GOOGLE PLAY STORE

Preventive Care

YOUR KEY TO WELLNESS

Identifying potential problems before they become major issues is key to your physical health.

Both medical plans include free in-network preventive care that includes annual physicals, mammograms, well child visits, immunizations, and more. So, stay on top of your wellness and schedule your in-network preventive visit today.

MEDICAL PLANS AT A GLANCE

	ALLIANCE SELECT $2,500 PPO PLAN	ALLIANCE SELECT $5,000 PPO PLAN
BENEFITS IN-NETWORK		
ANNUAL DEDUCTIBLE (CALENDAR YEAR)* - EMBEDDED		
Individual	$2,500	$5,000
Family	$7,500	$10,000
OUT-OF-POCKET MAXIMUM (CALENDAR YEAR)*		
Individual	$4,000	$6,350
Family	$12,000	$12,700
BENEFIT HIGHLIGHTS		
Coinsurance	30%	30%
Virtual Visits[1]	$30 copay	$40 copay
Preventive Care	100% covered	100% covered
Primary Care Physician (PCP)	$30 copay	$40 copay
Specialist	$60 copay	$70 copay
Urgent Care	$30 copay	$40 copay
Emergency Room	$250 copay	$250 copay
Outpatient Hospital	Deductible, 30% Coinsurance	Deductible, 30% Coinsurance
Mental Health & Substance Abuse Services	Inpatient/Outpatient: Deductible, 30% Office Visit: $30 Copayment	Inpatient/Outpatient: Deductible, 30% Office Visit: $40 Copayment
BENEFITS OUT-OF-NETWORK (OON)		
Deductible	$2,500 Single / $7,500 Family	$5,000 Single / $10,000 Family
Coinsurance	40%	40%
Out-of-Pocket Maximum	$4,000 Single / $12,000 Family	$6,350 Single / $12,700 Family

1. In-network virtual/telehealth services reflect member cost share for Doctor On Demand providers. In-network virtual/telehealth services for non- Doctor On Demand providers apply standard Office Visit member cost share.

NOTE: Deductible, Coinsurance, and Copayments (medical and prescription drug) apply towards the Out-of-Pocket Maximum.

* Reminder: The deductibles and out of pocket maximums accumulate on a calendar year basis and reset on January 1st.

Terms to Know

Benefits can be confusing! Here's a quick reference to help you navigate commonly used terms:

- **Copay:** A flat dollar amount you pay the provider when you receive a service.
- **Deductible:** The amount you pay for services before the plan begins paying some of the cost. The deductible may not apply to all services, including preventive care.
- **Coinsurance:** The portion of covered expenses you and the plan share after you meet the deductible (listed as a percentage).
- **Out-Of-Pocket Maximum (OOP Max):** The maximum amount you pay out of your pocket for covered expenses in a year. Once you reach the out-of-pocket maximum, the medical plan pays for all covered services for the rest of the year.
- **Embedded Deductible or OOP Max:** A single family member does not need to meet the family deductible or OOP max before the benefit begins to pay for healthcare services.

Pharmacy – Wellmark BCBS

PRESCRIPTION DRUG COVERAGE Blue Rx Complete Formulary (In and Out of Network Benefits)			
		Alliance Select $2,500 PPO Plan	Alliance Select $5,000 PPO Plan
Rx Deductible (waived for Tier 1)		$200 Single / $400 Family	$200 Single / $400 Family
Retail 30-day Supply	Tier 1	$10	$10
	Tier 2	$40	$40
	Tier 3	$60	$60
	Tier 4	$100	$100

PrudentRX Copay Assistance Program

PrudentRx is a copay assistance program for specific specialty drugs. Enrollment in the program will begin automatically if a specialty medication you are taking is on the list. You must speak with a PrudentRx advocate to finalize. If you enroll in the program, eligible medications will come at no cost to you. If you decline enrollment in PrudentRx, you will pay 30% coinsurance on the eligible medication and this amount will not accumulate towards your out-of-pocket maximum.

How it works? CVS Caremark has collaborated with PrudentRx exclusively for a program that may help save you money when you fill eligible specialty medications. A PrudentRx trained member advocate will be able to assist you through a high-touch, proactive engagement process to facilitate enrollment.

How to get started: Your enrollment in the program will begin automatically, but additional steps may be needed. You can choose to opt-out at any time. If you would like to review the PrudentRx Formulary List, please visit: https://www.wellmark.com/member/prescription-drugs.

Send Medications Right to Your Home

Home delivery is a convenient, cost-effective and safe option for medications you take regularly.

1. Call 866-611-5961 for CVS Caremark to walk through registration with FastStart.

2. You can also visit Caremark.com and select ‘Register Now’ and create a user ID. Set up your mail order and contact preferences. Easily access your pharmacy information through Caremark.com and myWellmark.com.

Set Up Mail Order (up to 90 days)

1. Select ‘Start Mail Service’ under Prescriptions tab in your Caremark.com account. CVS will accept prescription orders in a few ways:

a) Select ‘Request New Prescription’ and complete the required information. CVS will then reach out to your doctor

b) Print the mail order form from Caremark.com account and send that in along with a hard copy prescription.

c) Your doctor can send in prescriptions to CVS Caremark.

