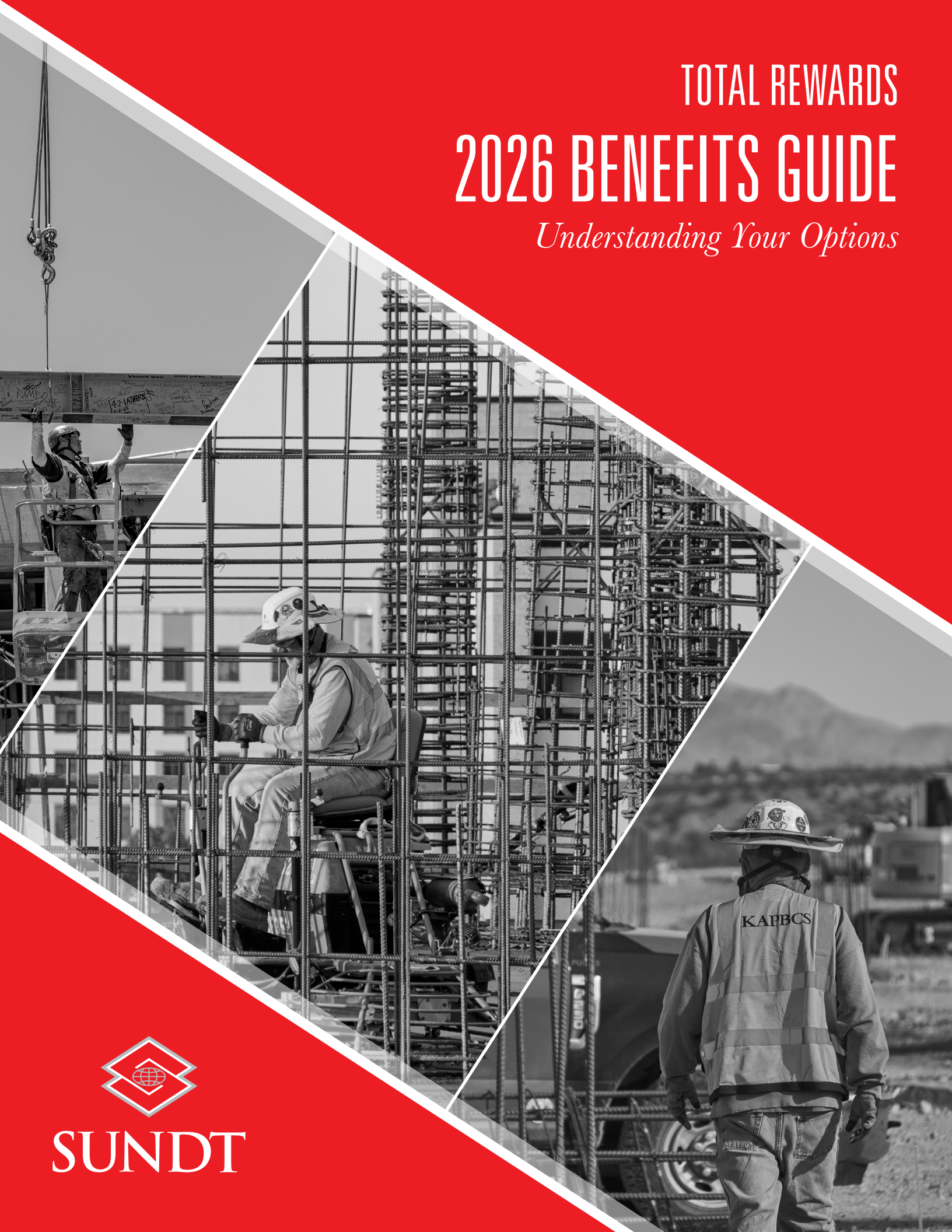
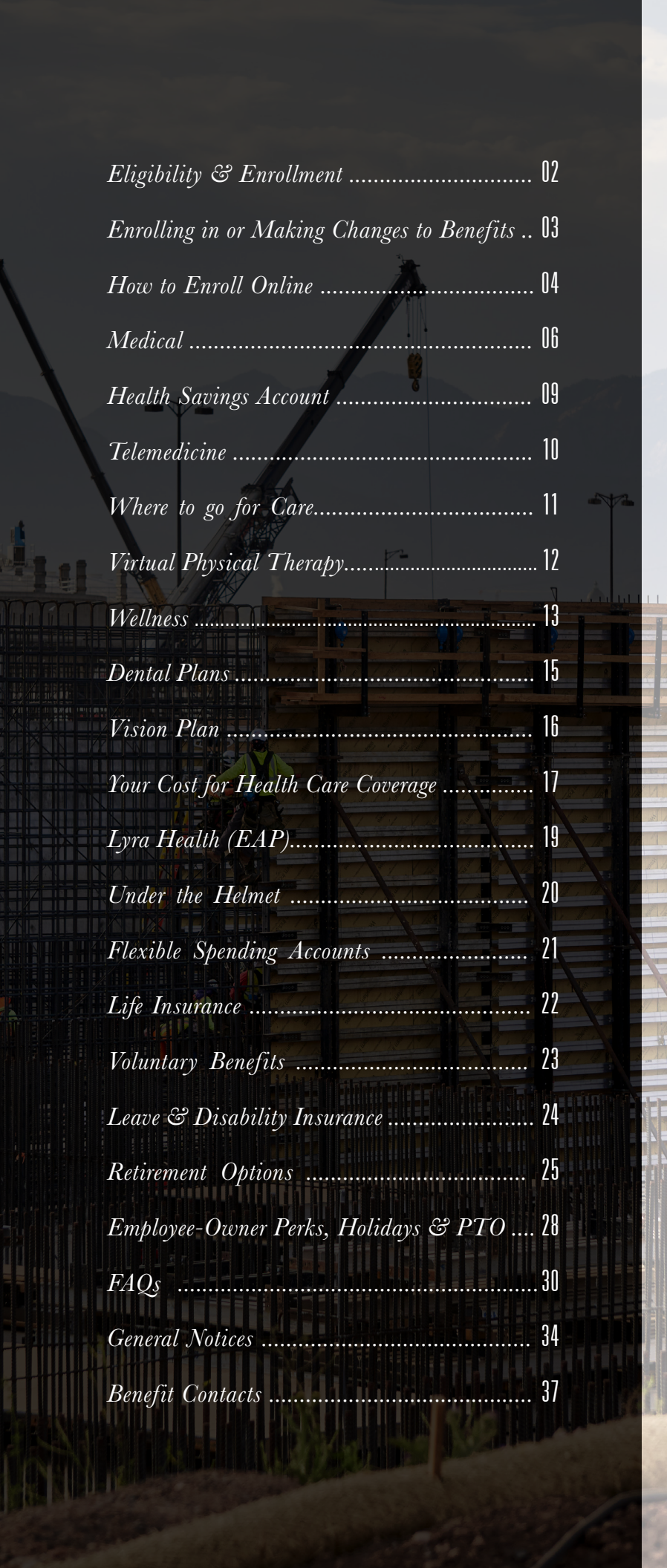


TOTAL REWARDS 2026 BENEFITS GUIDE

Understanding Your Options



SUNDT



<i>Eligibility & Enrollment</i>	<i>02</i>
<i>Enrolling in or Making Changes to Benefits ..</i>	<i>03</i>
<i>How to Enroll Online</i>	<i>04</i>
<i>Medical</i>	<i>06</i>
<i>Health Savings Account</i>	<i>09</i>
<i>Telemedicine</i>	<i>10</i>
<i>Where to go for Care.....</i>	<i>11</i>
<i>Virtual Physical Therapy.....</i>	<i>12</i>
<i>Wellness</i>	<i>13</i>
<i>Dental Plans</i>	<i>15</i>
<i>Vision Plan</i>	<i>16</i>
<i>Your Cost for Health Care Coverage</i>	<i>17</i>
<i>Lyra Health (EAP).....</i>	<i>19</i>
<i>Under the Helmet</i>	<i>20</i>
<i>Flexible Spending Accounts</i>	<i>21</i>
<i>Life Insurance</i>	<i>22</i>
<i>Voluntary Benefits</i>	<i>23</i>
<i>Leave & Disability Insurance</i>	<i>24</i>
<i>Retirement Options</i>	<i>25</i>
<i>Employee-Owner Perks, Holidays & PTO</i>	<i>28</i>
<i>FAQs</i>	<i>30</i>
<i>General Notices</i>	<i>34</i>
<i>Benefit Contacts</i>	<i>37</i>

What's Inside:

04 | **How to Enroll**

06 | **Medical Plan Summaries**

15 | **Dental Plan Summaries**

16 | **Vision Plan Summary**

17 | **Your Cost for Health Care Coverage**

25 | **Retirement Options**

30 | **Benefits FAQ**

WELCOME TO YOUR SUNDT BENEFITS!

As a Sundt Construction employee-owner, your health and well-being are a top priority. When you feel your best, physically, mentally, socially, and financially, you bring your best to both your loved ones and to our company. That's why we provide a comprehensive and competitive benefits program designed to support every area of your life.

This Benefits Guide will help you understand your options and make informed enrollment choices, so you can select the coverage that best meets your needs for the year ahead. We encourage you to take the time to review it carefully. Please stay connected to the Total Rewards and Sundt Strong pages on SharePoint for ongoing updates. If you have any questions regarding your benefits, you may contact the Benefits Team by emailing benefits@sundt.com or wellness@sundt.com. You may also reach the team by phone at 480.293.3139 or through the benefits text message line at 844.816.2132.





ELIGIBILITY & ENROLLMENT

WHO IS ELIGIBLE?

You may enroll your eligible dependents in many of the same plans you choose for yourself. Eligible dependents include:

- Your legal spouse (including common law) or registered domestic partner (same or opposite sex)
- Your children up to age 26 who are:
 - » Natural-born
 - » Adopted
 - » Stepchildren
 - » Registered domestic partner's children

To control health care costs and meet health plan contract obligations, Sundt performs mandatory reviews to verify dependent eligibility for enrollment in the benefit plans. In order for your dependent(s) to continue to receive benefits under The Sundt Companies benefit plans, action is required by you to submit proof of their eligibility. **Dependents will be dropped from coverage if proof is not provided to our third-party vendor.**

*If you're a part of the AGC San Diego Apprentice Program you are not eligible to enroll in medical insurance.



NOTE:

Please be aware that we will be making updates to dependent eligibility. Beginning January 1, 2027, domestic partners will no longer be eligible for coverage under Sundt's health insurance plans. We understand that this change may affect some of our employee-owners and their families, and we are committed to providing support and guidance throughout this transition.

WHEN DOES COVERAGE BEGIN?

Administrative: Regular, full-time and part-time employees, **including interns**, working 20 or more hours per week are eligible for medical, dental, vision, EAP, and Basic Life and Accidental Death & Dismemberment (AD&D) benefits on your date of hire. Short-Term Disability, Maternity Leave, Parental Leave and Long-Term Disability benefits are effective after 90 days of employment.

Craft: Employees are eligible for most benefits on the first day of the month following 60 days of continuous employment. Short-Term Disability, Maternity Leave, Parental Leave and Long-Term Disability benefits are effective after 6 months of continuous employment.

Craft Rehires: Previously eligible Craft rehires returning within one year of separation are eligible for most benefits on the first of the month following date of hire.

Waive Coverage Option: You must waive benefits within 30 days of your hire date. **If no action is taken**, you will be automatically enrolled in the Medical Base Plan for employee-only coverage.

