A plan for today, a vision for tomorrow.
# Table of Contents

**UPDATE ON ENROLLMENT AND BENEFITS FOR 2014**
- page 2

**ELIGIBILITY**
- page 5

**STATUS CHANGES**
- page 6

## HEALTH BENEFITS
- Medical & related health programs
  - page 7
- Prescription drug coverage
  - page 11
- Dental
  - page 14
- Vision
  - page 16
- Work-life balance
  - page 17

## REIMBURSEMENT ACCOUNTS
- Health care | Dependent care
  - page 18
- Commuter account
  - page 20

## LIFE BENEFITS
- Life insurance
  - page 21
- AD&D coverage
  - page 22
- Business travel accident insurance (BTA)
  - page 24

## PER PAYCHECK COSTS
- page 25

## DISABILITY MANAGEMENT
- Return to work | Stay at work
  - page 26
- Short term disability
  - page 26
- Long term disability
  - page 27

## ADDITIONAL BENEFITS
- Tuition reimbursement
  - page 29
- Long term care
  - page 29
- Worldwide emergency assistance
  - page 30

## RETIREMENT
- Plans | Tools
  - page 31
- Defined contribution plan
  - page 32
- 401(k)
  - page 32
- Financial Engines®
  - page 34
- Workplace financial planning
  - page 35

## CONTACTS AND INFORMATION
- page 36

**GLOSSARY & CALENDAR**
- page 37

Unum reserves the right to change, modify or terminate any of its benefits plans, and its contributions to the plans, at any time.
The Company offers varying levels of subsidy toward the full cost of some benefits. The subsidy can range from zero to 100 percent. For example, Unum pays the entire cost of basic life, short term disability, basic long term disability, financial education, 401(k) online investment advice, and contributions to the defined contribution retirement plan. It offers a significant subsidy toward medical, prescription drug, and dental coverage, and provides a 401(k) match. With some plans, you are fully responsible for the cost, such as AD&D, vision, and long term care.

The Company’s intent is to lay a framework from which you can develop a suitable protection plan for you and your family. By contributing toward key benefits, the Company helps you get started in this process. The ultimate choice of whether and how to participate is up to you.

Choose what you need

Weigh the benefit choices before you carefully. To achieve balance between your coverage needs and what you actually choose for benefits, follow these three steps:

1. CHECK WHAT YOU HAVE FOR BENEFIT COVERAGE

Life and health: To see your current elections for group life and health benefits, log on to https://unumeebenefits.ehr.com. A summary of your elections will appear on the first screen. Review your benefits and any coverage you’ve selected for family members. You should factor in any supplemental products you may have purchased at work or home.

Retirement: Don’t forget to assess how you are saving for retirement—even if retirement is decades away. While this is the time for thinking about re-enrollment in life and health benefits, you should consider your retirement readiness in your annual benefit assessment.

- Defined contribution: The Company’s 4.5 percent contribution made each payday to your account adds up. The funds you are invested in and your balance can be seen alongside your 401(k) information at www.401k.com.

- 401(k): Review your account balance, deferral rate, the funds you are invested in, and beneficiary information at Fidelity’s website, www.401k.com.

- Frozen pension benefit: If you have a vested benefit in the frozen pension plan, at least once a year remind yourself of the estimated value of your benefit at retirement. Visit the Towers Watson website, https://unumeebenefits.ehr.com, to view your frozen benefit at age 65. On the site you can also model the impact of taking your pension earlier.

- Other: Look over your latest annual statement from Social Security to check your government-provided retirement benefits. You can find this same information at www.ssa.gov. If you have a written financial plan, review this too.
2. ASK YOURSELF WHAT YOU NEED FOR COVERAGE, AND IF CHANGES ARE IN ORDER

Life and health: After checking where you stand with current benefit coverage, decide if you’ve had any changes in your life that require a change in benefits. Perhaps you’ve married, had a baby, watched a child leave home, or celebrated your spouse’s retirement. Situations like these require some thought, and a decision about whether to add, drop, or change coverage. Make sure that you understand the eligibility rules for spouses, domestic partners, and children. (Refer to page 5.) See if you should take advantage of a Health Care or Dependent Care Reimbursement Account to pay for related expenses with pre-tax dollars.

Retirement: Scrutinize whether you are contributing at a challenging level to your 401(k) account, and if you are taking full advantage of the company’s match. For an objective second opinion on which mix of 401(k) / Defined Contribution investment options may be right for you, review your free, personalized investment advice from Financial Engines. (Log onto your 401(k) / DC account through www.401k.com and watch for the Financial Engines stoplight to come into view on the revolving display on the right-hand side of the screen.) Also, ask yourself whether you and your finances are at a stage where you need an overall financial plan to help with near-term financial needs and long-range retirement needs. If you live paycheck to paycheck, maybe a few budgeting tips and tools could help.

3. TAKE ACTION, IF NECESSARY

Life and health: If you’re at this step and don’t need to make changes to your life and health benefits, you don’t have to do anything to keep your same benefits and coverage levels for 2014. Your elections for 2013 will roll over into 2014 automatically, including your allocations to the Health Care and Dependent Care Reimbursement Accounts (HCRA and DCRA).

If you need to change your life and health coverage, or adjust coverage for dependents (for example, add or drop a family member from coverage), visit the Towers Watson enrollment site to perform your changes on line.

You will have to verify the eligibility of any new dependents. Remember to make your changes during the enrollment period.

Retirement: If you can increase your 401(k) contribution by one percent, do so. The maximum company match, for those employees who have been here at least a year, is 5% and applies to contributions of 5% or more. To increase your contribution amount, change funds, rebalance your account, or update your beneficiary information, log onto your 401(k) account at www.401k.com.