Understanding Your Plan

1 YOUR FAMILY visits your provider (doctor/hospital) and shows their medical insurance card

2 YOUR DOCTOR OR PROVIDER will bill your medical carrier

3 YOUR MEDICAL CARRIER will process your claim, notify your provider, and send an Explanation of Benefits to you and your provider

4 YOUR RESPONSIBILITY is to pay the amount due to your provider as shown on your EOB

Doctor on Demand

With telehealth, you can schedule a virtual appointment with board-certified doctors and pediatricians who can diagnose, treat and prescribe most medications for minor medical conditions, such as:

- Acne
- Allergies
- Asthma
- Bronchitis
- Cold and flu
- Earaches
- Fever
- Headaches
- Infections
- Insect bites
- Joint aches
- Nausea
- Pink eye
- Rashes
- Respiratory infections
- Shingles
- Sinus infections
- Sore throats
- Urinary tract infections

24/7 Questions:

Call 800-997-6196

We've all been there—it's the middle of the night and you have a sick child or maybe you are trying to get an appointment with your primary care provider, but the first appointment isn't for two weeks. Good news... there's an easier way! Doctor on Demand is a convenient option for scheduling virtual doctor visits from your own home. With Doctor on Demand, you don't have to drive to the doctor's office or sit in a waiting room when you're sick—you can see your doctor from the comfort of your own bed or sofa.

- See a board-certified, licensed, telehealth trained doctor on your schedule with on-demand virtual visits 24/7, including holidays.
- Get treated for more than 80 common conditions including colds, flu, allergies, and more.
- Get a prescription or short-term refill of any existing prescription sent to a pharmacy nearby, in less time than your usual doctor visit.
- Avoid costly copays and deductibles of the ER and urgent care clinic.

To get started, scan the QR code above and visit DoctorOnDemand.com/Wellmark and download the Doctor On Demand app. Have your Wellmark Blue Cross and Blue Shield member ID card ready. You will need to create an account or sign in to begin your visit. Once signed in, you can pick your provider and select the next available appointment or find the time best for your schedule.

Dental – Delta Dental

GROUP NUMBER: 43140

In addition to protecting your smile, dental insurance helps pay for dental care and includes regular checkups, cleanings and x-rays. Receiving regular dental care can protect you and your family from the high cost of dental disease and surgery.

Dental coverage is offered for basic and major services. The dental plan also includes 100% coverage for preventive care. You and your eligible dependents may enroll in dental coverage administered by **Delta Dental.** The network used on this plan is the **PPO Plus Premier Network**.

To find an in-network provider, please visit: https://www.deltadental.com/us/en/member/find-a-dentist.html.

IN-NETWORK PLAN FEATURES	PPO NETWORK	PREMIER / NON-PAR NETWORK
Annual Deductible Calendar Year - Individual / Family	$25 / $75	$50 / $150
Annual Benefit Maximum Calendar Year	$1,500 per person	$1,500 per person
Orthodontia Maximum	$1,500 per person	$1,500 per person
	YOU PAY	
Preventive & Diagnostic Care • Dental cleanings • Preventive evaluations • Fluoride applications • X-rays • Sealants applications • Space maintainers	$0	$0
Routine & Restorative Services • Emergency treatment • General anesthesia/sedation • Routine oral surgery • Fillings • Posterior composites w/o alternate processing	**10% after deductible**	**20% after deductible**
Major services • Prosthetics (bridges and dentures) • Endodontics (root canals) • Periodontics (gum and bone diseases) • High-cost restorations (crowns, inlays, fillings, posts and cores) • Implants	**50% after deductible**	**50% after deductible**
Orthodontia (covered dependent children up to age 19)	Deductible waived, 50% coinsurance	Deductible waived, 50% coinsurance

Reminder: The deductibles and annual benefit maximum accumulate on a calendar year basis and reset on January 1st.

Vision – Delta Vision

GROUP NUMBER: 43140

Driving to work, reading a news article and watching TV are all activities you likely perform every day. Your ability to do all of these activities, though, depends on your vision and eye health. Vision insurance can help you maintain your vision as well as detect various health problems.Your vision insurance is provided by **Delta Vision** and entitles you to specific eyecare benefits. Our policy covers routine eye exams and other procedures, and provides specified dollar amounts or discounts for the purchase of eyeglasses and contact lenses.Our policy utilized the **Insight Network**.