Your coverage will remain in effect through the end of the benefits plan year (January 1, 2026 – December 31, 2026). If you miss the enrollment deadline, you may not enroll in a benefit plan unless you have a qualified life event during the plan year. The life event must be reported to Benefits within 30 days of the life changing event.

ENROLLING IN OR MAKING CHANGES TO YOUR BENEFITS

The choices you make when you first become eligible are locked in for the remainder of the calendar year. It's important to review your benefit options and choose the best coverage for you and your family.

YOU HAVE FOUR OPPORTUNITIES TO ENROLL OR MAKE CHANGES:

1. **Administrative and Craft employees need to enroll within 30 days of their hire date.**
2. **Within 30 days of a qualified life event or change in family status. Examples include:**
 - » Marital status change
 - » Registration of domestic partner
 - » Birth or adoption of a child
 - » Loss or gain of other health coverage for you and/or dependents or spouse/registered domestic partner's annual enrollment
3. **During the annual open enrollment period in November**
4. **Within 60 days for certain AHCCCS/Medicaid/CHIP/Medicare events**

STEPS TO ENROLL

1. **Complete the Enrollment Process**
 - » Review this guide to compare your options and evaluate plan costs and potential savings.
 - » Login to the Employee Portal and enroll within 30 days of employment start date. Enter the Benefits Portal and click Make Changes. Review the enrolling instructions on the next page.
 - » Select your benefit choices under the appropriate categories.
 - » Each year, you need to decide if you want to participate in a Flexible Spending Account (FSA) or Health Savings Account (HSA). You must designate the amount you want to set aside from each paycheck (cannot exceed annual IRS limits).
 - » Carefully review your dependent information to make sure they are eligible for benefits and their information is correct (date of birth, Social Security number, gender, etc.).
2. **Submit Your Elections**
3. **Confirm Your Elections**
 - » Review your benefits confirmation statement carefully to ensure you and your dependent's benefits enrollments are correct.
 - » Print and save a copy of your confirmation statement for your records and proof of elections.

HOW TO ENROLL ONLINE

Follow the instructions below to enroll in your benefits or waive coverage in the Employee Portal. Employees must complete their enrollment or waive benefits within 30 days of their hire date. If no action is taken, employees will be defaulted into the Base Plan (Employee Only), and all other benefits will be waived.

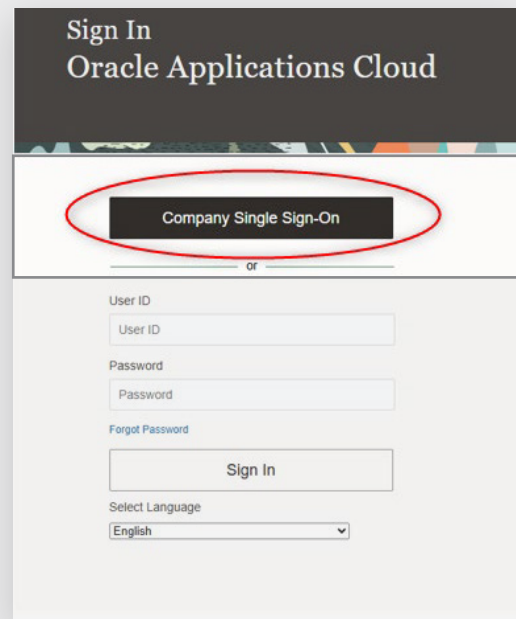
Sundt also provides all employees with a free Basic Life Insurance policy. Please make sure to designate a beneficiary when you enroll.

STEP 1: LOG INTO THE EMPLOYEE PORTAL

Log in to the Employee Portal or visit hcm.sundt.com from any computer. If you are logged into a Sundt computer, your login will take you directly into the Employee Portal. Otherwise, click on Company Single Sign-On.

STEP 2: SIGN IN

You will be directed to the sign in page where you will enter your credentials. ***You may be required to do a two-factor authentication.**



Sign In
Oracle Applications Cloud

Company Single Sign-On

or

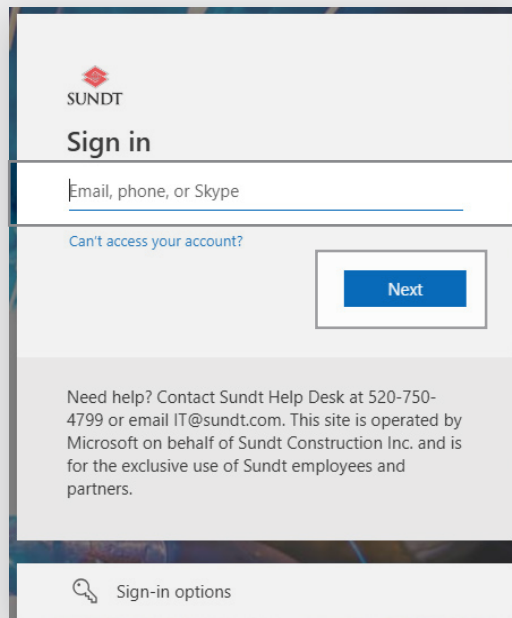
User ID

Password

[Forgot Password](#)

Sign In

Select Language
English



SUNDT
Sign in

Email, phone, or Skype

[Can't access your account?](#)

Next

Need help? Contact Sundt Help Desk at 520-750-4799 or email IT@sundt.com. This site is operated by Microsoft on behalf of Sundt Construction Inc. and is for the exclusive use of Sundt employees and partners.

Sign-in options

Admin

Username: Your Sundt Email Address

Password: Your computer login password

Craft

Username: <EmployeeNumber>@sundt.com
(example: 123456@sundt.com)

Password: If you do not have a password or have trouble logging in, please call the IT service desk **520.750.4799** for assistance.



Scan this QR code to access the next steps for enrolling in your benefits.

A construction worker is shown in profile, facing right, working on a steel rebar framework. The worker is wearing a white hard hat with a logo, safety glasses, a grey hooded sweatshirt, a high-visibility yellow safety vest, and yellow work gloves. A white cloth with the text "DI CAPBCS KAI" is tied around the worker's face. The worker is holding a pair of pliers and appears to be adjusting or securing a vertical rebar. A red level is visible in the worker's tool belt. The background shows more of the rebar structure and a clear sky.

PLANS AND BENEFITS

MEDICAL PLAN SUMMARIES

The chart below compares coverage highlights for your Blue Cross Blue Shield of Arizona PPO medical plan options.

PLAN HIGHLIGHTS	HDHP WITH HSA	BASE PLAN	PLUS PLAN
Costs	In-network cost to you:	In-network cost to you:	In-network cost to you:
ANNUAL CALENDAR YEAR DEDUCTIBLE			
Individual	\$1,700	\$1,250	\$500
Family	\$3,400	\$3,750	\$1,500
OUT-OF-POCKET MAX*			
Individual	\$4,250	\$4,250	\$3,000
Family	\$8,500	\$12,750	\$9,000
SUNDT MAX. ANNUAL HSA CONTRIBUTION			
Individual / Family	\$600 / \$1,200	n/a	n/a
PROFESSIONAL SERVICES			
Preventive Care	covered at 100%	covered at 100%	covered at 100%
Telehealth from AZ Blue	\$0 copay	\$0 copay	\$0 copay
Primary Care Physician (PCP)	30% after deductible	\$25 copay	\$15 copay
Specialist Visit		\$55 copay	\$35 copay
Lab Work		30% after deductible	20% after deductible
HOSPITAL SERVICES			
Inpatient	30% after deductible	30% after deductible	20% after deductible
Outpatient Surgery			
Emergency Room		\$75 copay	\$75 copay
Urgent Care			
INFERTILITY			
Infertility Covered services: lab and radiology testing, counseling, surgical treatment, artificial insemination, in-vitro fertilization, GIFT, ZIFT, etc.	Coverage varies by service provider. \$25,000 medical and pharmaceutical lifetime maximum.		
MENTAL HEALTH & SUBSTANCE ABUSE			
Mental Health Office Visit	30% after deductible	\$25 copay	\$15 copay
Inpatient/Outpatient Care		30% after deductible	20% after deductible
Telehealth from AZ Blue Mental Health Visits	\$0 copay	\$0 copay	\$0 copay

The above information is a summary only. Please refer to your Summary Plan Description for complete details of Plan benefits, limitations and exclusions. Go to [SundtWeb > Support Centers > Total Rewards > 2026 Benefits > Summary Plan Documents](#).

Out-of-Network Benefits: Covered at 50% of eligible expenses after deductible. Balance billing may apply.

*Based on the maximum charge allowed by the carrier. This does not include any balance billing that may occur when using an out-of-network provider.

PHARMACY BENEFIT

Your Blue Cross Blue Shield of Arizona pharmacy benefits provide you with access to many programs and services to help manage your health and prescription medication needs.

IN-NETWORK	HDHP WITH HSA			BASE & PLUS PLAN		
	RETAIL (30-DAY SUPPLY)	RETAIL (90-DAY SUPPLY)	HOME DELIVERY (90-DAY SUPPLY)	RETAIL (30-DAY SUPPLY)	RETAIL (90-DAY SUPPLY)	HOME DELIVERY (90-DAY SUPPLY)
Generics	30%	30%	30%	10%	2.5x copay	2x copay
Preferred Brands	30%	30%	30%	20% up to \$40 max	2.5x copay	2x copay
Non-Preferred Brands	30%	30%	30%	30% up to \$80 max	2.5x copay	2x copay
Specialty*	30%	30%	n/a	10% up to \$250 max	2.5x copay	n/a

HDHP w/HSA coinsurance applies after the deductible has been met.

No matter which plan you have, you'll pay 50% for all out-of-network prescription medications. No out-of-network coverage on home delivery or specialty medications.

*Specialty medications require prior-authorization. To download the Prior Authorization Request form, visit [AZBlue.com/pharmacy](https://www.AZBlue.com/pharmacy) and click the Provider Resources drop down.

Use [AZBlue.com](https://www.AZBlue.com) to manage your prescriptions:

- Search for lower cost alternatives, get help with your medications, and see which medications your plan covers.

CONTACT INFORMATION:

- Optum Rx Pharmacy: **866.325.1794**
- Customer service: **602.864.4861**



NOTE:

All three Medical Plans use the Standard Premium Drug List

Follow these simple steps to find out how your plan covers your medication(s).

1. Go to [AZBlue.com/pharmacy](https://www.AZBlue.com/pharmacy)
2. Under Standard Pharmacy Plans, select View Drug Lists and Resources
3. Select the Standard Premium Drug List - Closed Formulary tab
4. Click View PDF and find your medication

A background image showing construction workers in safety gear working on a large steel framework, likely for a bridge or industrial structure. The workers are positioned on a platform, and the structure consists of numerous vertical and horizontal steel beams.

MEDICAL

*Be the Best You With Medical Coverage, Administered by
Blue Cross Blue Shield of Arizona*

Is anything more important than your health? At Sundt, our goal is to inspire you to reach your highest potential and be the best version of you. This starts with taking care of your overall health. Learn more about the rich medical benefits Sundt offers you and your family.

WHAT ARE MY OPTIONS?