For help with developing a financial plan, set up an appointment with a reputable, licensed financial planner of your choice. As an interim step, you might consider calling the Ameriprise Financial Services Center hotline at 1-800-437-3500 to review your retirement goals. To better manage your money, call Ceridian at 1-800-854-1446 to request free copies of their booklets on personal budgeting.
What’s Changing for 2014

MEDICAL & RELATED HEALTH

The aim of Unum’s healthcare strategy is to enable and encourage you to maintain and improve your health. This leads to a healthier you, a more productive workforce, and better healthcare costs for both you and the company. Unum received a gold award in 2013 for Best Employers for Healthy Lifestyles from the National Business Group on Health.

In addition to offering traditional life, health, and disability plans, we support your efforts at maintaining – or improving – your health by also providing a Health Management Program that consists of tools and resources to help you stay healthy. Following is an overview of some of these resources, as well as changes for 2014:

**MEDICAL COPAYS COUNT TOWARD OUT-OF-POCKET MAXIMUM**

Starting in 2014, copays that you pay toward office visits ($15), specialist visits ($35), and urgent care or ER visits ($50 or $100, respectively) will count toward satisfying the annual out-of-pocket maximum in the medical plan.

**ADULT CHILDREN COVERED EVEN IF OTHER HEALTH COVERAGE AVAILABLE**

Beginning in 2014, your adult children, up to their 26th birthday, may be covered under the company’s medical plan even if they have access to medical insurance elsewhere.

**UPDATED HEALTH PLAN CHART**

The Summary of Benefits Coverage that outlines the company’s medical and prescription drug coverage has a slightly new look from last year. The chart provides details on the benefits and offers several coverage examples, which show how deductibles and coinsurance are applied when a claim is processed.

**VALUE OF HEALTHCARE BENEFITS ON W-2S**

Like last year, we will again be reporting the value of an individual’s group healthcare benefits to the IRS on employees’ W-2 forms. You will see an entry on your W-2 form that shows the amount you and Unum pay annually toward medical and prescription drug coverage.

**HEALTH ASSESSMENT**

Each year members of Unum’s medical plan are asked to complete an online health risk assessment by June 30. After finishing the health assessment (found online on the UnitedHealthcare site, www.myuhc.com), you will receive a personalized report that can alert you to possible or actual health risks, or suggest questions to ask your doctor. **If you complete the health assessment by June 30, 2014, you will receive the discounted medical rate (a $4.50 savings per payday) for the next 12 months.**

**HEALTH RESOURCE CENTER**

Unum partners with Take Care Health Systems to provide confidential Health Resource Centers (HRCs) onsite in Chattanooga, Columbia, Portland, and Worcester. Stop by the HRC to speak with a nurse, receive allergy shots, get weighed, or have your blood pressure and glucose levels checked. A complimentary screening at the HRC is a great way to gather your biometric numbers prior to completing the health assessment each year. A flu shot clinic is run annually.

**PRESCRIPTION DRUGS**

The drugs covered under CVS Caremark’s formulary can change periodically, so you should occasionally check the listing to see whether your prescribed drug has changed categories or possibly been scheduled to drop off the formulary. A current listing of Generic, Brand Name Preferred, and Brand Name Non-Preferred drugs, including any drugs that are being dropped from the formulary, is posted on Inside
Unum. For any drug being dropped, a corresponding list of alternative considerations is given.

As a reminder, generic oral medications for diabetes have no copay. Your cost for purchasing these drugs is $0.

SUPPLEMENTAL LTD

During this November’s annual enrollment for 2014 benefits, there will be a special enrollment for supplemental long term disability coverage. If you do not have coverage protecting your earnings over $50,000, consider enrolling during the annual enrollment window in order to receive coverage that is guaranteed and not subject to medical underwriting.

RETIREMENT PLANS

New Retirement Program: Starting on January 1, 2014, the Company will launch a new retirement program, designed to give employees more simplicity and control in managing their retirement savings:

• A Defined Contribution plan will be offered in which the company will contribute 4.5 percent of your earnings each payday.

• The Company match toward the 401(k) plan will increase to 5 percent, dollar for dollar, for the first 5 percent of an employee’s contributions. Employees that have worked at least 12 months and 1000 hours are eligible to receive the match.

• The definition of earnings in both the Defined Contribution and 401(k) plans will include salary plus performance-based incentives, such as PBI.

• The Pension plan is being closed on December 31, 2013, after which no further benefit accruals will occur in the plan. Employees with a vested pension benefit as of December 31 will receive their monthly pension when they retire.

401(k) annual contribution limits: The IRS retirement plan limits have not yet been updated for 2014. Currently, the limits are $17,500 for employee contributions, $5,500 for catch-up contributions, and $255,000 for annual compensation. Once the 2014 limits are announced, they will be posted on Inside Unum.

401(k) / Defined Contribution fund changes: Effective January 2, 2014, these fund changes will occur:

• Davis NY Venture Y Fund will be removed from the plan’s lineup. Balances in the fund that are not moved prior to the close date will be transferred to the Spartan 500 Index Fund.

• In addition to reinvestment of dividends, the Unum Group Unitized Stock Fund will allow participants the option of receiving dividends in cash.

