Fidelity Bank
Right By You®

WELL-BEING PROGRAM
2026 BENEFITS GUIDE

TABLE OF CONTENTS

WELCOME

We are pleased to provide you with the 2026 Benefits Guide. This guide is intended to provide a summary of the benefit programs available to all benefit-eligible employees. It is only an overview, and you must review specific plan brochures and plan documents for full program details, limitations and exclusions.

After careful research and planning, Fidelity Bank is offering a comprehensive benefit program for the well-being of all our full-time employees. You and your family deserve the most thorough protection against illness, injury and financial insecurity that we can provide. Because you have demonstrated a strong commitment to our organization, we designed this benefit package to reflect the strength of our commitment to you.

What does this program cost me?

In most cases, the premiums you pay for coverage are eligible expenses to be deducted on a pre-tax basis. This arrangement, which is through the IRS Code Section 125, allows you to pay for certain insurance premiums with tax-free dollars. This means that dollars are deducted for these elections and taxable payroll is reduced before state, federal and FICA withholdings are taken out.

What do I do if I need to make changes?

If you should need to make benefit changes during our plan year, you must have a qualifying event to do so and report that qualifying event within 30 days. A qualifying event is a family status change, and is applicable to our medical, dental and vision plans. Below is a list of applicable qualifying events.

- Change in marital status – marriage, divorce, death of a spouse
- Change in the number of dependents – birth, adoption or death
- Termination of employment – employee, spouse or dependent
- Change in work schedule – reduction of work hours or increased work hours
- Change in dependent eligibility – attainment of age
- Change in residence or worksite – employee, spouse or dependent

This is not the end of our evaluation of the best benefits for our employees – it is an ongoing effort. If you have comments, questions or other inquiries, please contact Human Resources.

INTRODUCTION

Fidelity Bank values the well-being of our employees and strives to protect, preserve and invest in each of you. We take a total rewards approach in developing our benefits program as we understand that there are multiple aspects of true well-being.

At Fidelity Bank we aim to offer the best in Health and Welfare options for you and your family, making healthcare not only affordable, but something you and your family can trust.

Your Financial Preparedness is also a top priority; therefore, we not only contribute at a higher rate than most employers, but we also provide quality retirement plan choices that allow you to be in control of your financial future.

Just as you do, we value the importance of life outside of work and provide benefits and assistance for a true Work-Life Integration. Finally, as you continue to show your commitment to us through your loyalty and years of service, we honor you through a Service Recognition and Award program.

At Fidelity Bank, we consider you a part of our family and we only want what's best for you!

GENERAL INFORMATION

EMPLOYEE ELIGIBILITY

All employees working 30 hours or more per week are eligible for benefits.

BENEFITS BEGIN:	1st of the month following Date of Hire *If your Date of Hire is on the 1st of the month, then your benefits begin immediately
BENEFITS TERMINATE:	Medical, Dental, Vision: End of the month following Date of Termination Life: Date of Termination

DEPENDENT AGE LIMITS

MEDICAL:	Until age 26*
DENTAL:	Until age 26*
VISION:	Until age 26*
VOLUNTARY LIFE:	Until age 26*

**coverage terminates at the end of the month in which the dependent child turns 26.*

MEDICAL PLAN OVERVIEW

BLUE CROSS BLUE SHIELD OF NC (BCBSNC) | 1-877-275-9787 | WWW.BLUECROSSNC.COM

Our medical plans through Blue Cross Blue Shield of NC are "open access" PPO plans, which means that you do not need to select a primary care doctor, nor will you need a referral to visit a specialist. As long as you remain in the network, your benefits will be covered at the higher in-network benefit amount. The only exception to this relates to mental health and substance abuse. Should you need treatment for mental health or substance abuse, you must contact BCBSNC before you seek treatment.

If you visit a provider that is in-network, you will not need to file any claims. If you elect to go out-of- network, you will need to prepay and then file your claims with Blue Cross Blue Shield of NC. In this situation, the provider may balance bill you for any amount over the "Usual and Customary" charge. If you remain in-network, you will not be subject to any balance billing.

If you live outside of North Carolina, your network will be the Blue Cross Blue Shield network in that applicable state. Please visit https://www.bluecrossnc.com/find-a-doctor-or-facility to see the applicable network for your state. You can also receive in-network benefits when you are traveling. If you have an emergency, please go to the nearest hospital and call BCBS as soon as possible. If you have an acute situation, please call the 800 number on your ID card and BCBS will direct you to an in-network provider in that area. Your benefits will be paid the same as if you visited an in-network provider in your home state.

Please take an opportunity to visit the BCBSNC website www.bluecrossnc.com. There, you will be able to access several helpful tools including:

- Request an ID card
- Check the status of your claims
- Find a drug and participating providers
- Take a personal health survey
- Manage your health by participating in programs targeted at certain health conditions
- Access to resources such as a nurse-line, healthcare cost estimator & research tool for healthcare topics

A prior plan approval program has been implemented for diagnostic imaging services. The program will require participating referring providers to request prior plan approval for all CT/CTA, MRI/MRA, PET Scans and nuclear cardiology studies performed in an outpatient setting such as a doctor's office, the outpatient department of a hospital or at a freestanding imaging center. Prior plan approval is not required when these services are performed in an emergency room, hospital (related to an inpatient stay), urgent care center or ambulatory surgical center.

AMAZON PHARMACY

AMAZON MEDSYOURWAY | 1-855-963-4546 | WWW.AMAZON.COM/BLUECROSSNC

Amazon Pharmacy - MedsYourWay
Blue Cross Blue Shield of NC has partnered with Amazon Pharmacy, which allows members to easily order and quickly receive non-specialty medicines delivered to your home.

Shop – Easy to Use
Amazon Pharmacy is just like shopping on Amazon.com.

- Easy sign up, which includes an option to have your account auto-populate with your prescription history.
- Option for 90+ day fills.
- Pharmacist on call 24/7.
- Ability to manage your medicine and order history.

Save – Built-in Drug Discount Card
Some drugs may be available at lower prices with a discount card. MedsYourWay discount pricing is built right into the Amazon Pharmacy experience.

- At checkout, you'll see the lowest cost available for your prescription. That's the price you'll pay.
- MedsYourWay discount card pricing is not insurance, however, all prescriptions and covered purchases, whether paying a copay or using the discount card pricing, will automatically count toward your annual out-of-pocket maximum.

Ship – Free Home Delivery
Skip the pharmacy line with home delivery.

- Fast, free delivery: Amazon Prime members get two-day free shipping on most orders, standard free shipping for non-Amazon Prime members is five days, but can be expedited to two-day delivery for $5.99.
- Real time package tracking from order to delivery.

Sign up and learn more at www.amazon.com/bluecrossNC.

Then click the "Get Started" Link.

For questions, please call the Amazon Pharmacy Customer Care team at 855-963-4546. Monday through Friday 8 a.m. - 10 p.m. EST and Saturday-Sunday 10 a.m. - 8 p.m. EST.

PRESCRIPTION DRUG BENEFIT

APHORA HEALTH | 717-586-9313 | APHORAHEALTH.COM

Aphora Health is your Preferred Prescription Drug Vendor for many high-cost medications. They provide medications from both US and International Pharmacies.