There are three medical options to choose from: Base, Plus, and HDHP plans. For the Base and Plus Plan options there are copays for PCP, specialist, and urgent care visits. With the HDHP plan, you pay for all medical services until you reach the annual deductible. After your annual deductible is met, the plan pays a percentage of covered services known as coinsurance. When you reach the out-of-pocket maximum limit, the plan will pay 100% for all eligible in-network expenses for the remainder of the calendar year. Deductibles do not have to be paid prior to qualified preventative services in order to have them covered 100% by the plan. Use the chart below to compare medical plan options and determine which would be the best for you and your family.

PLAN HIGHLIGHTS	HDHP With Health Savings Account (HSA) BCBS PPO Plan	Base and Plus BCBS PPO Plan
Covered Services	Covered Services are the same as Base and Plus Plan but paid at different levels.	Covered services are the same but paid at different levels depending upon the plan you choose.
Seeing a Specialist	No referral required.	No referral required.
Deductible Required	Yes, deductible must be met before covered services, including prescriptions, will be covered. Deductible is waived for Preventive Services and Telemedicine.	Yes, in most cases. Deductible is waived for Preventive Services and Office Visits.
Compatible with the HSA	Yes.	No (you may elect a Flexible Spending Account).
Other Important Tips	• Although this plan has a higher deductible than most plans, it requires lower payroll deductions. • The HSA account provides a tax-favored vehicle to help you manage your out-of-pocket expenses. • Emergencies covered worldwide. • Up-front costs like prescriptions may be difficult to pay immediately without savings – be sure to research the costs of your services before enrolling on a HDHP plan.	• You may choose in or out-of-network care, however in-network care provides you a higher level of benefit. • Emergencies covered worldwide. • Out-of-network providers will bill the balance to the member for amounts not covered by BCBSAZ.

Please note, the above examples are used for general illustrative purposes only. For a detailed view of your medical plan summaries, visit [AZBlue.com](https://www.AZBlue.com).

HEALTH SAVINGS ACCOUNT (HSA)

Administered by HealthEquity

When you enroll in a High Deductible Health Plan (HDHP) and meet the HSA eligibility requirements, you may contribute to an HSA to pay for eligible health care expenses with pre-tax dollars, through HealthEquity.

WHAT ARE THE BENEFITS?

- Tax Advantages: Contribute pre-tax or deduct post-tax contributions on your federal return.
- Tax-Free Growth: Earnings from interest or investments grow tax-free (subject to account rules and state laws).
- Tax-Free Withdrawals: Use HSA funds tax-free for qualified medical expenses. Visit healthequity.com/hsa-qme for a list of qualified expenses.
- No Expiration: Funds roll over year-to-year.
- Lower Premiums: HSA-compatible plans often have lower monthly premiums than traditional PPOs.

HOW DO I QUALIFY FOR AN HSA?

The IRS has guidelines regarding who qualifies for an HSA. You are considered eligible if:

- You are covered under a qualified HDHP medical plan.
- You are not enrolled in non-qualified health insurance outside of The Sundt Companies HDHP HSA PPO plan.
- You are not enrolled in Medicare, Tricare, Tricare for Life, VA or IHS.
- You are not claimed as a dependent on someone else's tax return (excluding a spouse/registered domestic partner).
- You are not enrolled in a general Health Care Flexible Spending Account (Health FSA) or general Health Reimbursement Arrangement (HRA).

A FEW RULES YOU NEED TO KNOW:

- IRS Limits: Monitor your contributions to avoid exceeding IRS limits, which can result in income tax plus a 6% excise tax.
- Nonqualified Expenses: If you're under 65, using HSA funds for nonqualified expenses incurs a 20% penalty.
- Medicare Eligibility: You can't contribute to an HSA once you're entitled to Medicare, but existing funds can still be used for qualified expenses.
- Other Coverage: A limited-purpose FSA is allowed after meeting your HDHP deductible.
- Contribution Timing: Contributions are typically prorated based on months of eligibility. However, under the full contribution rule, if you're HSA-eligible by December 1 and remain eligible through the next year, you may contribute the full annual limit.

HOW DO I MANAGE MY HSA?

- The most convenient way to pay for qualified expenses is to utilize the HSA debit card.
- You can also use your own cash or a personal credit card and reimburse yourself through your online HSA account. Be sure to setup direct deposit in your HealthEquity member portal.
- It is recommended that you keep receipts of HSA purchases, should you ever be audited by the IRS.

View the status of your claims and check your HSA balance at healthequity.com.

MAXIMUM ELECTION	2026 IRS ANNUAL CONTRIBUTION LIMIT	2026 SUNDT CONTRIBUTION	2026 MAXIMUM EMPLOYEE CONTRIBUTION
Individual	\$4,400	\$600	\$3,800
Family	\$8,750	\$1,200	\$7,550
Age 55+ Catch-Up Contribution*	\$1,000	N/A	\$1,000



TELEMEDICINE

*Now through Telehealth from AZ Blue
Get Care Anytime, Anywhere*

Telemedicine visits (including mental health visits) with Telehealth from AZ Blue are **FREE** when you are enrolled in one of the Sundt medical plans. No more waiting rooms or scheduling hassles. **Telehealth from AZ Blue puts you in control of when and where you see a doctor — all from your smartphone or computer 24/7.**



General Health Issues

You can speak with a licensed physician by video or phone for non-emergency issues.



Prescriptions

Doctors can send a prescription to the pharmacy you've selected if necessary.



Mental Health

Licensed therapists and psychiatrists available via appointment for mental health.

VIRTUAL ANNUAL PHYSICAL

Take advantage of a convenient way to earn your wellness credit—complete your annual physical virtually at no cost through Telehealth from AZ Blue. It's simple: schedule your lab work, then meet with a provider online to review your results once they're ready. This quick and easy process gives you the credit and keeps your health on track—all from the comfort of home.

HOW DOES IT WORK?

- Log in to AZBlue.com/member, click on Find Care, then select Telehealth to log in or sign up.
- Fill in your contact information.
- Set up your username and password.
- Add your insurance, doctor, and health information.
- You're ready to use Telehealth from AZ Blue!



NOTE:

If you are traveling out of state, you'll need to change your profile setting to show the state you're visiting. That way, you can choose a doctor who is licensed to practice in that state.



EMERGENCY ROOM VS. URGENT CARE / TELEMEDICINE

How Do You Choose?

If it's not a true emergency, skip the emergency room. Need medical attention, but it's not a true emergency? Save time and money by visiting urgent care. Emergency room charges are expensive, and the average wait time is 4.5 hours! Urgent care centers provide quality care just like the ER, but you could save hundreds of dollars and hours of time in the waiting room for non-life-threatening issues.

URGENT CARE CENTER / TELEMEDICINE

(Non-life-threatening)

- Earaches and infections
- Minor cuts, bumps, sprains, and burns
- Fever and flu symptoms
- Allergic reactions
- Cough, cold and sore throat
- Animal bites
- Mild asthma
- Headaches
- Urinary tract infections
- Back and joint pain

EMERGENCY ROOM

(Life-threatening)

- Sudden numbness or weakness
- Disorientation or difficulty speaking
- Sudden dizziness or loss of coordination
- Seizure or loss of consciousness
- Shortness of breath or severe asthma attack
- Head injury or major trauma
- Blurry vision or loss of vision
- Severe cuts or burns
- Overdoses
- Uncontrolled bleeding
- Coughing or vomiting blood
- Heart attack or chest pain
- Severe allergic reactions



TIP:

To find the nearest urgent care, visit [AZBlue.com](https://www.azblue.com), navigate to Find Care and select Statewide/National PPO. For non-life threatening issues, consider using telemedicine (see page 10).

VIRTUAL PHYSICAL THERAPY

Hinge Health Through Blue Cross Blue Shield of Arizona

Sundt Construction is proud to offer Hinge Health at no cost to all BCBSAZ enrolled health plan members! That includes spouses/registered domestic partners, and dependents age 18 or older.

Struggling with joint or muscle pain? Get access to a personalized exercise program and a dedicated care team to reduce your joint and muscle pain. Hinge Health offers care for your back and joints.

Recover from a recent or past injury. Prepare for surgery. Overcome back and joint pain. Stay healthy and pain free. Get the tools to move freely again and do it from the comfort of your home, on your schedule.



*Scan the QR Code to start
your recovery plan today!*

GET VIRTUAL CARE BASED ON YOUR SITUATION:

- A personal care team, including a physical therapist and health coach.
- Same-day access to care: Once accepted, members can start their exercise therapy right away and schedule a virtual physical therapy appointment.
- Convenient exercise therapy for every lifestyle: Members get a treatment plan tailored to their pain and needs, like pelvic health issues, and can complete exercises on their time.
- Skills and tools to stay engaged: We equip members with everything they need to stay on track, like goal setting, lifestyle coaching, and meaningful progress tracking.

BLUE CROSS BLUE SHIELD OF ARIZONA

Wellness Resources

24/7 NURSE ON CALL

Using one toll-free number, you and your family can speak with Registered Nurses on health-related adult and pediatric issues and get help making informed health care decisions. Registered Nurses can also assist callers with choosing appropriate medical care and preparing questions to discuss with your physician about treatment plans. When appropriate, Registered Nurses will suggest care either through self-care techniques, a provider appointment, or, if needed, a visit to urgent care or the emergency room.

Call **866.422.2729** to speak with a nurse.

BLUE 365 DISCOUNTS

Visit blue365deals.com/BCBSAZ & have your BCBS member ID card ready. Discounts are available for national brands for fitness gear, gym memberships, healthy eating, and more.

AZBLUE MEMBER ACCOUNT

The AZBlue online member account makes it easy to manage your health plan on the go. Visit AZBlue.com/member to access the following:

- Access your digital member ID card/order replacement ID cards.
- View your deductibles and out-of-pocket balances.
- View your claim information and pay your provider bills.
- Search for doctors, hospitals, urgent care centers, and labs.
- Explore treatment options, cost for procedures, and covered services.
- Look up a drug your doctor orders and use the treatment cost estimator.



WELLNESS CREDIT PROGRAM



Save on your medical plan premiums by getting an annual physical!

As health care costs continue to rise, there has never been a better time to take proactive steps for your well-being—both to feel your best and to save on medical expenses. Building a relationship with a trusted healthcare provider is essential. Regular check-ups, even when you feel healthy, help you maintain wellness and identify potential issues early—before they become more serious.

For employees and their spouses or registered domestic partners enrolled in the Sundt medical plan, annual physicals are fully covered when using in-network providers, with no out-of-pocket cost.

To participate in the 2026 Wellness Credit Program, complete an annual physical with your Primary Care Provider (PCP) or complete a virtual annual physical through Telehealth from AZ Blue anytime between **October 1, 2025 – August 31, 2026** to receive the wellness credit in the 2027 plan year. Employees and their spouses or registered domestic partners can now self-attest through Sharecare once they have completed their annual physical. Please note that the wellness credit will not be applied until Sundt receives confirmation of appointment attendance directly from Sharecare. If Sharecare is unable to validate your appointment, Sundt reserves the right to discontinue any further wellness credits for the applicable calendar year.

Wellness credits are \$1,752 per calendar year per employee and an additional \$1,752 per calendar year per covered spouse/registered domestic partner (a total of up to \$3,504 per calendar year) if an annual physical is completed.

By participating in the wellness program, you and your spouse/registered domestic partner will benefit in the following ways:

- **Reduction in Sundt Medical Plan premiums.** You will save money on the following year's medical premium by completing an annual physical during the previous year. You and your spouse/registered domestic partner can each earn \$146 per month in wellness credits to offset medical premiums, a savings of up to \$3,504 per year.
- **Better health.** When you schedule an annual physical and monitor your health, you will start feeling better and stay healthier.
- **Spend less on health care expenses.** By addressing issues before they become serious, you will save money on out-of-pocket health care expenses.



