

# Welcome to Sherwin-Williams!

For over 150 years, we’ve grown stronger as a company due to one important element: our employees. It’s our goal to look out for you and your family, and that starts with a host of world-class benefits designed for real life. From health care coverage to retirement savings, from disability insurance to wellness programs—we’ve created benefit options designed to help you and your family live healthier, save smarter and feel better. Step inside our comprehensive benefits, and see how we can help you plan ahead, save for and protect what’s most important to you.



**Access your benefits through your smartphone, computer or tablet [myswbenefits.com](https://myswbenefits.com) or call 1-844-358-0604.**

## When Should I Enroll in Health and Welfare Benefits?

You have **30 days from the first day of your full-time status or ACA Eligible Date** to complete your benefits enrollment or your electable benefits will be waived and you will not have coverage. The next opportunity to enroll in health care benefits is the annual Open Enrollment held each October/November for the following plan year or when you experience a qualified status change, detailed on [page 26](#) of this document.

Full-time employees and their eligible family members who are enrolled via [myswbenefits.com](https://myswbenefits.com) are covered on the first day of the month following the first full day at work. **If you begin work on the first day of the month, your coverage begins on that day if enrolled.**

**Note:** This document presents only the highlights of some of the benefits Sherwin-Williams provides to U.S. employees. It is not intended to take the place of the official plan documents, insurance policies and contracts that govern the individual plans. As stated in the Plan’s official documents, Sherwin-Williams reserves the right to amend, modify or terminate the Plan at any time and for any reason. Participation in any Company-sponsored benefit plan is not a promise, guarantee or agreement of continued employment with The Sherwin-Williams Company. Valspar benefits programs information can be obtained by visiting [myswbenefits.com](https://myswbenefits.com) and [401k.com](https://401k.com).

**Effective January 1, 2022**  
U.S. NON-UNION AND COLLECTIVELY BARGAINED EMPLOYEES

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# Non-Union Employees Benefits Eligibility Guide

**U.S. 50 States: Non-Union Employees** (unless bargained for by a collective bargaining unit)

Benefit	Regular Full-Time	Regular Part-Time	ACA 30 Hours + Rule	Temporary Full-Time and Temporary Part-Time	Co-op/ Intern
<b>The Sherwin-Williams Company 401(k) Plan</b>	•	•	•	•	•
<b>Non-Union Employees' Revised Pension Investment Plan (PIP)</b>	•	•	•	•	•
<b>S-W Medical &amp; HMO Plans</b>	•		•		
<b>S-W Dental and DMO Plans</b>	•		•		
<b>S-W Vision Plans</b>	•		•		
<b>Teladoc Medical Experts</b> (For Employees and Dependents enrolled in Advantage, Prime or the Standard Medical Plans)	•		•		
<b>S-W Health Savings Account (HSA)</b>	•		•		
<b>Flexible Spending Accounts (FSA)</b>	•		•		
<b>Basic Employee Life Insurance</b>	•				
<b>Optional Accidental Death and Dismemberment Insurance</b>	•				
<b>Optional Employee Life Insurance</b>	•				
<b>Optional Spouse/Domestic Partner Spouse Life Insurance</b>	•				
<b>Optional Dependent Child(ren)/ Domestic Partner Child(ren) Life Insurance</b>	•				
<b>Short Term Disability</b>	•				
<b>Long Term Disability</b>	•				
<b>Supplemental Long Term Disability</b>	•				
<b>Critical Illness Insurance</b>	•				

Benefit	Regular Full-Time	Regular Part-Time	ACA 30 Hours + Rule	Temporary Full-Time and Temporary Part-Time	Co-op/ Intern
<b>Accident Insurance</b>	•				
<b>Hospital Indemnity</b>	•				
<b>MetLife® Legal Plan</b>	•				
<b>Auto and Home Insurance</b>	•	•	•	•	•
<b>Pet Insurance</b>	•	•	•	•	•
<b>Business Travel Accident Insurance</b>	•				
<b>Identity Theft Protection</b>	•				
<b>Permanent Life Insurance</b>	•				
<b>World Business Travel Plan*</b>	•				
<b>ASK Work/Life Solutions</b>	•	•	•		
<b>Adoption Assistance</b>	•				
<b>Balance 4 Well-Being</b>	•	•	•	•	•
<b>Quit For Life Tobacco Cessation</b>	•	•			
<b>Credit Union</b>	•	•	•	•	•
<b>Flu Shots</b>	•	•	•	•	•
<b>529 College Savings</b>	•	•	•	•	•
<b>WageWorks Commuter Benefits</b>	•	•	•	•	•
<b>WW (Weight Watchers®)</b>	•	•			
<b>S-W Benefits Discount Hub</b>	•	•	•	•	•

\* The World Business Travel Plan is available for Regular Full-time employees and dependents traveling with employee on approved business travel up to age 70.

# Collectively Bargained Employees\*\* Benefits Eligibility Guide

## U.S. 50 States: Collectively Bargained Employees

Benefit	Regular Full-Time	Regular Part-Time	ACA 30 Hours + Rule	Temporary Full-Time and Temporary Part-Time	Co-op/ Intern
<b>Hourly 401k Plan</b>	•	•	•	•	•
<b>The Sherwin-Williams Company Employees' Pension Plan (EPP)</b>	•	•	•	•	•
<b>S-W Medical &amp; HMO Plans</b>	•		•		
<b>S-W Dental and DMO Plans</b>	•		•		
<b>S-W Vision Plans</b>	•		•		
<b>Teladoc Medical Experts</b> (For Employees and Dependents enrolled in Advantage, Prime or the Standard Medical Plans)	•		•		
<b>S-W Health Savings Account (HSA)</b>	•		•		
<b>Flexible Spending Accounts (FSA)</b>	•		•		
<b>Basic Employee Life Insurance</b>	•				
<b>Voluntary AD&amp;D</b>	•				
<b>Short Term Disability</b>	•				
<b>Total Permanent Disability†</b>	•				
<b>Critical Illness Insurance</b>	•				
<b>Accident Insurance</b>	•				

Benefit	Regular Full-Time	Regular Part-Time	ACA 30 Hours + Rule	Temporary Full-Time and Temporary Part-Time	Co-op/ Intern
<b>Hospital Indemnity</b>	•				
<b>MetLife® Legal Plan</b>	•				
<b>Auto and Home Insurance</b>	•	•	•	•	•
<b>Pet Insurance</b>	•	•	•	•	•
<b>Identity Theft Protection</b>	•	•	•	•	•
<b>Permanent Life Insurance</b>	•				
<b>ASK Work/Life Solutions</b>	•	•	•		
<b>Balance 4 Well-Being</b>	•	•	•	•	•
<b>Quit For Life Tobacco Cessation</b>	•	•			
<b>Credit Union</b>	•	•	•	•	•
<b>Flu Shots</b>	•	•	•	•	•
<b>529 College Savings</b>	•	•	•	•	•
<b>WageWorks Commuter Benefits</b>	•	•	•	•	•
<b>WW (Weight Watchers®)</b>	•	•			
<b>S-W Benefits Discount Hub</b>	•	•	•	•	•

\*\* Please refer to your Collective Bargaining Agreement for information on plans for which you are eligible.

† Bedford, Chicago, Morrow depending on employee's years of service

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# When to Enroll

## U.S. 50 States: Non-Union and Collectively Bargained Employees

Benefit	Enrolled Automatically (if eligible)	MUST enroll via myswwbenefits.com <sup>‡</sup> during annual Open Enrollment or within 30 days of your full-time status or ACA eligible date
<b>The Sherwin-Williams Company 401(k) Plan*</b>	•	
<b>Non-Union Employees' Revised Pension Investment Plan (PIP)*</b>	•	
<b>Hourly 401k Plan</b>	•	
<b>The Sherwin-Williams Company Employees' Pension Plan (EPP)</b>	•	
<b>S-W Health Savings Account</b>		•
<b>S-W Medical &amp; HMO Plans</b>		•
<b>S-W Dental and DMO Plans</b>		•
<b>S-W Vision Plans</b>		•
<b>International Business Travel Medical Plan</b>	•	
<b>Optional Employee Life Insurance</b>		•
<b>Optional Dependent Child(ren)/Domestic Partner Child(ren) Life Insurance</b>		•
<b>Optional Spouse/Domestic Partner Spouse Life Insurance</b>		•
<b>Basic Employee Life Insurance</b>	•	
<b>Voluntary AD&amp;D</b>		•
<b>Short Term Disability</b>	•	

Benefit	Enrolled Automatically (if eligible)	MUST enroll via myswwbenefits.com <sup>‡</sup> during annual Open Enrollment or within 30 days of your full-time status or ACA eligible date
<b>Long Term Disability</b>	•	
<b>Supplemental Long Term Disability</b>		•
<b>Flexible Spending Accounts</b>		•
<b>Business Travel Benefits</b>	•	
<b>Teladoc Medical Experts</b> (For Employees and Dependents enrolled in Advantage, Prime or the Standard Medical Plans)	•	
<b>Critical Illness Insurance</b>		•
<b>Accident Insurance</b>		•
<b>Hospital Indemnity</b>		•
<b>MetLife Legal Plan</b>		•
<b>Adoption Assistance</b>	•	
<b>Auto and Home Insurance</b>		•
<b>Pet Insurance</b>		•
<b>Identity Theft Protection</b>		•
<b>Permanent Life Insurance</b>		•
<b>S-W Benefits Discount Hub</b>		•

\* You may log on to [www.401k.com](http://www.401k.com) or call the Customer Service Support Line at 1-800-323-4015 to change your payroll deferrals and choose your investments at any time after you are enrolled in these benefits.

‡ See page 5 for details on how to enroll in these benefits via myswwbenefits.com.

# How to Enroll in Your Benefits\*

Benefits Enrollment is accessed online through [myswbenefits.com](https://myswbenefits.com). Plan information is available on this site as well.

**IMPORTANT: You must enroll in your health and welfare benefits within 30 days of your full-time status or ACA Eligible Date. If you fail to enroll during the 30-day enrollment period, your electable benefits will be waived and you will not have coverage.**

Full-time employees and their eligible family members who are enrolled via [myswbenefits.com](https://myswbenefits.com) are covered on the first day of the month following the first full day at work. **If you begin work on the first day of the month, your coverage begins on that day if enrolled.**

It is highly recommended that employees enroll in benefits as soon as possible since there will be back deductions taken out of a future paycheck for the time that the employee has held coverage.

The next opportunity to enroll in health care and optional insurance is the annual Open Enrollment held each fall for the following plan year or when you experience a qualified status change, detailed on [page 26](#) of this document.

\* You are automatically enrolled in some benefits. Please see [page 4](#) for details. Retirement and Savings Plan enrollment is automatic and employees will be provided enrollment materials from Fidelity Investments. See the [My Retirement](#) section in this guide for more information.

**Questions? Contact Customer Service at 844-358-0604, 8:00 a.m. – 5:00 p.m. Eastern Time, Monday – Friday.**

**To access My S-W Benefits:**

- 1. Visit [myswbenefits.com](https://myswbenefits.com) and click “Log On.”**  
Use your Digital Workplace ID and password to access your personalized account. Your Digital Workplace ID is your full company email address.

You can also use your My S-W Benefits User ID and password by entering the information on the page.

If you want to create a User ID and Password click “New User?”

- 2. You can also access My S-W Benefits through the app, Alight Mobile, from Alight (our third-party benefits administrator).**  
Download the app from the Apple App Store or Google Play, then use it to enroll, check your health coverage, search for doctors.

**Health Coverage Resources for part-time employees or retirees not eligible for company sponsored medical:**  
[www.healthcoverageresources.com/sherwin/home](https://www.healthcoverageresources.com/sherwin/home)

eHealth: 1-877-731-9565  
*Questions on plans and pricing*

S-W Benefits Service Center: 1-844-358-0604  
*Coverage calculator and site navigation*

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Benefit	Coverage
<b>Medical, Dental and Vision Coverage</b>	<ul style="list-style-type: none"> <li>Your coverage ends on the last day of your last month as an active employee at Sherwin-Williams. Your covered dependents lose coverage on the same day. If your last day of employment happens to be the last day of the month, your coverage will end that day.</li> <li>Paycheck deductions for your healthcare coverage end with your final paycheck. These deductions are for your healthcare coverage through the end of your last month of coverage.</li> <li>You may be able to continue coverage for yourself and your dependents by signing up for COBRA (Consolidated Omnibus Budget Reconciliation Act). You'll get a COBRA enrollment packet in the mail about two weeks from your last day at work. There are other healthcare enrollment options offered externally through Health Coverage Resources. Login to <a href="http://myswbenefits.com">myswbenefits.com</a> and click on the Health Coverage Resources tile for more information. You can also choose to enroll in a Marketplace plan at <a href="http://www.healthcare.gov">www.healthcare.gov</a>.</li> </ul>
<b>Health Savings Account (HSA)</b>	<ul style="list-style-type: none"> <li>The money in your health savings account is yours to keep.</li> <li>You have the option to keep your health savings account with Fidelity (additional fees may apply). Call Fidelity at 1-800-323-4015 for more information.</li> </ul>
<b>Healthcare Flexible Spending Account (HC FSA) Dependent Care Flexible Spending Account (DC FSA)</b>	<ul style="list-style-type: none"> <li>Your healthcare FSA coverage ends on the last day of the month in which you stop working at Sherwin-Williams. You can only be reimbursed for expenses incurred on or before the last day of the month in which you stop working.</li> <li>Your dependent care FSA coverage ends on your last day of work. You can only be reimbursed for expenses incurred on or before your last day of work.</li> </ul>
<b>Basic and Optional Life Insurance Accidental Death &amp; Dismemberment Insurance (AD&amp;D)</b>	<ul style="list-style-type: none"> <li>Your coverage ends on the last day of the month in which you stop working at Sherwin-Williams. If eligible, you will receive information about portability coverage and conversion rights in the mail about two weeks after your last day at work.</li> </ul>
<b>Short- and Long-Term Disability</b>	<ul style="list-style-type: none"> <li>Your coverage ends on your last day of work.</li> </ul>
<b>Voluntary Benefits (Legal, Hospital Indemnity, Critical Illness, Accident, Pet, Auto/Home and Identity Theft Protection)</b>	<ul style="list-style-type: none"> <li>Your coverage ends on the last day of the month in which you stop working at Sherwin-Williams</li> <li>You may be able to keep your voluntary benefits after you leave Sherwin-Williams by paying the vendor directly via monthly billing.</li> </ul>
<b>Employee Assistance Program</b>	<ul style="list-style-type: none"> <li>Your coverage ends two months after your last day of work at the end of the month.</li> </ul>
<b>401(k) Savings Plan</b>	<ul style="list-style-type: none"> <li>Your eligibility ends on your pay through date (last day worked + unused vacation and personal holidays).</li> </ul>
<b>Pension Plan</b>	<ul style="list-style-type: none"> <li>Your eligibility ends on your pay through date (last day worked + unused vacation and personal holidays).</li> </ul>

NOTE: Collectively Bargained Employees: The information on this page is for Non-Union Employees only. Please refer to your Union Contract for information regarding the coverage end dates of your benefits.

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# The Sherwin-Williams Company 401(k) Plan

## For Non-Union Employees Only\*

The Sherwin-Williams Company 401(k) Plan (the Plan) provides you the opportunity to save money from your paycheck for retirement. This Plan is also intended to be an Employee Stock Ownership Plan (ESOP) as defined by the Internal Revenue Code (IRC) and provides you the opportunity to become a shareholder of the Company and participate in the Company's growth. The Plan, along with your pension plan, Social Security and other personal savings, can provide an important source of income at retirement.

## Plan Eligibility

To be eligible to participate in the Plan, you must be:

- a full-time, part-time, temporary, or co-op employee of the Company or a subsidiary of the Company which has adopted the Plan,

- a citizen of the United States if you are working abroad, under certain circumstances described in the Plan, or a non-US citizen working in the United States.

## When Does Coverage Begin?

If you have not enrolled in the Plan within 45 days of your date of hire, you will automatically be enrolled in the 401(k) Plan at 3% of your pay. An enrollment kit from Fidelity Investments will be sent to your home address within a few weeks of your hire date. Simply log on to [www.401k.com](http://www.401k.com) or call the Customer Service Support Line at 1-800-323-4015 to change your payroll deferrals and choose your investments.

If you do not wish to participate in the Plan you must contact Fidelity and change your contribution rate to 'zero'. To opt out of the plan, access your account online at [www.401k.com](http://www.401k.com) or call 1-800-323-4015.

## Your Contributions

You will be automatically enrolled in the Sherwin-Williams Company 401(k) Plan at 3% of your pretax eligible earnings. You may increase your payroll deduction in half percent increments (up to 50%) at any time.

The IRS limits the amount of money allowed to be contributed to an employee's account within a calendar year. No more than \$20,500 in total employee contributions are allowed for 2022. Highly compensated employees as defined by the Internal Revenue Code may have additional limitations.

## Annual Increase Program

As a participant in the Plan, you are automatically enrolled in the Annual Increase Program which increases your contribution by 1% each year until you reach 10%. You may choose to increase the annual increase to 2% or 3%, or you may opt out of the program all together. The annual increase will occur in December unless you choose to change the date.

## Company Matching Contributions

Company matching contributions help you maximize your savings. Company matching contributions commence at the beginning of the quarter following your one-year anniversary with the Company. The Company matches dollar for dollar up to the first 6% of creditable compensation that you contribute to the Plan.

## Roth 401(k)

Another option you have is the Roth 401(k). This feature allows you to make after-tax contributions (via payroll deductions) to your Plan now, then takes those contributions and associated earnings completely tax free at retirement. A tax-free distribution of these monies may be made five tax years after the year of the first Roth contribution, or after you have attained age 59 ½, become disabled or decease.

## Catch-up Contributions

If you are age 50 years old or older, or will reach 50 during the calendar year, you may

\* **Collectively Bargained Employees:** The Sherwin-Williams Company 401(k) Plan is for Non-Union Employees only. Please refer to pages 11-15 for retirement plan options.

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## The Sherwin-Williams Company 401(k) Plan *continued*

elect to make additional contributions to the Plan. These “catch-up” contributions are made to the Plan on either a pre-tax or after-tax basis, are NOT matched by the Company, and are not considered when determining your limits on how much you can contribute to the Plan. The IRS maximum annual catch-up contribution is \$6,500 for 2022.

### Your Investments

You can direct the investment of all your plan contributions. The Plan offers a wide variety of funds from which to select, representing all of the primary asset classes (short-term investments, bonds and stocks). Since fund options can change, you will be provided with a complete list of available fund options once you are eligible to participate in the Plan. You can change the investment of your contributions on any business day. If you don't provide an investment direction, your contributions will be automatically invested in a target date fund based on the year you will reach age 65 and company matching contributions will be automatically invested in Company stock. However, you can choose to direct the investment of your contributions and Company contributions to any investment available within the Plan at any time.

### Vesting

Vesting gives you ownership of the funds in your Plan account. That means you can take your vested account balance with you when you leave the Company. Please note that you are always 100% vested in your contributions. If your service date is prior to January 1, 2017, your Company matching contributions are always 100% vested. If your service date is January 1, 2017 or later, your Company matching contributions become 100% vested once you reach the third anniversary of your service date. There is no partial vesting, so if you leave the Company before reaching the third anniversary of your service date, you forfeit the unvested benefit.

If you were part of an acquired plan that did not have a vesting schedule, your Company matching contributions are 100% vested.

### Fund Access While You Are Working

The Plan provides for loans and limited withdrawals. See the SPD for more information on accessing funds from your account or call the Customer Service Support Line at 1-800-323-4015.

- If you are on a paid leave of absence, contributions will continue to be deducted from your creditable earnings. If you are on a military leave of absence, special rules may apply. While you are on a leave of absence you can continue to make withdrawals from the Plan and transfer funds among the Plan's investment options.
- If your employment has not terminated and you are considered totally disabled, you will remain a participant in the Plan. If you are considered totally disabled you may request a full distribution of your account. Please call 1-800-323-4015 for more information.

### Fund Access When You Leave the Company

- If you retire from the Company, you can choose to withdraw your account at any time after your retirement date.
- If you leave the Company for any reason other than retirement, the vested value of your account will automatically be distributed to you if the total value is \$5,000 or less. Vested account balances above \$5,000 will remain in the Plan and will require your consent before your account can be distributed.

### Account Information

Once you begin participation, your account is valued at the end of every business day. To obtain account benefit information anytime, day or night, or to obtain other plan information, log on to [www.401k.com](http://www.401k.com) or call the Customer Service Support Line at 1-800-323-4015.

Statements are always available online at [www.401k.com](http://www.401k.com). If you don't use the Internet, you will receive a statement at the end of the quarter showing your balance at the beginning of the quarter, the account activity for the quarter and the ending balance for the quarter. Your statement will be sent to you within a reasonable time after the close of the quarter.



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# S-W Pension Plan

## For Non-Union Employees Only\*

The Sherwin-Williams Company Non-Union Employees’ Revised Pension Investment Plan (the Plan) is a savings vehicle to help you accumulate funds for your retirement.

You make no contributions to this Plan. All contributions to your account are made by the Company for each year that you meet the eligibility requirements for a contribution. Assets in your Plan account accumulate tax free until they are distributed.

Your Plan account, along with your Sherwin-Williams Company 401(k) Plan (if participating), Social Security and any other personal savings, can provide an important source of income at retirement.

### Plan Eligibility

As an employee of the Company, you are eligible to participate in the Plan if:

- you are a full-time, part-time, temporary, or co-op employee of the Company or

subsidiary of the Company which has adopted the Plan

- you are not a member of a collective bargaining unit unless eligibility for the Plan is extended to such members through negotiation
- you are a citizen of the United States working abroad, under certain circumstances described in the Plan, or a non-US citizen working in the United States.

### Contribution Eligibility

The Company will make a contribution to your account when:

- you complete 6 months of service with the Company, and
- you complete at least 1,000 hours of service during the calendar year as a Company employee, and
- you are employed on the last day of the Plan year.

The annual Company-funded contribution generally occurs by the end of the quarter following the Plan year for eligible participants.

### Company Contribution

The contribution will be based on a percentage of your compensation determined according to your age and years of service, as shown in the table below:

Combination of Age and Service		
From	To	Contribution Percentage
18.0	34.9	2.0%
35.0	44.9	2.5%
45.0	54.9	3.0%
55.0	64.9	3.5%
65.0	74.9	4.0%
75.0	84.9	5.0%
85.0	94.9	6.0%
95.0	& Up	7.0%

### How do I designate my beneficiary?

If you have not already selected your beneficiaries for your 401(k) Plan, or if you have experienced a life-changing event such as a marriage, divorce, birth of a child, or death in the family, it’s time to consider your beneficiary designations.

You can designate your savings and pension plan beneficiaries online and receive instant online confirmation and check your beneficiary information virtually any time. Simply log on to NetBenefits at [www.401k.com](http://www.401k.com) and click on “Your Profile” and then “Beneficiaries.” If you do not have access to the Internet or prefer to complete your beneficiary information by paper form, please contact Fidelity at 1-800-323-4015.

\* **Collectively Bargained Employees:** The S-W Pension Plan is for Non-Union Employees only. Please refer to pages 11-15 for retirement plan options.

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### Investing Your Funds

You can direct the investment of the Plan contributions. Investment information will be sent to you by Fidelity Investments 180 days after your hire date.

The Plan offers a wide variety of funds from which to select, representing all of the primary asset classes (short-term investments, bonds and stocks).

You can change the investment direction of your benefit on any business day by visiting [www.401k.com](http://www.401k.com).

### Vesting

Vesting gives you ownership of the money in your plan account. That means you can take your vested account balance with you when you leave the Company. You become 100% vested in Company contributions once you reach the third anniversary of your service date. There is no partial vesting, so if you leave the Company before reaching the third anniversary of your service date, you forfeit your unvested benefit.