Aphora Health provides the same medication you take today from one of their pharmacies. All medications are a $0 copay to you!

Why Use Aphora Health? When you use Aphora Health for your prescription medicine, you save money, you earn money, and Fidelity saves money on claims which directly impacts your health insurance costs.

Financial Incentives for You:

- **$500 gift card** for High-Cost Specialty Medications filled in first 6 months of plan year.
- **$100 gift card** for Lower-Cost Specialty Medications filled in first 6 months.
- **$50 gift card** for Brand Name Drugs filled in first 6 months.

Who is Eligible? You and your dependents that are enrolled in Fidelity Bank's PPO Medical Plan (HDHP not eligible for program).

How it Works:

Step 1: Member provides prescription information to Aphora Health.

- Website – aphorahealth.com/enroll-now

- Enrollment Form – Complete Paper Form and:
  - **Scan & Email:** save@aphorahealth.com
  - **Take Photo & Text:** 717-586-9313
  - **Mail:** 10520 Chapel Hill Rd. #1160, Morrisville, NC 27560

Step 2: Aphora Health will confirm which medications are included in the program.

Step 3: Communicate with the member and obtain their approval to proceed.

Step 4: Employees should direct their doctor to e-prescribe their medications to our pharmacy. Pharmacy details will be available in your member portal once you sign up.

Step 5: Aphora Health will mail the prescription directly to your home.

Allow up to three weeks for the first fill to arrive at your home.

FLEXACCESS – SPECIALTY MEDS

BLUE CROSS BLUE SHIELD OF NC (BCBSNC) | 1-877-275-9787 | WWW.BLUECROSSNC.COM

FlexAccess
FlexAccess is a Specialty Copay Solution. To reduce persistent cost challenges with specialty medications, having access to a variety of manufacturer copay assistance coupon products is valuable. FlexAccess provides savings opportunities and delivers more pharmacy options.

FlexAccess is completely automated, so you don't need to search or bring coupons to the pharmacy. Unlike other copay assistance programs, FlexAccess has no pharmacy exclusivity requirement. Some of the benefits of FlexAccess are:

- Copays are almost always $25 or less
- No exclusivity on pharmacy
- Easy enrollment for members and proactive outreach from FlexAccess
- No coupons or separate cards needed

If you receive a prescription for a medication that qualifies for FlexAccess, you will receive notification directly from BCBSNC.

MEDICAL PLAN—PPO PLAN

BLUE CROSS BLUE SHIELD OF NC (BCBSNC) | 1-877-275-9787 | WWW.BLUECROSSNC.COM

Your medical coverage through Blue Cross Blue Shield of NC is an "open access" PPO plan, which means that you do not need to select a primary care doctor, nor will you need a referral to visit a specialist. As long as you remain in the network, your benefits will be covered at the higher in-network benefit amount.

COVERAGE	IN-NETWORK	OUT-OF-NETWORK
Annual Deductible Single Family	$1,500 $3,000	$2,500 $5,000
Out-of-Pocket Maximum Single Family	$4,500 $9,000	$7,500 $15,500
Benefit Period	1/1-12/31	
Office Visit	PCP: $30 Copay Specialist: $50 Copay Virtual: $30 Copay Chiropractic: $50 Copay	PCP: 70% after deductible Specialist: 70% after deductible Virtual: Not Covered Chiropractic: 70% after deductible
Prescription Drugs **Tier 1-5** **Mail Order**	Formulary: NetResults $10/$35/$60/$80/25%[1] 3 x Copay	Formulary: NetResults Copay + charge over in-network allowed amount
Emergency Room	$300 Copay	$300 Copay
Urgent Care	$50 Copay	$50 Copay
Inpatient Care	80% after deductible	70% after deductible
Outpatient Care	80% after deductible	70% after deductible
Routine Vision Exam	100% (every benefit period)	Not Covered

[1] Tier 5 Specialty Drugs are subject to 25% coinsurance and have a $50 Drug Minimum and a $150 per Drug Maximum for each 30-day supply of Tier 5 Drugs.

Manufacturer Coupons for Specialty Drugs: FlexAccess helps employees save on copays through the programs use of prescription coupons. The value of the manufacturer coupon will not count toward your deductible and out-of-pocket maximum.

Aphora Health: Refer to the information on page 8 to learn more about our specialty drug benefit!

Preventive Care is covered at 100% with a preventive primary diagnosis code. The service must be a covered preventive care benefit under healthcare reform. Certain over the counter preventive medications for which you have a prescription are available at no cost. During your annual physical if anything is discussed or performed outside of the healthcare reform approved screenings, your visit may not be covered at 100%.

MEDICAL PLAN—HDHP PLAN

BLUE CROSS BLUE SHIELD OF NC (BCBSNC) | 1-877-275-9787 | WWW.BLUECROSSNC.COM

Your medical coverage through Blue Cross Blue Shield of NC is an "open access" PPO plan, which means that you do not need to select a primary care doctor, nor will you need a referral to visit a specialist. As long as you remain in the network, your benefits will be covered at the higher in-network benefit amount.

COVERAGE	IN-NETWORK	OUT-OF-NETWORK
Annual Deductible Single Family	$2,500 $5,000[1]	$5,000 $10,000[1]
Out-of-Pocket Maximum Single Family	$5,000 $10,000[2]	$10,000 $20,000[2]
Benefit Period	1/1-12/31	
Office Visit	PCP: 80% after deductible Specialist: 80% after deductible Virtual: 80% after deductible Chiropractic: 80% after deductible	PCP: 50% after deductible Specialist: 50% after deductible Virtual: Not Covered Chiropractic: 50% after deductible
Prescription Drugs	Formulary: NetResults Enhanced Preventive: 80% All Other: 80% after deductible	Formulary: NetResults Enhanced Preventive: 80% + charge over in-network allowed amount All Other: 80% after deductible + charge over in-network allowed amount
Emergency Room	80% after deductible	80% after deductible
Urgent Care	80% after deductible	80% after deductible
Inpatient Care	80% after deductible	50% after deductible
Outpatient Care	80% after deductible	50% after deductible
Routine Vision Exam	100% (every benefit period)	Not Covered

[1] For Family coverage, the Family Deductible can be met by any combination of family members.

[2] For Family coverage, the Family Out-of-Pocket can be met by any combination of family members, with no member exceeding $6,650 in-network or $13,300 out-of-network.

Preventive Care is covered at 100% with a preventive primary diagnosis code. The service must be a covered preventive care benefit under healthcare reform. Certain over the counter preventive medications for which you have a prescription are available at no cost. During your annual physical if anything is discussed or performed outside of the healthcare reform approved screenings, your visit may not be covered at 100%.

To find the cost of your medication please visit https://www.bluecrossnc.com/members and select the link for "Look Up a Doctor or Drug" and use your BlueConnect login to see prices.

HEALTH SAVINGS ACCOUNT (HSA)

HEALTH EQUITY| 1-866-346-5800 | WWW.HEALTHEQUITY.COM

If you participate in the High-Deductible Health Plan (HDHP), you are eligible to open or maintain a Health Savings Account (HSA). The HSA is a personal savings account for health expenses, much like an IRA is used to save for retirement.