SUNDT STRONG & SHARECARE

Wellness Resources

Sundt Strong is our wellness program dedicated to supporting the overall health and well-being of every employee-owner, both at work and at home. Centered on four key pillars, physical, mental, financial, and social, Sundt Strong provides the tools and resources you need to build healthy habits, strengthen connections, and feel your best. We've also partnered with Sharecare to reward you for creating and maintaining those healthy habits.

FREE IN-NETWORK PREVENTIVE CARE

Sundt is committed to helping all employee-owners and their families be their healthiest and happiest. As part of this commitment, we encourage you to stay current with your recommended preventive care. Employees and spouses/registered domestic partners covered under Sundt's medical plan will receive a \$25 gift card for completing each of the recommended screenings listed below during FY 2026.

- Mammogram
- Cervical Cancer Screening
- Prostate Cancer Screening
- Colon Cancer
- Skin Cancer Screening
- Two Annual Dental Cleanings

Questions? Visit Sharecare to learn more about additional incentive opportunities. Have questions, reach out to wellness@sundt.com or **480.293.3139**. Virtual screenings can be done through Telehealth from AZ Blue. Log in to AZBlue.com/member click on Find Care, then select Telehealth.

SUNDT STRONG WELLNESS CHALLENGES

We want all Sundt employee-owners to be healthy and happy. Good health is key to enjoying a longer life with family and friends. Our wellness challenges are designed to encourage you to stay on track with your health and wellness goals, all while earning the opportunity to win valuable prizes through Sharecare.

To learn more about our challenges, visit the Sundt Strong page on the Total Rewards page.



WELL-BEING SEMINARS

Your well-being matters. That's why Sundt encourages all employee-owners to learn, grow, and invest in their health. Through well-being seminars focused on financial, mental, physical, and social health, you'll gain tools to thrive both personally and professionally. Sessions are offered year-round, online and in person. Check the Sundt Strong page to explore upcoming seminars and stay engaged in your well-being.

GET STARTED TODAY

- » Register at AZBlue.sharecare.com
- » Stay informed on challenges and incentives

DENTAL PLANS

Administered by Delta Dental of Arizona

You and your eligible dependents have the opportunity to enroll in one of the PPO Premier Dental Plans offered by Delta Dental. We encourage you to review the coverage details and select the option that best suits your needs.

USING THE PLAN

The Delta Dental PPO Premier plans are designed to give you the freedom to receive dental care from any licensed dentist of your choice. Keep in mind, you'll receive the highest savings and simplified claims processing if you select an in-network PPO dentist. Premier dentists also provide savings, but the discount is not as steep. Out-of-network dentists will have the highest out-of-pocket costs. Preventive services do not go towards your Calendar Year Maximum on either plan.

PLAN HIGHLIGHTS	DENTAL PPO PLAN	DENTAL PPO PLUS PLAN
	The costs below are for PPO Dentist, Premier Dentist, and Out-of-Network Dentist	
Calendar Year Deductible (Waived for preventive services)	\$50 per person	\$50 per person
Calendar Year Maximum	\$1,000 per person	\$2,000 per person
Diagnostic & Preventive Services (e.g., x-rays, cleanings, exams)	100% covered & does not go towards calendar year maximum	100% covered & does not go towards calendar year maximum
Basic & Restorative Services (e.g., fillings, extraction, root canals)	20% after deductible	20% after deductible
Major Services (e.g., dentures, crowns, implants)	50% after deductible	50% after deductible
Orthodontia Services (adult & child)	n/a	50%
Orthodontia Lifetime Maximum	n/a	\$2,000

To view a complete plan summary, please see [SundtWeb > Total Rewards > 2026 Dental Benefits](#).

When visiting an out-of-network provider, you are responsible for charges above usual, customary, and reasonable (UCR) limits.

VISION PLAN

Administered by VSP Vision Care

You have the option to elect vision benefits through VSP. You'll save money by visiting an in-network VSP or VSP Premier Edge provider. For a routine eye exam, glasses, or contacts to be covered in-network, you must search for vision professionals using the VSP member portal. Find a provider online at [VSP.com](https://www.vsp.com), enter your zip code, and select Find a Doctor and then select Schedule an Eye Exam Online. Simply inform your vision provider that you have VSP vision coverage and they can easily locate your account using your name or social security number.

PLAN HIGHLIGHTS

VISION PPO PLAN

	In-Network (VSP Choice) Plan Pays:	Out-of-Network Plan Reimburses You:
Exam – Every calendar year	covered in full	up to \$45
Lenses – Every calendar year		
Single	covered in full	up to \$30
Bifocal		up to \$50
Trifocal		up to \$65
Lenticular		up to \$100
Standard Progressive	covered in full	up to \$50
Premium Progressive	\$95-\$105 copay	up to \$50
Custom Progressive	\$150-\$175 copay	up to \$50
Frames – Every calendar year	\$175 allowance \$195 featured frame allowance	up to \$70
Contacts – Every calendar year, instead of glasses		
Contacts (Elective)	\$175 allowance	up to \$105
Contacts (Medically Necessary*)	covered in full	up to \$210
LightCare	\$175 allowance for ready made non-prescription sunglasses or ready made non-prescription blue light filtering glasses instead of prescription glasses or contacts at a VSP choice network doctor's office or retail store.	
Prescription Safety Glasses**	Your ProTec Safety frame is covered when you select a frame from the ProTec Eyewear Collection or you have a \$145 allowance for any other safety frame. Plus you get 20% off any amount over your allowance.	

The above information is a summary only. Refer to your Summary of Benefits for complete details of plan benefits, limitations and exclusions.

*When specific benefit criteria is determined by provider.

**To take advantage of the ProTec Safety Plan, simply visit an in-network VSP doctor or retail location, such as Visionworks, and provide your member information.



YOUR COST FOR HEALTH CARE COVERAGE

Your monthly cost for medical, dental and vision premiums are shown in the table below. To know what you'll pay per paycheck, divide these monthly costs by four.

BENEFIT PLAN	EMPLOYEE ONLY	EMPLOYEE + SPOUSE	EMPLOYEE + CHILDREN	FAMILY
MEDICAL WELLNESS / NON-WELLNESS PREMIUMS				
HDHP with HSA Plan	No charge / \$146.00	\$30.11 / \$322.11	\$30.25 / \$176.25	\$60.50 / \$352.50
Base Plan	No charge / \$146.00	\$30.11 / \$322.11	\$30.25 / \$176.25	\$60.50 / \$352.50
Plus Plan	\$126.67 / \$272.67	\$247.49 / \$539.49	\$185.46 / \$331.46	\$325.82 / \$617.82

The bolded rates shown are for employee-owners who have completed their wellness incentives.

BENEFIT PLAN	EMPLOYEE ONLY	EMPLOYEE + SPOUSE	EMPLOYEE + CHILDREN	FAMILY
DENTAL PREMIUMS				
Dental PPO Plan	\$6.00	\$14.00	\$17.00	\$32.00
Dental PPO Plus Plan	\$8.00	\$20.00	\$24.00	\$46.00

The medical and dental costs shown reflect your share after Sundt's contribution.

BENEFIT PLAN	EMPLOYEE ONLY	EMPLOYEE + SPOUSE	EMPLOYEE + CHILDREN	FAMILY
VISION PREMIUMS				
Vision Plan	\$8.47	\$16.94	\$18.13	\$28.97

A close-up, low-angle shot of a construction worker. The worker is wearing a yellow hard hat and a high-visibility yellow safety vest. They are looking down at a clipboard or a set of plans they are holding. The background is dark and out of focus, showing some blurred lights and the silhouettes of other workers. The overall mood is professional and focused.

SUNDT STRONG

Physical • Mental • Financial • Social

LYRA HEALTH (EAP)

Lyra Health, your mental health benefit, provides care for your overall well-being—how, when, and where you need it—at no cost to you. Lyra offers something for everyone, no matter what you and your family are going through. With quality providers and professionals, research-backed treatment methods and digital resources, you and your dependents can tap into easy-to-use tools to support your wellness. To access care, go to sundt.lyrahealth.com or call **833.597.2304**.

SERVICES INCLUDE:

- 8 FREE sessions of mental health coaching or therapy.
- On-demand access to a self-care library for help with sleep, meditation, stress relief, and more.
- 24/7 confidential support for managers who have concerns about an employee's mental well-being.
- Comprehensive care for parents and children.
- Free and confidential counseling for a range of work-life needs, like legal services, identity theft support, pet, child, and elder care.

WHO IS ELIGIBLE?

All employees and their dependents. Learn more by watching this quick video: bit.ly/LyraHealthSundt

WHAT CAN LYRA HELP ME WITH?

No matter what you're going through, Lyra's expert providers can help with:

- Job concerns and work productivity
- Support with legal matters
- Managing anxiety or depression
- Interpersonal and work relationships
- Conflict resolution
- Family or parenting issues
- Navigating grief
- Coping with stress
- Substance use
- Family or couples therapy



VIRTUAL, PHONE, IN-PERSON, LIVE MESSAGE

How do I activate my account?



*Visit sundt.lyrahealth.com to create your account. Call Lyra's Care Navigator Team at **833.597.2304** or email care@lyrahealth.com for assistance.*



Take an assessment to get matched to the right expert to meet your needs.



Set up your first consult and get support right away.



UNDER THE HELMET

Mental Health Program and Toolkit

Mental health challenges can take many different forms, and there are just as many ways to address them. Whether you are looking to manage stress, need someone to talk to, or are finding it difficult to cope with life's obstacles, Sundt provides a wide range of tools and services to support all employee-owners, as well as their spouses, registered domestic partners, and children. We are committed to ensuring you get the help you need, whenever and wherever you need it.

The Mental Health Toolkit contains all the mental health resources available to employee-owners and their families. These include:

- Lyra Health (EAP)
- Virtual Behavioral Health Providers
- Mental Health First Aid and Suicide Prevention Trainings
- National Resources

To request a physical copy of the Mental Health Toolkit email wellness@sundt.com.

If you're in crisis, use one of the numbers below.

988 Suicide & Crisis Lifeline:

- **988** (Call or Text from a mobile device)
- **800.273.TALK (8255)** (From a land line)
- 988lifeline.org/chat (Chat)



To access the Under the Helmet page, visit the [SundtWeb > Employee Resources > Mental Wellness Resources](#).

NOTE:

Lyra Health: access multiple care options such as guided self-care, coaching, therapy, meditation and more.

Comprehensive care for parents and children
Virtual | Phone | In-person | Live Message

Visit sundt.lyrahealth.com to create your account or call 833.597.2304.

FLEXIBLE SPENDING ACCOUNTS

Choose FSAs to Save Money, Administered by NueSynergy

Sundt provides you with access to three types of Flexible Spending Accounts. These accounts let you set aside money from your paycheck — before you pay taxes on it — then use that money when you have eligible health care and/or dependent day care expenses.

HEALTH CARE FSA IRS MAXIMUM \$3,300/YEAR

Your Health Care FSA will reimburse you for eligible health care expenses that you, your spouse/registered domestic partner, and your dependents incur during the calendar year. The entire annual amount you elect can be used at any time during the year. To view a full list of all Qualified Medical Expenses, visit irs.gov/publications.

Note: You are not eligible to participate in the Health Care FSA when enrolled in the HDHP with HSA.