Eligibility

You are eligible for benefits if you are a regular employee who works 20 or more hours per week. You may also elect medical, dental, vision, life and AD&D coverage for your family members, as follows:

Family members eligible for medical insurance:
• Your lawful spouse or domestic partner
• Your child up to age 26
• Your unmarried disabled child (whose disability started prior to age 25) who depends on you for support

Eligible children include your biological children, your legally adopted children, your stepchildren, your foster children, your domestic partner’s natural or adopted children, children whom you must cover under a qualified medical child support order (QMCSO), and children who live in a parent-child relationship with you.

Family members eligible for other group benefits (dental, vision, life and AD&D):
• Your lawful spouse or domestic partner
• Your unmarried children up to age 19 (up to age 25 if they are full-time students)
• Your unmarried disabled child (whose disability started prior to age 25) who depends on you for support

continued on next page
Eligibility

Eligible children include your biological children, your legally adopted children, your stepchildren, your foster children, your domestic partner’s natural or adopted children, children whom you must cover under a qualified medical child support order (QMCSO), and children who live in a parent-child relationship with you, depend upon you for financial support, and for whom you are legally responsible.

Eligible children must be financially dependent on you, meaning you provide more than 50 percent of the child’s support for the calendar year.

Verification of full-time student status is required annually and at the time of enrollment for dependents between the ages of 19 and 25. Verification of handicap status is required for dependents over the age of 19.

For new hires, benefits such as medical, dental, vision, life, AD&D and disability commence on the date of hire. New hires must enroll during their eligibility period or default to Company-paid LTD and life coverage. Other benefits, like tuition reimbursement and the company’s defined contribution plan, are available only after a required length of service.

Check the overview of each benefit in this brochure to make sure you are eligible.

You should also consult Inside Unum to read additional details on eligibility for your benefits. An SPD covering the benefits at Unum is available on the site. The SPD can be found under HR Info > Benefits > Plan Descriptions, Reports, SPD. It reviews eligibility for benefits offered at Unum, including eligibility definitions for dependents.

Part-time employee eligibility

Regular employees who work less than a standard 40-hour week, but at least 20 hours per week, are eligible for benefits but do not have the same level of subsidy for medical, dental and other benefits from the Company. If you are a part-time employee, check the overview of each benefit in this brochure to see if you qualify, the specific level of benefit you receive, and the share of cost you pay.

Status changes

The benefit choices you make at annual enrollment or as a new hire apply for the full year, unless you have a status change at some point during the year. The Internal Revenue Service defines the following as status changes that permit you to make changes in benefit enrollment choices:

- Marriage or divorce
- Birth, adoption or change in legal custody of a child
- Death of a spouse/domestic partner or a child
- Gain or loss of spouse’s/domestic partner’s employment
- Significant change in coverage or cost of spouse’s/domestic partner’s benefits
- Change in job status from full-time to part-time or from part-time to full-time by you or your spouse/domestic partner

You need to contact Towers Watson’s Benefit Service Center within 45 days of one of these status changes. If your change is due to marriage, divorce or birth/adoption of a child, log on to https://unumeebenefits.ehr.com. For other changes, please contact a Towers Watson benefit specialist at 800 678 2436.

When a status change occurs, you are allowed to:

- Add or delete dependents from coverage
- Start, stop or change your contributions to a reimbursement account
- Join a benefit plan you had previously chosen not to join.

The effective date of the change is the date of the event. You should call Towers Watson as close as possible to the event in order to avoid retroactive adjustment of premium on an after-tax basis.

Verification of your dependent’s full-time student status must be provided once a year, if that child is between 19 and 25 years of age.
About the medical plan

The UnitedHealthcare PPO plan offers comprehensive health care coverage provided through a nationwide network of preferred providers and hospitals. A cornerstone of the PPO plan is its flexibility. The following features of the PPO plan explain the plan’s flexibility when you receive medical services:

**CHOICE.** Each time you need medical care, you have a choice. You can visit an in-network physician or any other private practice doctor. The PPO plan does not require its members to designate a Primary Care Physician. To receive the highest level of benefit coverage, select an in-network physician (one who participates in the PPO network) for these advantages:

**Your costs are predictable.** Office visits require a $15 copay. (Visits to specialists require a $35 copay.)

**Routine periodic exams**, including annual physicals and certain preventive screenings, **are covered benefits**, subject to the $15 office visit copay.

**Paperwork is completed for you.**

**BROAD NETWORK:** The UnitedHealthcare PPO plan allows its members to access care in network throughout the U.S. with some of the finest medical doctors and facilities in the country. For example, members may access in-network services through The Cleveland Clinic, Massachusetts General Hospital, Johns Hopkins Hospital, The Mayo Clinic in Rochester, MN, Sloan-Kettering Cancer Center, Cedars-Sinai Medical Center, and Brigham and Women’s Hospital, to name just a few outstanding facilities.

You have access to the nationwide PPO network for your covered dependents, who may be attending school out of state. You also have access to the PPO network of physicians and hospitals throughout the United States when you are away from home.