Employees may make pre-tax contributions to their HSA that can then be used to pay for eligible medical, dental, or vision expenses. Items to consider:

- In 2026, participants may save up to $4,400 for an individual and $8,750 for a family
- Fidelity Bank contributes $500 annually for employee only coverage and $1,000 for all other enrollment tiers: Employee + Spouse; Employee + Child(ren) and Family coverage. Please note that this contribution does count towards your annual IRS maximums.
- Fidelity Bank will provide the employer contribution to your HSA on a monthly basis. Those hired after January 1, 2026, will receive a prorated amount
- In order to receive the employer HSA contribution, you must use HealthEquity for your Health Savings Account. You will be automatically enrolled in the HSA with HealthEquity when you elect to enroll in the HDHP Medical Plan and the employer contribution will be applied to your account
- Eligible contributions are not taxable, and funds roll over from year to year
- The account is yours and is portable should you leave
- You are not eligible to contribute to an HSA if you are on Medicare, covered under the PPO plan, or covered under your spouse's non-HDHP or if you participate in our full purpose FSA

MAXIMUM HSA CONTRIBUTION LIMIT*

	Individual	Family
2026	**$4,400**	**$8,750**
Catch-Up	**+$1,000**	**+$1,000**

*The annual IRS maximum contribution amount is employer and employee contributions combined.

*If you are over the age of 55, you may also make an additional **'catch-up'** contribution of $1,000.

WEIGHT LOSS REIMBURSEMENT ACCOUNT

Fidelity Bank utilizes a health reimbursement arrangement to help offset the cost for your GLP-1 weight loss medications. Eligible participants may receive reimbursement for half the cost of weight loss medications, up to a maximum of $200 monthly.

To qualify for this benefit, you must be enrolled in Fidelity Bank's medical insurance plan.

How Does This Work?

Incur Eligible Expense

- Incur an eligible prescribed GLP-1 weight loss drug (Saxenda, Zepbound, Wegovy or any compounded pharmacy GLP-1).

Include Documentation

- **For HSA Plan Participants (HDHP):** A copy of your YTD Explanation of Benefits (EOB) showing the minimum deductible has been met, along with any itemized statement, Rx Receipt or Rx Bag Tag showing: Date of Service, Name or Prescription Expense, Out-of-Pocket Cost, Provider Name and Patient Name.
- **For Non-HSA Plan Participants (PPO):** Any itemized statement, Rx Receipt or Rx Bag Tag showing: Date of Service, Name or Prescription Expense, Out-of-Pocket Cost, Provider Name and Patient Name.

Submit Claim Form

- Complete the claim form and submit by using one of the options below:
    - **Upload:** www.floresHR.com
    - **FAX:** 704-335-0818 or 800-726-9982
    - **Mobile App**
    - **Mail:** Claim Processing, PO Box 31397, Charlotte, NC 28231

Important Notes

- You can access the claim forms on www.floresHR.com or on the Fidelity Bank intranet site in the Benefits section.
- For employees participating in the HDHP Medical Plan, reimbursement would apply **after** you meet your deductible.
- If your email address is on file with Flores, you will be sent an email notification when they receive your claim and when your reimbursement is sent to you.

TELEMEDICINE

TELADOC | 1-800-835-2362 | WWW.TELADOC.COM

As part of our group medical insurance plans, Fidelity Bank offers employees and their dependents access to telemedicine through Teladoc. Teladoc provides fast and inexpensive access to board certified physicians who can diagnose illness, recommend treatment and prescribe medications through video conferencing.

Access to these benefits is available to you and your dependents 24 hours a day, 7 days a week, 365 days a year and is available throughout the United States. Telemedicine provides an alternative to non-emergent urgent care and emergency room visits. It also provides access to medical care when you are away from home and are unable to access your primary care physician.

How Does This Work?

- Register with Teladoc—you can register online at www.teladoc.com by selecting "Set up account".
- Please reference your company name and/or group number when registering to ensure your account gets linked to our medical plan.
- All active family members must complete a Personal Health History Disclosure (PHD) prior to receiving the first consultation.
- Member Representative collects information to complete or update your Personal Health History Disclosure (PHD) each time a consultation is scheduled.

Consultation with a Physician

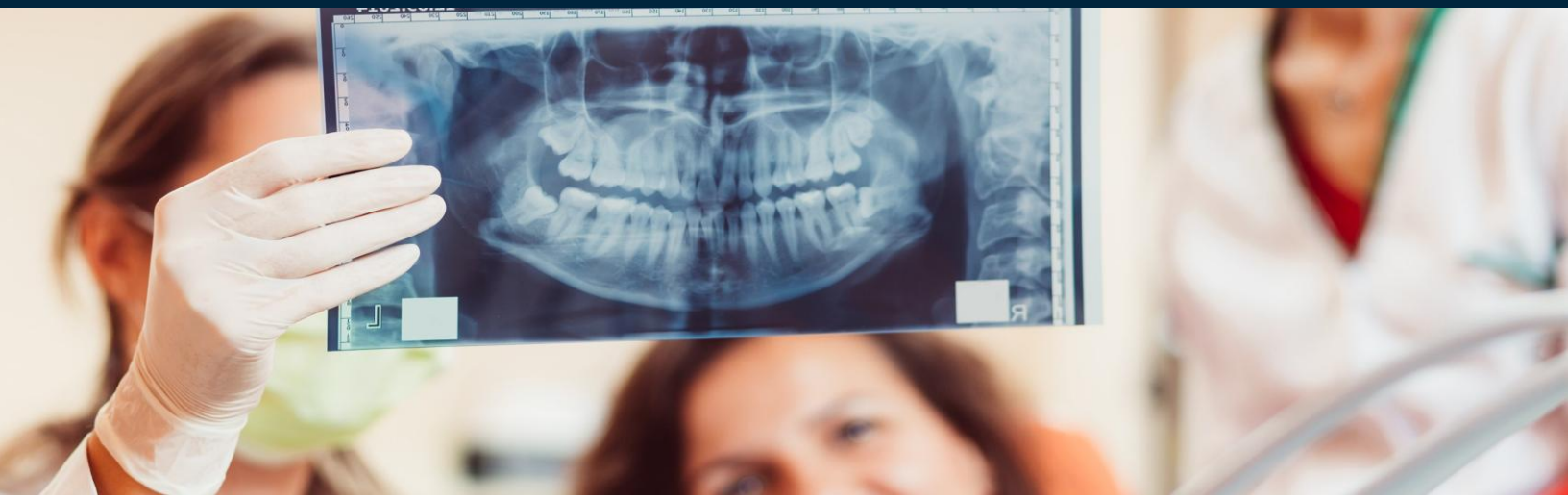
- Telephone Consultation: A physician will call the patient on the number that is provided generally within an hour and guaranteed within 2-hours.
- Video Consultation: Consultations are available online or through the Teladoc mobile application. Mobile application is available on the Apple App Store and Google Play. A physician will schedule a convenient time (guaranteed same day) to conduct the video consultation. Note: you must have a web camera and high-speed internet access to participate in a video consultation.

How Much Does This Cost?

