

# Augsburg Fortress

## PUBLISHERS

### Benefits Overview 2026

#### MN Employees

Eligibility: Full-Time Regular Employees working 30+ Hours per Week

Begin: The first of the month following 30 days of employment. If the first workday of the month falls on a regularly scheduled holiday or a weekend, benefits will begin the first of the month following.

| High Deductible Health Care Plan                    |                      |                      |
|-----------------------------------------------------|----------------------|----------------------|
| Benefits Highlights                                 | In Network           | Out of Network       |
| Annual Deductible<br>(Individual/Family)            | \$4,000/\$8,000      | \$13,000/26,000      |
| Annual Out-Of-Pocket Maximum<br>(Individual/Family) | \$8,000/\$16,000     | \$20,000/\$40,000    |
| Co-insurance                                        | 25% after deductible | 50% after deductible |
| Employee Monthly Premiums                           | Select Network       | Open Access Network  |
| Employee Only                                       | \$148                | \$195                |
| Employee + 1                                        | \$447                | \$540                |
| Family                                              | \$706                | \$851                |

| Health Savings Account (HSA)                                                                                                                                                                                                              |                        |                               |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|-------------------------------|
| An HSA allows you to set aside pre-tax money to be used for qualifying medical expenses now or in the future.                                                                                                                             |                        |                               |
| Augsburg Fortress Publishers HSA Contributions                                                                                                                                                                                            | Employee Only Coverage | Employee + Dependent Coverage |
| Semi-Annual Contribution<br>(January & July)                                                                                                                                                                                              | \$330                  | \$660                         |
| Total HSA Contribution                                                                                                                                                                                                                    | \$660                  | \$1,320                       |
| Including employer contributions, employees can set aside up to the IRS maximum \$4,400.00 for single coverage and \$8,750.00 for family coverage. If you are 55 or older you can make an additional catch-up contribution of \$1,000.00. |                        |                               |

| Dental Plan                              |                  |                |                      |                |
|------------------------------------------|------------------|----------------|----------------------|----------------|
| Benefit Highlights                       | Delta Dental PPO |                | Delta Dental Premier |                |
|                                          | In Network       | Out of Network | In Network           | Out of Network |
| Annual Deductible<br>(Individual/Family) | \$0              | \$25/\$75      | \$25/\$75            | \$25/\$75      |
| Annual Maximum Per Person                | \$1,500          | \$1,500        | \$1,500              | \$1,500        |
| Level of Coverage                        | Employee Only    | Employee + 1   | Family               |                |
| Employee Monthly Premium                 | \$15             | \$30           | \$50                 |                |

| Vision Plan                  |               |                                                       |                       |         |
|------------------------------|---------------|-------------------------------------------------------|-----------------------|---------|
| Benefit Highlights           |               | In Network                                            |                       |         |
| Exam/Plus Providers Exam     |               | \$10/\$0                                              |                       |         |
| Contact Lens- Standard       |               | Up to \$40- contact lens fit and two follow-up visits |                       |         |
| Frame                        |               | \$0 copay; 20% off balance over \$150 allowance       |                       |         |
| Contact Lenses- Conventional |               | \$0 copay; 20% off balance over \$150 allowance       |                       |         |
| Level of Coverage            | Employee Only | Employee +Spouse                                      | Employee + Child(ren) | Family  |
| Employee Monthly Premium     | \$7.80        | \$14.82                                               | \$15.60               | \$22.93 |

| Disability Benefits                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Short Term Disability</b><br>The STD plan is a company-paid benefit that provides income replacement if you can't perform your job for more than 7 consecutive days due to a medically certified condition. You'll receive 50% of your normal earnings. In the case of state paid leave benefits, STD salary continuation may be used as a supplement to state paid leave benefits, with STD salary continuation supplementing those state-provided benefits up to a maximum of 50% of regular salary. |
| <b>Long Term Disability</b><br>The LTD plan is a company-paid benefit that provides income if you're unable to perform your job for over 90 consecutive days due to a medically certified condition. It offers 60% of your monthly earnings, up to \$6,000, and is considered taxable income.                                                                                                                                                                                                             |

| Life and Accidental Dismemberment Insurance (AD&D)                                                                                                                                                                                                                                                                                                                                                           |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Basic Life and AD&amp;D</b><br>Augsburg Fortress Publishers provides company-paid Basic Life and AD&D Insurance, providing financial protection in the event of your death. Coverage is 1x your base annual salary, plus an additional 1x for accidental death.                                                                                                                                           |
| <b>Supplemental Life and AD&amp;D Insurance for employees and dependents</b><br>Augsburg Fortress Publishers offers Supplemental Life Insurance and AD&D for you and your dependents, providing financial protection in the event of death. Guarantee issue amounts are \$170,000 for employees, \$30,000 for spouses, and full benefits for children. Premiums vary based on coverage amount and age bands. |