### Account Information

Once you begin participation, your account is valued at the end of every business day. To obtain account benefit information anytime, day or night, or to obtain other plan information, log on to [www.401k.com](http://www.401k.com) or call the Customer Service Support Line at 1-800-323-4015.

Statements are always available online at [www.401k.com](http://www.401k.com). If you don't use the Internet, you will receive a statement at the end of the quarter showing your balance at the beginning of the quarter, the account activity for the quarter and the ending balance for the quarter. Your statement will be sent to you within a reasonable time after the close of the quarter.

### Retirement Eligibility

You are eligible to retire from the Company if:

- you are at least 55 years old, and you have at least 20 years of service; OR
- you are at least 60 years old or older, and the sum of your age and years of service with the Company equals at least 75; OR
- you are 65 years old (Normal Retirement Age)

To apply for retirement, contact Sherwin-Williams HR Services at 1-800-792-1110 approximately 90 days prior to your retirement date.

If you have questions on what happens to your Health and Welfare benefits when you retire call the Sherwin-Williams Benefits Service Center at 1-844-358-0604.

For help with retirement planning, sign onto My S-W Benefits and click on the *Retirement Planning* tile.

### Fund Access While You Are Working

The Pension Plan is designed for long-term retirement benefits and, unlike the 401(k) Plan, has no provisions for loans or withdrawals while employed.

### Fund Access When You Leave the Company

- If you retire from the Company, you will receive your Plan benefit as part of your retirement. There is no requirement that you must immediately withdraw your Plan benefit when you retire. You decide when you would like to receive your Plan benefit. However, the IRS will require the Plan to pay out a portion of your benefit if you have not initiated a distribution from the Plan by the time you reach age 70 ½.

You can initiate a distribution at any time after your retirement date by contacting the Customer Service support line at 800-323-4015.

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If your vested account at retirement is greater than \$5,000 you will be eligible to choose from a number of different annuity options in addition to the Lump Sum/Rollover option—Single Life Cash Refund Annuity (if single or married), or 50%, 75% or 100% Joint & Survivor Annuities if you are married at retirement.

- While you are on leave of absence you cannot request a distribution of your vested account balance. If you are on a military leave of absence, special rules may apply. However, while you are on a leave of absence you can continue to transfer funds among the Plan’s investment options and/or change your investment direction.
- If you leave the Company for any other reason other than retirement, vested balances of less than \$5,000 will be

automatically distributed to you. For vested balances over \$5,000, your consent will be required before your benefit can be distributed. Contact the Customer Service Support Line at 1-800-323-4015 to initiate a distribution.

- If you should die before retirement, your vested account balance will be paid to your spouse (if you are married), or to your designated beneficiary(s). Your surviving spouse or beneficiary has the same distribution and/or payment options offered to a retiree.

If you officially retire from the Company and you subsequently die, your beneficiary will receive a distribution based on the beneficiary designation you have on file with the Company.

If you do not designate your beneficiary, your vested retirement benefits will be distributed to your eligible spouse or, if single, to your estate.



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# The Sherwin-Williams Company Employees' Pension Plan (EPP)

For Collectively Bargained Employees Only\*†

The Sherwin-Williams Company Employees' Pension Plan (The Plan) is a defined benefit plan which can provide an important source of income when you retire.

You make no contributions to this Plan. For collectively bargained participants, the Plan's benefits are determined based on a formula that considers service and a crediting rate that is part of the collective bargaining agreement. Your benefit is based on the crediting rate in effect at the time you separate from employment with the Company. Refer to your current collective bargaining agreement to obtain your site specific crediting rate.

This Plan benefit, along with your Hourly 401(k) (if participating), Social Security and any other personal savings, can be an important source of income at retirement.

**Eligibility**  
 Full-Time, part-time, temporary and co-op employees covered by a collective bargaining unit agreement that adopted this plan, are eligible for participation in the Plan.

**Retirement Eligibility**  
 You are eligible for Retirement from the Company if:

- You meet the Early Retirement Eligibility outlined in your Collective Bargaining Agreement (CBA); OR, if your CBA is silent regarding early retirement, if:
- You are at least 55 years old, and you have a least 20 years of service; OR
- You are at least 60 years old and the sum of your age and years of service with the Company equals at least 75; OR
- You are 65 years old (normal retirement age)

To apply for retirement benefits, contact HR Services at 1-800-792-1110 approximately 90 days prior to your retirement date.

If you have questions on what happens to your Health and Welfare benefits when you retire call the Sherwin-Williams Benefits Service Center at 1-844-358-0604.

For help with retirement planning, sign onto My S-W Benefits and click on the *Retirement Planning* tile.

**Vesting Service**  
 You become 100% vested in the Plan once you earn three (3) years of Vesting Service. There is no partial vesting, so if you leave the Company before earning three years of Vesting Service in the Plan, you forfeit your unvested balance.

- You are credited with a year of Vesting Service for every calendar year in which you have worked at least 1,000 hours.

**Fund Access While You Are Working**  
 There are no provisions for loans or withdrawals while employed.

**Fund Access When You Leave the Company**  
 ■ If you retire from the Company, you will receive the Plan benefit as part of your retirement. Your monthly benefit at Normal Retirement is calculated based on your years of Accrued Benefit Service times the Annual Benefit Amount shown in your collective bargaining agreement. If your collective bargaining agreement includes a Medical Allowance, add this to the total.

\* **ONLY Collectively Bargained Employees** are eligible for The Sherwin-Williams Company Employees' Pension Plan.

† See Collective Bargaining Agreement for Legacy Valspar Union Early Retirement Eligibility.

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- If you choose to retire from the Company prior to the time you reach age 65, unreduced benefits are available to you as early as age 62.
- If your benefit payments begin before age 62, they will be reduced to reflect the longer expected payment period.
- If you leave the Company before retirement for any reason before you meet the retirement qualifications, you may be eligible to receive a Deferred Vested Retirement benefit.
- If the present value of your total benefit is less than \$1,000, you will receive the value of your annuity benefit in a single lump sum following the termination of your employment.
- If you are at any time eligible for a lump sum payment during a temporary window period and choose to elect that benefit, no further benefit will be payable to you under the Plan.

- Should you die before the earlier of
  - Your 65th birthday or
  - Your official date of retirement
 Your spouse or domestic partner will receive a monthly benefit equal to a 55% survivor annuity from the Plan for life. Benefit payments to your surviving spouse or domestic partner will be paid when you would have qualified to retire under the provisions of the Plan based upon the amount of Vesting and Accrued Benefit Service earned at the time of your death.
  - If you officially retire from the Company and you subsequently die, your spouse or domestic partner will receive the benefit based on your designation at the time of retirement. You MAY NOT change or cancel the type of option you selected at the time of your retirement after your benefits have commenced.

### Pension Plan Information

If you have questions about your current accrued benefit, or how your pension is calculated, please contact our Pension Center at 1-866-630-2259.

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# Hourly 401k Plan

For Collectively Bargained Employees Only\*

The Sherwin-Williams Company Hourly 401(k) Plan (the Plan) provides you with the opportunity to save money from your paycheck for retirement. The Plan, along with your pension plan, Social Security and other personal savings, can be an important source of income at retirement.

## Plan Eligibility

As an employee of the Company, you become immediately eligible to participate in the Plan with no service requirement if you are:

- an employee of the Company who is a member of a collective bargaining unit for whom eligibility for the Plan is extended to such members through negotiation, and
- a citizen of the United States if you are working abroad, under certain circumstances described in the Plan, or a non-US citizen working in the United States

## When Does Coverage Begin?

If you have not enrolled in the Plan within 45 days of your date of hire, you will automatically be enrolled in the Plan at 3% of your pay. An Enrollment Kit from Fidelity investments will be sent to your home address within a few weeks of your hire date.

Simply log on to [www.401k.com](http://www.401k.com) or call the Customer Service Support Line at 1-800-323-4015 to change your payroll deferrals and choose your investments.

If you do not wish to participate in the Plan, you must contact Fidelity and change your contribution rate to 'zero'. To opt out of the plan, access your account online at [www.401k.com](http://www.401k.com) or call 1-800-323-4015

## Your Contributions

You will be automatically enrolled in the Plan at 3% of your pretax eligible earnings. You may increase your payroll deduction (up to 60%) at any time.

The IRS limits the amount of money allowed to be contributed to an employee's account within a calendar year.

For 2022, no more than \$20,500 in total employee contributions are allowed. Highly compensated employees as defined by the Internal Revenue Code may have additional limitations.

## Annual Increase Program

As a participant in the Plan, you are automatically enrolled in the Annual Increase Program which increases your contributions by 1% up to 10% each year, until you either change your contribution level, or reach a 10% contribution level.

## Roth 401(k)

Another option you have is the Roth 401(k). This feature allows you to make after-tax contributions (via payroll deductions) to your Plan now, while taking those contributions and associated earnings completely tax free at retirement. A tax-free

distribution of these monies can be made five tax years after the year of the first Roth contribution, or after you have attained age 59 ½, become disabled, or decease.

## Catch-up Contributions

If you are age 50 years old or older, or will reach 50 during the calendar year, you may elect to make an additional contribution to the Plan. These "catch-up" contributions are made to the Plan on either a pre-tax or after-tax basis are not considered when determining your limits on how much you can contribute to the Plan. The IRS maximum annual catch-up contribution for 2022 is \$6,500.

## Your Investments

You can direct the investment of all your plan contributions. The Plan offers a wide variety of funds from which to select, representing all of the primary asset classes (short-term investments, bonds and stocks). Since fund options can change, you will be provided with a complete list of

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## Hourly 401k Plan *continued*

available fund options once you are eligible to participate in the Plan. You can change the investment of your contributions on any business day. If you don't provide an investment direction, your contributions will be automatically invested in a target date fund based on the year you will reach age 65.

### Vesting

Vesting gives you ownership of the funds in your Plan account. That means you can take your vested account balance with you when you leave the Company. Please note that you are always 100% vested in your contributions which allows you to take your account balance with you when you leave the Company.

Please refer to your Collective Bargaining Agreement regarding vesting of any company matching contributions you may receive.

### Fund Access While You Are Working

The Plan provides for loans and limited withdrawals. See the Summary Plan Description (SPD) for more information on

accessing funds from your account or call the Customer Service Support Line at 1-800-323-4015.

### Fund Access When You Leave the Company

- If you retire from the Company, you can choose to withdraw your account at any time after your retirement date.
- If you leave the Company for any reason other than your retirement, the vested value of your account will automatically be distributed to you if the total value is \$5,000 or less. Vested account balances above \$5,000 will remain in the Plan and will require your consent before you account can be distributed.
- If you are on an authorized leave of absence, contributions are suspended during the leave. If you are laid off, contributions are automatically suspended while you are on layoff. If you are on a military leave of absence, special rules may apply. While you are on a leave of absence, you can continue to make withdrawals from the Plan and transfer funds among the Plan's investment options.

- If your employment has not terminated, and you are considered totally disabled, you will remain a participant in the Plan. If you are considered totally disabled, you may request a full distribution of your account. Please call 1-800-792-1110 for more information.

### Account Information

Once you begin participation, your account is valued at the end of every business day. To obtain account benefit information anytime, day or night, or to obtain other plan information, log on to [www.401k.com](http://www.401k.com) or call the Customer Service Support Line at 1-800-323-4015.

Statements are always available online at [www.401k.com](http://www.401k.com). If you don't use the Internet, you will receive a statement balance at the beginning of the quarter, the account activity for the quarter and the ending balance for the quarter. Your statement will be sent to you within a reasonable time after the close of the quarter.

### How do I designate my beneficiary?

You can designate your savings plan beneficiaries online and receive instant online confirmation and check your beneficiary information virtually any time.

Simply log on to NetBenefits at [www.401k.com](http://www.401k.com) and click on "Your Profile" and then "Beneficiaries." If you do not have access to the Internet or prefer to complete your beneficiary information by paper form, please contact 1-800-323-4015.

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# Stock Ownership and Automatic Dividend Reinvestment Plan (DRIP)

For Collectively Bargained Employees Only\*

The Stock Ownership and Automatic Dividend Reinvestment Plan program allows a bargaining unit employee to purchase Sherwin-Williams stock through payroll deductions. The program is administered through EQ Shareowner Services, the Transfer Agent for Sherwin-Williams stock. This program is totally separate from the Hourly 401(k) Plan that is administered through Fidelity Investments.

You can review the Stock Ownership and Automatic Dividend Reinvestment Plan brochure available by contacting your Human Resources Administrator. This brochure explains the program. It contains common questions and answers.

Should you decide to participate in this program, you will need to complete the authorization form. Once the form is

complete, you or your Human Resources Administrator can forward the form to [retirement@sherwin.com](mailto:retirement@sherwin.com) so that payroll deductions may be established. Contributions will be deducted from your paycheck as soon as feasible upon receipt of the completed form.

If you want to change the amount, or discontinue the contribution, a new form needs to be completed. You should give this form to your Human Resources Administrator who will in turn send the form to [retirement@sherwin.com](mailto:retirement@sherwin.com) for processing. Payroll will make your deduction changes on the next payroll possible.

Statements are sent directly to participants from EQ Shareowner Services. Questions relating to your account can be referred directly to 1-800-468-9716.

\* **ONLY Collectively Bargained Employees are eligible for the Stock Ownership and Automatic Dividend Reinvestment Plan.**

## MY RETIREMENT





# Online Retirement Calculators & Tools

Many of these tools can be found by navigating to Menu > Tools once logged into [www.401k.com](http://www.401k.com)

## Planning and Guidance Center

Fidelity’s Planning and Guidance Center can help you create a plan for retirement — to help you get and stay on track. You can review your retirement plan and explore options that will impact your plan. You can also review your current investment mix.

- Consider your mix of investments
- Contribute more, if you can
- Estimate your pension benefit
- Understand how an HSA can help you save

## Take Home Pay Calculator

This calculator is designed to show you how making a pre-tax contribution to your retirement savings plan could affect your take home pay.

When you make a pre-tax contribution to your retirement savings account, you add the amount of the contribution to your account, but your take home pay is reduced by less than the amount of your contribution. That represents an increase in your take home pay compared to what would happen if you contributed the same amount to a taxable account.

- Review and revise your savings strategies
- Know how much money you need to save
- Revisit your budget
- Save for college

## Income Strategy Evaluator

This tool can help you evaluate your retirement planning strategy. The tool focuses on helping you assess your potential monthly income at retirement. You can experiment with a few changes to see the impact on your potential retirement income.

## Contribution Calculator

This calculator is designed to show you how you could potentially increase the value of your retirement plan account by increasing the amount that you contribute from each paycheck.

## Full View

Full View helps customers manage their personal finances by bringing their online financial accounts including investment, bank and credit card accounts onto a single Web page. Full view enables you to access information for all of your enrolled accounts securely.

With Full View, you can see your complete financial picture, including a snapshot of your net worth. In addition to your account balances, we’ve also added the following features:

- Alerts to help you monitor the activity on your accounts, available in the Alerts Inbox
- Home values and home equity charts that are automatically updated as valuations change, available in the Real Estate section
- Budget/Reporting Tools to set budget goals and run a variety of reports
- Categorization of transactions to better track spending
- Storage of transaction history for 24 months
- The ability to create Account Groups

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### Savings and Spending Check-Up

A simple rule suggests that 50% of your income should go to essential expenses, 15% to retirement savings, and 5% to short term savings. See how your actual savings and spending compare to these guidelines.

### Power of Small Amounts

See how a small increase – 1%, 3%, or 5% – in your savings plan contribution can make a powerful difference in your long-term retirement savings.

### College Savings Calculator

Find out if you are on track to meet your college savings goals.

### Mobile Apps

Mobile applications puts popular online features at your fingertips, allowing you to:

- View your accounts at a glance
- Monitor balances and investment selections
- Get your personal rate of return and more

Visit [Fidelity.com/mobile](https://www.fidelity.com/mobile) to find the mobile app for your preferred device.



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# Financial Wellness

Visit [netbenefits.com/moneycheckup](https://netbenefits.com/moneycheckup) for an interactive experience that can provide a personal finance picture. Please also visit the wellness micro-sites to gain information to help prepare for your financial future.

## Firsts Microsite

[This microsite](#) provides resources for the younger, millennial generation who is looking to get into better financial shape today, so they can confidently do more tomorrow. The educational resources are designed to help employees make smarter money decisions — from big financial moments to everyday finances.

## Basics Microsite

[This microsite](#) is for employees who are overwhelmed with immediate finances like keeping up with bills, managing debt, and dealing with unexpected expenses. The educational resources are designed to help employees better manage all of these items, so they can take steps to reshape their financial life.

## Lifestyle Microsite

[This microsite](#) is for financially established employees who are in control of their daily finances and have an eye on what's next. The educational resources are designed to help grow and protect what employees have saved, so they can live the lifestyle they want now, as well as in the future.

## Student Debt Tool

Ready to take control of student loans? So are we! We're helping to make managing student debt easier and getting to zero possible.

The numbers are huge: 1.4 trillion dollars, 44 million Americans. As big as the numbers are, they pale in comparison to how smaller numbers like \$10,000, \$20,000 or \$100,000 can feel when your repaying your own student debt.

As an employer, we see the very real impact of student loans. We understand the struggle to choose between long-term planning and paying down student debt. When Fidelity approached us with the

Student Debt Tool\*, we knew immediately that it was something that could help our employees with student loans take control of their debt.

The tool, which is live and available at [fidelity.com/studentdebt](https://fidelity.com/studentdebt), allows you to upload and see all your student loans (federal and private) in one place and explore different repayment options. Because the tool uses real loan data, you'll see the potential impact of switching plans, or making extra payments. Helpful resources like cheat sheets make it easy to get started making a change.

Get started with the Student Debt Tool today at [fidelity.com/studentdebt](https://fidelity.com/studentdebt).

\* The Student Debt Tool is not a product or service of Fidelity Brokerage Services.

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# Financial Workshops

Sherwin-Williams, in conjunction with Fidelity, makes it easy for employees to receive financial, retirement, and investment related education through face-to-face and on-demand workshops. Employees are encouraged to take advantage of the education available in these free workshops.

These no cost workshops are geared towards beginner, intermediate, or advanced financial knowledge to allow employees to control the pace of their learning.

Professional Financial presenters are available to present to audiences of 25 or more on a broad array of topics. Employees interested in a workshop topic are encouraged to ask their Supervisor or Human Resources representative to

determine if there is enough interest from others in the district or area to request a workshop. Workshop requests can be made through the plans Customer Service at 1-800-323-4015. Fidelity and S-W will work together to determine an appropriate workshop, presenter, date, time, and location for the workshop.

You can also view on-demand web based workshops available at any time. To participate in an on-demand workshop, employees should log in to [www.401k.com](http://www.401k.com) and click the “Library” banner, then scroll down and click “Workshops.” Select “On-Demand: Workshops,” “Live Web Workshops,” or “One-on-One Consultations” for a full list of available workshops that employees can participate in from home, on their lunch break at work, or whenever it is most convenient for them.

**Topics for both live and on-demand workshops include:**

- Get Started and Save for the Future You
- Create a Budget, Ditch your Debt and Start Building for the Future
- Take the First Step to Investing
- Turn Your Savings into Retirement Income
- Your College Planning Choices

Now is a great time to consider a workshop! Be sure to take advantage of all that your Retirement & Savings Plans have to offer.

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# Investor Centers

## Investor Strategies for all your Important Goals

If you're nearing retirement, or have multiple financial needs, time spent with a Fidelity Representative can help you develop a plan to help make your goals a reality. Just call your local Investor Center to schedule a complimentary one-on-one consultation.

To find your nearest Fidelity Investor Center, go to [www.Fidelity.com/branchlocator](http://www.Fidelity.com/branchlocator) for locations and directions. Please call ahead for an appointment.

If you don't live near a Fidelity Investor Center, you can still receive planning and investment guidance by phone. Just call 1-800-603-4015 to speak with a Fidelity Guidance Representative.

### Investment Guidance

**Multi-goal planning** — Fidelity believes that saving for retirement should be a top priority. After maximizing your retirement savings, you may want to consider saving for other key savings goals.

**Simplify your finances** — Consolidating workplace savings left with a former employer can help give you more control and make it easier to manage your money.

### Professional Money Management

A managed portfolio puts Fidelity's experienced professionals in charge of your assets. The service will help you to evaluate your financial situation and define your goals. Then the service will propose an investment strategy designed to help you reach those goals and manage your investments on an ongoing basis.

### Retirement Income Planning

If you're in retirement or approaching it, it's important to have a plan for generating and managing income. Creating a retirement income plan can help make the most of your retirement assets.

### Estate Planning

Looking to preserve your wealth for future generations? Fidelity's estate planning tools and resources can help guide you as you develop a plan to ensure your legacy.

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# 529 College Savings Plans

Sherwin-Williams is pleased to provide you with information on 529 savings plans where you can contribute after-tax money through convenient payroll deductions. Your savings accumulates tax-free in one of several investment options. You can later withdraw the money for qualified, higher education expenses, free of federal income tax, at any accredited college in the country.

Ohio's 529 CollegeAdvantage is one of the many 529 plans available that allows families in any state to benefit from Ohio's 529 College Savings Plan and your student isn't required to attend a school in Ohio. For more information go to [www.collegeadvantage.com](http://www.collegeadvantage.com).

BlackRock CollegeAdvantage is another popular 529 plan available to Sherwin-Williams employees. If you would like more information about BlackRock CollegeAdvantage, visit [www.blackrock.com/collegeadvantage](http://www.blackrock.com/collegeadvantage). If you decide to enroll with BlackRock, click the link below for enrollment instructions and be sure to use the Sherwin-Williams company ID code **26571**.



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# My S-W Total Rewards

My Sherwin-Williams Total Rewards is a personalized website that summarizes the annual compensation and benefits you receive from the Company.

The website provides important information that can help you better understand all the programs you are eligible to participate in, and will make it easy for you to explore and utilize these programs more effectively. Important “take action” reminders will point you in the right direction!

The website is available through Fidelity Investments to allow for convenient access, and the information will be regularly updated so you'll always have a current view of the total rewards Sherwin-Williams provides you! **If you are a new hire, your account will be created the quarter following your hire date.**

Access the website directly at [www.myswtotalrewards.com](http://www.myswtotalrewards.com) using your Fidelity NetBenefits sign on and password. This website is available to U.S. non-bargained employees.