- **PPO Medical Plan:** Members are responsible for the $30 consultation fee, per consultation, with a physician. Additionally, if the physician writes a prescription, you are responsible for the cost of filling this prescription.
- **HDHP Medical Plan:** Members are responsible for 20% after the deductible, per consultation, with a physician. Additionally, if the physician writes a prescription, you are responsible for the cost of filling this prescription.

For more information about this benefit, please visit www.teladoc.com.

DENTAL PLAN



BCBSNC | 1-888-471-2738 | WWW.BLUECROSSNC.COM/MEMBERS/DENTAL-BLUE

Fidelity Bank offers an excellent Dental plan provided through BCBSNC to all full-time employees and their family members.

While there is a network associated with this plan, there is no penalty for not using the network. Whether your dentist is in or out-of-network, the benefits will be paid the same regardless. Dentists who are in-network cannot balance bill you for amounts over the allowed charges; however, non-network dentists may bill you for amounts over the allowed charges.

A brief description of your plan is as follows:

LEVEL OF COVERAGE	IN-NETWORK	OUT-OF-NETWORK
Benefit Period	1/1-12/31	
Preventive Care	100%	
Basic Care	80% after deductible	
Major Care	50% after deductible	
Orthodontia Care	50% (Child Only)	
Annual Deductible Individual Family	 $50 $150	
Annual Maximum	$1,500	
Orthodontia Lifetime Maximum	$1,500	

Timely entrants will not be subject to benefit waiting periods for preventive and basic services but will be subject to a 12-month waiting period for Major and Orthodontic services. You will be considered a timely entrant if you enroll when first eligible or upon a qualifying event. If you do not enroll at these times, you will be considered a late entrant and will be subject to a 12-month benefit waiting period for Basic, and a 24-month waiting period for Major and Orthodontic services. Please note: This applies to employees and dependents.

VISION PLAN

SUPERIOR VISION | 1-800-507-3800 | WWW.SUPERIORVISION.COM

Fidelity Bank offers a voluntary Vision plan through Superior Vision Services (SVS). Members who choose to participate in the SVS plan will benefit by the generous hardware allowances that contribute to the purchase of your contacts, lenses & frames as well as an eye exam. While a large number of people wear corrective lenses or contacts, detection is very important in catching diseases and impairments at an early stage when treatment can prevent further damage.

Select an in-network provider and present your personalized I.D. card that is provided by SVS, or you can simply give the provider your name, employer name and social security number.

The provider will then call SVS Member Services for verification of eligibility, receive an authorization number and provide services. The provider handles all claims for in-network services.

A brief description of your plan is as follows:

LEVEL OF COVERAGE	IN-NETWORK	OUT-OF-NETWORK
Exam / Lenses & Contacts / Frames Frequency	12 months / 12 months / 12 months	
Exam	$10 Copay	Exam (MD): Up to $44 Allowance Exam (OD): Up to $39 Allowance
Frames & Lenses	$10 Copay[1]	Frames: Up to $50 Allowance Single: Up to $34 Allowance Bifocal: Up to $48 Allowance Trifocal: Up to $64 Allowance Progressive: Up to $64 Allowance Lenticular: Up to $84 Allowance
Contact Lenses in lieu of lenses & frames	Up to $200 Allowance[2]	Up to $100 Allowance

[1] *Frames are covered up to a $200 Allowance and 20% off amount over Allowance*
[2] *Conventional Contacts are covered up to a $200 Allowance and 20% off amount over Allowance*
[2] *Disposable Contacts are covered up to a $200 Allowance and 10% off amount over Allowance*

SHORT-TERM DISABILITY

SHORT-TERM DISABILITY

Fidelity Bank provides a Short-Term Disability salary continuation program at no cost to eligible employees. This program is designed to reduce the financial burden associated with an extended, non-work-related illness or injury. It works in conjunction with Fidelity Bank's sick leave policy and the Family Medical Leave Act (FMLA).

Eligibility: To qualify, employees must:

- Have worked for Fidelity Bank for at least 12 months (months need not be consecutive).
- Have completed 1,250 hours of service during the 12-month period prior to the start of FMLA leave.

Waiting Period:

- The medical condition must last more than 5 business days and require leave due to the employee's own serious health condition (as defined by FMLA).
- During this time, employees can use sick time, vacation time, or unpaid time—or any combination of these. This allows employees to save vacation or sick leave for supplemental pay later or for use after their return to work.

Benefit Percentage (Based on Length of Service):

Employees will receive the applicable percentage of their regular salary during the time they are approved for and actively under the care of a healthcare provider, as outlined below. Salary continuation ends once the healthcare provider releases the employee to return to work.

- **1–4 years:** up to 4 weeks at 100% pay, remaining allowed FMLA time paid at 60%
- **5–9 years:** up to 6 weeks at 100%, remaining allowed FMLA time paid at 60%
- **10+ years:** up to 11 weeks at 100%

Employees on maternity leave may choose to remain out for the remainder of their eligible FMLA leave after being medically cleared post-childbirth or released from the care of a healthcare provider. Any continued leave taken under FMLA following the end of Short-Term Disability benefits will be unpaid unless the employee elects to use available vacation, parental, or other accrued paid time off in accordance with company policy.

Maximum Benefit:

- Up to 12 weeks (combined with 5 day waiting period)

LONG-TERM DISABILITY

RELIANCE STANDARD |1-800-353-3986 |WWW.RELIANCEMATRIX.COM

LONG-TERM DISABILITY

A group Long-Term Disability policy is provided to you as an employee of Fidelity Bank. Should you become disabled due to injury or illness, you will receive income as long as you continue to be disabled through the benefit period. This benefit is non-contributory, which means Fidelity Bank pays 100% of the cost.

BENEFITS

Benefit Percentage: 60%

Elimination Period: Benefits begin after 180-days of disability.

LIMITATIONS

Maximum Benefit: $6,000 per month.

Benefit Duration: 5 years or lesser of 60-months or to age 65.

Mental Health Limitation: Limited to 24-months.

Pre-existing Period: Diagnosis 3-months prior to enrollment, you will have a 12-month waiting period for that condition.

ADDITIONAL INFORMATION

Earnings Definition: Based on salary or benefit earnings rate for commissioned employees.

Salary Re-determination: Each plan anniversary.

Definition of Disability: Unable to perform the material duties of your own occupation, with at least 20% loss in pre-disability income.

Own Occupation: 24-month period of time, then any occupation to end of benefit period.

Partial/Residual: Partial disability accrues towards your elimination period.

Return to Work: Benefits will not offset with worker's earnings, during the 1st 12-months, up to 100% of your insured earnings.

VOLUNTARY LONG-TERM DISABILITY

RELIANCE STANDARD | 1-800-353-3986 | WWW.RELIANCEMATRIX.COM

LONG-TERM DISABILITY (BUY-UP)

As an employee of Fidelity Bank, you have access to purchase an enhanced group Long-Term Disability policy through Reliance Standard. Should you be disabled due to an injury or illness, you will receive income as long as you continue to meet the definition of disability through the benefit period. This benefit is voluntary, which means you pay the entire cost of coverage. By paying the cost on a post-tax basis, should you become disabled, you will not pay taxes on the benefit.

BENEFITS

Benefit Percentage: 60%

Elimination Period: Benefits begin after 90-days of disability.

LIMITATIONS

Maximum Benefit: $15,000 per month.