LIMITED PURPOSE HEALTH CARE FSA IRS MAXIMUM \$3,300/YEAR

HDHP with HSA participants are eligible to participate in the Limited Purpose Health Care FSA to set aside pre-tax dollars for eligible dental and vision expenses.

- The HSA with a Limited Purpose Health Care FSA work together to help you save and pay for eligible dental and vision care expenses.

At the time of publication, IRS limits for 2026 had not yet been released. The Flexible Spending Account (FSA) contribution limits are determined by Sundt.



NOTE:

The IRS has a strict “Use-It or Lose-It” rule for FSAs. At the end of the calendar year, you can roll over up to \$660 of unused Health Care or Limited Purpose Health FSA funds. Any remaining balance above this amount will be forfeited.

DEPENDENT CARE FSA IRS MAXIMUM \$7,500/YEAR

Reimburses you for childcare expenses up to age 13 and/or care for a disabled family member in the household, who is unable to care for themselves.

- You may only be reimbursed up to the amount available in your account.
- Maximum contribution amount is \$7,500 for individuals or married filing jointly. May be lower depending upon your tax filing status (married filing separately, etc.).
- The care must be necessary for you and your spouse/registered domestic partner to remain employed.
- Care must be provided through live-in care, babysitter, and licensed daycare centers.

HOW DO I USE IT?

You must re-enroll in the FSA program each year. At this time, you must establish an annual contribution amount within the maximum limit. Once enrolled, you will have online access to view your FSA balance, check on reimbursement status, submit claims, and more at nuesynergy.com/your-solutions/fsa/.

For more details about using an FSA, contact NueSynergy Benefits at **855.890.7239** or [SundtWeb > Support Centers > Total Rewards > NueSynergy Login](#) under Quick Links



LIFE INSURANCE

Prepare for the Unexpected, Administered by Sun Life

Sun Life is the plan administrator for life insurance and accidental death & dismemberment (AD&D) benefits. Life benefits can provide your family with financial protection in the event you or a covered dependent experiences death.

BASIC LIFE AND ACCIDENTAL DEATH & DISMEMBERMENT

Sundt believes it is important to prepare financially in the event of an accident or accidental death. Eligible employees are provided with Basic Life and AD&D insurance at no cost. In the event of your passing, life and AD&D insurance will provide your designated beneficiaries with financial protection and security.

The following benefits are provided by Sundt:

- Administrative employees are eligible for coverage equal to their base salary, up to a maximum of \$500,000, with a minimum benefit of \$50,000.
- Craft Employees are eligible for \$50,000.

VOLUNTARY LIFE

You may buy Voluntary Life insurance at a group rate for your dependents when you elect coverage for yourself. Dependents will be subject to a dependent verification with our third party vendor iVerifyPro. The chart below describes the amounts of coverage you can buy for yourself, your spouse/registered domestic partner, and your child(ren).

FEATURES	VOLUNTARY LIFE INSURANCE OPTIONS		
	Employee-Owner	Spouse/Registered Domestic Partner	Dependent Child(ren)
Coverage Options	\$10,000 increments	\$10,000 increments	\$10,000
Maximum	\$750,000	\$250,000	
Guaranteed Issue Amount	\$200,000	\$50,000	
Guaranteed Issue Period	Within 30 days of hire date or a qualified life event.		

Evidence of Insurability (EOI) will be required outside the guaranteed issue period and/or when your election exceeds the guaranteed issue amount. Please expect communication from Sun Life to complete the application process. Spouse/registered domestic partner and child(ren) will be subject to a dependent audit through our third-party vendor. For any questions regarding the EOI process or status of the application you can contact **800.247.6875**.

If you or your dependents are in the hospital or have a terminal illness, certain restrictions may apply. Starting on the month you turn 70, benefits are reduced to 65%. After your 75th birthday, benefits are reduced to 50%.

VOLUNTARY BENEFITS

Administered by Sun Life

CRITICAL ILLNESS INSURANCE

Dealing with a critical illness can be challenging. This plan may help with some of your financial worries and help you stay focused on your health. Sun Life Critical Illness provides a lump sum cash benefit to help cover out-of-pocket expenses associated with a critical illness (i.e. cancer, heart attack, stroke, etc.).

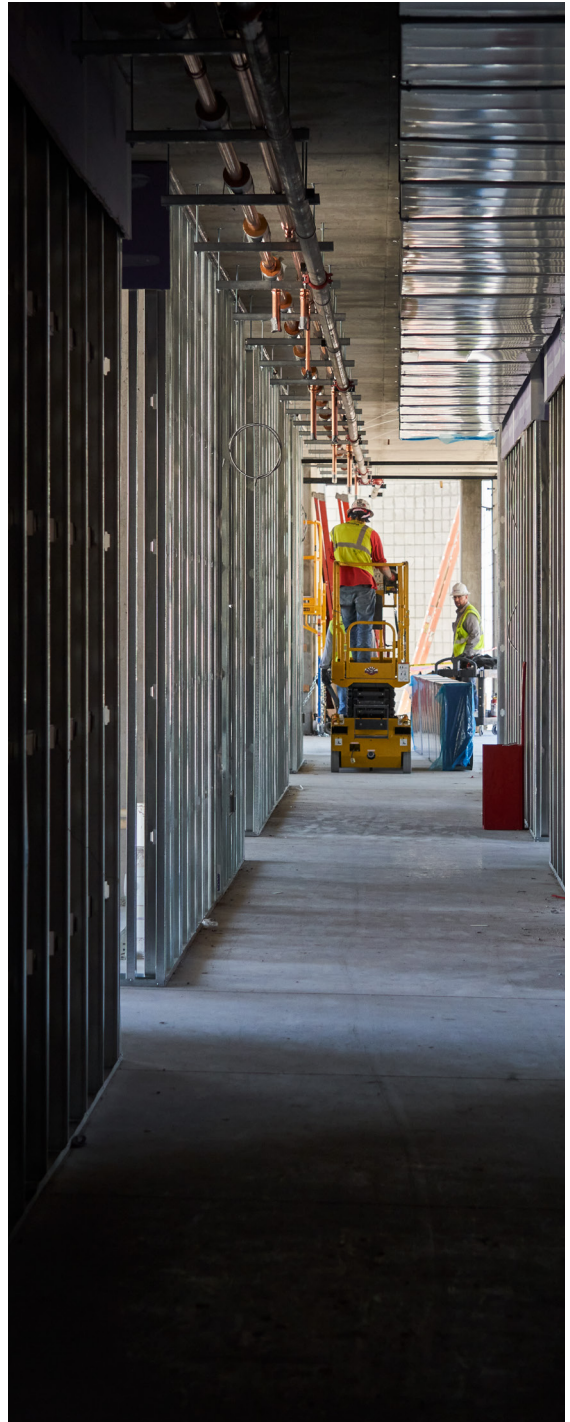
You may purchase up to \$40,000 of coverage in \$5,000 increments. Coverage is available for your spouse/registered domestic partner and children. Spouse coverage can not exceed 100% of the employee's elected amount. Child coverage can not exceed 50% of the employee's elected amount.

ACCIDENTAL INJURY INSURANCE

Accidents may affect your health and can happen at any time. Sun Life Accidental Injury Insurance provides fixed payments for the treatment and associated expenses of covered accidental injuries (i.e. fractures, dislocations, burns, lacerations, concussions, etc.). The payments you receive for covered accidents can be used any way you wish and are not limited to direct medical costs.

WANT TO LEARN MORE?

If you are considering these types of coverage, you must enroll when you first become eligible or during the annual open enrollment period. To learn more or to obtain a full schedule of benefits and rates go to [SundtWeb > Support Centers > Total Rewards > Critical Illness and Accidental Injury under Other Benefits](#).



LEAVE AND DISABILITY BENEFITS

Administered by Sun Life

The loss of income due to illness or disability can create serious financial challenges for your family. An unexpected injury or illness could strike at any time, leaving you unable to work. To help safeguard your financial well-being during a short-term, non-work-related injury or illness, employee-owners receive Short-Term Disability (STD) coverage at no cost.

Long-Term Disability (LTD) coverage is important because anyone at any age may become injured or ill for an extended period of time. Employee-owners who have completed the eligibility waiting period are automatically covered under the LTD plan at no cost.

FEATURES	DISABILITY OPTIONS
<i>When Do I Report a Claim/Leave?</i>	- Your own serious illness - Disability (i.e, surgery, Maternity, & Mental Health) FMLA: Your family member's serious illness, military leave, or your own intermittent leave: You may report a leave when you will be out of work for more than 3 consecutive days or intermittently to care for an immediate family member suffering a serious illness or to care for a newborn, foster or adopted child.
<i>Short-Term Disability (STD)*</i> The STD plan offers income replacement if you are unable to perform your normal work duties for more than 7 days.	- Administrative employees are eligible after 90 days from their hire date. - Craft employees are eligible after 6 months of continuous employment. - Admin employees are eligible for up to 100% of their base pay. - Craft employees are eligible for up to 60% of their base pay. - Eligible employee's income replacement may start immediately if hospitalized. - Employee-owners are required to apply for benefits under any State Disability Insurance (SDI) plan when available. A copy of the approval or denial from the state program must be promptly provided to the Benefits Department at benefits@sundt.com.
<i>Long-Term Disability Coverage (LTD)</i> LTD coverage replaces 60% of your base earnings to a monthly maximum of \$11,000 if you are disabled for more than 90 days and are unable to work.	- Administrative employees are eligible after 90 days from their hire date. - Craft employees are eligible after 6 months of continuous employment. - Your benefits may continue to be paid until you reach Social Security normal retirement age, as long as you meet the definition of disability. LTD benefits may be reduced by other sources of income, such as Social Security.
<i>Parental Leave</i> (Non-Birthing Parents/Child Bonding Leave with a newborn, newly adopted, or fostered child.)	- Administrative employee-owners are eligible after 90 days of continuous employment. - Craft employee-owners are eligible after six months of continuous employment. This applies to full and part-time regular employees who work 20 or more hours a week. - Eligible Admin and Craft employees can receive up to two weeks of paid parental leave. - Admin and Craft employees are eligible for up to 100% of their base pay. - Reference full policy on the SundtWeb.
<i>Maternity Leave</i> (Medical Leave for Birthing Parents. Medically necessary for childbirth and recovery.)	- Administrative and Craft employees are eligible for up to 100% of their base salary. - Admin and Craft employees are eligible for four weeks of fully paid maternity leave, beyond any other paid leave approved through short-term disability. - Employee-owners are required to apply for benefits under any State Disability Insurance (SDI) plan (excluding Colorado) when available. - Reference full Maternity Leave on the SundtWeb.

As an employer-paid benefit, Long-Term Disability (LTD) coverage will be provided on a post-tax basis. This means that any LTD benefits you receive will not be subject to income taxes.

* Birthing parents should refer to the Maternity Leave Policy. Please note that employees may not take both Maternity Leave and Parental Leave for the same birth, adoption or foster event.



RETIREMENT OPTIONS

Save for Your Future with the Sundt Companies 401(k) Plan and the Employee Stock Ownership Plan (ESOP)

Sundt is committed to helping you build long-term financial security. We provide two retirement programs designed to support your future wealth accumulation: the Sundt Companies 401(k) Plan and the Employee Stock Ownership Plan (ESOP).