To find an in-network provider, please visit: https://eyedoclocator.eyemedvisioncare.com/deltavisia/en

PLAN FEATURE	IN-NETWORK	OUT-OF-NETWORK REIMBURSEMENT SCHEDULE
Office Visit		
Eye Exam	$10 copay	Up to $35
Eyeglass, Lenses, Materials, & Frames		
Single Vision Lenses	Covered in full after $25 copay	Up to $25
Standard Lined Bifocal Lenses	Covered in full after $25 copay	Up to $40
Standard Trifocal Lenses	Covered in full after $25 copay	Up to $55
Lenticular	Covered in full after $25 copay	Up to $55
Lens Options - Standard progressives - Scratch-resistant coating - Ultra-violet screening - Solid or gradient tint - Anti-reflective coating - Photochromatic/transitions	 $90 copay $15 copay $15 copay $15 copay $45 copay $75 copay	Up to $40 benefit for standard progressives
Frames	$130 allowance, up to 20% discount above frame allowance	Up to $65
Contact Lenses (in lieu of frame and spectacle lenses) - Elective - Medically necessary (prior authorization required)	$130 allowance, 15% discount above contact lens allowance Covered in full	Up to $104 Up to $200
Refractive Laser Surgery	15% off retail price or 5% off promotional price	N/A
Frequency of Services		
Eye Exam	Once every calendar year	
Lenses or Contact Lenses	Once every calendar year	
Frames	Once every 2 calendar years	

Delta Dental/Vision Registration

GROUP NUMBER: 43140

Make the most of your dental and/or vision benefits with Delta Dental of Iowa's online Member Connection. Sign up today at www.deltadentalia.com to:

- Print an ID card
- View claim details and status
- Find a provider
- Find eligibility and benefit information
- Access an explanation of benefits (dental only)

SCAN THE QR CODE TO VISIT DELTA DENTAL OF IOWA

Get started today!

To register for Member Connection:

1. Go to select Dental Member from the drop down menu, and then click on"New user? Sign up." link in the "My Account" box on the right side of the homepage.
2. Complete the online registration.
3. Create a username & password, enter your email, create a challenge question and then click on "Register User.
4. Once your account has been created, be sure to go back to www.deltadentalia.com to log-in and view your complete account information.

Helpful tips when registering:

- Enter first and last name for the primary subscriber (exactly as your employer entered it during enrollment; e.g., "Bob" may be "Robert")
- Enter assigned subscriber ID or Social Security number (enter the nine digit number with no dashes or leading zeros)

Flexible Spending Accounts (FSAs)

iSOLVED BENEFIT SERVICES

Tax-advantaged FSAs are a great way to save money. The money you contribute to these accounts comes out of your paycheck without being taxed, and you withdraw it tax-free when you pay for eligible health care and dependent care expenses.

FSAs AT A GLANCE

	HEALTHCARE FSA	DEPENDENT CARE FSA
Eligibility	Any benefits-eligible employee	Any benefits-eligible employee
Contribution Limits*	$3,400**	$7,500** ($3,750 if married and filing taxes separately)
Eligible Use	Qualified medical, prescription, dental, and vision expenses, copays, and deductibles	Eligible day care expenses from licensed daycare providers for children aged under 14 or disabled dependents of any age
Fund Availability	Full annual contribution available right away	Dollars are available as they are contributed
What happens at the end of the year?	Both FSAs are "Use It or Lose It" meaning if you do not spend your funds by the expense deadline, your funds will be forfeited. The Health Care FSA allows a $680 carryover into the new plan year.	FSA funds expire at the end of each year. Use it or lose it. Unlike the healthcare FSA, your full election for the plan year is not available on the day your plan starts. For the dependent care FSA, you can only be reimbursed for qualified expenses up to the amount you have contributed to your FSA up to that point in time. As your contributions accrue, claims for reimbursement can be processed.

*Once elected, FSA contributions cannot be changed during the plan year, unless you experience a qualifying life event

**$680 carryover limit

What's an Eligible Expense?

Health Care FSA – Plan deductibles, copays, coinsurance, and other health care expenses. To learn more, see IRS Publication 502 at www.irs.gov.

Dependent Care FSA – Child day care, babysitters, home care for dependent elders, and related expenses. To learn more, see IRS Publication 503 at www.irs.gov.

SCAN THE QR CODE TO VISIT ISOLVED BENEFIT SERVICES

Company Provided Insurance

LINCOLN FINANCIAL GROUP | GROUP NUMBER: 43140 | POLICY NUMBER: SA2-890-LF1915-01

Basic Life and Accidental Death & Dismemberment (AD&D)

The Basic Life and AD&D plan administered through Lincoln Financial Group provides a benefit in the event of your death, dismemberment or paralysis. This benefit is sponsored by the company, so you will automatically be enrolled at no cost to you. Your basic life benefit amount will be $15,000. The Accidental Death Benefit is the same amount as Basic Life.