Benefit Duration: Social Security Normal Retirement Age (SSNRA), disabilities that occur after age 60, a schedule applies.

Mental Health Limitation: Limited to 24-months.

Pre-existing Period: Diagnosis 3-months prior to enrollment, you will have a 12-month waiting period for that condition.

ADDITIONAL INFORMATION

Earnings Definition: Based on salary or benefit earnings rate for commissioned employees.

Salary Re-determination: Each plan anniversary.

Definition of Disability: Unable to perform the material duties of your own occupation, with at least 20% loss in pre-disability income.

Own Occupation: 60-month period of time, then any occupation to end of benefit period.

Partial/Residual: Partial disability accrues towards your elimination period.

Return to Work: Benefits will not offset with worker's earnings, during the 1st 12-months, up to 100% of your insured earnings.

IMPORTANT NOTES

Employees who do not enroll when first initially eligible or who later elect to add coverage due to a life event or open enrollment will be required to submit Evidence of Insurability (EOI).

BASIC LIFE PLAN

RELIANCE STANDARD | 1-800-353-3986 | WWW.RELIANCEMATRIX.COM

BASIC LIFE INSURANCE

Fidelity Bank provides Basic Life and Accidental Death & Dismemberment (AD&D) insurance as part of our basic package through Reliance Standard at no cost to employees. The Basic Life/AD&D policies are payable upon death to any person you name as the beneficiary. You will designate a beneficiary when you originally enroll and have the option to change this designation at any time. Your AD&D policy refers to death by accident, in which case your benefit amount would double. This plan also allows you the opportunity to purchase life insurance for your spouse and/or dependents at set increments.

Class 1: Each Active Full-Time Employee
Class 2: Each Active Full-Time Commissioned Employee
Class 3: Retirees

BENEFITS

Basic Life Benefit:	**Class 1 & 2:** 2X annual earnings to max $500,000 (per earnings definition below)
	Class 3: 50% of life amount in force at retirement to max $250,000
Basic AD&D Benefit:	Matches Life benefit—Class 1 & 2
Guarantee Issue:	$500,000
Basic Life Maximum:	**Class 1:** $500,000 ($1,000,000 combined with Supplemental Life)
	Class 2: $500,000 ($1,000,000 combined with Supplemental Life)
	Class 3: $250,000

SPOUSE/DEPENDENT

Spouse Dependent Life:	Choice of $25,000/$20,000/ $15,000/$10,000/$2,000
Child Dependent Life:	Birth to age 26; choice of $25,000/$20,000/$15,000/$10,000/$2,000

ADDITIONAL INFORMATION

Earnings Definition:	**Class 1:** Based on Salary; **Class 2:** Based on prior 12 months earnings; New Employees: $50,000 or base salary, whichever is greater; **Class 3:** Salary at time of retirement
Salary Re-determination:	Each plan anniversary
Conversion:	**Class 1 & 2:** Upon Loss, within 31-days, you may convert your policy
Portability Benefit:	**Class 1 & 2:** Upon Loss, within 31-days, you may port your policy
Age-Reduction:	**All classes:** Benefits reduce by 35% at age 70 & 50% at age 75
Waiver of Premium:	Your premiums will be waived while you are on disability, unless you are 60+, in which case waiver is not offered
Accelerated Benefit:	**Class 1 & 2:** If diagnosed with 12-months to live due to a terminal condition, you may receive 75% of your Basic Life Benefit, maximum $500,000

Class 3: Retirees must pay the cost of Basic Life Coverage. Waiver of Premium, AD&D and the Accelerated Death Benefit are excluded from Retiree coverage.

SUPPLEMENTAL LIFE PLAN

RELIANCE STANDARD | 1-800-353-3986 | WWW.RELIANCEMATRIX.COM

SUPPLEMENTAL LIFE INSURANCE

Fidelity Bank recognizes that the amount of Basic Life Insurance offered may not be enough for your individual needs. If this is the case, you have the option to purchase additional life insurance on a voluntary basis. This coverage is provided at very low group rates through Reliance Standard.

Class 1: Each Active Full-Time Employee
Class 2: Each Active Full-Time Commissioned Employee
Class 3: Retirees

BENEFITS

Supplemental Life Benefit:	**Class 1:** 1, 2 or 3 x salary **Class 2:** Prior 12-months earnings; New Employees: $50,000 or base salary, whichever is greater **Class 3:** 50% of life amount in force at retirement
Guarantee Issue:	**Class 1 & 2:** $600,000 combined with Basic Life **Class 3:** $500,000 combined with Basic Life
Life Maximum:	**Class 1:** $1,000,000 (combined with Basic Life) **Class 2:** $1,000,000 (combined with Basic Life) **Class 3:** $500,000 (combined with Basic Life)

ADDITIONAL INFORMATION

Earnings Definition:	**Class 1:** Based on Salary; **Class 2:** Based on prior 12 months earnings; New Employees: $50,000 or base salary, whichever is greater; **Class 3:** Salary at time of retirement
Salary Re-determination:	Each plan anniversary
Conversion:	**Class 1 & 2:** Upon Loss, within 31-days, you may convert your policy
Portability Benefit:	**Class 1 & 2:** Upon Loss, within 31-days, you may port your policy
Age-Reduction:	**All classes:** Benefits reduce by 35% at age 70 & 50% at age 75
Waiver of Premium:	Your premiums will be waived while you are on disability, unless you are 60+, in which case waiver is not offered
Accelerated Benefit:	If diagnosed with 12-months to live due to a terminal condition, you may receive 75% of your Basic Life Benefit, maximum $500,000

IMPORTANT NOTES

- New Employees electing more than $600,000 (combined with Basic Life) will need to submit Evidence of Insurability (EOI).
- Employees who do not enroll when first initially eligible or who later elect to add coverage due to a life event or open enrollment will be required to submit Evidence of Insurability (EOI).

FLEXIBLE SPENDING ACCOUNT

Fidelity Bank has an excellent Flexible Spending Account. For each plan year, January 1 through December 31, you may contribute up to $7,500 to your dependent care account and up to $3,400 to your medical spending account.

During open enrollment each year, you make elections regarding the amount that you wish to contribute to your Flexible Spending Accounts. You also are allowed to change your elections for your insurance programs without having a qualified event, during our open enrollment period.

What is a Section 125/Flexible Spending Account?

A Flexible Spending Account, allowed by the IRS under section 125 of the IRS Code, allows you to increase your benefits by paying for certain services with pre-tax dollars. It also allows you to make your premium contributions for your benefit plans on a pre-tax basis, thus increasing the purchasing power of your salary.

You contribute to your Flexible Spending Account by agreeing to have a certain amount of salary withheld before taxes and deposited into your Flexible Spending Account. There are two types of Flexible Spending Accounts: 1) Medical Expense Account, and 2) Dependent Care Account.

What Are the Benefits to Me?

Your state and federal income taxes will be reduced thus, giving you more income. This is accomplished by letting you pay for your non-insured medical expenses and daycare bills with pre-tax dollars.

Make sure that you properly evaluate your expenses. Based on the IRS code, once you put your dollars into the program, you must use them within that plan year, or else you forfeit the money. **In other words, if you don't use it, you lose it.** You have 90-days after the end of the plan year to file for reimbursement of expenses incurred during the plan year. The only way to change your election during the plan year is to have a qualifying event.

