



## BENEFITS SUMMARY

This Summary highlights the benefit package available to regular, full-time, non-union employees. This Summary is not a substitute for the Employee Handbook nor does it override information provided in the Plan Booklets/Descriptions supplied by the Plan Managers. Benefits are subject to change per Management discretion.

### MEDICAL INSURANCE

<b>Option 1: Blue Cross Blue Shield (BCBS), including Vision and Rx Drugs</b>		
Plan Name	Community Blue PPO – Plan 3	
Min. Eligibility Requirements	<ul style="list-style-type: none"> <li>• 18 years of age</li> <li>• 30 days of continuous employment</li> </ul>	
Coverage	<ul style="list-style-type: none"> <li>• \$30 Office Visit/Urgent Care co-pay</li> <li>• 100% Preventive Care up to \$500</li> <li>• \$50 Emergency Visit co-pay</li> <li>• 20% Co-insurance after deductible</li> <li>• Vision benefits (VSP 24/24/24)</li> <li>• \$250/\$500 Single/Family Deductible</li> <li>• \$1000/\$2000 Single/Family Annual Maximum</li> <li>• \$10/\$40 Generic/Brand Name Prescription Drug Program through CVS/Caremark</li> </ul>	
Employee Contributions <sup>1</sup>	1-Person Contract	\$ 16.87
	2-Person Contract	\$ 38.03
	Family Contract	\$ 45.57
	Family Continuation Coverage <sup>2</sup>	\$ 19.63
<b>Option 2: Medical Insurance Opt-Out</b>		
Plan Name	United Paint Opt-Out Policy	
Min. Eligibility Requirements	<ul style="list-style-type: none"> <li>• 18 years of age</li> <li>• 30 days of continuous employment</li> </ul>	
Coverage	None. You are opting out of participation in the BCBS Plan.	
Opt Out Compensation	\$25.00 per week upon completion of an Opt Out Acknowledgment.	

### DENTAL INSURANCE

<b>Reliance Standard</b>		
Plan Name	Group Dental Plan	
Min. Eligibility Requirements	<ul style="list-style-type: none"> <li>• 18 years of age</li> <li>• 30 days of continuous employment</li> </ul>	
Coverage	Type 1 (Preventive)	100%
	Type 2 (General Maintenance)	80%
	Type 3 (Prosthodontics)	50%
	Type 4 (Orthodontics) <sup>3</sup>	50%
Employee Contributions	This is a non-contributory plan.	

<sup>1</sup> Employee contributions are made by way of automatic weekly payroll deductions. Through an IRS Section 125 program, your contributions are deducted on a pretax basis. These rates are effective 01/01/08 – 12/31/08.

<sup>2</sup> Family continuation coverage is offered to eligible dependents 19+ years old. The employee pays 50% of the premium for this coverage.

<sup>3</sup> Type 4, Orthodontics, has no age limit, but it does have a lifetime cap of \$1,000.00.



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### LIFE INSURANCE

Reliance Standard		
Plan Name	Group Life & Health Plan	
Min. Eligibility Requirements	<ul style="list-style-type: none"> <li>• 18 years of age</li> <li>• 30 days of continuous employment</li> </ul>	
Coverage	Employee Group	Benefit
	Group 1: Officers & Executives	2x annual salary up to \$200,000
	Group 2: Department Managers	1.5x annual salary up to \$150,000
	Group 3: All others	1x annual salary up to \$100,000
Life Insurance Reduction	Employee Age	Percentage of Benefit
	65 -75	65% - 30%
	80	20%
Employee Contributions	This is a non-contributory plan.	

### SHORT-TERM DISABILITY INSURANCE

Reliance Standard	
Plan Name	Group Life & Health Plan
Min. Eligibility Requirements	<ul style="list-style-type: none"> <li>• 18 years of age</li> <li>• 30 days of continuous employment</li> <li>• Non-occupational injury or illness rendering you completely unable to perform the essential duties of your job for a period of 5 or more business days.</li> </ul>
Coverage	67% of weekly earnings rounded to the next higher \$1.00 to a maximum of \$350.00/week.
Benefit Period	26 weeks
Elimination Period <sup>4</sup>	Benefits are paid 6-weeks after the onset of an injury or illness.
Employee Contributions	This is a non-contributory plan.

### LONG-TERM DISABILITY INSURANCE

Reliance Standard		
Plan Name	Group Disability Income Plan	
Min. Eligibility Requirements	<ul style="list-style-type: none"> <li>• 18 years of age</li> <li>• 30 days of continuous employment</li> <li>• Non-occupational injury or illness rendering you completely unable to perform the essential duties of your job for a period of 5 or more business days.</li> </ul>	
Coverage	67% of monthly earnings rounded to the next higher \$1.00 to a maximum of \$6,000.00/month.	
Benefit Period	Age at Date of Disability	Benefit Period
	Under 60	To age 65
	60	60 months
	61-65	48 months – 24 months (6 less/year)
	66-68	21 months – 15 months (3 less/year)
	69 and over	12 months
Elimination Period	26-weeks after the onset of an injury or illness.	
Employee Contributions	This is a non-contributory plan.	