### COMMONLY USED SERVICES, COPAYS BY YOU, AND WHAT THE PLAN COVERS

<table>
<thead>
<tr>
<th>Service</th>
<th>In-network Copay</th>
<th>Out-of-network Copay</th>
</tr>
</thead>
<tbody>
<tr>
<td>Routine office visit/annual exam</td>
<td>$15</td>
<td>60%</td>
</tr>
<tr>
<td>Specialist visit</td>
<td>$35</td>
<td>60%</td>
</tr>
<tr>
<td>Chiropractic care: 15-visit limit</td>
<td>$15</td>
<td>60%</td>
</tr>
<tr>
<td>Emergency care</td>
<td>$100 (waived if followed by admission to same facility)</td>
<td></td>
</tr>
<tr>
<td>Well-Child preventive care:</td>
<td>$15</td>
<td>60%</td>
</tr>
<tr>
<td>Hospital</td>
<td>80%</td>
<td>60%</td>
</tr>
<tr>
<td>In-hospital physician services:</td>
<td>80%</td>
<td>60%</td>
</tr>
<tr>
<td>Outpatient surgery:</td>
<td>80%</td>
<td>60%</td>
</tr>
<tr>
<td>Laboratory &amp; X-ray services*:</td>
<td>100%</td>
<td>60%</td>
</tr>
<tr>
<td>In-patient mental health:</td>
<td>80%</td>
<td>60%</td>
</tr>
<tr>
<td>Mammogram:</td>
<td>100%</td>
<td>60%</td>
</tr>
</tbody>
</table>

* Does not include advanced diagnostic imaging. Services for advanced diagnostics (such as MRIs, MRAs, PET scans, CT scans, and SPECT scans) are subject to 80% coinsurance (in network) or 60% coinsurance (out of network).

Note: Coinsurance amounts are first subject to a deductible.
Deductibles

The plan has a calendar year deductible for in-network services of $250 per individual / $500 per family. The deductible for out of network care is $900 per individual / $1800 per family.

After you have met the deductible, you pay your share of coinsurance, either 20% or 40%.

What does not count toward the deductible

- copays (for office visits, ER care, prescriptions)
- services covered at 100%

Out-of-pocket expenses

The out-of-pocket maximum on an in-network basis is $1,500 individual / $2,000 family. The out-of-pocket maximum for out-of-network services is $3,000 individual / $5,000 family.

What COUNTS towards the out-of-pocket maximum:

- copays for office visits and urgent/ER care
- deductible for in- and out-of-network services
- your 20% pr 40% share of cost (coinsurance)

What does NOT count towards the out-of-pocket maximum:

- copays for prescriptions
- charges above the Allowed Amount for out-of-network services
- non-compliance penalties

Pre-notification

“Pre-notification” means your doctor notifies UnitedHealthcare prior to providing certain in-network services.

For out-of-network services, you must pre-notify UnitedHealthcare. A list of out-of-network services requiring pre-notification by you may be found in the UHC Plan Summary document or online at www.myuhc.com.

Insurance administrator

UnitedHealthcare is the administrator of the national PPO plan. Their toll-free member service number is 855 868 6663.

Log on to www.myuhc.com to locate an in-network doctor or hospital. While at the site, you may also read general health information.

Medical ID cards

Use your medical ID card to access the PPO level of benefits coast-to-coast, including when traveling or living outside your home area.
About our health programs

Regular check-ups, following your doctor’s advice, and maintaining a balanced diet and exercise program add up to a healthier lifestyle. Unum’s health care strategy incorporates the principle that maintaining or improving your health is not only good for you, it’s key to lowering health care costs for you and the Company.

In addition to health insurance, the Company offers the following health resources to encourage your efforts to stay healthy:

The Health Resource Center (HRC) is a place to attend lunch and learns, have a blood pressure screening, receive an allergy or flu shot, or develop a personal action plan to reduce risk or manage a health condition.

The Health Assessment provides you with feedback to discuss with your doctor and also helps you better understand and manage your health. In 2014, we continue the financial incentive for employees to complete the Health Assessment. Employees who complete the assessment by June 30, 2014, will pay a discounted medical premium from August 2014 through July 2015. Employees who do not complete it will be charged an extra $4.50 per paycheck for medical premium, starting in August 2014.

Taking the Health Assessment includes two steps:

1) Gathering current information about your health
   You will need to know your height, weight, names of medications, blood pressure, cholesterol counts, and any recent lab results

2) Logging onto UnitedHealthcare’s website:
   Go to www.myuhc.com
   • Enter your ID and password (If you don’t have a password, follow the instructions in the Sign Up area.)
   • From the home page, you’ll see a panel link to the Health Assessment.

Complete the questionnaire and submit your responses. Once done, read over your health report and bring it to your doctor if you have questions.

Staying healthy and fit

Through its health management program, which includes fitness programs and wellness resources, Unum provides information and resources to promote greater physical and emotional health and well-being. Whether you attend a “Your Health Matters” lunch ‘n learn or decide to join the fitness center, you improve your chances of staying informed and healthy.

24-hour nurse line

What do you do when it’s midnight and your child develops a high fever? What if you’re out of town, don’t feel well, and need to find a doctor? Call the toll-free UHC 24-hour Nurse Line at 877 440 9219 (found on the back of your insurance card). The Nurse Line gives you the opportunity to speak directly with a registered nurse who can provide accurate, confidential answers to your health-related questions—days, nights, weekends and holidays.

Medical pricing and cost-share strategy

On an aggregate basis—when costs for the UnitedHealthcare PPO plan and all premium tiers are combined—Unum pays 72% of the total cost and employee plan members pay 28%. The highest subsidy percentage is for employee-only coverage, with an 80%

continued on next page
Medical & related health programs

A subsidy for the employee-only cost of the plan for full-time employees. For other tiers, the subsidy is 80% for the employee and 65% for family members (see below).

Part-time employees have a share of the cost of medical and dental coverage funded by the Company, but at a lower level than full-time employees:

- If you work at least 20 hours per week, but less than 30 hours per week, the cost subsidy is 50% of the subsidy provided to full-time employees.
- If you work at least 30 hours per week, but less than 40 hours per week, the cost subsidy is 75% of the subsidy provided to a full-time employee.