Full-Purpose Health FSA (Medical/Dental/Vision): What Expenses are Eligible for a Flexible Spending Account?

- Under the medical expense account, you may pay for medical expenses not generally covered under your benefits program, including copays, deductibles and coinsurance
- Hearing Aids
- Alternative Medicine
- Eye Exams
- Dental Services including Orthodontics
- Contact Lenses or Glasses

For more FSA resources, including FSA calculators, FSA eligible expenses list, educational videos and FAQ's, please visit the Flores Library: https://www.flores-associates.com/resources.html.

FLEXIBLE SPENDING ACCOUNT

What is a Limited-Purpose Section 125/Flexible Spending Account?

Employees who currently participate in the high deductible health plan (HDHP) and contribute to an HSA cannot participate in a traditional full-purpose health FSA (i.e., a health FSA that reimburses all Code Section 213(d) medical expenses), because it is considered impermissible "other coverage" under the HSA rules. However, employees can participate in a limited-purpose health FSA, as long as the FSA reimburses only permitted coverage or preventive care without regard to the HDHP deductible.

A limited-purpose FSA is much like a full-purpose health FSA, however, under a limited-purpose FSA, eligible expenses are limited to qualifying dental and vision expenses. Medical expenses are not eligible expenses. Per IRS regulations, a person may not contribute to a health savings account (HSA) if they or their spouse is enrolled in a full-purpose health FSA. By limiting FSA reimbursements to dental and vision care expenses, a person remains eligible to participate in both a limited-purpose FSA and an HSA.

You may contribute up to $3,400 to your limited-purpose Flexible Spending Account by agreeing to have a certain amount of salary withheld before taxes and deposited into your Flexible Spending Account.

Limited-Purpose Health FSA (Dental/Vision): What Expenses are Eligible for a Flexible Spending Account?

- Eye Exams
- Dental Services including Orthodontics
- Contact Lenses or Glasses

For more FSA resources, including FSA calculators, limited purpose FSA eligible expenses list, educational videos and FAQ’s, please visit the Flores Library: https://www.flores-associates.com/resources.html.

FLEXIBLE SPENDING ACCOUNT

GRACE PERIOD

Fidelity Bank has adopted the IRS-authorized **2-month + 15-day grace period for Medical Expense Accounts.** This grace period allows participants an additional 2 months and 15-days beyond the end of the plan year to incur expenses eligible for reimbursement. This feature applies to both the full-purpose and limited-purpose Flexible Spending Accounts.

With the grace period in effect, the expenses can be incurred within the 12-month plan year OR within the 2 month + 15 day period immediately following the plan year. Effectively, with the grace period a participant has 14½ months to incur eligible expenses (rather than only 12 months).

The final deadline for submission of claims remains unchanged – 90-days following the end of the plan year. Therefore, a participant still has 90-days following the end of the plan year (15-days following the end of the grace period) during which claims may be submitted. Reminder: the "run-out period" does NOT start with the end of the grace period. The run-out period starts on the first day after the end of the plan year.

Please note that all claims for eligible Medical FSA expenses must be incurred while the employee is an active participant in the plan and must be submitted within 90-days of the date of termination unless COBRA is elected. The same 90-day rule applies to withdrawal from the plan due to a qualifying event.

DEPENDENT CARE FSA

From your dependent care account, you may deduct expenses for:

- Daycare Centers or In-Home Child Care
- Preschool Tuition
- After-School Care
- Adult Day Care

For more Dependent Care Account resources, including DCAP calculators, eligible expenses list, educational videos and FAQ's, please visit the Flores Library: https://www.flores-associates.com/resources.html.

Please Note: The description above is intended to provide a general overview of your 125 plan. For a complete description of benefits and definitions, please consult your plan document.

401K RETIREMENT PLAN

PRINCIPAL | 1-800-245-1522 | WWW.PRINCIPAL.COM

A 401k retirement account allows employees to put money aside for use during retirement years. Saving money through a 401k is convenient and easy. Employees can contribute a portion of their pay to their 401k account through payroll deduction. The maximum contribution limit is $24,500 per year. The catch-up limit for employees age 50 and over is $8,000.

Participants ages 60-63, can boost their 401k catch-up limit to $11,250. If you earned more than $150,000* in FICA wages in the prior calendar year, all catch-up contributions to a workplace plan at age 50 or older will need to be made to a Roth account in after-tax dollars.

Fidelity Bank employees are eligible to begin contributing to their 401k accounts on the first of the month following 30-days of employment. An employee becomes eligible for the match on the first of the month following one year of employment. Part time employees are eligible to contribute to 401k and are eligible for the match if they meet specific requirements.

Employees may contribute any percentage of their salary (not to exceed the IRS maximum) into this plan and may choose from a range of different investment options. After one year of service, Fidelity Bank will begin matching contributions for all full-time employees. Fidelity Bank will match 100% of your contribution up to 6%. Participants over the age of 50 can contribute an additional $8,000 for the year as a catch-up contribution to the plan.

In addition to the employer match described above, the Bank may make a discretionary contribution equal to 3% of your gross annual compensation at the end of the year, once you satisfy the one year of service eligibility and remain an active employee on December 31st of the plan year.

All Employer contributions are invested among the CAP funds selected by the employee. The employer match and the 3% non-elective employer contribution are generous contributions made on the employee's behalf. Employees are always 100% vested in any Employer Match contributions. Employees will be fully vested in the 3% non-elective Employer Contribution after they complete three years of service.

TAX BENEFITS:

Employees will enjoy substantial tax benefits when you save for retirement through a 401k. Employee contributions, any employer contributions, and all earnings are not subject to federal or state income taxes until you take them out of the Plan. Tax-deferred compounding gives your retirement money the best opportunity to grow over time.

*With a Roth 401(k), the tax benefit occurs at the time of distribution provided the distribution occurs after age 59 1/2, death or disability and generally no earlier than five years after your first Roth 401(k) contribution. The Roth option allows you to save for retirement with a post-tax contribution.

EMPLOYEE ASSISTANCE PROGRAM

All One Health | 1-855-775-4357 |WWW.ALLONEHEALTH.COM

You and your family have access to an Employee Assistance Program (EAP) provided by Reliance Standard at NO COST, whatsoever. The EAP is an employer-sponsored assessment and referral service that give employees and their covered family members confidential, individual assistance with a wide range of personal and work-related issues.