## MY RETIREMENT





# Medical, Dental and Vision Coverage Eligibility Requirements

Your eligible dependents include:	Medical Coverage	Dental Coverage	Vision Coverage
<p>Your legal spouse as defined by applicable state law.</p> <p>Please note: You will be asked to provide documentation which verifies your dependent’s eligibility for the benefit plans. Please see <a href="#">page 25</a> for examples of documentation to submit.</p>	•	•	•
<p>Your common law spouse as defined by applicable state law and subject to a verification process.</p> <p>Please note: You will be asked to provide documentation which verifies your dependent’s eligibility for the benefit plans. Please see <a href="#">page 25</a> for examples of documentation to submit.</p>	•	•	•
<p>Your domestic partner. The term “Domestic Partner” means: (1) person (of the same-sex or opposite-sex) with whom an eligible employee has a current valid domestic partnership registration, civil union certificate, or similar document from any state or local government agency, or (2) if no valid domestic partnership registration, civil union certificate, or similar document exists from any state, an eligible employee (of the same-sex or opposite-sex) is in a relationship with a person (of the same-sex or opposite sex) where they:</p> <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> have lived together for at least one year;</li> <li><input checked="" type="checkbox"/> are both age 18 years or older and mentally competent to enter into a legal contract;</li> <li><input checked="" type="checkbox"/> are both in an exclusive relationship;</li> <li><input checked="" type="checkbox"/> are both not married to anyone else;</li> <li><input checked="" type="checkbox"/> are both not related by blood closer than would bar marriage in the state;</li> <li><input checked="" type="checkbox"/> share the same regular and permanent residence with the current intent of doing so indefinitely;</li> <li><input checked="" type="checkbox"/> are financially interdependent on each other.</li> <li><input checked="" type="checkbox"/> were mentally competent to enter into the relationship when the domestic partnership began.</li> </ul> <p><b>Please note: You will be asked to provide documentation which verifies your dependent’s eligibility for the benefit plans. Please see page 25 for examples of documentation to submit.</b></p>	•	•	•
<p>Your dependent children. Your dependent children are:</p> <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Your children by birth, your stepchildren, and your domestic partner children;</li> <li><input checked="" type="checkbox"/> Children placed with you for adoption by age 18;</li> <li><input checked="" type="checkbox"/> Foster children or dependent children for whom you are the legal guardian**;</li> <li><input checked="" type="checkbox"/> Children you support under a Qualified Medical Child Support Order or administrative order. Sherwin-Williams will determine whether or not an order meets the criteria of a Qualified Medical Child Support Order; or</li> <li><input checked="" type="checkbox"/> Your unmarried, dependent child of any age who is permanently and totally incapacitated, provided that the handicap began before the child reached age 19.</li> </ul> <p>Please note: You will be asked to provide documentation which verifies your dependent’s eligibility for the benefit plans. Please see <a href="#">page 25</a> for examples of documentation to submit.</p>	Up to Age 26*	Up to Age 26*	Up to Age 26*

\* *Dependent children are covered until the end of the month the dependent reaches the age limit. Some HMO plans have different age limits for coverage—please refer to the Summary Plan Document of the plan for additional information.*

\*\**Foster or Legal guardianship terminates at age 18. Dependent children are covered until the end of the month the dependent reaches this age limit.*

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# Dependent Verification Services

When you enroll a new dependent into coverage, you will receive paperwork at your home address to verify they are eligible for enrollment. **If your dependent does not meet the requirements or you fail to provide the requested information the dependent will be dropped from all coverage.**

**Documentation to Submit:**  
**Spouse & Domestic Partner:**  
 Two documents required, one from section A and one from section B

- **Document A:**
  - Government-Issued Marriage Certificate (document B not required if married in the past 12 months)
  - Government-Issued Certificate of Common Law Marriage (document B not required if married in the past 12 months) or Notarized Affidavit of Common Law (a copy can be found on the Dependent Verification Portal)
  - Government-Issued Certificate of Domestic Partnership or a Notarized

Affidavit of Domestic Partnership (a copy can be found on the Dependent Verification Portal)

- **Document B:**
  - Federal Tax Return within last 2 years listing your spouse
  - Proof of Joint Ownership issued within the last 6 months. Examples of Proof of Joint Ownership:
    - Mortgage Statement
    - Credit Card Statement
    - Bank Statement
    - Leasing Agreement
    - Property Tax Statement

**Child**  
**Biological Child:**  
 Government-Issued Birth Certificate  
**Adopted Child:**  
 Adoption Certificate or Placement Agreement

**Step-Child:**  
 Government-Issued Birth Certificate **AND** both documents to verify Spouse or Partner

**Legal Ward:**  
 Government-Issued Birth Certificate **AND** Court Ordered Document of Guardianship

**Disabled Child:**  
 Documentation listed above **AND** Federal Tax Return within 2 years of claiming child

**Foster Child:**  
 Foster Care Letter of Placement **AND** Government-Issued Birth Certificate

**For More Information:**  
 Visit [myswbenefits.com](https://myswbenefits.com) and click the Dependent Verification link to check your verification status, view notices, upload documentation, view the Security and Privacy Policy and more.

Contact the Dependent Verification Center at 1-844-358-0604. Representatives are available Monday-Friday from 8 a.m. to 5 p.m. Eastern Time.

**Submit your documents using one of the methods below:**

Method	Instructions	Timing
<b>Upload (for fastest results) using your computer or smartphone</b>	Log in at <a href="https://myswbenefits.com">myswbenefits.com</a> and click or tap on the “Verify My Dependent Eligibility” alert.	Expect a determination within <b>3 business days</b> , but you can check the status online.
<b>Secure Fax</b>	Fax to 1-877-965-9555 using the fax cover page included at the end of this notice.	Expect a determination within <b>5 business days</b> , but you can check the status online.
<b>U.S. Mail</b>	Dependent Verification Center P.O. Box 7114, Rantoul, IL 61866-7114	Expect a determination in the mail within <b>21 business days</b> .

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# How to Change Coverage or Add Dependents

**IMPORTANT:** You must submit changes online through [myswbenefits.com](https://myswbenefits.com) **within 30 days from the date the change occurred.** A social security number is not required to add a dependent to coverage.

Coverage is effective the first of the month following the event, unless it is for a birth or adoption—then the effective date is the date of birth, date of adoption or date of placement.

**If you do not update this information and your benefit elections within 30 days of the life event, you must wait until the next Open Enrollment to begin coverage the following January 1st.**

When you enroll or waive coverage for medical, dental, vision or flexible spending accounts, Internal Revenue Service (IRS) rules require that your benefit choices remain in effect throughout the year (January 1 –December 31) unless you have a **qualified status change** including:

- Marriage;
- Divorce;
- Legal separation;
- Annulment of marriage;
- Establishment or termination of domestic partnership;
- Death of a spouse, domestic partner, dependent child or child of domestic partner;
- Birth, adoption or placement of a dependent for adoption;

- Gaining benefit plan eligibility or loss of benefit plan eligibility by you, your spouse or domestic partner, your former spouse or domestic partner or your dependent child or child of domestic partner;
- Reduction or increase in hours of employment for you, your spouse, domestic partner, dependent child or child of domestic partner, including a change from part-time to full-time, or full-time to part-time, a strike, lockout, or commencement or return from an unpaid leave of absence;
- A change in dependent status, foster or legal guardianship for your child or child of domestic partner;
- A change in residence or worksite for you, your spouse, domestic partner, dependent child or child of domestic partner which significantly changes access to providers;

- A significant change in cost or a significant curtailment of health coverage for you, your spouse, domestic partner, dependent child or child of domestic partner;
- A special enrollment event under the HIPAA for you, your spouse, domestic partner, dependent child or child of domestic partner;
- You or the plan receives a Qualified Medical Child Support Order; or
- You, your spouse, domestic partner, dependent child or child of domestic partner becomes entitled to either Medicaid or Medicare or gains premium assistance eligibility.



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# Health Care Credits and Surcharges For Medical Plans

**Non-Tobacco User Discount**  
 Helping you and your family reach and maintain good health is an important part of our Sherwin-Williams culture and has a direct impact on the healthy future of our Company.

You will be asked during the new hire process about your tobacco user status (including electronic smoking devices). **Non-tobacco users enjoy discounted medical plan contributions—up to \$600 in savings!** You will be considered a non-tobacco user if you and your covered dependents have been tobacco-free for the prior six months.

**Balance 4 Well-Being (B4WB)**  
 Employees enrolled in a Sherwin-Williams Medical Plan have the option to earn **points** in order to save an annual discount on their 2023 medical plan contributions. The Vitality Health Review is worth points and is a great way to track your current health status! For employees & spouses/ domestic partners not enrolled in a Sherwin-Williams Medical Plan, Balance 4 Well-Being encourages you to complete the online health review in order to receive a snapshot of your current health status.

**Employee must earn the appropriate level of points every year in order to receive the discount on next year's medical contributions.**

Employees hired during 2022 will automatically receive a discount on 2022 medical contributions. However, they will need to participate in the Balance 4 Well-Being program and earn the appropriate amount of points to earn their discount for 2023. Employees that are hired, rehired or have a status change from part-time to full-time that occur on or after September 1, 2022, and are enrolled in a Sherwin-Williams medical plan, will automatically receive the discount on their medical contributions.

**Working Spouse Surcharge for Medical Coverage**  
 If your spouse has access to employer-sponsored medical coverage through his or her employer, but you choose to cover your spouse under one of the Company offered medical plans, you will be assessed a surcharge of \$60 per month (note: the \$60 surcharge will not apply if the covered spouse is also a Sherwin-Williams Company employee).

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# Medical Plans at a Glance

## Medical Plan Options — What’s the Difference?

Advantage and Prime Plans with HSA are high-deductible Anthem Medical Plans with lower per pay costs. The Standard Plan is the lower deductible Anthem Medical Plan with higher per pay costs.

### Employee contributions and deductibles

- Higher deductible = lower employee contributions

### Tax-advantaged Health Savings Account (HSA)

- Available if you enroll in the Advantage or Prime Plan
- Helps pay your out-of-pocket expenses, such as your deductible and coinsurance
- Regardless of which medical plan you choose, you will save money by using in-network providers.

	Health Savings Account (HSA)		Deductible		Out-of-Pocket Maximum (Includes Deductible)	
	S-W Contribution	Employee Contribution	In-Network	Out-of-Network	In-Network	Out-of-Network
<b>Advantage Plan with HSA</b>	N/A	\$0 - \$3,650 Single \$0 - \$7,300 Family	\$1,750 Single \$3,500 Family	\$3,500 Single \$7,000 Family	\$5,500 Single \$11,000 Family	No limit
<b>Prime Plan with HSA</b>	\$400 - Employee Only \$800 - Family	\$0 - \$3,650 Single \$0 - \$7,300 Family	\$1,500 Single \$3,000 Family	\$3,000 Single \$6,000 Family	\$4,750 Single \$9,500 Family	No limit
<b>Standard Plan</b>	N/A	N/A	\$1,000 Single \$2,000 Family	\$2,000 Single \$4,000 Family	\$3,500 Single \$7,000 Family	No limit

*How Deductible is met for Covered Services: The family deductible must be met before benefits are provided on family coverage. Once the family deductible is met, all family members will be considered as having met their deductible for the remainder of the year.*

## 2022 Per-pay Contribution Rates: Tobacco-Free, Earned B4WB Discount, and No Working Spouse Surcharge

	Employee Only		Employee + Child(ren)		Employee + Spouse/DP		Employee + Family	
	BIWEEKLY	WEEKLY	BIWEEKLY	WEEKLY	BIWEEKLY	WEEKLY	BIWEEKLY	WEEKLY
<b>Advantage Plan with HSA</b>	\$20.66	\$10.34	\$52.74	\$26.37	\$63.07	\$31.54	\$93.52	\$46.77
<b>Prime Plan with HSA*</b>	\$51.27	\$25.64	\$108.42	\$54.21	\$127.64	\$63.83	\$183.72	\$91.87
<b>Standard Plan</b>	\$73.41	\$36.71	\$150.90	\$75.45	\$176.90	\$88.45	\$253.37	\$126.69
<b>Dental PPO</b>	\$5.54	\$2.77	\$10.38	\$5.19	\$10.62	\$5.31	\$17.08	\$8.54
<b>Dental DMO</b>	\$4.27	\$2.13	\$8.19	\$4.10	\$9.23	\$4.62	\$13.15	\$6.58
<b>Vision</b>	\$2.34	\$1.17	\$4.69	\$2.35	\$4.69	\$2.35	\$7.03	\$3.52

*Note for the medical plans (Advantage, Prime or Standard Plan): For the working spouse surcharge, add \$27.70 per biweekly pay or \$13.85 per weekly pay. For the tobacco surcharge, add \$23.08 per biweekly pay or \$11.54 per weekly pay. For not earning 1,000 B4WB points, add \$13.85 per biweekly pay or \$6.92 per weekly pay.*

\* For the Prime Plan, you will receive an employer contribution to your HSA (\$400 Employee Only/\$800 Family).

For 2022, if you enroll in the Prime Plan at Open Enrollment or are a New Hire or change from Part-Time to Full-Time status on or before June 1, 2022, Sherwin-Williams will contribute the entire HSA employer contribution on January 1, 2022 or two weeks after your account is opened at Fidelity. Changes in coverage that occur during the year are not eligible for additional Employer Contributions after the initial deposit.

## MY HEALTH & SECURITY



# Advantage and Prime Plans with HSA

Looking for a health plan that provides quality medical coverage and helps you save money? Take a look at the Advantage and Prime plans with HSA.\*

The Advantage and Prime Plans are administered by Anthem and use the Anthem network of doctors and hospitals. When you use in-network providers, you'll pay less out-of-pocket for covered expenses.

Once you've met the deductible, the plans pay for most in-network covered services at 80%. The 20% you are responsible for is called coinsurance. With the Advantage or Prime Plan, the total amount you'll pay in-network for medical out-of-pocket expenses is capped. Once you reach the medical out-of-pocket maximum amount, the plan will pay 100% of covered services provided in-network for the rest of the calendar year. This is a "safety net," protecting you financially in case you incur

significant medical expenses in a particular year.

Not all services require that you satisfy a deductible. Certain preventive services, like wellness exams for babies and children, an annual physical exam for adults, mammograms and other well woman exams are covered at 100% with no deductible. Additionally, preventive prescription drugs<sup>‡</sup> (drugs taken for prevention of major medical conditions, like high blood pressure medication) are covered at 100% with no deductible or copayments under both plans. Refer to the preventive drug list for more information.

## How do Advantage and Prime plans with HSA plans work?

- ✓ **The Advantage and Prime plans are high-deductible Anthem Medical plans.** You choose the plan that best fits your financial goals.
- ✓ **You'll have a health savings account.** It's like a savings account, only with an HSA the money can only be used to pay for qualified medical expenses. The HSA is administered by Fidelity Investments.
- ✓ **You can make contributions to your HSA directly from your paycheck.** There's no minimum contribution, but there is a limit to how much you can contribute each year. These limits are set by the federal government and are adjusted every year. In 2022, you can contribute up to a total of \$3,650 for single coverage and \$7,300 for family

coverage. And, if you're 55 or older, you can contribute an additional \$1,000 on top of these maximum amounts.

NOTE: If you are newly enrolled in the HSA at any time after January 1, the total amount of your contribution will be prorated.

- Sherwin-Williams will contribute to your health savings account as well—\$400 if you elect Prime employee only coverage, or \$800 if you elect Prime plan family coverage<sup>†</sup>.
- If you are a new hire or change from part-time to full-time status on or before June 1 of the plan year and elect the Prime Plan you will receive the Company contribution.
- There are no Company contributions to the Advantage Plan with HSA but you can contribute to your HSA.

\* *Hawaii, Puerto Rico and Virgin Islands employees excluded.*

<sup>‡</sup> *Check out the list of eligible preventive prescription drugs on [myswbenefits.com](https://myswbenefits.com)*

<sup>†</sup> *For 2022, if you enroll in the Prime Plan at Open Enrollment or are a New Hire or change from Part-Time to Full-Time status on or before June 1, 2022, Sherwin-Williams will contribute the entire HSA employer contribution on January 1, 2022 or two weeks after your account is opened at Fidelity. Changes in coverage that occur during the year are not eligible for additional Employer Contributions after the initial deposit.*

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## Advantage and Prime Plans with HSA *continued*

- The money is yours.** While you are enrolling in your benefits on the My S-W Benefits website, you'll open an HSA with Fidelity Investments. The funds in the account are owned and controlled by you, not Sherwin-Williams, Anthem, Fidelity or anyone else. If you change health plans or leave employment at Sherwin-Williams, you take your account with you.
- You decide how (or if) you use your HSA funds.** You can withdraw money from your HSA to pay deductible expenses. Once you meet the deductible, the medical plan starts to pay benefits. You always have the option of paying for your medical expenses out of your pocket, leaving the money in your HSA to grow and earn interest for future medical expenses. You can also use your HSA dollars to reimburse yourself if you pay cash for an eligible expense—just keep a record!

- Account balances roll over from year to year.** You don't lose any money that you don't spend. You can save money in your account over time, and use the money to help pay for future medical expenses, especially in retirement.
- The health savings account provides tax advantages.** Your contributions are pre-tax or tax deductible, they earn interest tax-free, and they are not taxed when you make withdrawals to pay for qualified medical expenses. Any contributions Sherwin-Williams makes to your health savings account are tax-free as well.
- To qualify for a health savings account, you must be enrolled in a high-deductible health insurance plan and you must not be enrolled in Medicare.** Both the Advantage and Prime Plans are Anthem high deductible health plans.

**S-W Benefits Service Center**

- Coverage calculator and site navigation
- [myswbenefits.com](http://myswbenefits.com)
- 1-844-358-0604

**Anthem – Medical**

- 1-833-371-0216
- [www.anthem.com](http://www.anthem.com)
- Group #: 212069

Anthem will send a medical ID card in the mail within 4-6 weeks of your coverage begin date. If you require medical services and don't have your ID card, you or your provider can call Anthem to verify coverage at 1-833-371-0216. You can also view a digital ID card from the Engage Wellbeing app.

**Engage Wellbeing App**

Take your benefits and health to the next level with the Engage mobile app! Your health benefits – in the palm of your hand. Engage lets you:

- See what is covered, for how much and where your health care dollars are going.
- Find doctors you will love using quality ratings and first-hand patient reviews.
- Learn about health perks you didn't even know existed.
- Sync your health gadgets, log activities and track progress.

You can start by going to [Engage-wellbeing.com](http://Engage-wellbeing.com) or downloading the Engage Wellbeing app to sign up or login.

**CVS/caremark – Prescription Drug**

- 1-866-217-5347
- [www.caremark.com](http://www.caremark.com)
- RxBIN: 004336
- RxPCN: ADV
- RxGRP: RX7213

CVS/caremark will send a prescription drug ID card in the mail within 4-6 weeks of your coverage begin date. If you require prescription drug services and don't have your ID card, you or your pharmacy can call CVS/caremark to verify coverage at 1-866-217-5347.

You can also download and print a digital ID card on [www.caremark.com](http://www.caremark.com) or download the CVS/caremark app to access your ID card on a mobile device.

## MY HEALTH & SECURITY



# Advantage and Prime Plans with HSA Key Features

	Advantage Plan with HSA		Prime Plan with HSA	
	In-Network Benefits	Out-of-Network Benefits	In-Network Benefits	Out-of-Network Benefits
<b>Deductible</b>	\$1,750 single \$3,500 family <sup>†</sup>	\$3,500 single \$7,000 family	\$1,500 single \$3,000 family <sup>†</sup>	\$3,000 single \$6,000 family
<b>Annual out-of-pocket maximum you will pay (includes deductible)</b>	\$5,500 single \$11,000 family	No limit on out-of-pocket expenses	\$4,750 single \$9,500 family	No limit on out-of-pocket expenses
<b>Preventive Care</b>	Plan pays 100%	Plan pays 60% after deductible*	Plan pays 100%	Plan pays 60% after deductible*
<b>Primary Care Physician Office Visit</b>	Plan pays 80% after deductible*	Plan pays 60% after deductible*	Plan pays 80% after deductible*	Plan pays 60% after deductible*
<b>Specialist Office Visit</b>	Plan pays 80% after deductible*	Plan pays 60% after deductible*	Plan pays 80% after deductible*	Plan pays 60% after deductible*
<b>Inpatient Hospital Care</b>	Plan pays 80% after deductible*	Plan pays 60% after deductible*	Plan pays 80% after deductible*	Plan pays 60% after deductible*
<b>Retail Prescription Drug (30 day supply)<sup>1</sup></b>	Preventive Prescription Drugs: Plan pays 100% Non-preventive Prescription Drugs: Plan pays 80% <b>after deductible*</b>			
<b>Mail Order or CVS Pharmacy (90 day supply)<sup>1</sup></b>	Preventive Prescription Drugs: Plan pays 100% Non-preventive Prescription Drugs: Plan pays 80% <b>after deductible*</b>			

<sup>1</sup> Prescription Drug Benefits provided by CVS/caremark (see [page 32](#) for more information).  
 \* Plan pays this percentage after you have reached your deductible amount.  
<sup>†</sup> If you are enrolled in any coverage tier other than single/employee only, the family deductible must be met before the plan begins to pay benefits.

**How Deductible is met for Covered Services:** The family deductible must be met before benefits are provided on family coverage. Once the family deductible is met, all family members will be considered as having met their deductible for the remainder of the year.

**How Out-of-Pocket Maximum is met for Covered Services:** For two-person or family coverage, when an individual out-of-pocket maximum is met, that individuals out-of-pocket maximum has been met for the remainder of the year.

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# Advantage and Prime Plans with HSA Prescription Drugs Coverage

When you enroll in the plans, you automatically receive prescription drug coverage through CVS/caremark.

## Here’s how prescription drug expenses are covered under these plans<sup>1</sup>:

<b>Retail Prescription Drug (30 day supply)</b>	<b>Preventive Prescription Drugs*:</b> You pay \$0  <b>Non-preventive Prescription Drugs:</b> You pay 20% <b>after you meet the medical plan deductible</b>
<b>Mail Order or CVS Pharmacy (90 day Supply)</b>	<b>Preventive Prescription Drugs*:</b> You pay \$0  <b>Non-preventive Prescription Drugs:</b> You pay 20% <b>after you meet the medical plan deductible</b>

## Here’s how your Prescription Drug Plan Works:

- Certain preventive prescription drugs—like high blood pressure medication—are covered at 100% with no deductible or copay. A complete list of eligible preventive prescription drugs is available on [myswbenefits.com](https://myswbenefits.com).
- For prescription drugs that are not on the preventive drug list:
  - You pay the full cost of the prescription drug at the pharmacy. You receive the discounted pricing for the drug as a CVS/caremark participant.
  - This amount is automatically credited towards your HealthFund medical plan deductible.
  - After you meet the plan deductible, the plan pays 80% of your expenses. You will pay 20% of the discounted charges at the retail pharmacy or through the mail order program.
  - You can also fill your 90-day prescription at your local CVS pharmacy for the same price as filling it through the mail order service.
- Oral contraceptives covered at 100% for generic and brand name if no generic available.

<sup>1</sup> Under the Advantage and Prime plans, prescription drug expenses are automatically credited toward satisfying the plan deductible.  
 \* Check the Preventive Prescription Drug list on [myswbenefits.com](https://myswbenefits.com) for eligible prescription drugs.

**PLEASE NOTE:** If a brand name drug is dispensed when a generic is available, you must pay the difference between the brand name and the generic drug, plus the generic copay. We use the CVS/caremark formulary, but check the medical plan Summary Plan Description for exclusions.

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# Advantage and Prime Plans with HSA Contributions Per Pay Cycle

**Weekly and Biweekly Rates for Non-Tobacco Users\* that also earned 1,000 points in Balance 4 Well-Being (B4WB) and do not have the Working Spouse Surcharge\*†**

PLAN	Biweekly—Paid Every Two Weeks (26 pays per year)†				Weekly—Paid Every Week (52 pays per year) ‡			
	You Only	You + Child(ren)	You + Spouse	You + Family	You Only	You + Child(ren)	You + Spouse	You + Family
Advantage Plan	\$20.66	\$52.74	\$63.07	\$93.52	\$10.34	\$26.37	\$31.54	\$46.77
Prime Plan	\$51.27	\$108.42	\$127.64	\$183.72	\$25.64	\$54.21	\$63.83	\$91.87

\* If you use tobacco or do not earn 1,000 points in B4WB, your rates will increase.  
 † If you are a new hire or change from part-time to full-time status during the plan year, you will automatically receive the 1,000 point B4WB discount for that year.  
 ‡ **Working Spouse Surcharge:** Add \$27.70 to each biweekly pay, or \$13.85 to each weekly pay, if your spouse works and has access to employer-sponsored coverage.

## Working Spouse Surcharge for Medical Coverage

If your spouse has access to employer-sponsored medical coverage through his or her employer, but you choose to cover your spouse under one of the Company offered medical plans, you will be assessed a surcharge of \$60 per month (note: the \$60 surcharge will not apply if the covered spouse is also a Sherwin-Williams Company employee).

*Certain Valspar Legacy Union populations may have different rates due to the Collective Bargaining Unit. See myswwbenefits.com for details.*

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# Standard Plan

The Standard Plan\* is administered by Anthem and uses the Anthem network of doctors and hospitals. When you use in-network providers, you'll pay less out-of-pocket for covered expenses.