Your benefits

<table>
<thead>
<tr>
<th>Medical Cost Chart (full-time rates)</th>
<th>2014 bi-weekly cost ($)</th>
<th>Unum subsidy ($)</th>
<th>2014 Employee bi-weekly cost ($)</th>
<th>Percent of Unum contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee only</td>
<td>237.16</td>
<td>189.72</td>
<td>47.44</td>
<td>80%</td>
</tr>
<tr>
<td>Employee &amp; spouse or domestic partner</td>
<td>474.29</td>
<td>343.86</td>
<td>130.43</td>
<td>72.5%</td>
</tr>
<tr>
<td>Employee &amp; children</td>
<td>474.29</td>
<td>343.86</td>
<td>130.43</td>
<td>72.5%</td>
</tr>
<tr>
<td>Employee &amp; family</td>
<td>711.44</td>
<td>498.02</td>
<td>213.42</td>
<td>70%</td>
</tr>
</tbody>
</table>

Rates include the $4.50 discount for completing the Health Assessment.
Prescription drug coverage

CVS Caremark is the prescription drug vendor for our medical plan. The program operates separately from the medical plan, although the price for drug coverage is contained in your medical rate. If you are not already a member, you will receive a drug card and Welcome Packet from Caremark.

Tiered drug plan

The drug program is a 3-tier plan with drugs categorized as either generic, brand name preferred, or brand name non-preferred. Your copay depends upon which category your drug falls into. Generic drugs have the lowest copay.

“Preferred” brand name drugs are covered with a lower copayment than non-preferred drugs. For a drug to be added to the preferred list, it must meet or surpass specifications relative to drug safety, effectiveness, and manufacturing quality. Caremark—not Unum—compiles the preferred drug list, as do all prescription drug providers. In addition, the preferred list will change from time to time as Caremark determines which brand name drugs to add to or take off the list.

Incentive to promote health

Diabetes drugs receive special treatment in our drug plan as a way to encourage your efforts to protect your health and follow doctor’s orders. Generic oral medications for diabetes have no copay. Your cost for purchasing these drugs is $0.

<table>
<thead>
<tr>
<th>Supply</th>
<th>Generic</th>
<th>Brand Name Preferred</th>
<th>Brand Name Non-Preferred</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-30 days</td>
<td>$10</td>
<td>$25</td>
<td>$40</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Supply</th>
<th>Generic</th>
<th>Brand Name Preferred</th>
<th>Brand Name Non-Preferred</th>
</tr>
</thead>
<tbody>
<tr>
<td>31-90 days</td>
<td>$20</td>
<td>$50</td>
<td>$80</td>
</tr>
</tbody>
</table>
Prescription drug coverage

Mail order feature

Using mail order to obtain prescription drugs saves you money on maintenance drugs that require a regular supply. Prescriptions written for greater than a 30-day supply must be filled through mail order or you will pay a higher copay. Note: You may fill a 90-day prescription for a maintenance drug at a local CVS pharmacy and pay the same 90-day rate associated with mail order.

Mail order is suited to prescriptions you take on a regular basis, such as maintenance drugs related to high blood pressure, heart disease or arthritis. Prescription contraceptives are also available through mail order. A brand name copayment applies when a brand name is prescribed.

Applications and claim forms for the mail order drug program are available by calling Caremark toll-free at 888 790 4252. You may also check www.caremark.com for order forms and refill information.

Mail order service and maintenance drugs

Your best value for maintenance drugs is through Caremark’s Mail Order Service. Maintenance drugs are those medications taken for an ongoing or chronic condition, such as high blood pressure or high cholesterol. If you choose to purchase a 30-day supply of a maintenance drug at a retail pharmacy, you will pay an increased copay after the second fill.

Below is a chart that shows the copayment after two fills (bolded in the middle row), comparing it to the savings when you choose mail order. Remember, a copay will never be more than the cost of the drug. For example, if you take a maintenance drug that costs $4 per month at a retail pharmacy, it will continue to cost $4 per month even after two refills.

<table>
<thead>
<tr>
<th>Options</th>
<th>Brand Name</th>
<th>Preferred</th>
<th>Non-Preferred</th>
</tr>
</thead>
<tbody>
<tr>
<td>Copay for 30-day fill of short-term drug</td>
<td>$10</td>
<td>$25</td>
<td>$40</td>
</tr>
<tr>
<td>at pharmacy</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Copay for 30-day fill of maintenance drug</td>
<td>$20</td>
<td>$45</td>
<td>$70</td>
</tr>
<tr>
<td>at pharmacy after 2 fills</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Copay for 90-day fill of maintenance drug</td>
<td>$20</td>
<td>$50</td>
<td>$80</td>
</tr>
<tr>
<td>purchased through mail order (or at your</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>local CVS pharmacy)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Caremark offers a “Fast Start” program to help you easily switch maintenance medication from the retail pharmacy to the Mail Order Service. Please contact Caremark at 866 273 5268 to learn how to transfer your prescription to mail order fulfilment.
“First Step” program

Sometimes patients ask their doctor for the newest drug simply because they've seen it advertised on television or in magazines. For most chronic health problems, however, several drugs can be equally safe and effective. Older, proven drugs that countless patients have used safely may be just as effective as the heavily advertised ones. Older, established treatments are generally less expensive, representing the best value for patients and health plans.

Caremark’s “Step Therapy” program encourages use of proven, safe, effective, lower cost FDA-approved drugs to treat certain health problems. The idea is to try a “first step” drug for 30 days before taking the more expensive “second step” drug.

How you can save money on drugs

The prescription drug plan contains three tiers of copays, with the lowest copay ($10) associated with the purchase of generic drugs. The plan is designed this way to intentionally steer users toward generics whenever possible. Using generic drugs when appropriate saves you money and helps to stem the overall rise in drug costs.