<sup>4</sup> United Paint will continue an employee's regular weekly base pay during the 6-week elimination period.



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### FLEXIBLE SAVINGS ACCOUNT

#### ARI Health Care Reimbursement Plan

Plan Name	Flexible Benefit Plan
Min. Eligibility Requirements	<ul style="list-style-type: none"> <li>• 18 years of age</li> <li>• 30 days of continuous employment</li> </ul>
Coverage	Pre-tax dollars are used to pay for out-of-pocket medical, prescription drug, optical and dental benefits incurred by you, or your eligible dependents.
Maximum Contribution <sup>5</sup>	\$1,500.00 per Plan Year

#### ARI Dependent Care Reimbursement Plan

Plan Name	Flexible Benefit Plan
Min. Eligibility Requirements	<ul style="list-style-type: none"> <li>• 18 years of age</li> <li>• 30 days of continuous employment</li> </ul>
Coverage	Pre-tax dollars to pay for out-of-pocket, work-related dependent day-care costs.
Maximum Contribution <sup>6</sup>	\$5,000.00 per Plan Year

### PAID TIME OFF<sup>7</sup>

#### Vacation

Min. Eligibility Requirements	<ul style="list-style-type: none"> <li>• 30 days of continuous employment</li> </ul>	
Vacation Time Allowance	Length of Employment	Hours Allowed per Year
	Less than 2 years	40 hours
	At least 2 years, but less than 8 years	80 hours
	At least 8 years, but less than 15 years	120 hours
	More than 15 years	160 hours

#### Sick/Personal Time

Min. Eligibility Requirements	<ul style="list-style-type: none"> <li>• 30 days of continuous employment</li> </ul>
Sick/Personal Time Allowance	56 hours per year.

#### Holidays

Min. Eligibility Requirements	<ul style="list-style-type: none"> <li>• No waiting period</li> </ul>
Recognized Holidays	<ul style="list-style-type: none"> <li>• Good Friday</li> <li>• Memorial Day</li> <li>• Independence Day</li> <li>• Labor Day</li> <li>• Thanksgiving Day and the following Friday</li> <li>• Christmas – New Year Shutdown (7 business days)</li> </ul>

<sup>5</sup> Contributions are made by way of automatic weekly payroll deductions. Through an IRS Section 125 program, your contributions are deducted on a pretax basis.

<sup>6</sup> *ibid.*

<sup>7</sup> During any partial calendar year of employment, Vacation and Sick/Personal time off allowances are prorated equal to the percentage of the year worked.



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### 401(K) RETIREMENT PLAN

<b>Principal Financial Group</b>	
Plan Name	United Paint & Chemical Corporation Employee 401(K) Plan
Min. Eligibility Requirements	<ul style="list-style-type: none"> <li>• 21 years of age</li> <li>• 30 days of continuous employment</li> </ul>
Employer Match	The employer matching contribution is discretionary and is based on Company profitability at year-end.

### TUITION REIMBURSEMENT

<b>Education Assistance Program</b>	
Min. Eligibility Requirements	<ul style="list-style-type: none"> <li>• 1 year of continuous employment</li> </ul>
Benefit	Tuition reimbursement is allowed pending acceptance to the Education Assistance Program. In general, the curriculum must be in alignment with an employees UPCC career path and a final grade of a B or better must be achieved.

### SUPPLEMENTAL INSURANCE

<b>AFLAC</b>	
Min. Eligibility Requirements	<ul style="list-style-type: none"> <li>• 30 days of continuous employment</li> </ul>
Insurance Plan(s)	Employees may voluntarily elect to participate in these supplemental insurance policies: <ul style="list-style-type: none"> <li>• Accident/Disability</li> <li>• Cancer</li> <li>• Long-Term Care</li> <li>• Hospital Confinement Indemnity</li> <li>• Hospital Intensive Care</li> <li>• Short-Term Disability</li> <li>• Specified Health Event</li> </ul>

### Pre-paid Legal Services

Min. Eligibility Requirements	<ul style="list-style-type: none"> <li>• 30 days of continuous employment</li> </ul>
Insurance Plan(s)	Employees may voluntarily elect to participate in these supplemental insurance policies: <ul style="list-style-type: none"> <li>• Standard Group Legal Plan</li> <li>• Expanded Group Legal Plan</li> <li>• Identity Theft Shield Service</li> </ul>