Once you've met the Standard Plan medical deductible, the plan pays for most in-network covered services at 80%. The 20% you are responsible for is called coinsurance. The total amount you'll pay in-network for the Standard Plan medical out-of-pocket expenses is capped—once your Standard Plan medical deductible and 20% coinsurance reach the Standard Plan medical out-of-pocket maximum\*\* amount, the plan will pay 100% of covered services provided in-network for the rest of the calendar year. This is a “safety net,” protecting you financially in case you incur significant medical expenses in a particular year.

\* Hawaii, Puerto Rico and Virgin Islands employees excluded.

\*\* The CVS/caremark prescription drug coverage has a separate out-of-pocket maximum that does not apply to the medical deductible or medical out-of-pocket maximum.

† See the Summary Plan Description for more information.

‡ Excludes in-house testing, lab work, etc.

Certain services require preauthorization.†

Not all services require that you satisfy a deductible. Certain preventive services, like wellness exams for babies and children, an annual physical exam for adults, mammograms and other well woman exams are covered at 100% with no deductible and no office visit copayment.

Office visits for illness/injury are covered at 100% after a \$20 copay for network primary care doctors, or \$35 copay for visits to specialists in the Anthem network. These office co-pays, along with co-pays from emergency room visits, count towards the Out of Pocket Maximum.‡

**S-W Benefits Service Center**

- Coverage calculator and site navigation
- myswbenefits.com
- 1-844-358-0604

**Anthem – Medical**

- 1-833-371-0216
- www.anthem.com
- Group #: 212069

Anthem will send a medical ID card in the mail within 4-6 weeks of your coverage begin date. If you require medical services and don't have your ID card, you or your provider can call Anthem to verify coverage at 1-833-371-0216. You can also view a digital ID card from the Engage Wellbeing app.

**Engage Wellbeing App**

Take your benefits and health to the next level with the Engage mobile app! Your health benefits – in the palm of your hand. Engage lets you:

- See what is covered, for how much and where your health care dollars are going.
- Find doctors you will love using quality ratings and first-hand patient reviews.
- Learn about health perks you didn't even know existed.
- Sync your health gadgets, log activities and track progress.

You can start by going to [Engage-wellbeing.com](http://Engage-wellbeing.com) or downloading the Engage Wellbeing app to sign up or login.

**CVS/caremark – Prescription Drug**

- 1-866-217-5347
- www.caremark.com
- RxBIN: 004336
- RxPCN: ADV
- RxGRP: RX7213

CVS/caremark will send a prescription drug ID card in the mail within 4-6 weeks of your coverage begin date. If you require prescription drug services and don't have your ID card, you or your pharmacy can call CVS/caremark to verify coverage at 1-866-217-5347.

You can also download and print a digital ID card on [www.caremark.com](http://www.caremark.com) or download the CVS/caremark app to access your ID card on a mobile device.

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# Standard Plan Key Features

	Standard Plan	
	In-Network Benefits	Out-of-Network Benefits
<b>Standard Plan Medical Deductible</b>	\$1,000 single \$2,000 family <sup>†</sup>	\$2,000 single \$4,000 family <sup>†</sup>
<b>Standard Plan Medical Annual out-of-pocket maximum you will pay (includes deductible)</b>	\$3,500 single \$7,000 family	No limit on out-of-pocket expenses
<b>Preventive Care</b>	Plan pays 100%	Plan pays 60% after deductible*
<b>Primary Care Physician Office Visit</b>	You pay \$20 copay**	Plan pays 60% after deductible*
<b>Specialist Office Visit</b>	You pay \$35 copay**	Plan pays 60% after deductible*
<b>Inpatient Hospital Care</b>	Plan pays 80% after deductible*	Plan pays 60% after deductible*
<b>Prescription Drug Annual out-of-pocket maximum you will pay</b>	\$3,100 single \$6,200 family  Prescription Drug co-pays accumulate towards the out-of-pocket maximum.	
<b>Retail Prescription Drug (30 day supply)<sup>1</sup></b>	Generic Drug copay: \$15 Preferred Brand-Name Drug: You Pay 35% (\$30 minimum/\$130 maximum) Non-preferred Brand-Name Drug: You Pay 45% (\$50 minimum/\$155 maximum)	
<b>Mail Order or CVS Pharmacy (90 day supply)<sup>1</sup></b>	Generic Drug copay: \$25 Preferred Brand-Name Drug: You Pay 25% (\$60 minimum/\$240 maximum) Non-preferred Brand-Name Drug: You Pay 35% (\$80 minimum/\$280 maximum)	

**How Deductible is met for Covered Services:** The family deductible must be met before benefits are provided on family coverage. Once the family deductible is met, all family members will be considered as having met their deductible for the remainder of the year.

**How Out-of-Pocket Maximum is met for Covered Services:** For two-person or family coverage, when an individual out-of-pocket maximum is met, that individual's out-of-pocket maximum has been met for the remainder of the year.

<sup>†</sup> If you are enrolled in any coverage tier other than single/employee only, the family deductible must be met before the plan begins to pay benefits.

\* Plan pays this percentage after you have reached your deductible amount.

\*\* For Primary Care Physician and Specialist office visit, the visit itself is subject to copay. Additional services are subject to deductible and coinsurance.

<sup>1</sup> Prescription Drug Benefits provided by CVS/caremark (see [page 36](#) for more information).

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# Standard Plan Prescription Drugs Coverage

When you enroll in the Standard Plan you automatically receive prescription drug coverage through CVS/caremark.

Here's how prescription drug expenses are covered under this plan <sup>1</sup> :	
<b>Retail Prescription Drug (30 day supply)</b>	<p><b>Generic Prescription Drug Copay:</b> You pay \$15</p> <p><b>Preferred Brand-Name Prescription Drug:</b> You pay 35% of the cost of the drug (\$35 minimum/\$130 maximum)</p> <p><b>Non-Preferred Brand-Name Prescription Drug:</b> You pay 45% of the cost of the drug (\$50 minimum/\$155 maximum)</p>
<b>Mail Order or CVS Pharmacy (90 day Supply)</b>	<p><b>Generic Prescription Drug Copay:</b> You pay \$25</p> <p><b>Preferred Brand-Name Prescription Drug:</b> You pay 25% of the cost of the drug (\$65 minimum/\$240 maximum)</p> <p><b>Non-Preferred Brand-Name Prescription Drug:</b> You pay 35% of the cost of the drug (\$80 minimum/\$280 maximum)</p>
<b>Prescription Drug Annual out-of-pocket maximum you will pay</b>	<p>\$3,100 single \$6,200 family</p> <p>Prescription Drug co-pays accumulate towards the prescription drug out-of-pocket maximum.</p>

<sup>1</sup> Under the Standard Plan, prescription drug copays and coinsurance do not apply to the Standard Plan medical plan deductible or Standard Plan medical out-of-pocket maximum.

Here's how your Prescription Drug Plan works:	
Retail Prescription Drugs (30 day supply)	Mail Order or CVS/caremark Pharmacy (90 day supply)
<ul style="list-style-type: none"> <li>Short-term prescriptions (30 days or less) are filled at a CVS/caremark network pharmacy.</li> <li>When you fill a generic prescription, you pay a \$15 copay (or the price of the drug, if less than \$15), and the plan pays the rest.</li> <li>If your doctor prescribes a brand-name prescription drug that's on the CVS/caremark preferred drug list, you pay 35% of the cost—the minimum amount you'll pay is \$30, and the maximum amount is capped at \$130.</li> <li>If you receive a prescription for a brand-name drug that isn't on CVS/caremark's preferred list, you'll pay 45% of the cost—the minimum amount you'll pay is \$50, and the maximum amount is capped at \$155.</li> <li>Oral contraceptives covered at 100% for generic and brand name if no generic available.</li> </ul>	<ul style="list-style-type: none"> <li>If you need medication on a longer-term, regular basis, ask your doctor to write a 90-day prescription.</li> <li>You have a choice in how you order and receive your 90-day maintenance prescriptions.</li> <li>You can receive your 90-day supply through CVS/caremark's Mail Service Pharmacy, or you can have the prescription filled at your local CVS pharmacy. The cost is the same using either service.</li> <li>A 90-day supply of a generic prescription drug has a \$25 copay.</li> <li>If you are prescribed a brand-name drug that's on CVS/caremark's preferred drug list, you pay 25% of the cost—the minimum amount you'll pay is \$60, and the maximum amount is capped at \$240.</li> <li>If you receive a prescription for a brand-name drug that isn't on CVS/caremark's preferred list, you'll pay 35% of the cost—the minimum amount you'll pay is \$80, and the maximum amount is capped at \$280.</li> <li>Oral contraceptives covered at 100% for generic and brand name if no generic available.</li> </ul>

PLEASE NOTE: If a brand name drug is dispensed when a generic is available, you must pay the difference between the brand name and the generic drug, plus the generic copay. This cost does not apply to prescription out-of-pocket maximum.

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# Standard Plan Contributions Per Pay Cycle

## Weekly and Biweekly Rates for Non-Tobacco Users\* that also earned 1,000 points in Balance 4 Well-Being (B4WB) and does not have the Working Spouse Surcharge\*†

Biweekly—Paid Every Two Weeks (26 pays per year)‡				Weekly—Paid Every Week (52 pays per year) ‡			
You Only	You + Child(ren)	You + Spouse	You + Family	You Only	You + Child(ren)	You + Spouse	You + Family
\$73.41	\$150.90	\$176.90	\$253.37	\$36.71	\$75.45	\$88.45	\$126.69

\* If you use tobacco or do not earn 1,000 points in B4WB, your rates will increase.  
 † If you are a new hire or change from part-time to full-time status during the plan year, you will automatically receive the 1,000 point B4WB discount for that year.  
 ‡ **Working Spouse Surcharge:** Add \$27.70 to each biweekly pay, or \$13.85 to each weekly pay, if your spouse works and has access to employer-sponsored coverage.

### Working Spouse Surcharge for Medical Coverage

If your spouse has access to employer-sponsored medical coverage through his or her employer, but you choose to cover your spouse under one of the Company offered medical plans, you will be assessed a surcharge of \$60 per month (note: the \$60 surcharge will not apply if the covered spouse is also a Sherwin-Williams Company employee).

*Certain Valspar Legacy Union populations may have different rates due to the Collective Bargaining Unit. See myswwbenefits.com for details.*

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# Anthem Tools & Resources

## Advantage, Prime and Standard Medical Plans

**Anthem Blue Cross Blue Shield Anthem, at [www.anthem.com](http://www.anthem.com), offers up-to-date health and consumer information, self-service features, interactive tools and much more!** Once you register with Anthem Health, you can check recent claim payments, request ID cards and access these helpful programs:

- ☑ **Anthem Maternity Program, Future Moms** provides personalized support for expecting mothers and their families. The program is designed to control medical costs by providing for high-risk participants and reducing NICU admissions. Call 1-833-371-0216 to learn more.
- ☑ **24/7 NurseLine** allows members to talk via toll-free telephone calls to nurses around the clock or to select health topics from a pre-recorded audio library.

- ☑ **Discount Programs** give members access to discounts for health-related services and products, like fitness club memberships, wellness products, alternative medicine services, vision care and more.

- ☑ **Find a Doctor**
  - Members outside state of GA: <https://www.anthem.com/find-care/?alphaprefix=901>
  - Members residing in state of GA: <https://www.anthem.com/find-care/?alphaprefix=108>

- ☑ **Member Services/ Anthem Health Guides** are accessible 24/7 – 365 days a year by calling 1-833-371-0216. Anthem Health Guides can provide support for coordinated care efforts, help you find in-network providers, provide information about your benefits and coverage and answer questions on all Anthem program offerings.

**LiveHealth Online**  
24/7 Telehealth solution that allows members to talk directly with a doctor online to get expert advice, a treatment plan or prescriptions.

- [www.livehealthonline.com](http://www.livehealthonline.com)
- [customersupport@livehealthonline.com](mailto:customersupport@livehealthonline.com)
- 1-855-603-7985.

**AIM Specialty Health**  
Based on clinical guidelines for imaging services, this radiology benefit management program is designed to save costs on imaging services. The program includes proactive member outreach to both inform and guide members to high quality, lower cost CT/MRI service locations. Includes Sleep Program: This program ensures treatment compliance for sleep disorders by using evidence-based clinical guidelines for diagnosis, treatment and dispensing supplies.

**You must be enrolled in the Advantage, Prime or Standard Plan to take advantage of these programs.**

## MY HEALTH & SECURITY

**Engage Wellbeing**  
**Take your benefits and health to the next level with the Engage mobile app!**



Your health benefits — in the palm of your hand.

- Engage lets you:
- See what is covered, for how much and where your health care dollars are going.
  - Find doctors you will love using quality ratings and first-hand patient reviews.
  - Learn about health perks you didn't even know existed.
  - Sync your health gadgets, log activities and track progress.
  - View your ID cards.

You can start by going to [Engage-wellbeing.com](http://Engage-wellbeing.com) or downloading the Engage Wellbeing app to sign up or login.



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# Anthem Integrated Clinical Programs

## Advantage, Prime and Standard Medical Plans

### Autism Spectrum Disorder (ASD)

Contact Anthem Health Guide for more information.

### Anthem Behavioral Health Resource

This Clinical program for members with depression or complex behavioral conditions is designed to provide 24/7 access to a full range of support. Call center specialists can view member benefits to refer them to the appropriate provider or program. Members can also talk to licensed clinicians about any clinically complex situation or crisis need.

An Autism Spectrum Disorders component of the program provides support for parents who are balancing work with the demands of a child with special needs.

### Cancer Care Quality

program provides decision support and incentives to oncologists to help ensure our members get cost-effective, evidence-based care.

### Case management program, ComplexCare

Gives members who need a higher level of support to manage complex or high-risk chronic conditions.

### Transplant care

Contact Anthem Health Guide for more information.

### Gaps in care program, MyHealth Advantage

Designed to help improve health outcomes and reduce medical costs using personalized, evidence-based care recommendations for members.



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# Health Maintenance Organization (HMO) Option

## Health Maintenance Organization (HMO)

Depending on your location, an HMO may be available\*. An HMO is a network of doctors, hospitals and pharmacies that have agreed to charge negotiated rates for health care services.

If you choose coverage under an HMO option, remember that generally no benefits are paid if you don't use an HMO

provider or pharmacy. HMOs also require that your care be coordinated through a primary care physician (PCP). You go to your PCP first, and your PCP will refer you to a specialist or other health care provider, if necessary.

HMOs are only available to those in certain zip codes in California, Georgia, Maryland, Oregon and Washington.

To meet State requirements, Regular Full-Time Employees are offered the POS Kaiser Plan. Part-Time Employees in Hawaii who meet certain requirements and are approved by Human Resources are eligible to enroll in the HMO Hawaii Kaiser Plan.

**If an HMO is available to you, it will be shown on [myswbenefits.com](https://myswbenefits.com) as well as plan and employee contribution information.**

## Weekly and Biweekly Rates for Non-Tobacco Users\* that also earned 1,000 points in Balance 4 Well-Being (B4WB) and do not have the Working Spouse Surcharge†

PLAN	Biweekly—Paid Every Two Weeks (26 pays per year)‡				Weekly—Paid Every Week (52 pays per year) ‡			
	You Only	You + Child(ren)	You + Spouse	You + Family	You Only	You + Child(ren)	You + Spouse	You + Family
Kaiser California North HMO	\$169.62	\$300.42	\$344.23	\$473.68	\$84.81	\$150.21	\$172.12	\$236.84
Kaiser California South HMO	\$82.05	\$134.01	\$151.55	\$202.18	\$41.03	\$67.00	\$75.78	\$101.09
Kaiser Georgia HMO	\$112.31	\$191.51	\$218.13	\$295.99	\$56.16	\$95.76	\$109.07	\$148.00
Kaiser Maryland HMO	\$112.31	\$191.51	\$218.13	\$295.99	\$56.16	\$95.76	\$109.07	\$148.00
Kaiser Northwest HMO	\$112.31	\$191.51	\$218.13	\$295.99	\$56.16	\$95.76	\$109.07	\$148.00

\* If you use tobacco or do not earn 1,000 points in B4WB, your rates will increase.

† If you are a new hire or change from part-time to full-time status during the plan year, you will automatically receive the 1,000 point B4WB discount for that year.

‡ **Working Spouse Surcharge:** Add \$27.70 to each biweekly pay, or \$13.85 to each weekly pay, if your spouse works and has access to employer-sponsored coverage.

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If your spouse has access to employer-sponsored medical coverage through his or her employer, but you choose to cover your spouse under one of the Company offered medical plans, you will be assessed a surcharge of \$60 per month (note: the \$60 surcharge will not apply if the covered spouse is also a Sherwin-Williams Company employee).



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# Health Plan Comparison Tool — Puerto Rico and Virgin Islands

## Puerto Rico – Medical Card Systems MEDICAL, DENTAL, VISION AND LIFE INSURANCE

[www.mcs.com.pr](http://www.mcs.com.pr)  
 1-888-758-1616  
 Group#: 790937

Biweekly—Paid Every Two Weeks (26 pays per year)				
PLAN	You Only	You + Child(ren)	You + Spouse	You + Family
Puerto Rico	\$23.48	\$44.02	\$46.89	\$65.05
Weekly—Paid Every Week (52 pays per year)				
Puerto Rico	\$11.74	\$22.01	\$23.44	\$32.52

## Virgin Islands – Elan Insurance MEDICAL, DENTAL, VISION AND CLAIMS ADMINISTRATION

[myhealth.healthsmart.com](http://myhealth.healthsmart.com)  
 1-844-464-4277

Biweekly—Paid Every Two Weeks (26 pays per year)*				
PLAN	You Only	You + Child(ren)	You + Spouse	You + Family
Virgin Islands	\$63.16	\$97.26	\$108.24	\$140.60
Weekly—Paid Every Week (52 pays per year) †				
Virgin Islands	\$31.58	\$48.63	\$54.12	\$70.30

\* **Working Spouse Surcharge:** Add \$27.70 to each biweekly pay, or \$13.85 to each weekly pay, if your spouse works and has access to employer-sponsored coverage.



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# Health Coverage Resources

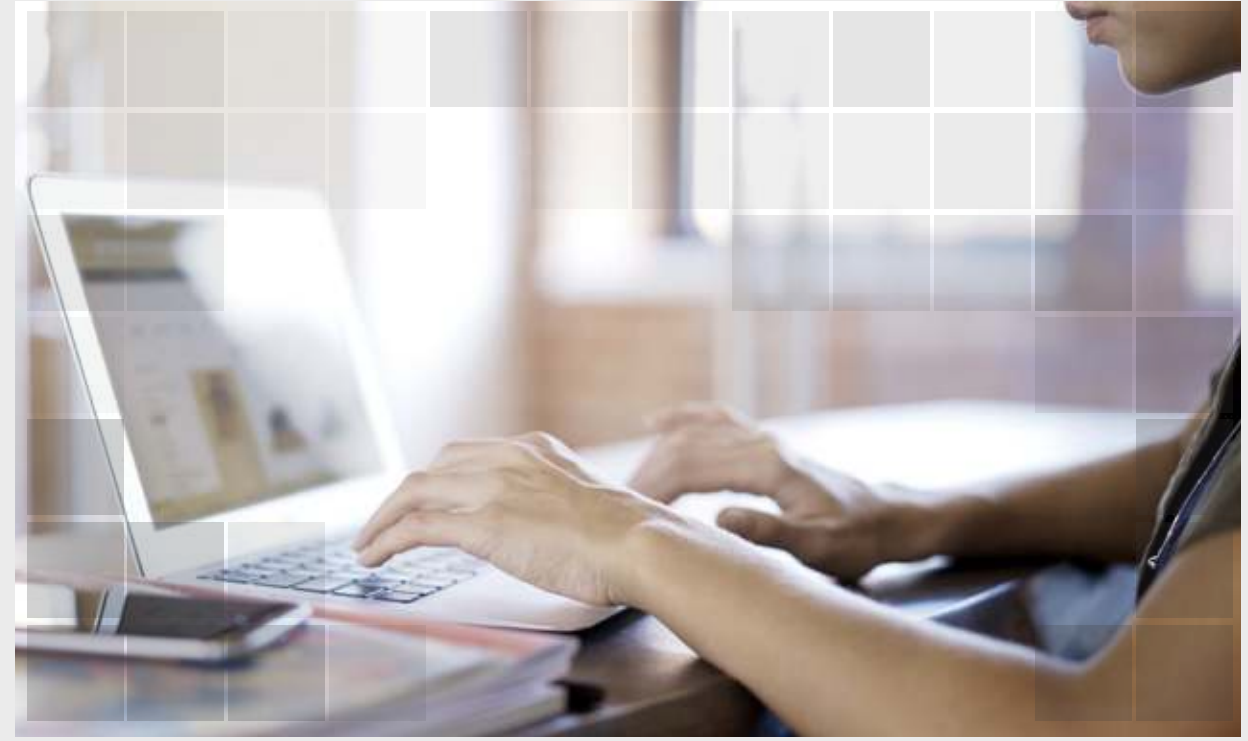
## Health Coverage Resources

Health Coverage Resources provides tools and resources to help part-time employees or retirees not eligible for company sponsored medical find medical plan coverage options offered through public or other programs.

- [www.healthcoverageresources.com/sherwin/home](http://www.healthcoverageresources.com/sherwin/home)

## eHealth

- Questions on plans and pricing
- 1-877-731-9565



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# Teladoc Medical Experts: Expert Medical Opinion

## Teladoc Medical Experts

Teladoc Medical Experts is an expert **second opinion service**. It lets you get advice from the world's leading physicians on everything from minor surgery and maternity challenges to more serious issues like cancer and heart disease. If you're uncertain about a diagnosis or treatment, a Teladoc Medical Experts clinician will take another look at your case and provide a confirmation or recommend a change.

[Teladoc Medical Experts](#) is completely confidential and cost-free. It's included in your benefits package and available at no charge to you, your spouse and any of your eligible dependents enrolled in the company health plan. You don't even have to make doctors' appointments or travel. All of the Teladoc Medical Experts services are provided over the phone or the Internet.

## Mental Health Navigator: Second Opinion

Mental Health Navigator service is available as part of the Teladoc Medical Experts program to employees and their sponsored dependents who have been diagnosed or are struggling with managing a mental health condition. Licensed, expert psychiatrists provide an in-depth review and recommendations for the diagnosis and/or treatment plans made by primary care physicians or other practitioners. In addition to the experts' recommendations, a personalized action plan is created for each member. A dedicated Navigator then provides collaborative ongoing support to assist with the action plan and ensure the member makes each next step with confidence.

**Teladoc Medical Experts services are available to: Employees and dependents enrolled in the Advantage, Prime or Standard Plan and their extended family (including: parents, in-laws, siblings/step-siblings, grandparents, grandchildren, nieces, nephews, aunts and uncles).**



**Contact Teladoc Medical Experts at:  
 1-855-835-2362**

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# Dental Plan Options\*

The S-W Dental Plan is a PPO administered by Aetna. This plan allows you to use any licensed dentist for your care, but provides the highest level of coverage if you visit a dentist that is an Aetna preferred provider. Here are the plan's key features:

	In-Network	Out-of-Network
<b>Calendar Year Deductible</b>	None	\$25 per individual, \$75 per family Applies to Preventive, Diagnostic, Basic and Major Services
<b>Calendar Year Benefit Maximum</b>	\$2,000 per individual Applies to Preventive, Diagnostic, Basic and Major Services	\$2,000 per individual Applies to Preventive, Diagnostic, Basic and Major Services
<b>Preventive and Diagnostic Services</b>	Covered at 100% with no deductible	Covered at 100% of R&C after deductible†
<b>Basic Restorative Services (Employee Responsibility)</b>	You pay 20% of discounted charges‡	You pay 20% of R&C after deductible‡
<b>Major Services (Employee Responsibility)</b>	You pay 50% of discounted charges‡	You pay 50% of R&C after deductible‡
<b>Orthodontia Benefit</b>	You pay 50% of discounted charges‡	You pay 50% of charges after deductible
<b>Orthodontia Lifetime Maximum</b>	\$2,000 per individual	\$2,000 per individual

\* Puerto Rico and Virgin Islands employees excluded.