Here are some tips on ways you can help lower your drug costs:

1) Use generic drugs. When your doctor prescribes a medication, ask if it is a generic drug, and if not, why not? Perhaps there is a generic drug that is appropriate for you. Generics contain the same active ingredients as the brand name drugs, and save you out-of-pocket expense. Think of generics as the “store-brand.” Generic manufacturers don't have to spend as much money on drug research, development, and advertising. Competition among the manufacturers of generic drugs also drives down prices. Contact your local “Big Box” retailer, such as Walmart, Costco, Target, etc., to inquire whether your drug is available at a special discount.

2) Use mail order. Ordering drugs through the mail, especially maintenance drugs that you may take, can save you money. A 90-day supply costs only double the copay for a 30-day supply but gives you triple the medication.
Dental

There are two dental plan choices:

- Dental 100 provides a higher level of benefits and costs more.
- Dental 150 may be a good choice if you need coverage for check-ups and routine care but do not usually have major dental expenses.

Both plans include orthodontia for children and adults.
All payments are based on reasonable and customary charges for the geographic area.

**Dental 100 vs. Dental 150**

<table>
<thead>
<tr>
<th></th>
<th>Dental 100</th>
<th>Dental 150</th>
</tr>
</thead>
<tbody>
<tr>
<td>ANNUAL DEDUCTIBLE</td>
<td>$100 per person</td>
<td>$150 per person</td>
</tr>
<tr>
<td></td>
<td>$300 per family</td>
<td>$450 per family</td>
</tr>
<tr>
<td>COINSURANCE</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Preventive services</td>
<td>100%</td>
<td>80% (deductible waived)</td>
</tr>
<tr>
<td>Basic services</td>
<td>80%</td>
<td>50%</td>
</tr>
<tr>
<td>Major services</td>
<td>60%</td>
<td>50%</td>
</tr>
<tr>
<td>Orthodontia</td>
<td>50% to $2,000 (lifetime maximum)</td>
<td>50% to $2,000 (lifetime maximum)</td>
</tr>
<tr>
<td>ANNUAL MAXIMUM</td>
<td>$1,500</td>
<td>$1,000</td>
</tr>
</tbody>
</table>

(Can be increased each year by an additional $250, up to a total of $1,000 in extra allowance toward the plan maximum, through the Dental Rewards program.)

**TERMS:**

- **Preventive** care includes two cleanings per year, x-rays, fluoride treatments and sealants for children.
- **Basic** services include services such as fillings, extractions and root canals.
- **Major services** include crowns, dentures and bridges.
- **Orthodontia** includes braces to straighten teeth.

**CHECK FIRST!**

It’s a good idea to ask your dentist to get a pre-determination of coverage before you have major work done. This will tell you if the service will be covered and how much your dental coverage will pay. This will keep you from running into an expense you did not anticipate. For example, you must receive pre-approval for the category of services called "implants."
Dental Rewards

The Dental Rewards feature allows members who go to the dentist for preventive care at least once a year and who incur no more than $750 ($500 for Dental 150) in charges, to carry over $250 toward the next year’s annual maximum. The most that can be accumulated and carried over year to year is $1000. This reward feature does not apply to orthodontic services.

Prepayment

Some orthodontists offer a discount when you pay the full fee for treatment up front. However, keep in mind that the Unum dental plan will reimburse as follows:

When treatment begins, the plan pays 25 percent of the total allowed for that treatment.

Then, the plan pays benefits quarterly (every three months) until your treatment ends or the orthodontic lifetime maximum has been reached.

Although you may have paid up front, the plan pays only when services are received.

Dental pricing and cost share (full-time rates*)

<table>
<thead>
<tr>
<th></th>
<th>2014 employee bi-weekly cost ($)</th>
<th>Unum subsidy ($)</th>
<th>2014 employee bi-weekly cost ($)</th>
<th>Percent of unum contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dental 100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Employee Only</td>
<td>17.88</td>
<td>12.48</td>
<td>5.40</td>
<td>70%</td>
</tr>
<tr>
<td>Employee &amp; Spouse or Partner</td>
<td>35.77</td>
<td>21.76</td>
<td>14.01</td>
<td>61%</td>
</tr>
<tr>
<td>Employee &amp; Children</td>
<td>35.77</td>
<td>21.76</td>
<td>14.01</td>
<td>61%</td>
</tr>
<tr>
<td>Employee &amp; Family</td>
<td>53.65</td>
<td>30.98</td>
<td>22.67</td>
<td>58%</td>
</tr>
<tr>
<td>Dental 150</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Employee Only</td>
<td>14.25</td>
<td>9.61</td>
<td>4.64</td>
<td>67%</td>
</tr>
<tr>
<td>Employee &amp; Spouse or Partner</td>
<td>28.50</td>
<td>19.21</td>
<td>9.29</td>
<td>67%</td>
</tr>
<tr>
<td>Employee &amp; Children</td>
<td>28.50</td>
<td>19.21</td>
<td>9.29</td>
<td>67%</td>
</tr>
<tr>
<td>Employee &amp; Family</td>
<td>42.76</td>
<td>28.79</td>
<td>13.97</td>
<td>67%</td>
</tr>
</tbody>
</table>

* The cost of dental insurance is split between the Company and employee. Part-time employees receive a lower subsidy than full-time employees: 50% of the subsidy if you work 20-29 hours per week; 75% of the subsidy if you work 30-39 hours per week.

Dental ID cards

To obtain a dental insurance identification card, log on to www.group.ameritas.com/unum to print a card.