401(K) PLAN

*Sign-up is required! * Administered by Fidelity*

Sundt's 401(k) Plan is one of the most effective ways for employee-owners to save for retirement. Fidelity and Sundt will send you an email reminder approximately one month before you become eligible to the email address that is on file with Sundt.

To participate, you must elect to have a percentage of your paycheck withheld and invested in your 401(k) account. Contribution limits are set by the IRS; please refer to [IRS.gov](https://www.irs.gov) or consult your tax advisor for the most current information. Sundt offers two contribution options:

Pre-Tax 401(k): Contributions are deducted from your paycheck before taxes, reducing your current taxable income. Your savings grow tax-deferred until withdrawal.

ROTH 401(k): Contributions are made with after-tax dollars, allowing your savings to grow tax-free.

Fidelity also offers access to Certified Financial Planners who can help you explore your options at no cost to you.

If you contribute up to 5% of your annual base salary, Sundt provides matching contributions. These contributions are made directly into the ESOP. Your ESOP statement will reflect this company match on your annual statement.

ELIGIBILITY

Employee-owners, including interns, are eligible to participate after completing six months of service. Rehires who were previously eligible do not have a waiting period and can enroll upon rehire. Once enrolled, contributions begin the first of the month following your eligibility date. Please allow 1–2 payroll cycles for contributions to be reflected.

*Please make sure to designate a beneficiary for your 401(k) account with Fidelity.

GETTING STARTED

To set up contributions, log in to 401k.com or call Fidelity at **800.835.5097**. Please reference Sundt Plan #48551. For Spanish assistance please call **800.587.5282**

ROLLOVERS

You may roll over all or part of an eligible distribution from another retirement plan into your Sundt Companies 401(k) at any time. There is no eligibility waiting period. Certain plan limitations may apply. Refer to the Summary Plan Document or Fidelity for exact details on direct rollovers. To initiate a rollover:

- If your former workplace plan is with Fidelity you can do the entire rollover through 401k.com with no additional paperwork needed and the money can be directly transferred.
- If your former workplace plan is **NOT** with Fidelity, you must complete the approved rollover form available on [SundtWeb > Support Centers > Benefits-Total Rewards > Retirement > 401k > Fidelity Rollover Form](#)

Additional resources, how-to guides, and Summary Plan Documents (SPDs) are available on [SundtWeb > Support Centers > Benefits-Total Rewards > Retirement > 401k](#).

THINKING ABOUT RETIRING SOON?

Review the Sundt Retirement Guide for valuable tools, resources, and next steps. [SundtWeb > Support Centers > Benefits-Total Rewards > Retirement > Links > Retirement Guide](#)

EMPLOYEE STOCK OWNERSHIP PLAN (ESOP)

No enrollment required, you're automatically included!

Sundt established its Employee Stock Ownership Plan (ESOP) in 1972 as part of our commitment to sharing the company's success with our employees. ESOP is a retirement benefit that provides you with beneficial ownership in Sundt at no cost to you, making you a shareholder in the company.

The ESOP is a long-term retirement plan funded entirely by Sundt. Similar to a 401(k), it is a qualified retirement plan, but with key differences: instead of being invested in a variety of market options, the ESOP is invested in Sundt stock. This means your efforts directly contribute to building company value, and you share in the rewards of the success we achieve together.

ELIGIBILITY

You become eligible to participate after completing **six months of service and must complete 1,000 hours during the plan year (October 1 to September 30) to receive an allocation.** Each year thereafter, every active Sundt employee must complete at least 1,000 hours during the plan year to receive an allocation.

CONTRIBUTIONS

- Annual contributions are determined by company performance, your base wages, and whether you are participating in the 401(k).
- Once eligible, Sundt contributes up to 16% of your base salary each year, provided you contribute at least 5% of your annualized base salary to your 401(k) during the Plan Year. The plan year starts 10/1 and ends 9/30 every year.
- In addition, Sundt shares a portion of its annual net income with ESOP participants through stock dividends.

STATEMENTS & DIVERSIFICATION

- Annual ESOP statements are mailed to your home at the end of each January.
- Diversification elections take place once per year in February, with distributions occurring in March.

VESTING SCHEDULE

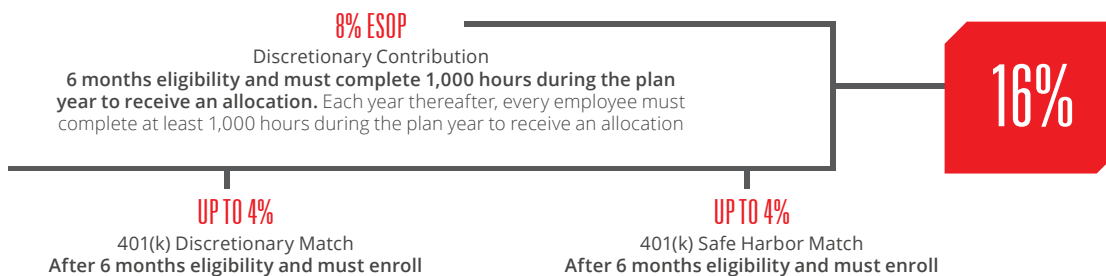
Your ownership in the ESOP grows over time through vesting. Sundt has adopted a flat vesting schedule, meaning that after three years of service you become 100% vested and gain full ownership of all contributions made on your behalf.

YEARS OF SERVICE	ESOP VESTING AMOUNT
1	33%
2	66%
3	100%

401(k) matches to the ESOP are always 100% vested. This will show up on your annual ESOP statement.

The ESOP is a powerful tool designed to help you build long-term financial security and create wealth for your future, setting Sundt apart from many of our competitors. To learn more about Sundt's ESOP, please visit [SundtWeb > Support > Benefits-Total Rewards > Retirement > ESOP](#)

*You will be automatically 100% vested if, while employed age 59 ½ is reached, you become totally and permanently disabled or upon death.



A construction worker wearing a high-visibility yellow and black jacket, blue jeans, black safety boots, and a white hard hat with a clear face shield is using a jackhammer on a grid of rebar. The worker is positioned on the left side of the frame, leaning forward. The jackhammer is a large, grey, gas-powered tool. The rebar grid is made of steel bars laid out in a rectangular pattern on a concrete surface. The background is a blurred construction site with a yellow structure visible in the distance.

ADDITIONAL BENEFITS

EMPLOYEE-OWNER PERKS

WORK BOOT DISCOUNT

Boot Barn Discount: Save 15% on the purchase of work boots from Boot Barn.

To download discount voucher visit [SundtWeb > Employee Resources > Employee Perks](#). For the nearest location, call **888.BOOT.BARN (888.266.8227)** or visit [bootbarn.com](#).

Women's Work Boot Discount: Juno Jones and Xena offer discounts on women's work boots. Click the hyperlinks to get to the websites. For Xena, use **XENAPARTNER1031** to activate the 20% partner discount! For Juno Jones enter promo code **Sundt** to get a 15% discount.

PRESCRIPTION SAFETY GLASSES REIMBURSEMENT

Receive an allowance for VSP Vision Care ProTec prescription safety glasses, up to \$145 each calendar year and 20% off the remaining balance, if you participate in Sundt's vision plan with VSP.

GYM DISCOUNT

Whether you're just starting your fitness journey or looking to expand your routine, Blue365 makes it easier and more affordable for BCBSAZ members to stay active and healthy.

Three Program Options:

- Fitness Your Way: Visit as many gyms as you want starting at just \$19 per month.
- Aaptiv: Access 20,000+ gyms and studios once you pick the membership tier that best fits your needs.
- Active & Fit: Find your perfect gym.

Visit [blue365deals.com](#) to learn more about your options and costs.



TIP:

For more employee-owner perks scan this QR code



WORKING ADVANTAGE

Exclusive discounts offered: movie tickets, rental cars, theme parks and attractions, identity theft protection, etc.

Phone: **800.566.3712**

Online: [workingadvantage.com](#)

Sundt Code: **435000963**

For more information or questions contact Total Rewards at **480.293.3139** or [benefits@sundt.com](#).

TUITION REIMBURSEMENT

Sundt encourages all employees (Salaried, Administrative and Craft) to pursue formal secondary education. Sundt's Tuition Reimbursement Program provides financial support to employee-owners whose secondary education is beneficial to both the employee and Sundt's mission to be the most skilled builder in America. To learn more, contact the Talent Development Team at [talentdevelopment@sundt.com](#).

AWARDCO

Sundt rewards employee-owners through the Awardco platform. With Awardco employee-owners can choose from hundreds of prizes through Amazon Business—that's right, anything they want from Amazon! They can also use Awardco points for hotels, tickets, the company swag store, and gift cards. Each reward will have a point value, and each point is worth \$1. Points do not expire until you leave Sundt. Visit [sundt.awardco.com](#) to log in.

DISCOUNT TIRE

Sundt employee-owners are eligible for a discount off the cost of tires, and a significant mount and balance discount on new tire purchases. To receive this discount, please call Fleet Services at **866.895.8032** in advance to your tire purchase and note discount code **CASH**. They will arrange your discount at a location near you.

PAID TIME OFF FOR REST & PLAY

Everyone needs time away from their jobs to recharge or attend to other issues (i.e. illness, personal events, etc.).

Administrative Employee-Owners

Sundt offers Flexible Time Off (FTO) to all administrative employee-owners. You are encouraged to take a reasonable amount of time off from work. All full-time administrative employee-owners will be encouraged to take at least 12 days off each year or the equivalent of 1 day per month.

Craft Employee-Owners

Craft employees accrue Paid Time Off (PTO) on a weekly basis according to their classification and service years. Previously eligible Craft rehires returning within one year of separation will be eligible to accrue PTO without a waiting period.

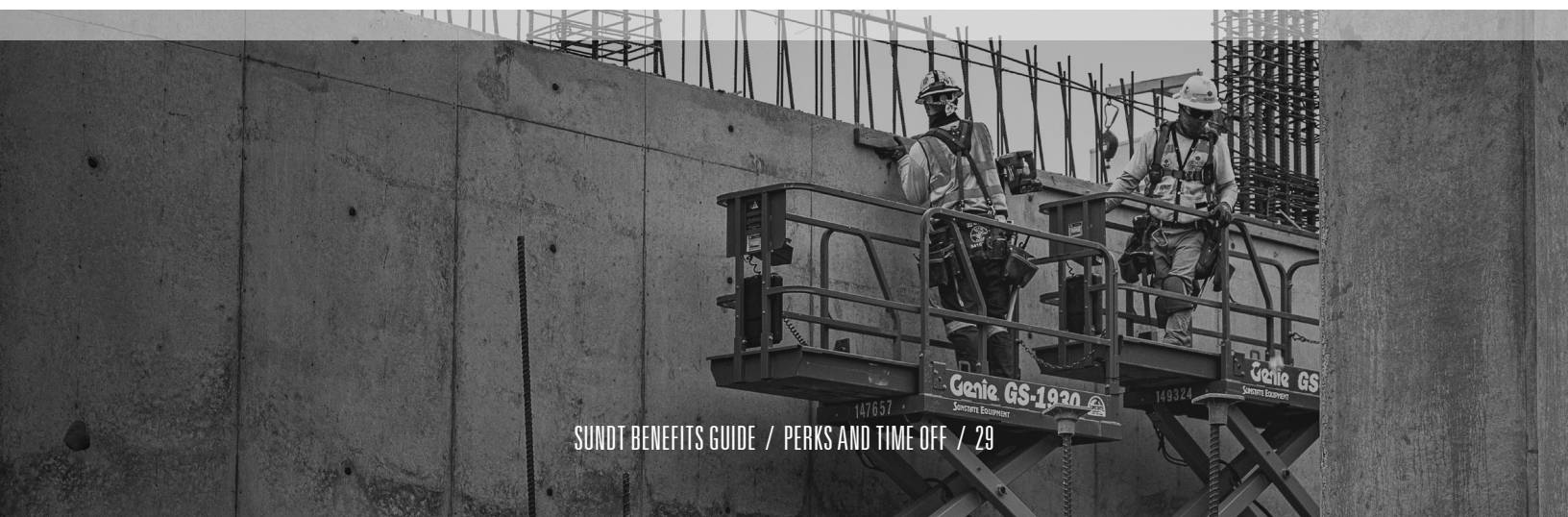
Craft employees with less than one year of continuous employment will be eligible for 64 hours of sick pay. More information available at [SundtWeb > Support Centers > Human Resources > PTO \(Craft\) under Policies](#).