Some services included in our EAP are:

- Workplace effectiveness, enhancing communication skills
- Up to three telephonic sessions for managing stress, overcoming anxiety or depression
- Drug or alcohol dependency
- Parenting issues and family conflicts
- Strengthening personal relationships
- Physical abuse
- Financial concerns
- Legal questions
- Compulsive gambling
- Coping with grief and loss

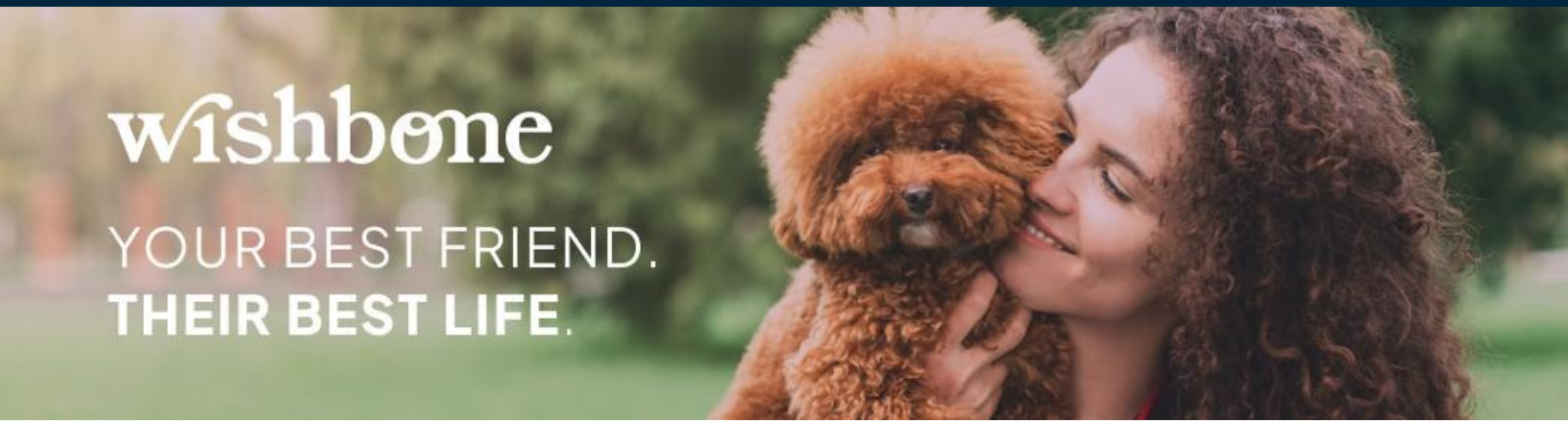
The EAP also provides expert referral services, including:

- Qualified referrals to experienced counselors (for telephone or face-to-face consultations)
- Referrals for child or elder care services
- Legal advice, including free telephone consultations and discounted legal services
- Financial counseling for assistance with debt management and budget planning
- Referrals to support groups (Alcoholics Anonymous, Overeaters Anonymous, Gamblers Anonymous, and others)

Please Note: The description above is intended to provide a general overview of your Employee Assistance Program. For more information, please consult the All One Health Brochure on BankSource.

Contact AllOne Health
855-RSL-HELP (855-775-4357)
http://allonehealth.com/reliance-matrix
Company Code: RSLI859

PET INSURANCE



WISHBONE INSURANCE | 1-800-887-5708 | WWW.WISHBONEINSURANCE.COM/FIDELITYBANK

Fidelity Bank is Offering Wishbone Pet Insurance to Employees.

Nobody wants to imagine their pet getting sick or injured - but when it comes to your pet's health, it's best to expect the unexpected.

Wishbone is accepted at any vet in the U.S., including emergency hospitals. Our simple online claims process means you get your money back fast, whether it's for routine care or an accident.

Protecting your pet's health and your finances has never been easier!

Pet Benefit Solutions: help@wishboneinsurance.com

AVAILABLE WISHBONE PLANS

Wishbone offers different plan options to fit your budget. Enroll in both for maximum benefits.

Advantage Plan

For unexpected accidents and illnesses
dogs & cats only

- Up to 70%/80% reimbursement on claims*
- $250 deductible; $10,000 annual limit
- Show your in-network ID card at an in-network vet to receive the higher reimbursement rate
- Get an instant 25% discount on eligible in-house medical services at in-network vets
- Includes 24/7 pet telehealth

Rates based on your pet's age, breed & zip code.

Wellness Plan

For regular routine visits
all pets, including exotics

ESSENTIAL PLAN	PREMIUM PLAN
Up to a $300 value	Up to a $575 value
$14/month	$25/month

Reimbursements are based on a schedule of benefits outlined during enrollment

Get a quote & enroll at www.wishboneinsurance.com/fidelitybank

*70% reimbursement rate applies to out-of-network veterinary practices; 80% reimbursement rate applies to in-network veterinary practices.

Wishbone Pet Insurance is a pet health insurance program offered by Pet Assure Corp., dba Pet Benefit Solutions, a licensed agency (NJ License Number 1677880). Insurance coverage is administered by Pet Assure Corp., dba Pet Benefit Solutions and underwritten by Everspan Insurance Company or Providence Washington Insurance Company. Please visit https://www.wisheboneinsurance.com/terms-and-conditions for more information. Wishbone's wellness plans are not insurance and are administered by Pet Benefit Solutions. WBPS-EE-BTH-B-073025

ADDITIONAL BENEFITS

VACATION

Vacation is a benefit given to all full-time employees to provide opportunities for rest, relaxation, and personal pursuits. This vacation benefit is based upon the employee's projected length of service. Vacation for a particular year is calculated based on the employee's projected length of service through December 31 of that year. The vacation year is defined as January 1 – December 31.

NEW EMPLOYEE VACATION

During the first calendar year of employment, new employees will receive the following number of vacation days based on their "benefit eligibility month" and the proration calculation as it applies to a standard 10-days of allowed vacation.

Example: Employee starts employment on February 3rd, their benefits will begin on March 1st, therefore they will receive 8 days of vacation for their first year of employment.

Benefits Eligible Month	Proration	Days	Hours
January	100.000%	10	80
February	91.667%	9	72
March	83.333%	8	64
April	75.000%	8	64
May	66.667%	7	56
June	58.333%	6	48
July	50.000%	5	40
August	41.667%	4	32
September	33.333%	3	24
October	25.000%	3	24
November	16.667%	2	16
December	8.333%	1	8

Vacation is not earned for any new employee until the completion of six (6) months of service. A newly hired employee taking vacation for the first time may choose to take vacation before the six-month service requirement has been fulfilled, upon approval by his/her supervisor. However, should an employee leave prior to the completion of six months of service, any used vacation time will be deducted from the employee's final pay.

ADDITIONAL BENEFITS

VACATION AFTER FIRST YEAR

After the first year of employment, the amount of paid vacation time employees receive each year increases with the length of their employment as shown in the following schedule:

Years of Eligible Service	Vacation Days Each Year
Less Than 1 Year	See New Employee Vacation
1 Year	11 Days
2 Years	12 Days
3 Years	13 Days
4 Years	14 Days
5 Years	15 Days
6 Years	16 Days
7 Years	17 Days
8 Years	18 Days
9 Years	19 Days
10 or More Years	20 Days

Employees become eligible for additional vacation as of January 1 of the year in which they celebrate their service anniversary. Based on prior work experience, exceptions can be made to the standard policy with approval of the Chief Human Resources Officer.

VACATION FOR OFFICERS

Officers with the title of Vice President will automatically receive 15 days of vacation in the year in which they are elected Vice President, unless the title is granted within the first calendar year of employment. If the title is granted within the first calendar year, the employee will be eligible to receive 15 days of vacation beginning in the second calendar year pending their completion of six months of service.