Discounts

Freedom to select a dentist of your choice continues under the Dental 100 and Dental 150 plans. Ameritas offers a discount to insureds who visit an in-network dentist. Ameritas’ network covers a few of the major cities in the states where Unum has offices, such as Tennessee, South Carolina, Maine and California. If you are interested in receiving reduced charges in exchange for visiting a dentist in Ameritas’ network, please call Ameritas at 800 487 5553 or log on to www.group.ameritas.com/unum to determine if a preferred provider practices near you.

dental rewards

the Dental Rewards feature allows members who go to the dentist for preventive care at least once a year and who incur no more than $750 ($500 for Dental 150) in charges, to carry over $250 toward the next year’s annual maximum. The most that can be accumulated and carried over year to year is $1000. This reward feature does not apply to orthodontic services.

prepayment

Some orthodontists offer a discount when you pay the full fee for treatment up front. However, keep in mind that the Unum dental plan will reimburse as follows:

When treatment begins, the plan pays 25 percent of the total allowed for that treatment.

Then, the plan pays benefits quarterly (every three months) until your treatment ends or the orthodontic lifetime maximum has been reached.

Although you may have paid up front, the plan pays only when services are received.

Dental pricing and cost share (full-time rates*)

<table>
<thead>
<tr>
<th></th>
<th>2014 employee bi-weekly cost ($)</th>
<th>Unum subsidy ($)</th>
<th>2014 employee bi-weekly cost ($)</th>
<th>Percent of unum contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dental 100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Employee Only</td>
<td>17.88</td>
<td>12.48</td>
<td>5.40</td>
<td>70%</td>
</tr>
<tr>
<td>Employee &amp; Spouse or Partner</td>
<td>35.77</td>
<td>21.76</td>
<td>14.01</td>
<td>61%</td>
</tr>
<tr>
<td>Employee &amp; Children</td>
<td>35.77</td>
<td>21.76</td>
<td>14.01</td>
<td>61%</td>
</tr>
<tr>
<td>Employee &amp; Family</td>
<td>53.65</td>
<td>30.98</td>
<td>22.67</td>
<td>58%</td>
</tr>
<tr>
<td>Dental 150</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Employee Only</td>
<td>14.25</td>
<td>9.61</td>
<td>4.64</td>
<td>67%</td>
</tr>
<tr>
<td>Employee &amp; Spouse or Partner</td>
<td>28.50</td>
<td>19.21</td>
<td>9.29</td>
<td>67%</td>
</tr>
<tr>
<td>Employee &amp; Children</td>
<td>28.50</td>
<td>19.21</td>
<td>9.29</td>
<td>67%</td>
</tr>
<tr>
<td>Employee &amp; Family</td>
<td>42.76</td>
<td>28.79</td>
<td>13.97</td>
<td>67%</td>
</tr>
</tbody>
</table>

* The cost of dental insurance is split between the Company and employee. Part-time employees receive a lower subsidy than full-time employees: 50% of the subsidy if you work 20-29 hours per week; 75% of the subsidy if you work 30-39 hours per week.

Dental ID cards

To obtain a dental insurance identification card, log on to www.group.ameritas.com/unum to print a card.

Discounts

Freedom to select a dentist of your choice continues under the Dental 100 and Dental 150 plans. Ameritas offers a discount to insureds who visit an in-network dentist. Ameritas’ network covers a few of the major cities in the states where Unum has offices, such as Tennessee, South Carolina, Maine and California. If you are interested in receiving reduced charges in exchange for visiting a dentist in Ameritas’ network, please call Ameritas at 800 487 5553 or log on to www.group.ameritas.com/unum to determine if a preferred provider practices near you.
Vision

Employees can buy vision coverage for themselves and dependents with pre-tax dollars. Services and materials received from a provider in the VSP network are covered at the in network level. To locate a provider in your area, consult the VSP website or call VSP at 800 877 7195. Services and materials received from a non-participating provider are covered at less of a discount as indicated in the out of network column in the following chart. The Vision Service Plan covers an annual eye examination, and eyeglasses or contact lenses once every two years. The following grid outlines the plan’s benefits.

<table>
<thead>
<tr>
<th>Benefit</th>
<th>Frequency</th>
<th>Copay</th>
<th>From VSP Doctor</th>
<th>From Out of Network Provider</th>
</tr>
</thead>
<tbody>
<tr>
<td>Examination</td>
<td>Once every calendar year</td>
<td>$10</td>
<td>Covered</td>
<td>Covered up to $40</td>
</tr>
</tbody>
</table>
| Lenses\(^1\)             | Once every 2 calendar years | $15 (for lenses and frame) | Covered | Covered up to $40/single vision
                                                                      Covered up to $60/bifocal
                                                                      Covered up to $80/trifocal
                                                                      Covered up to $125/lenticular |
| Frame\(^1\)              | Once every 2 calendar years | A wide selection of attractive frames are covered up to $150 | Covered up to $45 | |
| Contact Lenses\(^2,3\)   | Once every 2 calendar years | $15       | Covered         | Covered up to $210                                |
| Medically Necessary\(^4\) | None               | Covered   | Covered up to $130 | Covered up to $105                                |
| Elective                 | Discounted services at VSP Laser Vision Centers |
| Laser Vision Correction\(^5\) | Discounted services at VSP Laser Vision Centers |

1 Your plan provides a 20 percent discount on non-covered complete pairs of prescription glasses when provided by a VSP doctor.
2 Patients choosing contacts use their eligibility for a frame and lenses.
3 Your plan includes a 15 percent discount off of the VSP doctor’s professional services when buying contact lenses. Materials are provided at the customary fees.
4 Medically necessary contact lenses must be prescribed by a VSP doctor for certain conditions. Your VSP doctor must get prior approval from VSP for medically necessary contact lenses.
5 Laser vision correction (PRK and LASIK surgery) is available through contracted laser centers. Program availability may vary based on location and regulatory approval.