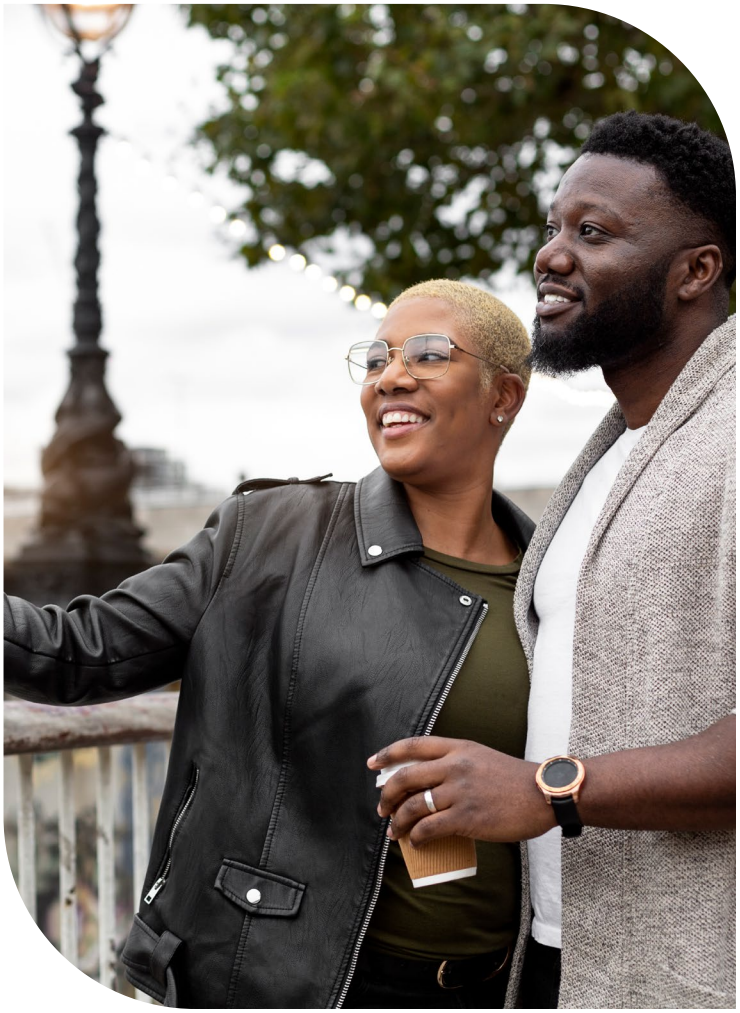
NOTE

Upon loss of eligibility or termination of employment, you may elect to continue your employer-sponsored Basic Life Insurance coverage by converting it, which means change it to a new type of individual policy. Remember, you become responsible for the premiums.

AGE REDUCTION SCHEDULE

BASIC LIFE & AD&D:

Coverage reduces to 65% at age 65 and reduces an additional 15% at age 70.



Company Provided Disability Insurance

LINCOLN FINANCIAL GROUP | GROUP NUMBER: 1078180 | POLICY NUMBER: GD/GF2-890-LF1915-01

We want to do everything we can to protect you and your family. That's why the company pays for the full cost of short- and long-term disability insurance—meaning that you owe nothing out of pocket. In the event that you become disabled from a non-work-related injury or sickness, disability income benefits will provide a partial replacement of lost income. Please note that you are not eligible to receive short-term disability benefits if you are receiving workers' compensation benefits. Upon return from short-term disability, you will need to catch-up on all elected health benefit premiums.

Short-Term Disability (STD)

The STD plan provides full-time employees with income replacement while disabled and unable to work due to a non-occupational illness, injury, or pregnancy. The benefit amount of 60% of your weekly base annual earnings, up to a maximum of:

- $1,500 per week for Group 1 (over $100k)
- $1,000 per week for Group 2 (under $100k)

The benefit would begin on the 8th day of an accident or illness. The maximum benefit period is 13 weeks.

Long-Term Disability (LTD)

The LTD plan provides full-time employees with income replacement for those out of work for 90 days or more. The benefit amount is 60% of your monthly earnings, up to a maximum of:

- $10,000 per month for Group 1 (over $100k)
- $5,000 per month for Group 2 (under $100k)

There is a pre-existing condition waiting period, which means the policy will not cover any total or partial disability if: you received treatment for that condition within the 3 months before coverage starts, and the disability begins within the first 12 months after your coverage begins.

This benefit continues until you are no longer disabled or reach your Social Security normal retirement age, whichever is sooner.

Filing a Disability Claim

In order to receive STD benefits, you must contact Human Resources and Lincoln Financial Group within 30 days of your disability event.

1. **Log in to LincolnFinancial.com or the Lincoln Financial Mobile app. First-time users will need to register using company code 2009573 and by providing first and last name, birthdate, and the last four digits of your Social Security number.**
2. **Select Start a claim or leave of absence and answer a few questions.**
3. **Choose Submit. For short-term disability claims, you'll be asked to download, sign, and submit a medical authorization form, which you or your claims specialist can provide to your doctor.**
4. **The confirmation page will provide a PDF document of your submittal. Save it for your records. You'll need your claim or leave number to view the status for the first time.**
5. **Check the status of your claim online at LincolnFinancial.com or the Lincoln Financial Mobile app.**

Employee Assistance Program (EAP)

LINCOLN FINANCIAL GROUP | EMPLOYEE CONNECT

We understand that we all face serious problems at some time in our lives and we are committed to providing help during those times.

The EAP is designed to assist employees and their families with personal challenges in many different areas including depression, stress management, drug and alcohol abuse, relationships, grief, domestic violence, legal and financial issues, parenting, childcare and elder care. Participation in the EAP is voluntary, confidential and free of cost for the first 5 in-person visits. For those who require referrals for long-term treatment, there may be fees for the services of outside providers. We encourage you and your eligible family members to take advantage of our EAP benefit.