| Group Critical Illness Insurance                                                                                                                                                                                                                                                           |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Voluntary Critical Illness Insurance offers a fixed lump-sum benefit upon diagnosis of a critical illness, such as a heart attack or stroke. Guaranteed issue amounts are \$20,000 for employees and spouses, with full benefits for children. Costs vary based on coverage and age bands. |

| Group Hospital Indemnity Insurance                                                                                                                                                 |               |                  |                       |         |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|------------------|-----------------------|---------|
| Voluntary hospital indemnity insurance provides a range of fixed lump-sum daily benefits to help cover costs associated with a hospital admission, including room and board costs. |               |                  |                       |         |
| Level of Coverage                                                                                                                                                                  | Employee Only | Employee +Spouse | Employee + Child(ren) | Family  |
| Employee Monthly Premium                                                                                                                                                           | \$18.90       | \$38.73          | \$27.61               | \$46.89 |

| Group Accident Insurance                                                                                                                                                          |               |                  |                       |         |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|------------------|-----------------------|---------|
| Pays a lump-sum benefit to help with the out-of-pocket medical and/or non-medical expenses for injuries resulting from a covered accident or for accidental death & dismemberment |               |                  |                       |         |
| Level of Coverage                                                                                                                                                                 | Employee Only | Employee +Spouse | Employee + Child(ren) | Family  |
| Employee Monthly Premium                                                                                                                                                          | \$6.95        | \$10.94          | \$15.52               | \$19.69 |

#### **Flexible Spending Accounts (FSA)**

Allows you to set aside tax-sheltered money to be reimbursed for eligible dental, vision, dependent childcare expenses, and eligible parking expenses.

#### **Health Care FSA**

Employees can elect to set aside up to \$3,400 in pre-tax dollars per plan year, with the amount withheld equally from 24 paychecks.

#### **Dependent Care Reimbursement Account**

Employees can elect to set aside up to \$7,500 in pre-tax dollars per plan year, with the amount withheld equally from 24 paychecks.

#### **Parking Reimbursement Account**

Employees can elect to set aside up to \$340 in pre-tax dollars per month, with the amount withheld equally from 24 paychecks.

#### **Transit Pass Benefit**

Metro Transit allows employees to use pre-tax dollars for a monthly MetroPass or Stored Value cards. MetroPass costs \$83 per month for unlimited bus and rail use, while Go-To Stored Value cards can be purchased in \$10 increments.

#### **403(b) Retirement Savings Plan**

To enroll in the plan, you must be 21. New employees are automatically enrolled at a 6% deduction starting the first payroll after 30 days. You can change your deferrals anytime. In 2026, contributions can range from 1% to 100% of your compensation, up to the IRS limit of \$24,500. Those aged 50 or older can make an additional \$7,500 in catch-up contributions. For every \$1 you contribute, Augsburg Fortress Publishers matches \$0.50, up to 6%. Employer contributions are 100% vested from the start.

#### **Paid Time Off**

##### **Company Holidays**

The office is closed for 11 company holidays each year, during which employees receive paid time off.

##### **Sick Days:**

All regular full-time employees accrue 8 hours per month.

##### **Vacation Days:**

Employees with less than 5 years of service accrue 11.4 hours per month, capped at 280 hours. Those with 5 or more years of service accrue 14.7 hours per month, also up to a maximum of 280 hours.

##### **Volunteer Day:**

Augsburg Fortress Publishers acknowledge that community issues impact our organization's success. As a result, regular full-time employees are allowed one paid day each year for volunteer activities.

#### **Employee Assistance Program (EAP)**

HealthPartners Employee Assistance Program (EAP) is a proven strategy for assisting employees and their families with personal and work-related problems, difficulties and concerns which can and do affect their work performance. Augsburg Fortress Publishers' EAP partner can be reached by phone, text or online.

#### **Well-Being Offerings**

Augsburg Fortress Publishers promotes a culture of wellbeing for all employees and sponsors a variety of activities throughout the year. Principal, our retirement plan platform provides a variety of financial tools.

#### **Employee Purchase Privileges**

All Augsburg Fortress Publishers employees are eligible to receive a 50 percent discount and free shipping on purchases of Augsburg Fortress Publishers products only.

*This sheet is intended to provide a summary of each of the benefit plans. Although care was taken to correctly describe these plans, you should consult the actual certificate of coverage for full details.*