† In-network benefit is based on a percentage of Aetna negotiated fees.

‡ The out-of-network benefit is a percentage of the reasonable and customary (R&C) charge for a covered service or supply. Charges in excess of the R&C amount are the responsibility of the member.

## Weekly and Biweekly Dental Plan Contributions Per Pay Cycle

PLAN	Biweekly—Paid Every Two Weeks (26 pays per year)*				Weekly—Paid Every Week (52 pays per year) †			
	You Only	You + Child(ren)	You + Spouse	You + Family	You Only	You + Child(ren)	You + Spouse	You + Family
Dental PPO Plan	\$5.54	\$10.38	\$10.62	\$17.08	\$2.77	\$5.19	\$5.31	\$8.54
DMO	\$4.27	\$8.19	\$9.23	\$13.15	\$2.13	\$4.10	\$4.62	\$6.58

### Aetna – Dental

- 1-877-238-6200
- www.aetna.com
- Group #: 619325

You will not receive a dental ID card in the mail; however, you can print one from [www.aetna.com](http://www.aetna.com) or access a digital version through the Aetna app. If you prefer a physical Dental ID card you can call Aetna and request an ID card to be sent to you.

If you require dental services and don't have access to your ID card, you or your provider can call Aetna to verify coverage at 1-877-238-6200.

### In-network providers can be found by:

- Using DocFind at [www.aetna.com](http://www.aetna.com), or
- Calling Member Services at 877-238-6200 or emailing them at [www.aetna.com](http://www.aetna.com) once you are enrolled as an Aetna plan member.

### Aetna Dental Maintenance Organization (DMO) Plan

In addition to the Dental PPO plan outlined above, a Dental Maintenance Organization (DMO) also may be available to you. Like a medical HMO, a DMO plan covers services provided by a network of DMO dentists and specialists. If the DMO is available in your area, it will be listed on [myswbbenefits.com](http://myswbbenefits.com).

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# Vision Plan\*

The Sherwin-Williams Vision Plan is administered by EyeMed Vision Care. When you select vision coverage, you and your dependents may receive an eye examination **once** every calendar year. In addition, the plan covers all or part of the cost of either eye glasses or contact lenses **once** every calendar year.

The EyeMed Plan uses a broad-based network of providers including LensCrafters, Pearle Vision, Target, [Glasses.com](http://Glasses.com), [ContactsDirect.com](http://ContactsDirect.com), and independent providers, giving you access to more than 29,000 providers nationwide. To choose a network provider, visit [www.eyemedvisioncare.com](http://www.eyemedvisioncare.com).

Once you've used your EyeMed Vision Care benefit, you can save 40% off a complete pair of prescription eyeglasses, 20% off nonprescription sunglasses and 20% off remaining balances beyond plan coverage at in-network Providers.

\* Puerto Rico and Virgin Islands employees excluded.

	In-Network Member Cost	Out-of-Network Reimbursement
<b>Exam with Dilation as Necessary</b>	\$10 copay	Up to \$25
<b>Standard Contact Lens Fit and Follow Up</b>	Up to \$40	N/A
<b>Frames</b>	You will receive an annual allowance of \$150 towards your frames, plus 20% off balance over \$150	Up to \$30
<b>Standard Plastic Lenses</b>		
Single Vision	\$0 copay	Up to \$25
Bifocal	\$0 copay	Up to \$40
Trifocal	\$0 copay	Up to \$50
<b>Lens Options</b>		
UV Coating	\$15	N/A
Tint (Solid and Gradient)	\$15	N/A
Standard Scratch Resistance	\$15	N/A
Standard Polycarbonate	\$40	N/A
Standard Progressive	\$65	N/A
Standard Anti-Reflective Coating	\$45	N/A
Other add-ons and services	20% off retail price	N/A
<b>Contact Lenses</b>		
Conventional and Disposable	\$150 allowance, 15% off balance over \$150 (conventional only)	Up to \$70
<b>Laser Vision Correction</b>		
Lasik or PRK from U.S. Laser Network		15% off retail price or 5% off promotional price

Note: The total allowance for lenses is \$150.

## Weekly and Biweekly Vision Plan Contributions Per Pay Cycle

Biweekly—Paid Every Two Weeks (26 pays per year)				Weekly—Paid Every Week (52 pays per year)			
You Only	You + Child(ren)	You + Spouse	You + Family	You Only	You + Child(ren)	You + Spouse	You + Family
\$2.34	\$4.69	\$4.69	\$7.03	\$1.17	\$2.35	\$2.35	\$3.52

## MY HEALTH & SECURITY



**EyeMed – Vision**

- 1-866-723-0514
- [www.eyemedvisioncare.com](http://www.eyemedvisioncare.com)
- Group #: 9682204
- Network: Select

EyeMed sends two ID cards in the subscriber's name when you join, but you don't have to have it when you visit your eye doctor. If you lose your card or need extras for your family, you can print a replacement on the member portal: [www.eyemedvisioncare.com/member/public/login.emvc](http://www.eyemedvisioncare.com/member/public/login.emvc)

Or to pull up a digital version anytime, anywhere, download the EyeMed Members App through the [App Store](#) or [Google Play](#).

If you require vision services and don't have access to your ID card, you or your provider can call EyeMed to verify coverage at 1-866-723-0514.

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# Vision Plan Extra Benefits

## ContactsDirect.com

Good things happen when you use your EyeMed benefits at ContactsDirect.com.

**Save \$20 off your next order of contacts** (above and beyond your regular contact lens benefit) and get **free shipping**. To get your discounts:

- Register at [ContactsDirect.com](https://www.contactsdirect.com) using your EyeMed member information
- Log in when shopping for contacts
- EyeMed will apply your savings automatically and take another \$20 off

No coupons. No codes. No problem.

*Expiration dates may vary. Log into your member account at [eyemed.com](https://www.eyemed.com) for full offer exclusions and expiration details. Offer valid for select EyeMed groups. Must be an active enrolled EyeMed member to redeem. No promo or coupon code needed. One time use only. Must be combined with your EyeMed vision benefits, which can be applied online in the cart at ContactsDirect. May not be combined with other offers. Valid prescription required. Void where prohibited by law. No cash value. Some exclusions may apply. Offer subject to change.*

## Freedom Pass from EyeMed

With Freedom Pass, members get a special offer at LensCrafters, Target Optical and participating Sears Optical: **\$0 out-of-pocket cost for their choice of frames – no matter the price point.**<sup>1</sup>

That means your employees will incur no cost on frames from top leading brands like Ray Ban, Oakley, Coach, Micheal Kors, Armani Exchange, and Vogue.

### For LensCrafters:

Go to [freedompass.eyemed.com](https://freedompass.eyemed.com) and enter EMFP21 to get your in-store offer code.

**For Target Optical:** Use code 755288.

<sup>1</sup> A special offer from LensCrafters, Target Optical and Sears Optical. \$130 or higher frame allowance required. Valid for each year of the initial contract term and in-store only at LensCrafters, Target Optical and Sears Optical. Offer not valid at Sears Optical stores affiliated with US Vision. Offer excludes Chanel, Cartier, Tiffany, Prada, Gucci, Tom Ford and Giorgio Armani frames. Complete pair purchase required – member is still responsible for lenses, which are covered based on benefits outlined in the vision benefits and may include an additional copay. Discounts are not insured benefits. <sup>2</sup>EyeMed analysis of business results, before and after offering Freedom Pass from Target Optical and Sears Optical, 2018. <sup>3</sup>EyeMed analysis of average Freedom Pass savings at LensCrafters, Target Optical and Sears Optical.



## Sun Perks from EyeMed

Quality sunglasses can provide excellent protection, blocking at least 99% of both UVA and UVB rays. In fact, extended sun exposure has been linked to damage of the lens, retina and the eye's surface. Plus, premium lenses provide better clarity, sharpened details and better depth perception — without distortion or glare. And polarized lenses take it one step further by absorbing and filtering out unwanted light rays.

With Sun Perks from EyeMed, receive **\$20 any purchase of premium non-prescription sunglasses**, or **\$50 off a purchase of \$200 or more toward premium, non-prescription sunglasses** at Sunglass Hut.\*

Simply redeem your sun savings online at [sunglasshut.com](https://www.sunglasshut.com) or at any participating Sunglass Hut store.

\* May not be combined with any other offers or discounts. Transaction must be completed by 12/31/2021. Offer valid for the first year of the contract only. This is not insurance. Redeemable at any participating U.S. Sunglass Hut, Sunglass Hut at Macy's or online, or at [SunglassHut.com](https://www.SunglassHut.com). Excludes Chanel, Maui Jim, Oakley, Tiffany and Tom Ford.

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# Health Care Flexible Spending Account (FSA)

## Keep More of the Money You Earn!

Using a flexible spending account is like getting a discount on certain expenses—not because the expenses are less, but because you are paying with money that has not been taxed. You can use a spending account to get reimbursed for eligible Health care expenses, through a Health Care Spending Account.

Spending accounts offer tax breaks that feel like a boost to your take-home pay. Here’s how they work:

- You direct a part of your pre-tax pay into a spending account. Your contributions are taken out of your paycheck through regular, equal payroll deductions.
- You can use your spending account throughout the year to reimburse yourself or help pay for certain eligible expenses.
- The portion of your paycheck you put into your spending account is taken out before you pay federal income taxes, Social Security and most state taxes. The amount available to spend during

the year is based on the yearly amount you elected, minus any reimbursements already made.

**Please remember:** Your health care spending account dollars are **“use-it-or-lose-it”** funds. Account balances are not carried over from year to year. This means that if you have any unused funds at the end of the plan year, those funds will be forfeited. So estimate what you want to direct to your spending account carefully.

### Eligible Expenses

Here are just some expenses you can pay with your health care FSA:

- Medical, dental, vision and prescription drug copays
- Eye exams and eyeglasses
- Contact lenses and saline solution
- Hearing aids
- Laboratory fees
- Mental health counseling

All expenses must be qualified medical, vision, pharmacy or dental benefit

expenses, as defined in Section 213(d) of the Internal Revenue Code.

Over-the-counter medications can only be paid with funds from your FSA if your doctor prescribes them.

### Your Contribution

Ready to decide the amount you want in your FSA? It’s good to plan ahead. Consider the medical, vision or pharmacy costs not covered by a health plan. Need dental work? How about contact lenses? Your FSA may help pay for these items and more. Also look at family changes that might have an impact on your expenses.

You can contribute a minimum of \$150 and a maximum of \$2,750 per year to your Health Care FSA in 2022.

### Getting Reimbursed

Getting reimbursed is easy. You will receive a debit card to use to pay for your reimbursable expenses. There is no need to fill out a paper claim form.

Eligible health care expenses are reimbursed up to the full amount of your annual FSA contribution, minus any amount already reimbursed. Employee has until 3/31 of the next year to request reimbursement for the prior year.

To access your account or if you have questions, contact the Sherwin-Williams Benefits Service Center at 1-844-358-0604.

**What’s the Difference between FSA and HSA?**

- FSAs can be paired with the Standard Plan or HMO plan; HSA accounts can only be paired with the Advantage or Prime Plan.
- With a FSA, you need to use the money in your account(s) by the end of the plan year, or you forfeit it. HSA account balances roll over year to year, allowing you to build balances for future medical expenses, even in retirement.

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# Dependent Care Flexible Spending Account (FSA)

## Keep More of the Money You Earn!

Here's great news. You can:

- Pay for eligible dependent care expenses with pre-tax dollars
- Lower the taxes taken out of your pay

These are just two of the great advantages you get with a [Flexible Spending Account \(FSA\)](#).

Using a flexible spending account is like getting a discount on certain expenses—not because the expenses are less, but because you are paying with money that has not been taxed. You can use a spending account to get reimbursed for eligible Dependent care expenses, through a Dependent Care Spending Account.

## Dependent Care Flexible Spending Account

A Dependent Care FSA is a great way to pay dependent care expenses and lower your taxable income. Here's how it works:

- You direct part of your before-tax pay into a special account to help pay work-related dependent care costs.
- Your contributions are taken out of your paycheck through regular, equal payroll deductions.
- You can use your spending account throughout the year to reimburse yourself or help pay for certain eligible expenses.
- Your expense must be for the purpose of allowing you and, if married, your spouse to be employed
- The portion of your paycheck you put into your spending account is taken out before you pay federal income taxes, Social Security and most state taxes. The amount available to spend during the year is based on the yearly amount you elected, minus any reimbursements already made.

**Please remember:** Your dependent care spending account dollars are **“use-it-or-lose-it”** funds. Account balances are not carried over from year to year. This means

that if you have any unused funds at the end of the plan year, those funds will be forfeited. So estimate what you want to direct to your spending account carefully.

## Qualifying Dependents

A dependent care FSA helps reimburse you for the work-related cost of care for a qualifying dependent. A qualifying dependent is:

- A tax dependent of yours who is under age 13, or
- Any other tax dependent of yours, such as an elderly parent, who is physically or mentally incapable of self-care and has the same principal residence as you
- A spouse who is physically or mentally incapable of self-care and has the same principal residence as you

## Your Contribution

The Internal Revenue Service limits the amount you can put into a dependent care FSA, up to:

- \$5,000 per year, if you are married and filing a joint return, or if you are a single parent

- \$2,500 per year, if you are married and filing separately

Estimate what your day care expenses will be for the year, and allocate enough from your pay, up to the allowable contribution limit, to cover them.

## Getting Reimbursed

Under IRS guidelines, you can only be reimbursed for dependent care that has already taken place. Also, you can only be reimbursed for the amount you have already contributed to your dependent care FSA. Unlike the health care FSA, the full amount of your dependent care election is not available January 1. Employee has until 3/31 of the next year to request reimbursement for the prior year.

You can access your account and review additional information at [myswbenefits.com](https://myswbenefits.com) or 1-844-358-0604.

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# Group Life Insurance Options

For Non-Union Employees Only\*

## Basic Employee Life Insurance

Sherwin-Williams pays the full cost of Basic Employee Life Insurance coverage equal to two times your annual earnings to a maximum of \$150,000. Sherwin-Williams provides life insurance through Prudential Insurance Company of America.

## Optional Employee Life Insurance

If you want life insurance coverage in addition to that provided by Sherwin-Williams, you may purchase optional employee life insurance in increments of one to seven times your earnings up to a maximum of \$1.5 million. Your contribution is based on your age and on the amount of insurance elected.

As a newly hired employee, if you elect an amount over \$500,000 or 3 times your salary, you will have to provide evidence of insurability and be approved by the insurance company in order to elect the benefit.

Fluctuations in your annual earnings and increased age may cause your level of coverage and contributions to change.

### Sherwin-Williams Optional Employee Life Monthly Contributions

Age	Monthly Cost Per \$1,000 Coverage
<25	\$.045
25-29	\$.055
30-34	\$.073
35-39	\$.082
40-44	\$.092
45-49	\$.137
50-54	\$.211
55-59	\$.394
60-64	\$.605
65-69	\$1.163
70+	\$1.886

**Questions?** Contact the Sherwin-Williams Benefits Service Center at 1-844-358-0604 if there are questions on coverage or beneficiary elections.

**How to calculate your monthly premium amount:** John is age 36 and his annual salary is \$48,500. John would like to elect 3 times his salary (\$145,500) in order to protect his family in the event of his death. John would look at the chart above and locate his age (35-39) and the corresponding rate (.089). He would multiply his desired coverage amount by that rate (\$145,500 x .089 = 12,950) and then divide that figure by 1,000 (= \$12.95). This would be his monthly premium for the amount of coverage he wants.

\* **Collectively Bargained Employees:** The information on this page is for Non-Union Employees ONLY. Please refer to your Union Contract for information regarding the availability life insurance options.

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# Optional Spouse and Dependent Life Insurance

For Non-Union Employees Only\*

## Optional Spouse/Domestic Partner Spouse Life Insurance

You may purchase Optional Spouse/Domestic Partner Spouse Life insurance coverage for amounts equal to: \$15,000, \$25,000 or \$50,000. Upon initial enrollment as a New Hire elections of \$50,000 are subject to proof of good health and approval by Prudential. All other enrollment changes are subject to proof of good health and approval by Prudential. Increased age may cause your level of coverage and contributions to change.

### Sherwin-Williams Optional Spouse/Domestic Partner Spouse Life Insurance Monthly Contributions

Age	Monthly Cost Per \$1,000 Coverage
<25	\$.045
25-29	\$.055
30-34	\$.073
35-39	\$.082
40-44	\$.092
45-49	\$.137
50-54	\$.211
55-59	\$.394
60-64	\$.605
65-69	\$1.163
70+	\$1.886

### How to calculate your monthly premium amount:

John is age 36 and his annual salary is \$48,500. John would like to elect 3 times his salary (\$145,500) in order to protect his family in the event of his death. John would look at the chart above and locate his age (35-39) and the corresponding rate (.089). He would multiply his desired coverage amount by that rate (\$145,500 x .089 = 12,950) and then divide that figure by 1,000 (= \$12.95). This would be his monthly premium for the amount of coverage he wants.

## Optional Dependent Child(ren)/ Domestic Partner Child(ren) Life Insurance

You may purchase Optional Dependent Child(ren)/Domestic Partner Child(ren) Life insurance in coverage amounts of \$10,000 or \$20,000. Dependent Child(ren)/ Domestic Partner Child(ren) are covered to age 26. Proof of good health is not required.

### Sherwin-Williams Optional Dependent Child(ren)/ Domestic Partner Child(ren) Life Insurance Monthly Contributions

Amount of Coverage	Monthly Cost
\$10,000	\$.80
\$20,000	\$1.60

The Employee is automatically the beneficiary of the Optional Dependent Life Insurance Policies.

**“Spouse” is defined as your legal spouse, domestic partner.**

**“Dependent” is defined as your:**

- Unmarried children from live birth to 26 years old
- Legally adopted children and/or a child placed with you for adoption prior to legal adoption is considered your Qualified Dependent from the date of placement for adoption, and is treated as though the child were a newborn child born to you
- Stepchildren
- Domestic partner’s children
- Foster children who depend on you for support and maintenance

*Exceptions: Your spouse, domestic partner or dependent child is not considered a “qualified dependent” while on active duty in the armed forces of any country.*

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# Optional Employee and Family Accidental Death & Dismemberment Insurance

## For Non-Union Employees Only\*

Optional Employee AD&D insurance can provide financial assistance to you and your family in the event of accidental loss of life, limb, eyesight, speech or hearing.

If you are married or are considered the head of your household, you can extend your coverage to include your spouse, domestic partner, unmarried dependent children and children of domestic partners up to age 26. Eligible family members are covered as a percentage of the principal sum you select for yourself, as shown below:

	Spouse Only	Spouse with Dependent(s) only	Employee Only Dependent(s)
Spouse	65%	60%	N/A
Each dependent child(ren)	N/A	10%	20%

You can select between \$10,000 and \$500,000 of coverage. Coverage over \$250,000, however, cannot exceed ten times your annual earnings. The full amount you select is referred to as the principal sum.

### Monthly Contributions

Principal Sum Selected	Monthly Cost Employee Only	Monthly Cost Family Plan
\$10,000	\$ .16	\$ .24
\$25,000	\$ .40	\$ .60
\$50,000	\$ .80	\$ 1.20
\$75,000	\$ 1.20	\$ 1.80
\$100,000	\$ 1.60	\$ 2.40
\$125,000	\$ 2.00	\$ 3.00
\$150,000	\$ 2.40	\$ 3.60
\$175,000	\$ 2.80	\$ 4.20
\$200,000	\$ 3.20	\$ 4.80
\$225,000	\$ 3.60	\$ 5.40
\$250,000	\$ 4.00	\$ 6.00
\$300,000*	\$ 4.80	\$ 7.20
\$350,000*	\$ 5.60	\$ 8.40
\$400,000*	\$ 6.40	\$ 9.60
\$450,000*	\$ 7.20	\$ 10.80
\$500,000*	\$ 8.00	\$ 12.00

\* Selections over \$250,000 cannot exceed ten times your annual salary.

**“Spouse” is defined as your legal spouse, domestic partner.**

**“Dependent” is defined as your:**

- Unmarried children from live birth to 26 years old
- Legally adopted children and/or a child placed with you for adoption prior to legal adoption is considered your Qualified Dependent from the date of placement for adoption, and is treated as though the child were a newborn child born to you
- Stepchildren
- Domestic partner’s children
- Foster children who depend on you for support and maintenance

*Exceptions: Your spouse, domestic partner or dependent child is not considered a “qualified dependent” while on active duty in the armed forces of any country.*

\* **Collectively Bargained Employees:** The information on this page is for Non-Union Employees ONLY. Please refer to your Union Contract for information regarding accidental death and dismemberment insurance options.

## MY HEALTH & SECURITY



# Updating Employee Life and Accident Insurance Beneficiary Information

**It is important to have a beneficiary on file and keep your beneficiary information current in case of the unexpected. Employees may elect beneficiaries via [myswbenefits.com](https://myswbenefits.com) or call 1-844-358-0604.**

When you have a major change in your life like getting married, divorced, termination of a domestic partner relationship, adding a child or getting a promotion, you should take the time to review and/or update your beneficiary information.

- You may designate more than one beneficiary.

- You should designate the percentage of the insurance proceeds you want different beneficiaries to receive. If you do not, funds will be divided equally among the beneficiaries you have listed or according to the default plan.
- If you have different types of coverage (for example, Basic Employee Term Life and Optional Employee Term Life coverages), you may designate different beneficiaries for different types of coverage.

- If you do not have a beneficiary listed, the plan will pay according to the default plan which is:
  - Your surviving spouse/domestic partner;
  - Your surviving children, in equal shares;
  - Your surviving parents, in equal shares;
  - Your surviving siblings, in equal shares; or
  - Your estate.

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# Disability Coverage Options

## For Non-Union Employees Only\*

Sherwin-Williams provides disability coverage to guard you and your family against a sudden loss of income. There are two types of coverage:

- **Short-Term Disability (STD)** that covers you in cases of short-term illness or injuries.
- **Long-Term Disability (LTD)** coverage that covers you for extended periods of disability. Two types of long-term disability are available: LTD basic coverage or LTD supplemental coverage.

### Reporting a Disability

Employees are required to report disability days to their manager and/or comply with any local worksite requirements. In addition, you must initiate a disability request by contacting The Hartford, at 1-877-627-3702 **within 3 calendar days after the absence begins.**



\* **Collectively Bargained Employees:** The information on this page is for Non-Union Employees ONLY. Please refer to your Union Contract for information regarding disability coverage options.



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# Short-Term Disability

For Non-Union Employees Only\*

You are automatically enrolled in the Short-Term Disability plan as a regular full-time employee after 30 days of employment. The plan is fully paid by Sherwin-Williams. Here is a summary of your salary continuation benefits:

**Length and Amount of Benefits**  
 After the Waiting Period, the Plan will continue a percentage of your regular base pay (see below for what is included in regular base pay) for up to twenty-five (25) weeks if you continue to be unable to work due to the continuing Disability. Benefits are first provided at full regular base pay for up to the first eight (8) weeks of your continuing Disability, and then partial regular base pay for up to seventeen (17) weeks of your continuing Disability.

**Maximum Benefit Amount**

<b>Full Pay (100%)</b>	<b>Partial Pay (60%)</b>
<b>8 weeks</b>	<b>17 weeks</b>

**Special note for employees with nine (9) or more years of service as of January 1, 2021:** The above benefit does not increase with additional years of service. However, employees with nine (9) or more years of service as of January 1, 2021 will receive additional benefits under the Plan due to their length of service on that date.