MENTAL WELL-BEING

Licensed counselors can help with issues such as:

- Mental health concerns
- Emotional difficulties
- Domestic abuse
- Substance abuse
- Financial worries
- Grief and loss
- Relationship support
- Self-esteem and personal development
- Stress management
- Work-life balance

When you need in-the-moment emotional well-being support, counselors are here to help 24/7. Call **888-628-4824**, visit **GuidanceResources.com**, or download the GuidanceNow mobile app. New users click “Register” (wedID LFGSupport) and follow the prompts to create your username and password.

WORK-LIFE ASSISTANCE

Lincoln Financial Group also provides a wide variety of work-life support, with most services at no cost. A few of the services include:

LifeKeys: Resources for child, elder, or pet care, and household services

Legal support: Wills and estate planning, family, civil, criminal, and real estate

Financial services: Budgeting, mortgages, college funding, and issues

TravelConnect: Services provide travel assistance from lost luggage, translation services or even medical evacuation, from a foreign country

APP STORE

GOOGLE PLAY STORE

Supplemental Insurance

LINCOLN FINANCIAL GROUP | GROUP NUMBER: 43140 | POLICY NUMBER: SA2-890-LF1915-01

Employee Supplemental Life & AD&D

You may purchase additional life insurance at group rates:

- Available in increments of $10,000, up to 5x your basic annual earnings (max of $500,000)
- You pay the full cost of this plan and the premium depends on your age and the amount of coverage elected
- If you have previously waived coverage, you have the opportunity to elect up to $10,000 without answering medical questions. If you elect more than $10,000, then you are subject to answering medical questions and approval from Lincoln Financial Group
- If you are already enrolled you have the opportunity to increase your current coverage by $10,000 up to the guaranteed issue amount of $100,000 without answering medical questions

Spouse and Child Life AD&D

You may purchase additional dependent life insurance at group rates:

- Spousal life is available in increments of $5,000 up to a max of $250,000. The Spouse may be covered up to 50% of the employee's elected amount.
- Spouses guaranteed issue amount is $30,000.
- If you have previously waived this coverage for your spouse, you have the opportunity to elect up to $5,000 without answering medical questions. If you elect more than $5,000, then your spouse is subject to answering medical questions and approval by Lincoln Financial Group.
- Spouse premiums are based off of employee's age. Refer to page 22 for rates.
- Child life is available from 15 days old to 6 months of age at $250, and 6 months old to age 26 at $1,000, $2,000, $4,000, $5,000, or $10,000. Children are not subject to medical underwriting
  - The cost remains the same regardless of the number of children you have

Rates are on page 24.

Guaranteed Issue and Evidence of Insurability

Employees and spouses who elect Voluntary Life and AD&D coverage when they are first eligible can elect up to the Guaranteed Issue (GI) amount without Evidence of Insurability (EOI). If the amount requested is more than GI, you will need to provide EOI before the amount over GI becomes effective. If you have previously waived coverage, but wish to enroll in voluntary life, you can elect up to $10,000 for yourself and $5,000 for your spouse, without answering medical questions. If you elect above $10,000 for yourself or $5,000 for your spouse, then you will subject to answering medical questions and approval from Lincoln Financial Group. You have to submit the EOI; it does not get sent automatically or submitted by HR. Forms are found on the LFG website and SharePoint site.

Note: Upon loss of eligibility or termination of employment, you and/or your dependents may elect to continue your Supplemental Term Life Insurance coverage by either porting or converting it. If you can continue your life insurance policy, you can port it, which means continuing the same type of policy, or you can convert it, which means change it to a new type of individual policy. Remember, no matter which option you choose, you are responsible for the premiums.

Accident Insurance

LINCOLN FINANCIAL GROUP | GROUP NUMBER:1078180 | POLICY NUMBER: ACC-0001727243

With accident insurance, you can enjoy peace of mind. Lincoln Accident Insurance helps deliver financial security for the unexpected—allowing you to protect your budget against unforeseen expenses if you suffer an accidental injury. You can use the cash benefits from this coverage to help meet copayments and other expenses while you recover, or any other way you see fit.

COVERAGE LEVEL	LOW	BASE	HIGH
Employee Only	$5.91	$8.37	$11.09
Employee + Spouse	$10.01	$14.04	$18.44
Employee + Child(ren)	$11.58	$15.81	$20.49
Employee + Family	$15.55	$21.34	$27.68

Coverage Examples

What are some examples of when Accident Insurance pay benefits?

- Broken bones
- Torn ligaments
- Dislocations
- Emergency dental work
- Cuts/Lacerations
- Concussions
- Children's sports injuries

What are some of the services that are eligible for benefits when there is an accident?

- Emergency Room
- Ambulance
- Hospitalization
- Surgery
- Mobility Devices
- Lodging/Transportations

Example Scenario

Bob plays softball with friends. During one game, he slides into third base and breaks his ankle. Under the Accident Plan, Bob's injury triggers many benefits.