EMPLOYEE TYPE	WEEKLY PTO ACCRUAL	ANNUAL PTO ACCRUAL
All Craft Employees with 1+ year of service	1.92 hours	100 hours
Forepersons with 3–15 years of service	2.69 hours	140 hours
Forepersons with 16+ years of service	3.46 hours	180 hours

HOLIDAYS

The company observes the following holidays each year. Administrative employees receive holiday pay. Craft Employees are eligible for Holiday Pay after (1) one year of continuous service. Craft Rehires who have already completed one year of service prior to termination are eligible for Holiday Pay if they return within (1) one year of separation. For more information contact Total Rewards.

- New Year's Day
- Martin Luther King Jr. Day
- Memorial Day
- Independence Day
- Labor Day
- Thanksgiving Day
- Day after Thanksgiving
- Christmas Eve Day
- Christmas Day



FREQUENTLY ASKED QUESTIONS

BENEFITS FAQ

Q: During Open Enrollment, what happens if I do not login to elect or waive benefits within the open enrollment period?

A: You will be default enrolled in the current Medical and Dental Plan that you are enrolled in. All other coverage will be waived. You will not have the opportunity to enroll dependents or change plan elections until the next annual enrollment period unless you have a qualifying event.

Q: As a new or rehired employee, what happens if I do not login to elect or waive benefits within 30 days of my hire date?

A: You will be default enrolled in the Medical Base Plan and all other coverage will be waived. You will not have the opportunity to enroll dependents or change plan elections until the next annual enrollment period unless you have a qualifying event.

Q: Do I have to make new benefit elections if I am a re-hire?

A: Yes, your previous elections are not saved. You must make new elections within 30 days of re-hire date.

Q: Do I have to do anything if I want to waive benefits?

A: Yes, you will need to sign in to hcm.sundt.com and select the waive option by following the steps on page 4 of the Benefits Guide.

Q: How do I find help to understand the plans and know which plan to choose?

A: Blue Cross Blue Shield of Arizona has a pre-enrollment line that can help you select the best plan based on you and your family's needs. The pre-enrollment line number is **844.817.4117** 6 am - 6 pm MST.

Q: How do I enroll in my benefits?

A: To enroll in benefits, please see the Enrolling In or Making Changes to my Benefits section on page 4 of the Benefits Guide.

Q: I do not have my username and password to log on to the Employee Portal.

A: See page 4 of the Benefits Guide for login credentials. If you are experiencing any issues with logging in, please contact IT at **520.750.4799**.

Q: I received an error message while enrolling. Who do I contact?

A: Contact the benefits team at benefits@sundt.com or **480.293.3139**.

Q: What is a Qualified Life Event?

A: A qualified life event or change in family status includes, but is not limited to, marriage, birth, or adoption of a child, loss or gain of health coverage. See page 3 of your Benefits Guide for more information.

Q: How do I report a Qualified Life Event?

A: You can report a qualified life event via the Employee Portal by following the steps below.

- Log in to the Employee Portal via the Sundt Web homepage link or at hcm.sundt.com
- See page 4 of the Benefits Guide for login credentials
- Click on the Benefits Tile
- Click on the Report a Life Event
- Select your life event and enter the effective date **(date the life event occurred)**
- Click Continue
- Click Make Changes and follow the prompts to make your election changes and designate your dependent(s) to your plan
- Submit changes and print/save a copy for your records

Q: What is a Beneficiary?

A : A beneficiary is a person you choose to receive your life insurance and retirement funds in the event of your death.

Q: How do I update my beneficiaries for Basic Life Insurance, Health Savings Account (HSA), 401(k) and/or ESOP?

A: Designation of beneficiaries for Basic Life insurance can be done through the Employee Portal. You will need to contact HealthEquity, Fidelity, and Principal directly to update beneficiaries for HSA, 401(k) and ESOP.

Q: I have not received my insurance cards. How can I access my cards?

A: You can access your digital cards through [AZBlue.com](https://www.AZBlue.com). You must register first to create an account. Please allow 5 to 7 business days for the cards to generate. To request an insurance card to be mailed to you, call Blue Cross Blue Shield of Arizona at **602.864.4861**.

Q: What are pending action items?

A: Pending action items indicate missing information from the Employee Portal that is needed to complete the enrollment process. Contact benefits@sundt.com if you need clarification.

Q: How do I update my new address?

A: You can update your address in the Employee Portal via the Sundt Web homepage link or at hcm.sundt.com. Once you are logged in, go to [Personal Information > Contact Info > Edit and/or Add Home/Mailing Address > Submit](#).

Q: Does Sundt offer a reimbursement for safety glasses?

A : Yes, the prescription safety glasses program offers an allowance of up to \$145 for qualified prescription safety glasses. You must have active Vision coverage through VSP to be eligible.

Q: How do I submit a claim for reimbursement on safety glasses?

A: No claim form is necessary for reimbursement. You are responsible for any amount over the \$145 allowance.

Q: I have questions about my HSA account, who do I contact?

A: You may contact HealthEquity at **866.346.5800** or [HealthEquity.com](https://www.HealthEquity.com).

Q: Who do I contact if I have questions on my FSA or Dependent Care accounts?

A: You can call Nuesynergy direct at **855.890.7239** there are also resources available online at nuesynergy.com/resources/for-participants.

WELLNESS FAQ

Q: How do I earn my wellness credit?

A: Complete an annual physical anytime between **October 1, 2025 – August 31, 2026**. Employees and their spouses or registered domestic partners can self-attest through BCBSAZ Sharecare once they have completed their annual physical. Please note that the wellness credit will not be applied until Sundt receives confirmation of appointment attendance directly from Sharecare.

Q: Can I complete a virtual wellness visit with Telehealth from AZ Blue to earn my wellness credit?

A: Yes, Telehealth from AZ Blue visits will be verified after you self-attest through BCBSAZ Sharecare.

FREQUENTLY ASKED QUESTIONS

Q: Why should I participate in the wellness credit program?

A : You will learn your individual health metrics. Not only that, but your doctor can explain what those numbers mean and how they can affect your overall health. Besides maintaining and monitoring your health, you can save money on your insurance premiums, as much as \$1,752-\$3,504 per year!

Q: I don't have a Primary Care Provider (PCP). How do I find one?

A : To find a PCP near you, go to [AZBlue.com](https://www.AZBlue.com), click "Find Care", then select "Find a Doctor, Provider, or Facility". If you continue as a guest, select "Employer Provided" from the type of coverage drop down. Choose "Statewide/National PPO" as the network and enter your location. Click "Primary Care Physician" to browse the list.

Q: Will Sundt receive my personal health information from my annual physical?

A: No, Your health information is completely confidential. Sundt will not receive any individual results or values. We only receive aggregate data that helps us plan wellness initiatives for employee-owners.

Q: I recently had blood work done; can that count as my annual physical?

A: No. To receive the wellness credit, you must complete an annual physical with a PCP and self-attest through BCBSAZ Sharecare.

Q: What does it mean to self-attest?

A: We require employee-owners and spouses participating in the Wellness Credit Program to formally confirm (self-attest) the completion of their appointment, as well as the date and name of the provider. Both the employee-owner and the spouse must complete their own annual wellness exam and create their own Sharecare account to self-attest.

Important: We are no longer utilizing the annual physical affidavit form and instead are requiring all participants to self-attest online through Sharecare.

Q: Does Sundt offer a reimbursement for gym memberships?

A: Employees enrolled in a Sundt medical plan are eligible to receive a discount. Go to [blue365deals.com](https://www.blue365deals.com) and navigate to Fitness. From there you can select the fitness discounts you would like to sign up for.

RETIREMENT FAQ

Q: I have been with Sundt for 6 months. How do I set up my 401(k) contributions?

A: Set up your contributions by registering with Fidelity online at [401k.com](https://www.401k.com) or by phone at **800.835.5097** or **800.547.7754** for Spanish (Reference Plan #48551).

Q: Are Interns and craft eligible to participate in the Sundt 401(k) and ESOP Plan?

A: Yes, once the eligibility requirements are met.

Q: How much should I contribute?

A : Fidelity Investments offers Certified Financial Planners, at no additional cost to you, that you may request to speak with. Fidelity is there to support you in making confident decisions to help reach your financial goals.

Q: I am a rehire, do my 401(k) contributions start automatically?

A : If you were eligible with your prior hire, you are eligible upon rehire. You must go back to 401k.com to re-elect your contributions. Please note that it could take a week or two for your information to transfer over to Fidelity from Sundt.

Q: I would like to take a loan out of my 401(k), how do I do that?

A: You may either log on to your account at 401k.com and follow the steps in the Quick Links tab or you can call Fidelity directly at **800.835.5097** to request a loan.

Q: Can I take a loan or advance out of my ESOP?

A: You cannot take a loan or an advance out of the ESOP.

Q: Will I still get the same amount matching if I choose to contribute to the ROTH verses the Pretax 401(k)?

A: Yes, both have the same matching contributions toward the ESOP.

Q: Where do the 401(k) matches show up, I do not see them in my Fidelity account?

A : The 401(k) company match can be seen on your Principal ESOP statement which is issued in January of each year.

Q: What is the ESOP Plan year?

A: The ESOP plan year starts October 1st and ends September 30th, every year.

Q: I have been with Sundt for 6 months, how do I see my statement & ESOP contributions?

A: Statements are only updated once a year at the end of January. At that point, you will receive the statement in the mail and be able to access your statement at principal.com.

Q: How do I maximize my ESOP?

A: To maximize your ESOP, sign up immediately to start contributing to your 401(k) when eligible. Make sure that you are contributing 5% of your annual salary to your 401(k) account through Fidelity during the plan year.

Q: Once I leave Sundt how and when can I get my ESOP money?

A: If eligible and separated from Sundt prior to the end of the plan year, September 30, you will receive a packet for distribution at the end of January. This will arrive separately from your statement. If your distribution packet is returned in February, then the distribution will be processed at the end of March.

GENERAL NOTICES

WOMEN'S HEALTH AND CANCER RIGHTS ACT

If you have had or are going to have a mastectomy, you may be entitled to certain benefits under the Women's Health and Cancer Rights Act of 1998 (WHCRA). The Women's Health and Cancer Rights Act requires group health plans and their insurance companies and HMOs to provide certain benefits for mastectomy patients who elect breast reconstruction. For individuals receiving mastectomy-related benefits, coverage will be provided in a manner determined in consultation with the attending physician and the patient, for:

All stages of reconstruction of the breast on which the mastectomy was performed; Surgery and reconstruction of the other breast to produce a symmetrical appearance; Prostheses; and Treatment of physical complications of the mastectomy, including lymphedema.