\* **Collectively Bargained Employees:** The information on this page is for Non-Union Employees ONLY. Please refer to your Union Contract for information regarding short-term disability coverage options.

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# Long-Term Disability

## For Non-Union Employees Only\*

Long-Term Disability (LTD) provides you with a benefit if you become disabled. You are automatically enrolled in LTD basic coverage if you are an active non-union employee working full-time. This benefit is fully paid for by Sherwin-Williams. If you are disabled for at least six months because of illness or injury, you are eligible for an LTD benefit of 50% of your monthly basic earnings from all sources, up to a maximum of \$10,000.

If you want to elect additional coverage to that provided by Sherwin-Williams, you may purchase LTD supplemental coverage. LTD supplemental coverage provides an additional 10% of basic monthly earnings to your LTD benefit. If you are disabled for at least six months because of illness or injury, you are eligible for a total LTD benefit of 60% of your monthly basic earnings from all sources, up to a maximum of \$15,000.

### 2022 Sherwin-Williams Supplemental Long-Term Disability Plan

Employee Annual Earnings	Employee Monthly Contribution
\$15,000 but less than \$20,000	\$6.24
\$20,000 but less than \$25,000	\$8.03
\$25,000 but less than \$30,000	\$9.81
\$30,000 but less than \$35,000	\$11.59
\$35,000 but less than \$40,000	\$13.38
\$40,000 but less than \$45,000	\$15.16
\$45,000 but less than \$50,000	\$16.94
\$50,000 but less than \$55,000	\$18.73
\$55,000 but less than \$60,000	\$20.51
\$60,000 but less than \$65,000	\$22.29
\$65,000 but less than \$70,000	\$24.08
\$70,000 but less than \$75,000	\$25.86
\$75,000 but less than \$80,000	\$27.64

Employee Annual Earnings	Employee Monthly Contribution
\$80,000 but less than \$85,000	\$29.43
\$85,000 but less than \$90,000	\$31.21
\$90,000 but less than \$95,000	\$32.99
\$95,000 but less than \$100,000	\$34.78
\$100,000 but less than \$105,000	\$36.56
\$105,000 but less than \$110,000	\$38.34
\$110,000 but less than \$115,000	\$40.13
\$115,000 but less than \$120,000	\$41.91
\$120,000 but less than \$125,000	\$43.69
\$125,000 but less than \$130,000	\$45.48
\$130,000 but less than \$135,000	\$47.26
\$135,000 but less than \$140,000	\$49.04
\$140,000 but less than \$145,000	\$50.83

Employee Annual Earnings	Employee Monthly Contribution
\$145,000 but less than \$150,000	\$52.61
\$150,000 but less than \$155,000	\$54.39
\$155,000 but less than \$160,000	\$56.18
\$160,000 but less than \$165,000	\$57.96
\$165,000 but less than \$170,000	\$59.74
\$170,000 but less than \$175,000	\$61.53
\$175,000 but less than \$180,000	\$63.31
\$180,000 but less than \$185,000	\$65.09
\$185,000 but less than \$190,000	\$66.88
\$190,000 but less than \$195,000	\$68.66
\$195,000 but less than \$200,000	\$70.44
\$200,000 and higher	\$70.44

Fluctuations in your annual earnings may cause your level of coverage and contributions to change.

\* **Collectively Bargained Employees:** The information on this page is for Non-Union Employees ONLY. Please refer to your Union Contract for information regarding Long-Term Disability or Total Permanent Disability options.

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# Critical Illness Insurance

Critical Illness Insurance can help cover the extra expenses associated with a serious illness. When a serious illness happens to you or a loved one, this coverage provides you with a lump-sum benefit of your choice of either \$10,000, \$20,000 or \$30,000 in Initial Benefits upon diagnosis. Payment(s) you receive will be made in addition to any other insurance you may have and may be spent as you see fit.

If you meet the group policy and certificate requirements, critical illness insurance provides you with a lump-sum benefit upon diagnosis of the following conditions:

- Full Benefit Cancer<sup>1</sup>
- Stroke<sup>2</sup>
- Alzheimer’s Disease
- Partial Benefit Cancer<sup>1</sup>
- Kidney Failure
- Major Organ Transplant
- All Other Cancer<sup>1</sup>
- Heart Attack
- Coronary Artery Bypass Graft
- 22 Listed Conditions<sup>3</sup> (see your outline of coverage for details)

Your plan pays a Recurrence Benefit for the following covered conditions: Heart Attack, Stroke, Coronary Artery Bypass Graft, Full Benefit Cancer, Partial Benefit Cancer and All Other Cancer. A Recurrence Benefit is only available if an Initial Benefit has been paid for the Covered Condition. There is a Benefit Suspension Period between Recurrences.<sup>4</sup>

This plan also provides a \$50 annual benefit per calendar year for eligible health screenings/prevention measures. This benefit amount is above and beyond the Total Benefit Amount.<sup>5</sup>

You are eligible to enroll yourself and your eligible family members.<sup>6</sup> You just need to enroll during your open enrollment. You can enroll for this coverage without having to take a medical exam, provided you are actively at work, your enrollment is guaranteed.<sup>7</sup>

**If you and/or your dependents are enrolled in Critical Illness Insurance, you can submit proof of a wellness visit\* for a \$50 reimbursement from the plan\*\*.** Each covered person on the plan is eligible for one \$50 reimbursement per year. Proof of the wellness visit must be submitted within one year of the date of your exam/screening.

*\*Contact Prudential at 1-844-455-1002 to see which preventive exams or screenings qualify for the \$50 reimbursement.*

*\*\*Some exclusions apply. Not available in all states. Please contact Prudential for complete details at 1-844-455-1002.*

## Critical Illness Insurance Benefits

Initial Critical Illness Benefits	% of Initial Benefit	% of Recurrence Benefit
Full Benefit Cancer <sup>1</sup>	100%	100%
Partial Benefit Cancer <sup>1</sup>	25%	25%
Heart Attack	100%	100%
Stroke <sup>2</sup>	100%	100%
Coronary Artery Bypass Graft	100%	100%
Kidney Failure	100%	Not Applicable
Alzheimer’s disease <sup>3</sup>	100%	Not Applicable
Major Organ Transplant Benefit	100%	Not Applicable
17 Listed Conditions <sup>3</sup>	25%	Not Applicable

**Questions? Contact Prudential at 1-844-455-1002.**

<sup>1</sup> Please review the Disclosure Statement or Outline of Coverage/ Disclosure Document for specific information about cancer benefits. Not all types of cancer are covered. Some cancers are covered at less than the Initial Benefit Amount. For NH sitused cases and NH residents, there is an initial benefit of \$100 for All Other Cancer.

<sup>2</sup> In certain states, the Covered Condition is Severe Stroke.

<sup>3</sup> Prudential Critical Illness Insurance will pay 25% of the Initial Benefit Amount when a covered person is diagnosed with one of the 22 Listed Conditions. A Covered Person may only receive one benefit payment of a Listed Condition in his/her lifetime. The Listed Conditions are: Addison’s disease (adrenal hypofunction); amyotrophic lateral sclerosis (Lou Gehrig’s disease); cerebrospinal meningitis (bacterial); cerebral palsy; cystic fibrosis; diphtheria; encephalitis; Huntington’s disease (Huntington’s chorea); Legionnaire’s disease; malaria; multiple sclerosis (definitive diagnosis); muscular dystrophy; myasthenia gravis; necrotizing fasciitis; osteomyelitis; poliomyelitis; rabies; sickle cell anemia (excluding sickle cell trait); systemic lupus erythematosus (SLE); systemic sclerosis (scleroderma); tetanus; and tuberculosis.

<sup>4</sup> We will not pay a Recurrence Benefit for a Covered Condition that Recurs during a Benefit Suspension Period. We will not pay a Recurrence Benefit for either a Full Benefit Cancer or a Partial Benefit Cancer unless the Covered Person has not had symptoms of or been<sup>8</sup> treated for the Full Benefit Cancer or Partial Benefit Cancer for which we paid an Initial Benefit during the Benefit Suspension Period.

<sup>5</sup> The Health Screening Benefit is not available in all states. See your certificate for any applicable waiting periods. There is a separate mammogram benefit for MT residents and for cases sitused in CA and MT.

<sup>6</sup> Eligible Family Members means all persons eligible for coverage as defined in the Certificate.

<sup>7</sup> Coverage is guaranteed provided (1) the employee is actively at work and (2) dependents are not subject to medical restrictions as set forth on the enrollment form and in the Certificate. Some states require the insured to have medical coverage. Additional restrictions apply to dependents serving in the armed forces or living overseas.

<sup>8</sup> Covered at 100% by Prudential.

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## Voluntary Critical Illness Insurance *continued*

### Weekly and Biweekly Rates for Non-Tobacco Users per \$1,000 of Voluntary Critical Insurance Coverage

Attained Age	Biweekly—Paid Every Two Weeks (26 pays per year)				Weekly—Paid Every Week (52 pays per year)			
	Employee Only	Employee + Spouse	Employee + Children	Employee + Spouse/Children	Employee Only	Employee + Spouse	Employee + Children	Employee + Spouse/Children
< 25	\$0.09	\$0.18	\$0.18	\$0.26	\$0.04	\$0.09	\$0.09	\$0.13
25-29	\$0.11	\$0.20	\$0.20	\$0.26	\$0.05	\$0.10	\$0.10	\$0.13
30-34	\$0.14	\$0.28	\$0.26	\$0.36	\$0.07	\$0.14	\$0.13	\$0.18
35-39	\$0.22	\$0.40	\$0.32	\$0.46	\$0.11	\$0.20	\$0.16	\$0.23
40-44	\$0.31	\$0.62	\$0.50	\$0.68	\$0.15	\$0.31	\$0.25	\$0.34
45-49	\$0.50	\$0.90	\$0.68	\$0.96	\$0.25	\$0.45	\$0.34	\$0.48
50-54	\$0.75	\$1.28	\$0.98	\$1.34	\$0.37	\$0.64	\$0.49	\$0.67
55-59	\$1.16	\$1.74	\$1.32	\$1.80	\$0.58	\$0.87	\$0.66	\$0.90
60-64	\$1.63	\$2.38	\$1.78	\$2.44	\$0.81	\$1.19	\$0.89	\$1.22
65-69	\$2.26	\$3.26	\$2.40	\$3.32	\$1.13	\$1.63	\$1.20	\$1.66
70 +	\$2.91	\$4.44	\$3.22	\$4.52	\$1.46	\$2.22	\$1.61	\$2.26

### Weekly and Biweekly Rates for Tobacco Users\* per \$1,000 of Voluntary Critical Insurance Coverage

Attained Age	Biweekly—Paid Every Two Weeks (26 pays per year)				Weekly—Paid Every Week (52 pays per year)			
	Employee Only	Employee + Spouse	Employee + Children	Employee + Spouse/Children	Employee Only	Employee + Spouse	Employee + Children	Employee + Spouse/Children
< 25	\$0.10	\$0.26	\$0.22	\$0.32	\$0.05	\$0.13	\$0.11	\$0.16
25-29	\$0.12	\$0.28	\$0.26	\$0.36	\$0.06	\$0.14	\$0.13	\$0.18
30-34	\$0.17	\$0.44	\$0.36	\$0.50	\$0.08	\$0.22	\$0.18	\$0.25
35-39	\$0.30	\$0.62	\$0.50	\$0.68	\$0.15	\$0.31	\$0.25	\$0.34
40-44	\$0.45	\$0.98	\$0.76	\$1.04	\$0.23	\$0.49	\$0.38	\$0.52
45-49	\$0.81	\$1.46	\$1.10	\$1.52	\$0.41	\$0.73	\$0.55	\$0.76
50-54	\$1.28	\$2.10	\$1.58	\$2.16	\$0.64	\$1.05	\$0.79	\$1.08
55-59	\$2.00	\$2.90	\$2.16	\$2.96	\$1.00	\$1.45	\$1.08	\$1.48
60-64	\$2.82	\$4.02	\$2.96	\$4.10	\$1.41	\$2.01	\$1.48	\$2.05
65-69	\$3.88	\$5.56	\$4.08	\$5.62	\$1.94	\$2.78	\$2.04	\$2.81
70 +	\$4.84	\$7.70	\$5.58	\$7.78	\$2.42	\$3.85	\$2.79	\$3.89

\* If either you or your spouse, as defined in the enrollment form, uses tobacco then the tobacco rate applies.

The Employee + Spouse /Children coverage options assume that the employee age and the spouse age fall within the same age band. If the employee and spouse ages put them in different age bands, the final per-pay premium amount will differ from what is listed above. For example, if an employee is 35 and the spouse is 29, those individuals would fall into two different age bands in regards to group critical illness premium.

Please note that final payroll deductions may vary slightly due to rounding.

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# Accident Insurance

Accident insurance coverage provides you with a lump-sum payment when you suffer a covered injury or undergo covered testing, medical services, or treatment and meet the group policy and certificate requirements.

Accidents can happen anytime, anywhere, when you least expect them, and they can be costly. You hurt your back while doing home repairs, your child is injured while on the playground or playing sports, or your spouse slips on the stairs. Having the extra financial support if the time comes may mean less worry for you and your family.

You are eligible to enroll yourself and your eligible family members. Your accident coverage is guaranteed issue,<sup>1</sup> which means your acceptance is guaranteed, regardless of your health. You just need to be actively at work for your coverage to be

effective. There are no medical exams to take and no health questions to answer.

Your coverage will be in force on the effective date of your coverage. There are no waiting periods to satisfy. Once all required information is received, claims are generally processed within 10 business days. Only one claim form is needed per accident and every claim is reviewed by a claims professional. Payments will be paid directly to you, not to the doctors, hospitals or other health care providers. You will receive a check, payable to you, for maximum convenience. You can use your payment as you see fit. Use it to help pay for medical plan deductibles and copays, out-of-network treatments, for your family's everyday living expenses, or whatever else you need while recuperating from an accident.

**If you and/or your dependents are enrolled in Accident Insurance, you can submit proof of a wellness visit\* for a \$50 reimbursement from the plan\*\*.**

Each covered person on the plan is eligible for one \$50 reimbursement per year. Proof of the wellness visit must be submitted within one year of the date of your exam/screening.

*\*Contact Prudential at 1-844-455-1002 to see which preventive exams or screenings qualify for the \$50 reimbursement.*

*\*\*Some exclusions apply. Not available in all states. Please contact Prudential for complete details at 1-844-455-1002.*

**How it works**

Kathy's daughter, Molly, plays soccer. During a recent game, Molly collided with an opposing player, was knocked unconscious and taken to the local emergency room by ambulance for treatment. The ER doctor diagnosed a concussion and a broken tooth. He also ordered a CT scan. After thorough evaluation, Molly was released to her primary care physician for follow-up treatment, and her dentist repaired her broken tooth with a crown.

Covered Event <sup>2</sup>	Benefit Amount <sup>3</sup>
Ambulance (ground)	\$300
Emergency Care	\$100
Physician Follow-Up (\$75 x 2)	\$150
Medical Testing	\$200
Concussion	\$400
Broken Tooth (repaired by crown)	\$200
Benefits paid by Prudential Group Accident Insurance	\$1,350

<sup>1</sup> Coverage is guaranteed provided (1) the employee is actively at work and (2) dependents to be covered are not subject to medical restrictions as set forth on the enrollment form and in the Certificate. Some states require the insured to have medical coverage. Additional restrictions apply to dependents service in the armed forces or living overseas.

<sup>2</sup> Covered services/treatments must be the result of a covered accident as defined in the group policy/certificate. See your Disclosure Statement or Outline of Coverage/Disclosure document for full details.

<sup>3</sup> Benefit amount is based on a sample Prudential plan design. Actual plan design and plan benefits may vary.

**Questions? Contact Prudential at 1-844-455-1002.**

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# Accident Insurance *continued*

## Accident Insurance Benefits

Benefit Type <sup>1</sup>	Prudential Insurance Pays You
<b>Injuries</b>	
Fractures <sup>2</sup>	\$100 – \$6,000
Dislocations <sup>2</sup>	\$100 – \$4,000
Second and Third Degree Burns	\$100 – \$10,000
Concussions	\$400
Cuts/Lacerations	\$50 – \$400
Eye Injuries	\$300

<sup>1</sup> Covered services/treatments must be the result of a covered accident as defined in the group policy/certificate. See your Disclosure Statement or Outline of Coverage/Disclosure Document for full details.

<sup>2</sup> Chip fractures are paid at 25% of Fracture Benefit and partial dislocations are paid at 25% of Dislocation Benefit.

Benefit Type <sup>1</sup>	Prudential Insurance Pays You
<b>Medical Services &amp; Treatment</b>	
Ambulance	\$300 – \$1,000
Emergency Care	\$50 – \$100
Non-Emergency Care	\$50
Physician Follow-Up	\$75
Therapy Services (including physical therapy)	\$25
Medical Testing Benefit	\$200
Medical Appliances	\$100 – \$1,000
Inpatient Surgery	\$200 – \$2,000

Benefit Type <sup>1</sup>	Prudential Insurance Pays You
<b>Hospital<sup>3</sup> Coverage (Accident)</b>	
Admission	\$1,000 (non-ICU) – \$1,000 (ICU) per accident
Confinement	\$200 a day (non-ICU) – up to 365 days \$400 a day (ICU) – up to 30 days
Inpatient Rehab (paid per accident)	\$200 a day, up to 15 days

<sup>3</sup> Hospital does not include certain facilities such as nursing homes, convalescent care or extended care facilities. See Prudential's Disclosure Statement or Outline of Coverage/ Disclosure Document for full details.

Benefit Type <sup>1</sup>	Prudential Insurance Pays You
<b>Other Benefits</b>	
Lodging <sup>4</sup> – Pays for lodging for companion up to 31 nights per calendar year	\$200 per night, up to 31 nights
Health Screening Benefit <sup>5</sup> benefit provided if the covered insured takes one of the covered screening/ prevention tests	\$50 Payable 1x per calendar year

<sup>4</sup> The lodging benefit is not available in all states. It provides a benefit for a companion accompanying a covered insured while hospitalized, provided that lodging is at least 50 miles from insured's primary residence.

<sup>5</sup> The Health Screening Benefit is not available in all states. For Texas sitused policies and Texas residents covered under policies sitused in other states, when the Health Screening Benefit is included in an Accident-only plan, the covered screening measures are: physical exam, blood chemistry panel, complete blood count (CBC), chest x-rays, electrocardiogram (EKG), and electroencephalogram (EEG).

Biweekly—Paid Every Two Weeks (26 pays per year)*				Weekly—Paid Every Week (52 pays per year)*			
Employee Only	Employee + Spouse	Employee + Children	Employee + Spouse/ Children	Employee Only	Employee + Spouse	Employee + Children	Employee + Spouse/ Children
\$5.02	\$9.22	\$10.90	\$13.34	\$2.51	\$4.61	\$5.45	\$6.82

Please note that final payroll deductions may vary slightly due to rounding.

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# Hospital Indemnity Insurance

Hospital indemnity insurance provides you with payments when you are admitted and when you are confined to a hospital,<sup>1</sup> due to an accident or illness, as long as the policy and certificate requirements are met. Typically, a flat amount is paid for admission and a daily amount is paid for each day of a hospital stay. It also pays extra benefits for admission to or confinement in an Intensive Care Unit (ICU), and for other benefits and services.<sup>2</sup>

Payments are made directly to you to use as you see fit. They can be used to help pay for medical plan deductibles and copays, for out-of-network stays, for your family's everyday living expenses, or for whatever else you need while recuperating from an illness or accident.

You are eligible to enroll yourself and your eligible family members. You just need to enroll during your open enrollment period and be actively at work for coverage to be effective. Dependents to be enrolled may

not be subject to a medical restriction as set forth in the Certificate. Some states require the insured to have medical coverage. Additional restrictions apply to dependents serving in the armed forces or living overseas.

Your accident coverage is guaranteed issue,<sup>3</sup> which means your acceptance is guaranteed. You just need to be actively at work for your coverage to be effective. There are no medical exams to take and no health questions to answer.

Once all required information is received, claims are generally processed within 10 business days. Only one claim form is needed per admission or hospital stay and every claim is reviewed by a claim professional.

Payments will be paid directly to you, not to the doctors, hospitals or other health care providers. You will receive a check, payable to you, for maximum convenience. There is no coordination of benefits with any other insurance you may have.

## How it works

Susan wakes up in the middle of the night experiencing chest pain. An ambulance takes her to the emergency room at a local hospital. Upon arrival, the doctor examines Susan and advises that she requires urgent by-pass surgery. When she comes out of surgery, she is admitted to the Intensive Care Unit for close observation. After 1 day in the Intensive Care Unit, Susan moves to a standard room and spends 2 additional days recovering in the hospital.

Covered Event <sup>2</sup>	Benefit Amount <sup>4</sup>
<b>Admission</b> Intensive Care Unit Coverage (Sickness)	\$1,000
<b>Confinement for 1 day</b> Intensive Care Unit Coverage (Sickness)	\$400
<b>Confinement for 2 days</b> Hospital Coverage (Sickness)	\$400
<b>Benefits paid by Prudential Group Hospital Indemnity Insurance</b>	<b>\$1,800</b>

<sup>1</sup> Hospital does not include certain facilities such as nursing homes, convalescent care or extended care facilities. See your Disclosure Statement or Outline of Coverage/Disclosure Document for full details.

<sup>2</sup> Covered services/treatments must be the result of an accident or sickness as defined in the group policy/certificate. See your Disclosure Statement or Outline of Coverage/Disclosure Document for more details.

<sup>3</sup> Coverage is guaranteed provided (1) the employee is actively at work and (2) dependents to be covered are not subject to medical restrictions as set forth on the enrollment form and in the Certificate. Some states require the insured to have medical coverage. Additional restrictions apply to dependents serving in the armed forces or living overseas.

<sup>4</sup> Benefit amount is based on sample Prudential plan. Actual plan design and plan benefits may vary.

**Questions? Contact Prudential at 1-844-455-1002.**



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## Hospital Indemnity Insurance *continued*

### Hospital Indemnity Insurance Benefits

Benefit Type <sup>1</sup>	Prudential Insurance Pays You
<b>Hospital Coverage (Accident)</b>	
<b>Admission</b> must occur within 90 days after the accident	\$1,000 per accident (non-ICU) \$1,000 per accident (ICU)
<b>Confinement</b> must occur within 90 days after the accident	\$200 a day (non-ICU) for up to 30 days  \$400 a day (ICU) for up to 30 days
<b>Inpatient Rehab</b> stay must occur immediately following hospital confinement and occur within 365 days of accident	\$200 a day, up to 15 days per accident and 30 days per calendar year

Benefit Type <sup>1</sup>	Prudential Insurance Pays You
<b>Hospital Coverage (Sickness)</b>	
<b>Admission</b> Payable 5x per calendar year	\$1,000 (non-ICU) \$1,000 (ICU)
<b>Confinement</b> Paid per sickness	\$200 a day (non-ICU) for up to 30 days  \$400 a day (ICU) for up to 30 days
<b>Other Benefits</b>	
<b>Health Screening (Wellness)<sup>2</sup></b> benefit provided if the covered insured takes one of the covered screening/prevention tests Payable 1x per calendar year	\$50

<sup>1</sup> Covered services/treatments must be the result of an accident or sickness as defined in the group policy/certificate. See your Disclosure Statement or Outline of Coverage/Disclosure Document for more details.

<sup>2</sup> The Health Screening Benefit is not available in all states.

### Eligible Employee Contributions for Hospital Indemnity Insurance Plans Per Pay Cycle

Biweekly—Paid Every Two Weeks (26 pays per year)				Weekly—Paid Every Week (52 pays per year)			
Employee Only	Employee + Spouse	Employee + Children	Employee + Spouse/Children	Employee Only	Employee + Spouse	Employee + Children	Employee + Spouse/Children
\$9.00	\$20.58	\$13.24	\$25.86	\$4.50	\$10.29	\$6.62	\$12.93

Please note that final payroll deductions may vary slightly due to rounding.