	Low Plan	Base Plan	High Plan
Non-surgical Fracture, Ankle	$250	$450	$2,200
Ambulance	$100	$200	$300
ER Visit	$150	$200	$250
X-ray	$20	$30	$40
X-ray (at initial visit)	$20	$30	$40
Physical Therapy (six sessions)	$210	$300	$390
Crutches	$50	$100	$200
Benefit Payable	**$780**	**$1,280**	**$3,380**

Critical Illness Insurance

LINCOLN FINANCIAL GROUP | GROUP NUMBER:1078180 | POLICY NUMBER: CI-0001727242

Critical illness insurance helps you to protect your budget from the unexpected expenses that can come with a critical illness. You will receive cash benefits when diagnosed with a covered critical illness, and you can use your benefit however you wish, for medical or personal expenses. You can elect $10,000, $20,000 or $30,000 of coverage. Spouses can elect $10,000, $20,000, or $30,000 up to 100% of employee benefit amount. You can elect Critical Illness Insurance for your dependent children in the amount of $5,000, $10,000, or $15,000 (up to 100% of the employee coverage amount) when you choose coverage for yourself.

	EMPLOYEE	SPOUSE
AGE	PER $1,000 OF COVERAGE	PER $1,000 OF COVERAGE
<25	$0.410	$0.410
25–29	$0.520	$0.520
30–34	$0.640	$0.640
35–39	$0.750	$0.750
40-44	$0.950	$0.950
45-49	$1.250	$1.250
50-54	$1.640	$1.640
55-59	$2.270	$2.270
60-64	$3.010	$3.010
65-69	$4.150	$4.150
70+	$5.380	$5.380
CHILD(REN)		
Per $1000 of Coverage	$0.601	

Coverage Examples

CORE PLAN BENEFITS	
Heart Attack	100%
Arterial/Vascular Disease	50%
Mitral or Aortic Valve Disease	25%
Sudden Cardiac Arrest	100%
Stroke	100%
Major Organ Failure	100%
Non-Invasive Cancer	25%
Invasive Cancer	100%
Skin Cancer (paid once per lifetime)	$1,000

Critical Illness Example

Employee A is age 29. Based on the chart above, the rate is $0.520 per $1,000 of coverage. Employee A elects $20,000 in coverage. The monthly premium will be $10.40 ($0.520 x 20 = $10.40).

Identity Theft Assistance

NORTON LIFELOCK

For 2026-27 plan year, we are moving the identity theft assistance from Aura to Norton LifeLock. If you wish to keep your current coverage through Aura, please reach out to Human Resources to learn how to port your coverage to a personal policy.

Identity Theft insurance provides credit monitoring and fully managed identity restoration services should you or an immediate family member become a victim of identity theft. This will help you remain productive at home and at work while your identity is restored to pre-theft status.

Identity Theft Protection monitors personal information, accounts, and online reputation and sends alerts if Norton LifeLock detects threats. It automatically requests removal of information found online to help keep it out of the hands of thieves and scammers.

Financial Fraud Protection monitors credit, financial accounts, and property titles and sends alerts if suspicious changes are detected.

Privacy & Device Protection –shop, bank, and connect online more securely and privately with intelligent safety tools that help protect passwords, devices & Wi-Fi connections from hackers.

Family Safety gives you the tools to protect loved ones –no matter who they are, how old they are, or where they live –from online predators and thieves.

Service and Support 24/7/365 100% US based customer care with white glove resolution services.

ID THEFT	MONTHLY COST
Employee	$12.99
Family	$21.98

SCAN THE QR CODE TO VISIT NORTON LIFELOCK

Legal Insurance

ARAG

For 2026-27 plan year, we are moving the legal services from MetLife to ARAG. If you wish to keep your current coverage through MetLife, please reach out to Human Resources to learn how to port your coverage to a personal policy.

Whether you need a simple will or your legal needs are more extensive, this program offers affordable legal services for a wide variety of legal matters. Telephone and in-person legal consultations are available. And your coverage is portable, so you can continue to take advantage of low rates even if you leave the the company.

PLAN BENEFITS

- Legal Consultation and Advice
- Court Representation
- Dedicated Law Firm
- Legal Document Preparation and Review
- Letters and Phone Calls Made on Your Behalf
- Speeding Ticket Assistance
- Will Preparation
- 24/7 Emergency Access

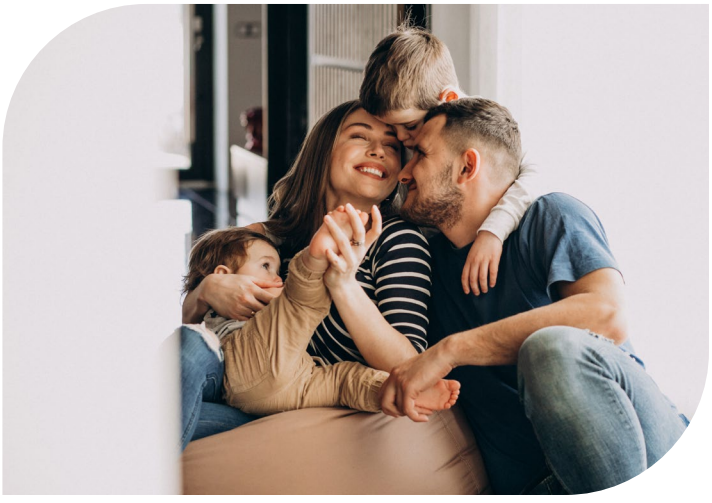
YOUR CONTRIBUTIONS

LEGAL SERVICES	MONTHLY COST
Employee + Dependents	$21.96

Get legal help when you need it

Get legal help when and where you need it. With the app, you can:

- **Go to ARAGlegal.com/myinfo and enter access code: 19620qs, or call 800-247-4184 to speak to an experienced service team that can match you with the right attorney**
- Call the attorney you select and schedule a time to talk or meet
- There are no copays, deductibles, or claim forms when you use a network attorney for a covered matter
- 24/7 Access at your fingertips



SCAN THE QR CODE TO VISIT YOUR LEGAL PLAN POWERED BY ARAG. THE ACCESS CODE IS: 19620qs

401(k) & Retirement

EPIC RETIREMENT PLAN SERVICES

Our 401(k) Plan helps you save for retirement through convenient payroll deductions, employer contributions, and a variety of investment options designed to support long-term financial goals. The earlier you begin saving, the more opportunity your money has to grow through compounding over time.

PLAN BENEFITS

- **Pre-Tax and Roth Contributions** – Choose traditional pre-tax contributions, Roth after-tax contributions, or a combination of both based on your financial and tax-planning goals. Roth contributions may allow for tax-free qualified withdrawals in retirement.
- **Company Matching Contribution** – The plan provides a matching contribution equal to 50% of employee contributions up to 6% of eligible compensation.
- **Safe Harbor Contribution** – Eligible participants receive a company contribution equal to 3% of eligible compensation, helping boost retirement savings.
- **Rollover Contributions** – You may be able to transfer eligible balances from previous employer retirement plans or traditional IRAs into the plan, allowing retirement assets to remain consolidated in one account

Getting Started

1. Enroll in the plan and designate your beneficiaries.
2. Create your online retirement account and establish a secure username and password.
3. Choose your contribution rate and investment elections.
4. Review your account regularly and increase contributions whenever possible.

401(k) Eligibility: Full-time employees age 21 or older are eligible to participate in the 401(k) plan after completing the applicable waiting period.

SCAN THE QR CODE TO VISIT OUR MICROSITE WITH MORE 401(K) INFORMATION

FEDlogic – New for 2026

FEDlogic is a free, confidential advocacy service provided through your Hale Holdings that helps you and your family understand and maximize available federal and state benefits. FEDlogic's team includes former Social Security Administration professionals and benefit experts with decades of experience navigating complex government programs

HOW FEDLOGIC CAN HELP

- Medicare and Medicare planning
- Social Security retirement benefits
- Disability benefits
- Supplemental Security Income (SSI)
- Medicaid
- Veteran and Tribal benefits
- COBRA and Healthcare.gov coverage options
- Support for critical illnesses, catastrophic claims, ALS, and dialysis
- Assistance for families with premature babies in the NICU

WHAT TO EXPECT

FEDlogic offers unlimited phone consultations with benefit specialists who will:

- Listen to your unique situation and goals.
- Explain benefit options in clear, easy-to-understand terms.
- Help identify programs and benefits you may qualify for.
- Guide you through enrollment and application processes when appropriate.
- You AND your immediate and extended family can use FEDlogic

International Medical Coverage

BCBS GLOBAL SOLUTIONS

This guide outlines the Blue Cross Blue Shield Global Solutions (BCBS Global Solutions) medical coverage available to you and your family members while traveling outside your home country for business.

WHO IS COVERED?

- Employees traveling on business
- Traveling spouse
- Unmarried dependent children
- Coverage applies to business trips and business-related sojourns lasting up to 180 consecutive days outside the home country

KEY BENEFITS

The plan provides coverage for:

- Unexpected illnesses and injuries while traveling
- Doctor visits and outpatient care
- Hospital (inpatient) services
- Emergency prescription medications

Accessing Care

Members can:

- Use telemedicine anytime for non-emergency concerns
- Access a global provider network in more than 190 countries
- Search for providers through the BCBS Global Solutions Member Portal or mobile app
- Request Direct Pay to avoid paying providers upfront

Employee Monthly Contributions

Paycheck Deductions

The following charts contain the monthly premiums.

MEDICAL

COVERAGE LEVEL	$2,500 PPO	$5,000 PPO
Employee Only	$208.83	$148.45
Employee + Family	$431.57	$276.27

DENTAL

COVERAGE LEVEL	RATE
Employee Only	$37.64
Employee + Spouse	$77.66
Employee + Child(ren)	$86.20
Employee + Family	$140.18

VISION

COVERAGE LEVEL	RATE
Employee Only	$5.30
Employee + Spouse	$10.12
Employee + Child(ren)	$11.46
Employee + Family	$15.16

SUPPLEMENTAL LIFE & AD&D

VOLUNTARY LIFE & AD&D EMPLOYEE COVERAGE

Age	<30	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70+
Rate per $10,000	$1.55	$1.95	$2.15	$2.25	$3.25	$4.65	$8.35	$12.65	$23.85	$38.45

VOLUNTARY LIFE & AD&D* SPOUSE COVERAGE

Age	<30	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70+
Rate per $5,000	$0.78	$0.98	$1.08	$1.13	$1.63	$2.33	$4.18	$6.33	$11.93	$19.23

DEPENDENT CHILD LIFE & AD&D

Benefit Amount	$1,000	$2,000	$3,000	$4,000	$5,000	$10,000
Rates	$0.29	$0.58	$0.86	$1.15	$1.44	$2.88

* Spouse's voluntary life & AD&D premiums are based off of employee's age.