Officers with the title of Senior Vice President and above will automatically receive 20 days of vacation in the year in which they are elected Senior Vice President, unless the title is granted within the first calendar year of employment. If the title is granted within the first calendar year, the employee will be eligible to receive 20 days of vacation beginning in the second calendar year pending their completion of six months of service.

SICK LEAVE

Fidelity Bank provides paid sick leave benefits to all full-time exempt and non-exempt employees for periods of temporary absence due to illnesses or injuries, at a rate of 6.67 hours for each full calendar month worked. (This equates to 10 days or 80 hours per year.)

- Employees are not eligible to use any sick leave until completion of the thirty (30) day probationary period.
- Sick leave may be used for doctor appointments, personal illness and family illness. *For purposes of this policy, "family" is defined as an employee's spouse, child, mother and father.*
- Sick leave may be carried over from year to year, up to a maximum of 960 hours.

ADDITIONAL BENEFITS

PARENTAL LEAVE

Fidelity Bank recognizes the importance of bonding with a new child following their birth or adoption. We have created a Parental Leave policy that would allow eligible employees to take 2 weeks of 100% paid parental leave, regardless of whether they are eligible for FMLA benefits or not up to the FMLA maximum of 12 weeks.

Eligibility: To be eligible for parental leave benefits, an employee must be actively employed by Fidelity Bank and work more than 30 hours per week.

Maternity	Paternity	Adoption
40 hours sick leave (if available)	40 hours sick leave (if available)	2 weeks Parental Leave
Short-Term Disability **1-4 years***: 4 weeks at 100%; up to 8 weeks at 60% **5-9 years***: 6 weeks at 100%; up to 6 weeks at 60% **10+ years***: up to 12 weeks at 100%	2 weeks Parental Leave	Vacation
2 weeks Parental Leave	Vacation	Unpaid time (if FMLA qualified)
Unpaid time/Vacation	Unpaid time (if FMLA qualified)	
Up to the FMLA maximum of 12 weeks ***Based on seniority date**		

OBSERVED HOLIDAYS

Fidelity Bank follows the Federal Reserve Holiday Schedule and will grant paid holiday time off to all full- time employees on the holidays listed below:

- New Year's Day
- Martin Luther King, Jr. Day
- Presidents' Day
- Memorial Day
- Juneteenth
- Independence Day
- Labor Day
- Columbus Day
- Veterans Day
- Thanksgiving
- Christmas

FLOATING HOLIDAYS

A recognized holiday that falls on a Sunday will be observed on the following Monday. If a holiday falls on a Saturday, no day will be observed however an additional day may be given as a floating holiday. The floating holiday consists of 8 hours of paid time off and must be taken as a full day (8 hours) with manager approval at any time during the year. All active employees hired before the observed floating holiday, will receive the floating holiday. Employees hired after the observed floating holiday, are not eligible for the floating holiday in that year. If an employee uses the floating holiday but leaves the Bank before the official recognized holiday date, the employee will not have earned that floating holiday, and 8 hours of pay will be deducted from their final paycheck.

ADDITIONAL BENEFITS

FAMILY & COMMUNITY SERVICE DAYS

As part of the Fidelity Bank Service Milestone Awards program, employees will earn paid days off to use to spend time with family or serving their community. Employees can choose how they spend their service days as long as they are in 4 or 8 hour increments. Family & Community Service Awards are awarded at milestone anniversary years and based on the chart below.

Years of Eligible Service	Family & Community Service Days
5 Years	1 Day
10 Years	2 Days
15 Years	3 Days
20 Years	4 Days
25 Years	5 Days
30 Years	6 Days
35 Years	7 Days
40 Years	8 Days
45 Years	9 Days
50 Years	10 Days

PAYROLL

Fidelity Bank pays all employees once a month, on the last business day of the month. Payroll is made through direct deposit.

BANKING PACKAGE: EMPLOYEE BANKING BENEFITS

As a Fidelity Bank employee, you're eligible for premium banking benefits, including:

- Employee checking account
- Free nationwide ATM usage
- Digital banking solutions
- Mortgage discounts
- Access to Fidelity Bank Perks

To learn more or open an account, visit our Employee Banking Benefits site. If you're already a Fidelity Bank customer, contact Fidelity Direct to ensure your account is properly coded for employee benefits.

Note: While there is no minimum balance requirement, you must make a deposit within 45 days of opening your account to keep it active.

EMPLOYEE BENEFIT COST

Employee contributions are the employee's share of premium cost and are made through payroll deductions. Payroll deductions, as listed below, are deducted on a pre-tax basis. Life insurance benefits are deducted on a post-tax basis.

MEDICAL PPO PLAN (BCBSNC)	EMPLOYEE MONTHLY CONTRIBUTION
Employee	$210.00
Employee / Spouse	$755.00
Employee / Children	$640.00
Family	$955.00

MEDICAL HDHP PLAN (BCBSNC)	EMPLOYEE MONTHLY CONTRIBUTION
Employee	$160.00
Employee / Spouse	$650.00
Employee / Children	$575.00
Family	$785.00

DENTAL (BCBSNC)	EMPLOYEE MONTHLY CONTRIBUTION
Employee	$31.06
Employee / Spouse	$75.73
Employee / Children	$89.95
Family	$134.57

VISION (SUPERIOR VISION)	EMPLOYEE MONTHLY CONTRIBUTION
Employee	$11.90
Employee / Spouse	$25.58
Employee / Children	$19.25
Family	$35.14

EMPLOYEE BENEFIT COST

All benefits listed below are with Reliance Standard.

BASIC LTD	EMPLOYEE MONTHLY CONTRIBUTION
Employee	$0.00, Fidelity Bank pays 100% of the costs

VOLUNTARY LTD	EMPLOYEE MONTHLY COST
Employee	To calculate your cost, take your annual base salary, divide by 12 and multiply by 60% (this number may not exceed $15,000). This will be your monthly benefit. Divide the monthly benefit by 100. Then multiply this amount by $0.372 to calculate your monthly cost.

BASIC LIFE	EMPLOYEE COST
Employee	$0.00, Fidelity Bank pays 100% of the costs

SPOUSE/DEPENDENT LIFE	EMPLOYEE MONTHLY CONTRIBUTION
$25,000 Spouse/ $25,000 Child(ren)	$8.60
$20,000 Spouse/ $20,000 Child(ren)	$7.63
$15,000 Spouse/$15,000 Child(ren)	$5.76
$10,000 Spouse/ $10,000 Child(ren)	$3.89
$2,000 Spouse/$2,000 Child(ren)	$0.42

EMPLOYEE SUPPLEMENTAL LIFE	EMPLOYEE CONTRIBUTION (PER $1,000)
0-29	$0.10
30-34	$0.13
35-39	$0.15
40-44	$0.28
45-49	$0.37
50-54	$0.49
55-59	$0.61
60-64	$0.88
65-69	$1.36
70+	$2.45

NOTES

This document is an outline of the coverage proposed by the carrier(s), based on information provided by your company. It does not include all the terms, coverages, exclusions, limitations, and conditions of the actual contract language. The policies themselves must be read for those details. The intent of this document is to provide you with general information about your employee benefit plans. It does not necessarily address all the specific issues which may be applicable to you. It should not be construed as, nor is it intended to provide, legal advice. Questions regarding specific issues should be addressed by legal counsel who specialize in this practice area.