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# MetLife Legal Plan

## MetLife Legal Plan: Legal coverage means added peace of mind for employees and their dependents.

MetLife Legal Plan makes it simple to get legal advice and representation without draining your finances. You have access to more than 14,000 professionally selected Network Attorneys and additional group benefit features:

- Affordable assistance for a wide range of legal needs, including wills and other estate planning documents, real estate matters, traffic offenses, adoptions, debt collection defense and much more for a low monthly cost and unlimited use

- Identity Management Services include proactive services when you think your personal data has been compromised as well as resolution services to assist in recovering from identity theft
- Identity Theft Defense services provide consultations with an attorney regarding potential creditor actions resulting from identity theft and attorney services as needed

*Group legal plans are provided by Hyall Legal Plans, Inc., a MetLife company, Cleveland, OH. In certain states, group legal plans are provided through insurance coverage underwritten by Metropolitan Property and Casually Insurance Company and Affiliates, Warwick, RI. Payroll deduction required for group legal plans. Benefit programs offered by MetLife and its Affiliates contain certain exclusions and terms for keeping them in force. For costs and complete details of the coverage, call or write the company.*

## Eligible Employee Contributions for MetLife Legal Plan Coverage Per Pay Cycle

Biweekly—Paid Every Two Weeks (26 pays per year)	Weekly—Paid Every Week (52 pays per year)
\$7.27	\$3.63

**Questions?**  
 Contact MetLife Legal Plan at 1-800-438-6388.

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# Auto and Home Insurance

Farmers Insurance Choice<sup>SM</sup> makes it easier than ever to smartly access great coverage for your unique needs. With Farmers Insurance Choice, you get personalized auto and home insurance quotes from highly rated carriers in just minutes.

- Get multiple quotes and compare policies from top carriers in one place
- Pick the coverage and payment plan that may be right for you
- Others saved an average of 22%\* on auto insurance when choosing to insure with Farmers GroupSelect<sup>SM</sup>

See for yourself how much you could save with automated payments, good driver rewards, and multi-policy discounts.

**Questions? 1-800-438-6381 or visit [farmersinsurancechoice.com/sherwinwilliams](https://farmersinsurancechoice.com/sherwinwilliams) to get your free, no-obligation quotes today!**

\* Based on the average nationwide annual savings in 2020 reported by new customers who called the Farmers GroupSelect employee and affinity member call center, switched their auto insurance to a Farmers branded insurance policy issued through a Farmers GroupSelect employer or affinity member program, and realized savings.

Potential savings vary by customer and may vary by state and product.

Farmers Insurance Choice is used by Farmers General Insurance Agency, Inc. (the "Agency") and other independent agencies and captive agents to provide consumers a broad choice of insurance providers. Coverage may be underwritten by carriers unaffiliated with Farmers GroupSelect through the Agency: CA License #0D25399.

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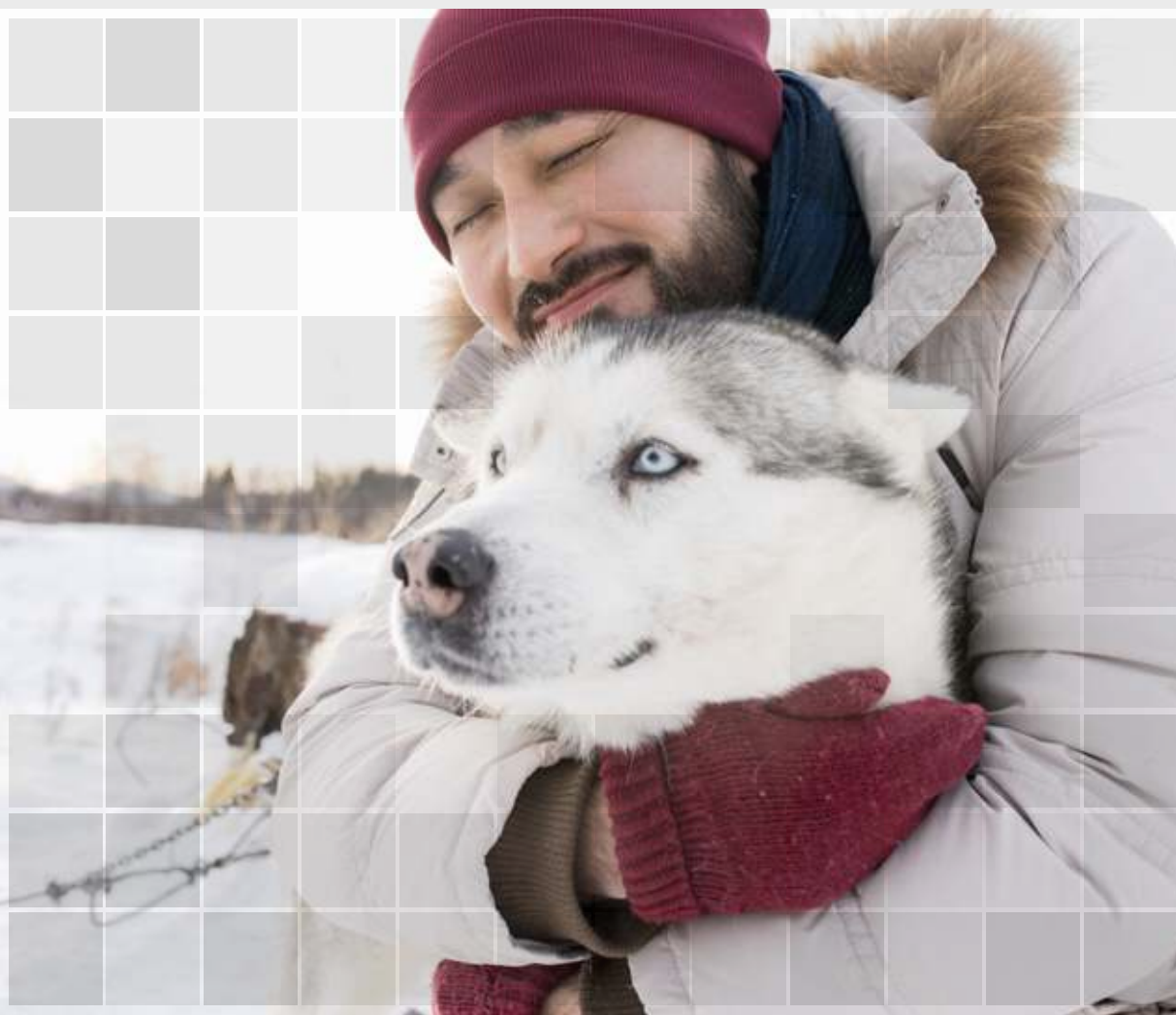
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# Pet Insurance

Provide your pet with the care it needs at a monthly cost that won't strain your budget.

Pet insurance provides benefits for veterinary treatments related to accidents and illnesses, including cancer. Medical policies cover diagnostic tests, X-rays, prescriptions, surgeries, hospitalization and more. And you can take advantage of:

- Guaranteed acceptance – no medical review is required
- Use of any veterinarian worldwide, including specialists and emergency providers
- Benefits that renew in full each year at the current rate or a higher rate. You can also enroll at any point during the year.
- Enroll anytime by logging into [benefits.petinsurance.com/sherwin-williams](https://benefits.petinsurance.com/sherwin-williams) or call 1-877-738-7874





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# Identity Theft Protection

**Identity Theft Protection**  
 Identity Theft Protection, through Allstate Identity Protection, can help you safeguard personal information and alert you to potential threats.

You'll have access to:

- Protection of your privacy, identity and finances at a reduced cost.
- Comprehensive identity monitoring, fraud remediation and restoration, and identity theft reimbursement.
- Social media monitoring to minimize exposure to fraud and reputational damages.

You can elect this coverage as a new hire or during Annual Open Enrollment.

**Rates:**  
**Employee Only:** \$4.59 biweekly  
**Family:** \$8.28 biweekly

**Employee Only:** \$2.30 weekly  
**Family:** \$4.14 weekly

**Questions? Contact Allstate at 1-800-789-2720.**



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# Permanent Life Insurance

Employee Permanent Life Insurance is a coverage option for you (through age 80) and your spouse/domestic partner (through age 65) and children (through age 25). This type of policy guarantees financial protection for your loved ones that lasts your entire lifetime (as long as you pay the premiums). If you retire or otherwise leave Sherwin-Williams, you can take this policy with you as long as you pay the insurance company directly.

## Weekly Permanent Life Insurance Contributions Per Pay Cycle

Issue Ages	\$10,000.00 Face Amount		\$20,000.00 Face Amount		\$30,000.00 Face Amount	
	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
16-20	\$4.00	\$4.00	\$4.00	\$4.00	\$4.00	\$4.00
21-25	\$4.00	\$4.00	\$4.00	\$4.00	\$4.00	\$4.00
26-30	\$4.00	\$4.00	\$4.00	\$4.00	\$4.00	\$4.75
31-35	\$4.00	\$4.00	\$4.00	\$4.00	\$4.00	\$5.92
36-40	\$4.00	\$4.00	\$4.00	\$5.05	\$4.88	\$7.58
41-45	\$4.00	\$4.00	\$4.15	\$6.55	\$6.23	\$9.83
46-50	\$4.00	\$4.32	\$5.47	\$8.66	\$8.21	\$12.99
51-55	\$4.00	\$5.79	\$7.28	\$11.59	\$10.93	\$17.38
56-60	\$5.16	\$8.12	\$10.33	\$16.24	\$15.51	\$24.36
61-65	\$7.92	\$11.46	\$15.85	\$22.93	\$23.77	\$34.39
66-70	\$11.57	\$16.71	\$23.14	\$33.42	\$34.72	\$50.14
71-75	\$18.09	\$25.08	\$36.19	\$50.16	\$54.29	\$75.23
76-80	\$22.28	\$29.53	\$44.57	\$59.07	\$66.85	\$88.61

## Biweekly Permanent Life Insurance Contributions Per Pay Cycle

Issue Ages	\$10,000.00 Face Amount		\$20,000.00 Face Amount		\$30,000.00 Face Amount	
	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
16-20	\$8.00	\$8.00	\$8.00	\$8.00	\$8.00	\$8.00
21-25	\$8.00	\$8.00	\$8.00	\$8.00	\$8.00	\$8.00
26-30	\$8.00	\$8.00	\$8.00	\$8.00	\$8.00	\$9.51
31-35	\$8.00	\$8.00	\$8.00	\$8.00	\$8.00	\$11.85
36-40	\$8.00	\$8.00	\$8.00	\$10.11	\$9.77	\$15.16
41-45	\$8.00	\$8.00	\$8.30	\$13.11	\$12.46	\$19.67
46-50	\$8.00	\$8.65	\$10.95	\$17.32	\$16.42	\$25.98
51-55	\$8.00	\$11.59	\$14.57	\$23.18	\$21.86	\$34.77
56-60	\$10.33	\$16.24	\$20.67	\$32.48	\$31.02	\$48.72
61-65	\$15.85	\$22.93	\$31.70	\$45.86	\$47.55	\$68.79
66-70	\$23.14	\$33.42	\$46.29	\$66.85	\$69.44	\$100.29
71-75	\$36.19	\$50.16	\$72.39	\$100.32	\$108.59	\$150.47
76-80	\$44.57	\$59.07	\$89.14	\$118.15	\$133.71	\$177.23

*This is a brief summary of TransElite® Universal Life Insurance underwritten by Transamerica Life Insurance Company, Cedar Rapids, Iowa. Policy Form Series CPGUL300 and CCGUL300. Forms and form numbers may vary. This insurance may not be available in all jurisdictions. Limitations and exclusions apply. Refer to the policy, certificate and riders for complete details.*

**Questions? Contact Transamerica at 1-888-763-7474.**

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# ASK Work/Life Solutions

## Assistance. Support. Knowledge.

We know that balancing the demands and pressures of work and personal life can sometimes be overwhelming. The ASK Work/Life Solutions program—our Employee Assistance Program (EAP)—is available to both regular full- and regular part-time employees and anyone residing in their home.

This free and confidential service, administered through CuraLinc, is available 24 hours a day, 365 days a year. Call to speak with a professional about:

- Legal concerns
- Financial counseling
- Marital and family concerns
- Child and elder care issues
- Substance abuse and dependency
- Stress, anxiety and other emotional health topics

**You and anyone in your household can receive counseling services at no cost to you for up to six face-to-face office visits per issue or problem.**

There are no deductibles, copays or claim forms involved. You are automatically enrolled in this program, which is fully paid for by Sherwin-Williams.

Contact the program at 1-(800) 882-2189 or [www.eap.sherwin.com](http://www.eap.sherwin.com)



**ASSISTANCE. SUPPORT. KNOWLEDGE.**

**[www.eap.sherwin.com](http://www.eap.sherwin.com) | 1-800-882-2189**

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# Balance 4 Well-Being, powered by Vitality

Balance 4 Well-Being is available to all employees and spouses/domestic partners. It is designed to support all dimensions of well-being: emotional, physical, financial and social. Sherwin-Williams is dedicated to supporting our employees on their journey to well-being. Whether it's eating healthier, moving more, strengthening relationships, reducing stress or improving financial well-being, the Balance 4 Well-Being program will guide and support employees every step of the way.

The Balance 4 Well-Being website provides tools and resources to support achieving your well-being goals.

## Here are just a few of the tools available in Balance 4 Well-Being:

- **Online Health Review:** Receive important information that will help you identify and achieve your well-being goals.

- **Health Coaching:** Create the healthiest version of yourself with a partner who will keep you focused on attainable goals and accountable to your progress.
- **Online Challenges:** Participate in company-wide challenges to help build healthy habits.
- **NetBenefits:** Use online educational and money management tools to increase financial well-being, reduce financial stress, and help you take control of your financial future.

Complete certain activities in the Balance 4 Well-Being program to earn points and get rewards! Rewards requirements vary based on your employee or spouse/domestic partner status. All employees and spouses/domestic partners are encouraged to participate in the well-being program and are eligible to earn rewards.

Getting involved in the Balance 4 Well-Being program can help to improve your life and also pay off! There are numerous rewards you can earn by participating in the program.

## Ready to start your well-being journey?

Register for Balance 4 Well-Being by logging on to My S-W Benefits. Once signed on to My S-W Benefits, click on the Balance 4 Well-Being tile. Access will also be available by going directly to the website, [www.wellbeing.sherwin.com](http://www.wellbeing.sherwin.com) (spouse/domestic partner must use this method to register).

## Newly Hired?

It may take up to 10 days after your hire date before you are able to register on the Balance 4 Well-Being website.

If you are hired before 9/1 in the plan year, you will automatically receive a discount on your medical plan contributions for the current year. In order to get the same discount next year, you will need to participate and earn a certain amount of points in the Balance 4 Well-Being program. If you are hired on or after 9/1 in the plan year, you will automatically receive a discount on your medical contributions for the current year AND the next year.

## Questions about Balance 4 Well-Being?

Please contact Customer Service at: 1-877-224-7117 or email [wellness@powerofvitality.com](mailto:wellness@powerofvitality.com).

# MY WELL-BEING





# Balance 4 Well-Being: Gym Reimbursements

**Annual gym reimbursement through the Balance 4 Well-Being program will be available in early 2022.** Stay tuned for more information about this exciting new benefit!

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# Quit for Life™ Tobacco Cessation Program

## Get Help. Stay Quit.

**We know quitting tobacco isn't easy, and we're here to help.**  
 The Quit for Life Program has helped thousands of people take control of their lives and health by quitting tobacco. The telephone-based and online coaching treatment program is available free of charge for all regular full- and regular part-time U.S. and Canadian employees, spouses, domestic partners, dependent children and domestic partner children (over age 18 through the end of the month they turn 25).

It's free, it's confidential, and it works.

Upon successful completion of this program, you qualify for the Non-Tobacco discount if you and all of your covered dependents have been tobacco free for the prior six months.

You can enroll in this program by calling 866-QUIT-4-LIFE (866-784-8454) or log on to <https://myquitforlife.com/sherwinwilliams> and follow the instructions.



## MY WELL-BEING



# WW (Weight Watchers®) Program

**Want to live a longer, healthier life?** When you join WW (Weight Watchers Reimagined), you can lose weight and build healthy habits with a science-backed program that fits your life.

Achieving a healthy weight not only reduces your risk of heart disease, diabetes and certain types of cancer, it also helps you gain energy, self-confidence and improves your quality of life. The right time to be healthier is now—and we want to help. WW is a scientifically-proven approach to weight loss based on eating well, moving more, and developing healthy habits that can lead to lasting weight loss.

Join WW and you'll get access to our most flexible plan ever and easy-to-use app. Our program includes exciting experiences and products through our one-of-a kind rewards program, WellnessWins™, curated mindfulness and meditation content through our partnership with Headspace®, and on-demand guided fitness instruction through our partnerships with Aaptiv and FitOn.

The Sherwin-Williams WW program, which is available to all regular full-time and part-time employees, their spouses, domestic partners and dependents (ages 18-25), includes three options:

- Digital
- Digital 360
- Unlimited Workshops + Digital

And, to help you make the commitment to healthy weight loss, Sherwin-Williams is subsidizing over 80% of the retail cost of your WW membership - that's as low as \$4 per month! Reimbursement submission is no longer required!

For more information or to sign up, visit [WW.com/us/SherwinWilliams](http://WW.com/us/SherwinWilliams).

**Questions?**  
Call WW Customer Service at 1-866-204-2885.

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# Flu Shot Program

**The Flu Ends with You!** The annual flu shot program runs from fall of the current year into spring the following year. During the flu shot program, here is how you can get your flu shot:

- ☑ **Flu Shot Vouchers:** Vouchers are available on [myswbenefits.com](https://myswbenefits.com). Print your flu shot voucher(s) for yourself and eligible family members that will be accepted at any CVS or Walgreens nationwide. You can also show an electronic copy of the flu shot voucher on your phone at a CVS or Walgreens. One voucher per eligible dependent.
- ☑ **Onsite Flu Shot Clinics:** Eligible sites and work locations may be hosting an onsite clinic in the fall. Contact your HR Business Partner for more information on this option.

Employees do not have to be enrolled in a Sherwin-Williams health care plan to participate. Eligible dependents include your spouse/domestic partner and your children/domestic partner’s children age 18 through 26.

This last option is available year-round and during the annual flu shot program:

- ☑ **Visit your health care provider:** Employees and dependents enrolled in a Sherwin-Williams medical plan can visit a primary care doctor and obtain a flu shot at no cost.



**Questions? Call 1-844-358-0604.**

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# Vacation

At Sherwin-Williams, our employees' total well-being is important, and we are pleased to offer an increasing paid vacation schedule based on your years of service with the company.

During your first year you are provided vacation time based on your hire date. After your first year with Sherwin-Williams, you will be provided additional vacation days based on the vacation schedule. At the end of every year, you will automatically carry over up to five days (whole and partial days, up to 40 hours total) of unused vacation to be used during following calendar year.

## Flex Time

The vacation schedule includes five flex time days for unplanned absences which can be used for any reason and without penalty or incurring attendance points. Flex time can be used to cover sick days, attending to a sick child or taking a well-being day. Your flex time days will be available on January 1 of each year. Where mandated by state or local law, employees will be use flex time in one-hour increments. In all other areas, employees will be able to use flex time in four-hour/ half-day increments.

Years of Service	Vacation Schedule
<b>New Hire</b>	<b>3 - 13 days*</b>
<b>1 year</b>	<b>13 - 15 days*</b>
<b>2 years</b>	<b>16 days</b>
<b>3 - 4 years</b>	<b>17 days</b>
<b>5 - 7 years</b>	<b>21 days</b>
<b>8 - 9 years</b>	<b>22 days</b>
<b>10 - 14 years</b>	<b>23 days</b>
<b>15 - 16 years</b>	<b>26 days</b>
<b>17 - 24 years</b>	<b>28 days</b>
<b>25+ years</b>	<b>31 days</b>

\* Depending on hire date.  
 Employees working in Puerto Rico will remain on the current vacation and sick time accrual schedule.

The vacation schedule applies to US full-time employees not covered by a collective bargaining agreement. Some exceptions apply for employees in Puerto Rico due to legal requirements.

**Questions?** Please contact your local Human Resources Business Partner or call HR Shared Services at 1-800-792-1110.

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# Paid Parental Leave, Military Leave, and Bereavement Leave

## Non-Union Employees Only

### Paid Parental Leave

Regular full-time employees with at least one year of service are provided continuation of 100% base salary for up to 2 weeks, in week long increments, following the birth, adoption or foster placement of a child. The paid parental leave must be taken within one year of the birth, adoption or foster placement of the child.

### Military Leave

Regular full-time and regular part-time employees may take up to four weeks of leave with full pay each year to serve the military through active duty, National Guard, Reservist or performance of funeral honor duties.

### Bereavement Leave

Spending time with loved ones is important when the loss of a family member occurs. Regular full-time and regular part-time employees are eligible for the following bereavement leave:

- Five days of bereavement leave following the death of an immediate family member; or
- Three days of bereavement leave following the death of any other family member.

An immediate family member includes: spouse, domestic partner, child, step child, child of a domestic partner, grandchild, parent, step parent, grandparent, sibling, step sibling, mother-in-law, mother of a domestic partner, father-in-law, father of a domestic partner, sister-in-law, sister of a domestic partner, brother-in-law, brother of a domestic partner, daughter-in-law, daughter of a domestic partner, son-in-law, son of a domestic partner, foster child, foster father and foster mother.



**Questions about leave?** Contact the Leave of Absence Center of Excellence at 1-800-792-1110 or [loa@sherwin.com](mailto:loa@sherwin.com).

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# Celebrate

## Celebrate

The Sherwin-Williams recognition and service anniversary program. On the Celebrate website, you can send recognition to coworkers, earn badges tied to S-W core values and celebrate service anniversaries!

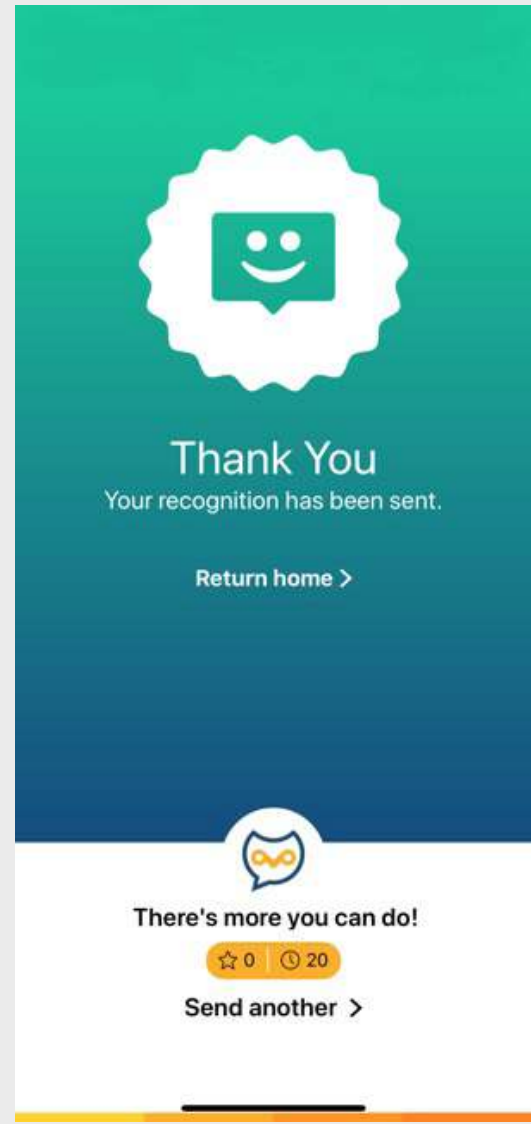
First time access must be via [swcelebrate.sherwin.com](http://swcelebrate.sherwin.com). Celebrate also has an app available for download on Google Play or the Apple App Store: **EZ Thanks. App Code: SWCelebrate.**



## Questions?

Email [swrecognition@@biworldwide.com](mailto:swrecognition@@biworldwide.com).