ACCIDENT

COVERAGE LEVEL	LOW	BASE	HIGH
Employee Only	$5.91	$8.37	$11.09
Employee + Spouse	$10.01	$14.04	$18.44
Employee + Child(ren)	$11.58	$15.81	$20.49
Employee + Family	$15.55	$21.34	$27.68

CRITICAL ILLNESS

	EMPLOYEE	SPOUSE
AGE	PER $1,000 OF COVERAGE	PER $1,000 OF COVERAGE
<25	$0.410	$0.410
25–29	$0.520	$0.520
30–34	$0.640	$0.640
35–39	$0.750	$0.750
40-44	$0.950	$0.950
45-49	$1.250	$1.250
50-54	$1.640	$1.640
55-59	$2.270	$2.270
60-64	$3.010	$3.010
65-69	$4.150	$4.150
70+	$5.380	$5.380
CHILD(REN)		
Per $1000 of Coverage	$0.601	

IDENTITY THEFT ASSISTANCE

ID THEFT	MONTHLY COST
Employee	$12.99
Family	$21.98

LEGAL SERVICE PLAN

COVERAGE LEVEL	RATE
Employee + Dependents	$21.96

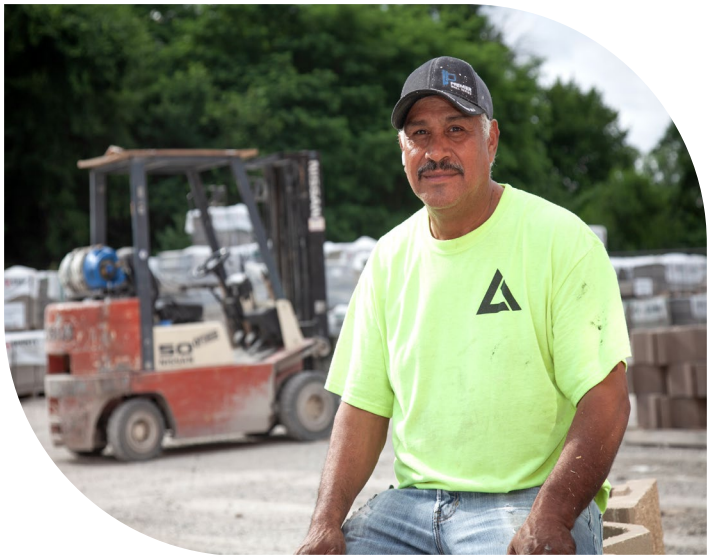
Contacts

PLAN	CARRIER	WEBSITE	PHONE
Medical/Rx	Wellmark	www.wellmark.com	800-524-9242
Dental	Delta Dental	www.deltadentalia.com	800-544-0718
Vision	Delta Vision	www.deltadentalia.com	800-544-0718
Flexible Spending Accounts (FSAs)	iSolved Benefit Services	www.isolvedbenefitservices.com/wdm	515-224-9400
Employee Assistance Program (EAP)	Lincoln Financial Group/ EmployeeConnect	GuidanceResources.com WebID: LFGSupport	888-628-4824
Life and AD&D Insurance	Lincoln Financial Group	www.LincolnFinancial.com	800-423-2765
Disability	Lincoln Financial Group	www.LincolnFinancial.com	800-423-2765
Accident, Critical Illness Insurance	Lincoln Financial Group	www.LincolnFinancial.com	800-423-2765
Legal Plan	ARAG	www.araglegal.com	800-247-4184
Identity Theft Assistance	Norton LifeLock	https://lifelock.norton.com/	800-607-9174
401(k)	EPIC	www.epicrps.com	800-716-3742
Advocacy Program	FEDLogic	https://fedlogicgroup.com/	877-837-4196
Hale Holdings Human Resources	Melissa Gering Sedonna Lyons Crystal Welborn	hr@quicksupplyco.com	515-985-1860 515-401-1066 515-416-8673
Holmes Murphy Contacts	Alyssa Beck Renee McPhee	abeck@holmesmurphy.com rmcphee@holmesmurphy.com	515-381-7452 515-974-4638

This benefit summary describes the benefit plans available to you as an employee of Hale Holdings. The details of these plans are contained in the official plan documents that may be provided to you by your employer, including some insurance contacts. This summary is meant only to cover the highlights of each plan. It does not contain all the details that are included in your summary plan description as described by the Employee Retirement Income Security Act (ERISA).

If there is ever a question about one of these plans, or if there is a conflict between the information in this summary and the formal language of the plan documents, the formal wording in the plan documents will govern. Please note that the benefits described in the summary may be changed at any time and do not represent a contractual obligation on the part of the company.

Notes



HALE HOLDINGS

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