Breast reconstruction benefits are subject to deductibles and coinsurance limitations that are consistent with those established for other benefits under the plan. If you would like more information on WHCRA benefits, contact your plan administrator at **480.293.3139**.

HIPAA: NOTICE OF PRIVACY PRACTICES

We are required by applicable federal and state law to maintain the privacy of your protected health information. We are also required to notify you that we maintain a Notice of Privacy Practices describing our legal duties and your rights concerning your medical information. The Notice of Privacy Practices is available to you on the [SundtWeb > Support Centers > Total Rewards > General Notices](#).

PREMIUM ASSISTANCE UNDER MEDICAID AND THE CHILDREN'S HEALTH INSURANCE PROGRAM (CHIP)

If you or your children are eligible for Medicaid or CHIP and you're eligible for health coverage from your employer, your state may have a premium assistance program that can help pay for coverage, using funds from their Medicaid or CHIP programs. If you or your children aren't eligible for Medicaid or CHIP, you won't be eligible for these premium assistance

programs but you may be able to buy individual insurance coverage through the Health Insurance Marketplace. For more information, visit healthcare.gov.

If you or your dependents are already enrolled in Medicaid or CHIP and you live in a qualifying state, contact your state Medicaid or CHIP office to find out if premium assistance is available. A list of qualifying states can be found on the [SundtWeb > Support Centers > Total Rewards > General Notices](#)

If you or your dependents are NOT currently enrolled in Medicaid or CHIP, and you think you or any of your dependents might be eligible for either of these programs, contact your State Medicaid or CHIP office or dial **1-877-KIDS NOW** or insurekidsnow.gov to find out how to apply. If you qualify, ask your state if it has a program that might help you pay the premiums for an employer-sponsored plan.

If you or your dependents are eligible for premium assistance under Medicaid or CHIP, as well as eligible under your employer plan, your employer must allow you to enroll in your employer plan if you aren't already enrolled. This is called a "special enrollment" opportunity, and you must request coverage within 60 days of being determined eligible for premium assistance. If you have questions about enrolling in your employer plan, contact the Department of Labor at askebsa.dol.gov or call **866.444.EBSA (3272)**.

You may be eligible for assistance paying your employer health plan premiums. For a current list of eligible states and additional contact information visit the [SundtWeb > Support Centers > Total Rewards > General Notices](#). For more information on special enrollment rights, Contact either:

U.S. Department of Labor
Employee Benefits Security Administration
dol.gov/agencies/ebsa
866.444.EBSA (3272)

U.S. Department of Health and Human Services
Centers for Medicare and Medicaid Services
cms.hhs.gov
877.267.2323, Menu Option 4, Ext. 61565

PAPERWORK REDUCTION ACT STATEMENT

According to the Paperwork Reduction Act of 1995 (Pub. L. 104-13) (PRA), no persons are required to respond to a collection of information unless such collection displays a valid Office of Management and Budget (OMB) control number. The Department notes that a Federal agency cannot conduct or sponsor a collection of information unless it is approved by OMB under the PRA, and displays a currently valid OMB control number, and the public is not required to respond to a collection of information unless it displays a currently valid OMB control number. See 44 U.S.C. 3507. Also, notwithstanding any other provisions of law, no person shall be subject to penalty for failing to comply with a collection of information if the collection of information does not display a currently valid OMB control number. See 44 U.S.C. 3512.

The public reporting burden for this collection of information is estimated to average approximately seven minutes per respondent. Interested parties are encouraged to send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the U.S. Department of Labor, Employee Benefits Security Administration, Office of Policy and Research, Attention: PRA Clearance Officer, 200 Constitution Avenue, N.W., Room N-5718, Washington, DC 20210 or email ebbsa.opr@dol.gov.

HIPAA NOTICE OF SPECIAL ENROLLMENT RIGHTS

If you decline enrollment in your employer's health plan for you or your dependents (including your spouse) because of other health insurance or group health plan coverage, you or your dependents may be able to enroll in your employer's health plan without waiting for the next open enrollment period if you:

- Lose other health insurance or group health plan coverage. You must request enrollment within 30 days after the loss of other coverage.
- Gain a new dependent as a result of marriage, birth, adoption, or placement for adoption. You must request health plan enrollment within 30 days after the marriage, birth, adoption, or placement for adoption.
- Lose Medicaid or Children's Health Insurance Program (CHIP) coverage because you are no longer eligible. You must request medical plan enrollment within 60 days after the loss of such coverage.

If you request a change due to a special enrollment event within the 30-day timeframe, coverage will be effective the date of birth, adoption or placement for adoption. For all other events, coverage will be effective the first of the month following your request for enrollment. In addition, you may enroll in your employer's health plan if you become eligible for a state premium assistance program under Medicaid or CHIP. You must request enrollment within 60 days after you gain eligibility for medical plan coverage. If you request this change, coverage will be effective the first of the month following your request for enrollment. Specific restrictions may apply, depending on federal and state law.

Note: If your dependent becomes eligible for a special enrollment rights, you may add the dependent to your current coverage or change to another health plan.

WHAT YOU NEED TO KNOW ABOUT THE "NO SURPRISES" RULES

The **"No Surprises"** rules protect you from surprise medical bills in situations where you can't easily choose a provider who's in your health plan network. This is especially common in an emergency situation, when you may get care from out-of-network providers. Out-of-network providers or emergency facilities may ask you to sign a notice and consent form before providing certain services after you're no longer in need of emergency care. These are called "post-stabilization services." You shouldn't get this notice and consent form if you're getting emergency services other than poststabilization services. You may also be asked to sign a notice and consent form if you schedule certain non-emergency services with an out-of-network provider at an in-network hospital or ambulatory surgical center.

The notice and consent form informs you about your protections from unexpected medical bills, gives you the option to give up those protections and pay more for out-of-network care, and provides an estimate of what your out-of-network care might cost. You aren't required to sign the form and shouldn't sign the form if you didn't have a choice of health care provider or facility before scheduling care. If you don't sign, you may have to reschedule your care with a provider or facility in your health plan's network.

This applies to you if you're a participant, beneficiary, enrollee, or covered individual in a group health plan or group or individual health insurance coverage, including a Federal Employees Health Benefits (FEHB) plan.

GENERAL NOTICES

MARKETPLACE NOTICE

To assist you as you evaluate options for you and your family, this notice provides some basic information about the Health Insurance Marketplace and employment-based health coverage offered by your employer. This notice is available to you on the SundtWeb.

ADA WELLNESS NOTICE

The Sundt Companies wellness program is a voluntary wellness program available to all employees. The program is administered according to federal rules, including the Americans with Disabilities Act of 1990, the Genetic Information Nondiscrimination Act of 2008, and the Health Insurance Portability and Accountability Act, and others. If you choose to participate in the program, you will be asked to complete a voluntary annual physical with your primary care provider. You are not required to complete the annual physical. Only employees who do so will receive this incentive. We are required by law to maintain the privacy and security of your personally identifiable health information. Although the program may collect and use aggregate information, it will never disclose any of your personal information either publicly or to the employer, except as necessary to respond to a request from you for a reasonable accommodation needed to participate in the wellness program, or as expressly permitted by law. Your health information will not be provided to your supervisors or managers and may never be used to make decisions regarding your employment; your health information will not be sold, exchanged, transferred, or otherwise disclosed except to the extent permitted by law to carry out specific activities related to the program, and you will not be asked or required to waive the confidentiality of your health information as a condition of participating in the program or receiving an incentive.

Anyone who receives your information for purposes of providing you services as part of the program will abide by the same confidentiality requirements. In addition, all medical information obtained through the program will be maintained separate from your personnel records, information stored electronically will be encrypted, and no information you provide as part of the program will be used in making any employment

decision. You may not be discriminated against in employment because of the medical information you provide as part of participating in the program, nor may you be subjected to retaliation if you choose not to participate. The complete notice is available to you on the SundtWeb. If you have questions or concerns regarding this notice, or about protections against discrimination and retaliation, please contact Benefits at **480.293.3139** or benefits@sundt.com.

MEDICARE PART D NOTICE

If you or your dependents are eligible for Medicare Part D, it's important to know whether your prescription drug coverage through Sundt is creditable (equal to or better than Medicare's coverage).

For details on how this impacts you, please review the full Medicare Part D Notice available on SharePoint: [SundtWeb > Support Centers > Total Rewards > General Notices](#)

COBRA CONTINUATION COVERAGE

You and/or your dependents may have the right to continue coverage after you lose eligibility under the terms of our health plan. Upon enrollment, you and your dependents receive a COBRA Initial Notice that outlines the circumstances under which continued coverage is available and your obligations to notify the plan when you or your dependents experience a qualifying event. Please review this notice carefully to make sure you understand your rights and obligations.

STATEMENT OF MATERIAL MODIFICATIONS

The benefits outlined in this guide are only a summary and are not intended to be controlling. For a detailed description, contact Total Rewards for the complete contract.

QUESTIONS? YOUR BENEFITS CONTACTS

BENEFIT	CONTACT & PLAN NUMBER	TELEPHONE NUMBER	WEBSITE OR EMAIL
General Information	Pre-enrollment Line	844.817.4117	
	Total Rewards	480.293.3139 Text: 844.816.2132	benefits@sundt.com
Medical	Blue Cross Blue Shield of Arizona	602.864.4861 800.232.2345	AZBlue.com
Pharmacy	Optum Rx	866.325.1794	AZBlue.com
Telemedicine	Telehealth from AZ Blue	844.606.1612	AZBlue.com/member
Virtual Physical Therapy	Hinge Health	855.902.2777	hinge.health/sundt-join
Dental	Delta Dental	800.352.6132	deltadentalaz.com
Vision	VSP	800.877.7195	vsp.com
Wellness Credit Program	Total Rewards	480.293.3139	wellness@sundt.com
Life, AD&D and Disability	Sun Life	888.444.0239	sunlife.com
	EOI	800.247.6875	my.eoi@sunlife.com
Voluntary Critical Illness & Accident	Sun Life	888.444.0239	sunlife.com
Flexible Spending Accounts	NueSynergy	855.890.7239	nuesynergy.com/ resources/for-participants
Health Savings Account	HealthEquity	866.346.5800	AZBlue.com healthequity.com
401(k)	Fidelity Plan 48551	English: 800.835.5097 En español: 800.587.5282	401k.com
ESOP	Principal Plan 706880	800.547.7754	principal.com
Employee Assistance Plan (EAP)	Lyra Health	833.597.2304	lyrahealth.com

This Benefits Guide is designed to provide basic information regarding benefit plans and programs available to eligible employees of Sundt. This document merely summarizes the employee benefit plans and programs and does not detail all of the terms, conditions, restrictions, and exclusions contained in the plan documents, carrier contracts and/or Summary Plan Descriptions (SPD) (the “plan documentation”) for the various benefit plans and programs. Every reasonable effort has been made to ensure the accuracy of the information contained in this document; however, in the event of a discrepancy between the information in this document and the plan documentation, the provisions described in the plan documentation will govern. This document does not create any contractual rights for any current or former employee of Sundt, or for any other individual. The provisions of the applicable plan documentation will govern the determination of any individual's rights under any employee benefit plan or program. Sundt reserves the right to amend or terminate any of its employee benefit plans and programs at any time and without notice or cause.



SUNDT