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# Adoption Assistance Program

Adoption can be quite expensive when you consider legal fees, adoption agency fees, travel expenses and other costs. The Sherwin-Williams Adoption Assistance Program is designed to provide eligible non-union employees with financial assistance. Eligible expenses will be covered up to a maximum of \$5,000 per adopted child.

While the reimbursements do not constitute ‘wages’ for income tax withholding, such amounts will be reported on your W2. The reimbursement is subject to Social Security, Medicare taxes and Federal Unemployment taxes. When you complete your tax return for the year, you will need to determine if any portion of the reimbursement represents taxable income.

Employees who qualify for assistance through this program are also eligible for two (2) weeks of paid leave during the first six weeks after the adopted child has been placed with the family.

An eligible non-union employee must meet all of the following requirements:

- must be a regular full-time employee;
- must have completed one (1) year of continuous full-time service at the time of adoption;
- for leave of absence eligibility, the employee must be actively working at the time the adopted child is placed with the family; and

- for financial aid eligibility, the employee must be actively working or on an approved leave of absence at the time any financial aid payments are made.

An eligible child qualified for adoption must meet the following requirement:

- must be under the age of eighteen (18)

To see a detailed explanation, list of eligible expenses, and how to file for this program, please log on to [myswbenefits.com](https://myswbenefits.com). Claims **must** be submitted within 90 days from the final date of the adoption.

**Questions? Contact the Sherwin-Williams Benefits Service Center at 1-844-358-0604.**

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# WageWorks Commuter Benefit

Save on public transportation and parking with the pre-tax Commuter Benefit, WageWorks. Once you sign up, the cost of your parking or your public transportation passes is deducted from your pay before taxes are taken out — saving you as much as 40% off the cost of your commute. To take advantage of WageWorks commuter benefits, log on to [www.wageworks.com](http://www.wageworks.com). Click “Sign Me Up!” or call 877-WageWorks (877-924-3967).



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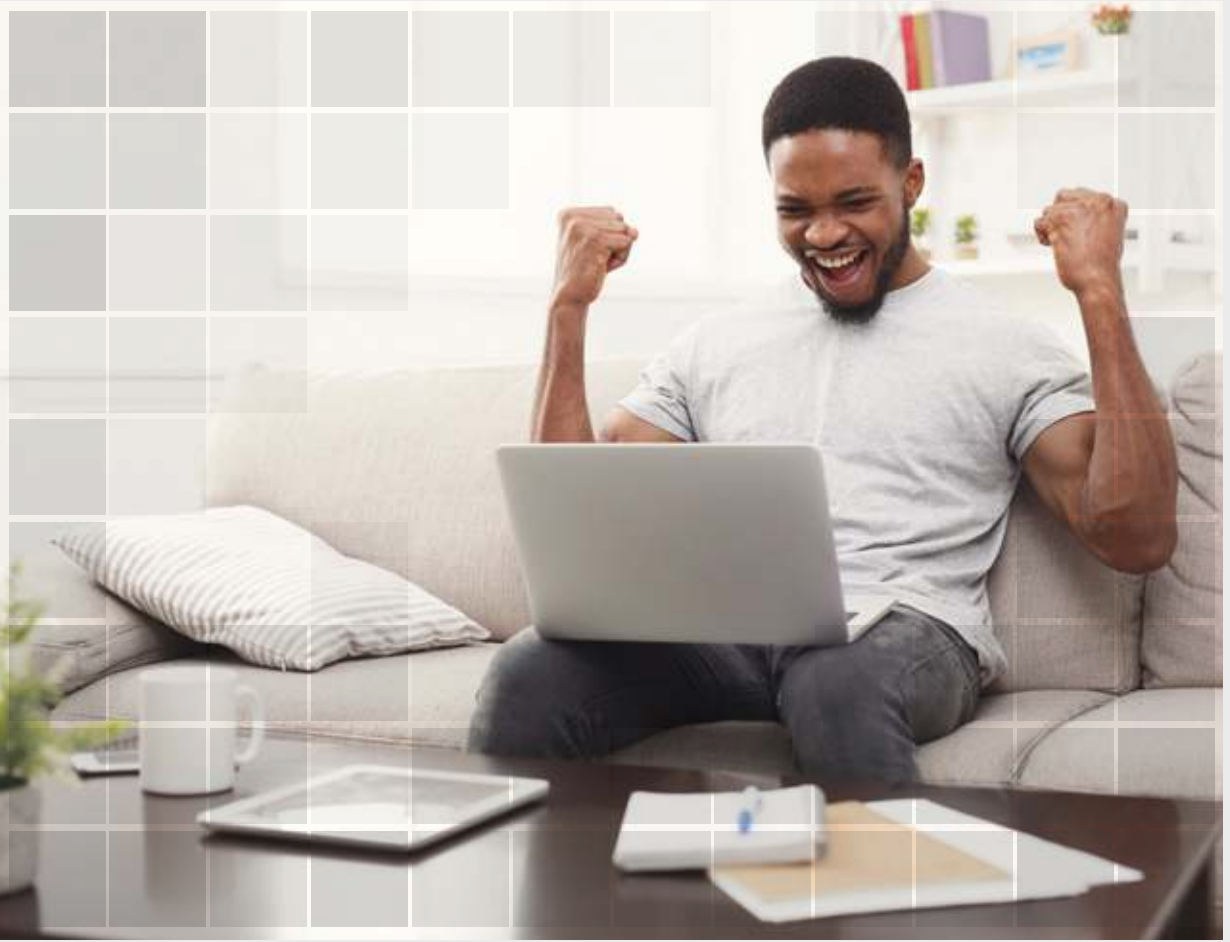
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# S-W Benefits Discount Hub

BenefitHub Marketplace is your home to save on thousands of items all through an easy-to-use, exclusive discount marketplace. BenefitHub negotiates the best discounts on the market for you and many of the offers include additional cash back to make it the best overall value to you. Not only saving you money, but time and hassle, too. The diverse platform includes discounts on travel, hotels, restaurants, car rentals, your favorite local establishments and much more!

You can access the BenefitHub Marketplace by logging into [myswbenefits.com](https://myswbenefits.com) and clicking My Extras.

**Questions? Call 1-866-664-4621.**



**MY EXTRAS**



# Business Travel Benefits

## Business Travel Accident Insurance\*

Business Travel Accident Insurance is available to U.S., Puerto Rico, U.S. Virgin Islands and Canada regular full-time, non-union employees at no cost to employees. Business Travel™ is defined as a trip authorized by Sherwin-Williams for the purpose of furthering the business of the Company while away from your regular place of work. The Business Travel Accident Plan covers accidental death and dismemberment that occurs during authorized business travel.

This benefit provides coverage to the employee for loss of life due to an accident, while on authorized business travel, payable at three times your base annual earnings\*\* with a minimum payment of \$100,000 and a maximum payment of \$1,000,000. Additional benefits may apply for medical and dental claims due to an accident while on authorized business travel. This benefit is available

for employees only (does not cover dependents).

## World Business Traveler Plan

The Sherwin-Williams World Traveler plan is available to all regular full-time employees and spouses/domestic partners under the age of 70 and unmarried children to age 26 to receive emergency medical and dental coverage while traveling outside the employee's home country on an authorized company business trip — including doctor visits, prescription drug coverage, and inpatient hospital expenses for urgent and emergency care.

“Business Travel” for the World Business Traveler Plan is defined as Business travel outside your home country for a maximum of 180 consecutive days for any one Business Trip, with no more than 270 travel days in a 12 month period. If your country of residence and/or domicile is the United States or any U.S.

Territory/Protectorate, travel between any combination of the 50 United States and U.S. Territories/Protectorates is considered travel within the home country.

- The plan is offered through Blue Cross Blue Shield Global
- There is no cost to the employee for this plan

The following are eligible for coverage:

- Employee: Regular full-time employee under age 70
- Dependent: Spouse or domestic partner under age 70, unmarried children to the covered employee. Dependents are covered as long as they are traveling with the covered employee on an authorized company business trip

**Questions? Call Blue Cross Blue Shield Global at 1-888-412-6403.**

## International SOS

Sherwin-Williams partners with International SOS, the leading medical assistance, international health care and security assistance company. Travel security information is provided by a joint venture of International SOS and Control Risks, the world's leading security risk management firm.

Rest assured that whenever you travel internationally on company business, Sherwin-Williams has a 24/7 resource on call, online and even on the ground to help with any medical, security and logistical questions, concerns and situations that may arise. So if you need a medical referral, lose your medication, seek pre-travel advice or experience a medical or security crisis, Sherwin-Williams has a fully integrated program in place so you receive the care and expertise that you need, whenever you need it.

**Questions?  
Call 1-215-942-8226.**

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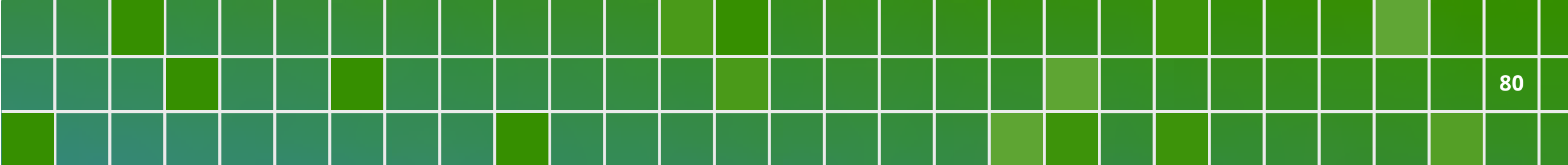
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# Credit Union Benefit and Membership

Managing your personal finances can be difficult and time-consuming. As a Sherwin-Williams employee you're eligible to join Century Federal Credit Union (CFCU) — a full-service financial institution. Take advantage of the numerous benefits of CFCU membership including savings and checking, loans including auto, mortgage, home equity and credit cards.

Members have access to seven branch locations in the Cleveland area, including the CFCU Sherwin-Williams Branch located

in the lobby at Headquarters. CFCU can serve members nationwide by virtue of 20,000 surcharge-free ATMs as well as through e-solutions such as online banking, online bill payment, e-statements, ACH/ direct deposits and mobile banking. Contact CFCU at 800-615-2328 or online at [www.cenfedcu.org](http://www.cenfedcu.org). CFCU is an Equal Housing Lender. Savings are federally insured to at least \$250,000 and backed by the full faith and credit of the US Government.

## MY EXTRAS





# Contact Information for Sherwin-Williams Benefit Plans

<b>Aetna Dental DMO or PPO</b> Dental DMO	<a href="http://www.aetna.com">www.aetna.com</a> 1-877-238-6200 Group #: 619325
<b>Allstate Identity Protection</b> Identity Theft Protection	<a href="http://www.myaip.com">www.myaip.com</a> 1-800-789-2720
<b>Anthem Medical</b> Advantage, Prime and Standard Medical Plans	<a href="http://www.anthem.com">www.anthem.com</a> 1-833-371-0216 Group #: 212069
<b>ASK-Work/Life Solutions Program</b> Employee Assistance	<a href="http://www.eap.sherwin.com">www.eap.sherwin.com</a> 1-800-882-2189
<b>Balance 4 Well-Being, powered by Vitality</b> Wellness Programs	<a href="http://www.wellbeing.sherwin.com">www.wellbeing.sherwin.com</a> 1-877-224-7117 <a href="mailto:wellness@powerofvitality.com">wellness@powerofvitality.com</a> Log on to <a href="http://myswbenefits.com">myswbenefits.com</a>
<b>Black Rock College Advantage</b> Advantage 529	<a href="http://www.blackrock.com/collegeadvantage">www.blackrock.com/collegeadvantage</a> S-W ID Code: 26571
<b>Blue Cross Blue Shield Global</b> For World Business Traveler Plan, Expats and TCNs	<a href="http://www.geo-blue.com">www.geo-blue.com</a> Toll-Free: 1-888-412-6403 Collect: +1-610-254-5830 <a href="mailto:customerservice@geo-blue.com">customerservice@geo-blue.com</a> 24/7 Medical Assistance and Evacuation: Collect call accepted: +1-215-798-3714 or <a href="mailto:globalhealth@geo-blue.com">globalhealth@geo-blue.com</a>
<b>Celebrate Recognition</b> Recognize a co-worker and celebrate service anniversaries	<a href="http://swcelebrate.sherwin.com">swcelebrate.sherwin.com</a> <a href="mailto:swrecognition@biworldwide.com">swrecognition@biworldwide.com</a>
<b>Century Federal Credit Union</b>	1-800-615-2328 <a href="http://www.cenfedcu.org">www.cenfedcu.org</a>
<b>CVS Caremark — Advantage, Prime and Standard Medical Plans Prescription Drug</b>	<a href="http://www.caremark.com">www.caremark.com</a> 1-866-217-5347 RxBIN: 004336 RxPCN: ADV RxGRP: RX7213
<b>EyeMed Vision Plan</b> Vision	<a href="http://www.eyemedvisioncare.com">www.eyemedvisioncare.com</a> 1-866-723-0514 Lasik: 1-877-552-7376 Group #: 9682204 Network: Select
<b>Farmers Insurance Choice</b> Auto and Home Insurance	<a href="http://farmersinsurancechoice.com/sherwinwilliams">farmersinsurancechoice.com/sherwinwilliams</a> 1-800-438-6381

<b>Fidelity Investments</b> Pension, Savings, Health Savings Account	<a href="http://www.401k.com">www.401k.com</a> 1-800-323-4015
<b>Flexible Spending Accounts</b> Healthcare and Dependent Day Care	<a href="http://myswbenefits.com">myswbenefits.com</a> 1-844-358-0604
<b>The Hartford</b> Disability/FMLA	<a href="http://abilityadvantage.thehartford.com">abilityadvantage.thehartford.com</a> 1-877-627-3702
<b>Health Coverage Resources</b> Part-time employees or retirees not eligible for company sponsored medical	<a href="http://www.healthcoverageresources.com/sherwin/home">www.healthcoverageresources.com/sherwin/home</a> eHealth: 1-877-731-9565 Questions on plans and pricing S-W Benefits Service Center: 1-844-358-0604 Coverage calculator and site navigation
<b>International SOS</b> Emergency resources while traveling internationally	<a href="http://www.internationalsos.com">www.internationalsos.com</a> 1-215-942-8226 Group# 11BYCA000157
<b>Kaiser Foundation HMO Health Plan—CA</b> Northern & Southern California Offered by home and work zip code	<a href="http://www.kaiserpermanente.org">www.kaiserpermanente.org</a> 1-800-464-4000 Group #: 8381—Northern California Group #: 227620—Southern California
<b>Kaiser Foundation HMO Health Plan—GA</b> Offered by home and work zip code	<a href="http://www.kaiserpermanente.org">www.kaiserpermanente.org</a> 1-800-611-1811 Group #: 8389
<b>Kaiser Foundation HMO Health Plan—MD</b> Offered by home and work zip code	<a href="http://www.kaiserpermanente.org">www.kaiserpermanente.org</a> 1-800-777-7902 Group #: 18190
<b>Kaiser Foundation HMO Health Plan—Northwest (OR and WA)</b> Offered by home and work zip code	<a href="http://www.kaiserpermanente.org">www.kaiserpermanente.org</a> 1-800-813-2000 Group #: 12295
<b>Kaiser Foundation POS/HMO Health Plan—HI</b> Offered by home and work zip code	<a href="http://www.kaiserpermanente.org">www.kaiserpermanente.org</a> 1-808-432-5955 (Oahu) 1-800-966-5955 (other islands) Group #: 06720

<b>LiveHealth Online</b> 24/7 Virtual Visits (Enrolled in Advantage, Prime or Standard Plan)	<a href="http://www.livehealthonline.com">www.livehealthonline.com</a> 1-855-603-7985  Note: Certain states prohibit providers to legally prescribe medications for telephone only (no video) visits.
<b>MetLife</b> Legal Plan	<a href="http://www.mybenefits.metlife.com">www.mybenefits.metlife.com</a> 1-800-438-6388
<b>My SW Total Rewards</b> Statements	<a href="http://www.myswtotalrewards.com">www.myswtotalrewards.com</a> 1-800-323-4015
<b>Nationwide</b> Pet Insurance	<a href="http://benefits.petinsurance.com/sherwin-williams">benefits.petinsurance.com/sherwin-williams</a> 1-877-738-7874
<b>Prudential Insurance Company of America</b> Life Insurance	<a href="http://www.prudential.com/mybenefits">www.prudential.com/mybenefits</a> Control Number 51341 1-877-602-4778
<b>Prudential Insurance</b> Voluntary Benefits (Critical Illness, Hospital Indemnity and Accident Insurance)	1-844-455-1002 <a href="http://mybenefits.prudential.com">mybenefits.prudential.com</a>
<b>Quit For Life</b> Tobacco Cessation	<a href="https://myquitforlife.com/sherwinwilliams">https://myquitforlife.com/sherwinwilliams</a> 1-866-784-8454
<b>S-W Benefits Discount Hub</b>	<a href="https://myswdiscounts.benefithub.com/">https://myswdiscounts.benefithub.com/</a> 1-866-664-4621
<b>S-W Benefits Service Center (My S-W Benefits)</b>	<a href="http://myswbenefits.com">myswbenefits.com</a> 1-844-358-0604
<b>S-W Pension Center</b> For Collectively Bargained Pension Plans only	1-866-630-2259
<b>Teladoc</b> Telephone Medical Consultation	<a href="http://www.teladoc.com">www.teladoc.com</a> 1-855-835-2362
<b>Teladoc Medical Experts</b> Second Opinion, Consultations (Advantage, Prime, Standard)	<a href="http://www.teladoc.com/medicalexperts">www.teladoc.com/medicalexperts</a> 1-855-835-2362, choose option for Expert Medical Opinion
<b>Transamerica</b> Permanent Life Insurance	<a href="http://www.transamericaemployeebenefits.com">www.transamericaemployeebenefits.com</a> 1-888-763-7474
<b>WageWorks</b> Commuter Savings	<a href="http://www.wageworks.com">www.wageworks.com</a> 1-877-924-3967
<b>WW (Weight Watchers®)</b> Weight Management	<a href="http://www.ww.com/us/sherwinwilliams">www.ww.com/us/sherwinwilliams</a> 1-866-204-2885

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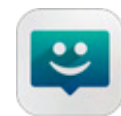













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# How do I get an ID card or extra cards?

## Anthem – Medical

- 1-833-371-0216
- [www.anthem.com](http://www.anthem.com)
- Group #: 212069

Anthem will send a medical ID card in the mail within 4-6 weeks of your coverage begin date. If you require medical services and don't have your ID card, you or your provider can call Anthem to verify coverage at 1-833-371-0216.

You can also download and print a digital ID card on [www.anthem.com](http://www.anthem.com) or download the Engage Wellbeing App to access your ID card on a device such as your cellphone.

## CVS/caremark – Prescription Drug

- 1-866-217-5347
- [www.caremark.com](http://www.caremark.com)
- RxBIN: 004336
- RxPCN: ADV
- RxGRP: RX7213

CVS/caremark will send a prescription drug ID card in the mail within 4-6 weeks of your coverage begin date. If you require prescription drug services and don't have your ID card, you or your pharmacy can call CVS/caremark to verify coverage at 1-866-217-5347.

You can also download and print a digital ID card on [www.caremark.com](http://www.caremark.com) or download the CVS/caremark app to access your ID card on a device such as your cellphone.

## Aetna – Dental

- 1-877-238-6200
- [www.aetna.com](http://www.aetna.com)
- Group #: 619325

You will not receive a dental ID card in the mail; however, you can print one from [www.aetna.com](http://www.aetna.com) or access a digital version through the Aetna app. If you prefer a physical Dental ID card you can call Aetna and request an ID card to be sent to you.

If you require dental services and don't have access to your ID card, you or your provider can call Aetna to verify coverage at 1-877-238-6200.

## EyeMed – Vision

- 1-866-723-0514
- [www.eyemedvisioncare.com](http://www.eyemedvisioncare.com)
- Group #: 9682204
- Network: Select

EyeMed sends two ID cards in the subscriber's name when you join, but you don't have to have it when you visit your eye doctor. If you lose your card or need extras for your family, you can print a replacement on the member portal:

[www.eyemedvisioncare.com/member/public/login.emvc](http://www.eyemedvisioncare.com/member/public/login.emvc)

Or to pull up a digital version anytime, anywhere, download the EyeMed Members App through the [App Store](#) or [Google Play](#).

If you require vision services and don't have access to your ID card, you or your provider can call EyeMed to verify coverage at 1-866-723-0514.

## MY RESOURCES





# Sherwin-Williams Benefit Service Center

[myswbenefits.com](http://myswbenefits.com)

1-844-358-0604

The S-W Benefit Service Center can help with:

### Benefits for U.S. Employees, Retirees and Ex-Employees

- Health & Welfare Benefits
- Voluntary Benefits
- Enrollment and Changes (except Auto & Home and Pet Insurance – please call MetLife directly)
- Dependent Verification Process
- Flexible Spending Account (Healthcare and Dependent Care)
- Health Savings Account Enrollment and Employee Contribution Changes
- Payroll Deduction Inquiries

### Benefits Enrollment and Life Events

- New Hires, Part-Time to Full-Time Status Change or Full-Time to Part-Time Status Change
- Open Enrollment
- Status Change – Non-Union to Union or Union to Non-Union
- Payroll Status Change – Bi-Weekly to Weekly, Weekly to Bi-Weekly
- Retirement, Termination or Separation Agreements
- Having a Baby, Death, Divorce, Marriage, Loss or Gain of Coverage, etc.
- Life Insurance Beneficiary

### Benefits Billing

- Leave of Absence
- COBRA
- Unpaid Leave of Absence
- Retiree Medical (if eligible)

### Discounts

- BenefitHub Discount Marketplace
- Balance 4 Well-Being Link – Access to Global-Fit Network Gym Discounts

### Forms – Benefits Related

- COBRA
- Coverage Termination Letters
- Court Orders for Dependent Coverage

- Employee Verification of Benefits Coverage
- Power of Attorney
- Social Security Administration – Medical Verification form for Medicare Part B (CMS Forms)
- Tax Form 1095

### Other

- Access to Plan Documents and Information about Health & Welfare and Voluntary Benefits
- Adoption Assistance Program
- Enrollment Assistance After Calling Vendor Directly

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# Employee Services

**As a Sherwin-Williams Employee, you have access to important additional programs and rewards.** There are people and tools throughout Sherwin-Williams that can help you take advantage of these services. If you need information or assistance with any of the following programs, please contact:

### Your HR Business Partner for assistance with...

- Vacation
- Bereavement
- FMLA
- Leave of Absence including Disability or Maternity
- HR Cloud System
- Tuition Reimbursement
- Service Awards

### mySherwin.com for information on...

- Employee Discount
- Car Discounts
- Cell Phone Discounts
- Employment Verification
- Matching Gifts
- Scholarships

### Your Payroll Processor for assistance with...

- W2's
- Direct Deposit
- Federal Withholding
- State Withholding

**Note:** This document presents only the highlights of some of the benefits Sherwin-Williams provides to U.S. employees. It is not intended to take the place of the official plan documents, insurance policies and contracts that govern the individual plans. As stated in the Plan's official documents, Sherwin-Williams reserves the right to amend, modify or terminate the Plan at any time and for any reason. Participation in any Company-sponsored benefit plan is not a promise, guarantee or agreement of continued employment with The Sherwin-Williams Company. Valspar benefits programs information can be obtained by visiting [myswbenefits.com](http://myswbenefits.com) and [401k.com](http://401k.com).

## MY RESOURCES