More information on the in and out of network benefits with VSP can be obtained by calling VSP at 800 877 7195 or by logging on to vsp.com.
Ameritas underwrites and administers the VSP program.
Work-Life Balance employee assistance program

The Unum Work-Life Balance program is available to employees for assistance with work-life issues. It offers referrals for crisis and short-term counseling, or can simply provide support when a problem affects your personal or professional life. The program also provides information on dealing with grief and death, including supporting co-workers.

The program is run by Ceridian Performance Partners.

**Eligibility**

You and your family members are eligible for the Work-Life program if you are employed at a Unum company.

**HOW IT WORKS**

The Work-Life Balance program is designed to provide professional, confidential counseling for all kinds of personal issues, including:

- Alcohol and drug abuse
- Marital or relationship difficulties
- Child care referral service
- Anxiety or depression
- Elder care referral service
- Parenting problems
- Coping with the loss of a loved one
- Credit counseling
- Emotional impact of financial or family problems
- Simple legal counseling

**To speak with someone or learn more**

You or your family members may call the Work-Life Hotline directly—24 hours a day—whenever you need assistance. Taking advantage of the program is entirely voluntary. The toll-free hotline is available at 800 854 1446.

In addition, Inside Unum has a Work-Life site with educational materials and program highlights. You may also visit the website www.lifebalance.net. (Use “lifebalance” twice as the password if prompted.)

**CONFIDENTIALITY**

Any services you receive from the program are confidential. Ceridian will release absolutely no personal information about your use of the program, except when required by state or federal law, (for example, if an employee is a danger to himself or herself, or others, or in cases of child abuse).
Reimbursement accounts

Health and dependent care

Health and dependent care reimbursement accounts let you pay eligible health and dependent care expenses with tax-free dollars. What’s that worth? It can be the difference between paying $100 a week for daycare or $77 a week. Over 50 weeks this adds up to $1,150 in savings.

There is no doubt—using reimbursement accounts lowers your taxes and saves you money. Even if you are hesitant about paperwork, consider these accounts. A few minutes of planning and paperwork over the year opens a great opportunity to save.

Here is how the accounts work. The IRS permits you to set aside money from your paycheck before taxes are taken out. The money must go into a reimbursement account and be used during the year to pay eligible health care or dependent care expenses. When you withdraw the money to pay these expenses, you do not pay taxes on it. As a result, you save because this money is tax-free. It is not counted in determining your federal, Social Security and—in most states—state taxes.

The following chart shows how you save:

<table>
<thead>
<tr>
<th>TAX RATE*</th>
<th>22.65%</th>
<th>35.65%</th>
<th>38.65%</th>
</tr>
</thead>
<tbody>
<tr>
<td>For this expense</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>$5,000 daycare</td>
<td>$1,132</td>
<td>$1,782</td>
<td>$1,932</td>
</tr>
<tr>
<td>$500 medical</td>
<td>$113</td>
<td>$178</td>
<td>$193</td>
</tr>
</tbody>
</table>

*These rates include 7.65% in Social Security taxes added to 3 standard tax rates.

Reimbursement accounts make your money go farther. Each dollar you deposit helps you pay for health or dependent care.

Careful planning is a must

Reimbursement accounts are valuable, but you must plan carefully. The IRS has strict rules about the use of these accounts, including a “use it or lose it” provision. You forfeit any money in your account that you do not spend on expenses incurred while participating in the plan during the year. You may not alter your contribution amount during the year unless you have a status change. Be conservative in estimating your expenses to minimize this risk. The worksheets on page 20 will help you develop sound estimates.

Regulations that took effect in 2011 disallow reimbursement for non-prescribed over-the-counter medications.

Reimbursement

Using a debit card (HCRA only)

Participants in the health care reimbursement account may use their WageWorks debit card to pay for eligible health care expenses. The debit card allows you to pay many health care providers and pharmacists directly at the time of purchase. Please keep all your receipts in the event future documentation is required. In particular, be sure to keep receipts for any co-insurance amounts you pay, as substantiation of these expenses is necessary.

Filing Claims (HCRA/DCRA)

WageWorks administers reimbursement accounts. Submit completed reimbursement claim forms online. Requests are processed daily, with checks cut weekly. You may receive payment or request that your provider be paid.

Visit www.wageworks.com to check your account balance and claim status.

Two accounts

The chart on page 19 summarizes the two reimbursement accounts. You can open a Health Care Account (HCRA), a Dependent Care Account or both. The amount you choose is deducted from each paycheck in equal amounts before your taxes are calculated. As you have eligible expenses through the year, you can submit claims for reimbursement, or you can use the debit card for eligible healthcare expenses.
Other rules to consider in your planning

- You cannot change the amount you are contributing to an account during the year unless you have a status change. (See definition of status change on page 6.)
- You must incur expenses while you are participating in the plan and during the calendar year in which you put the money into your account.
- For HCRRA, you also have 2½ months into the following year in which to incur an expense.
- You have three months after the end of the year to submit claims.
- To withdraw money from the account, you must show proof that you have incurred the expense.
- If you start or stop making contributions during the year, you cannot submit claims for expenses incurred before or after participating in the plan.
- You may not claim a tax credit for any expenses paid from your Dependent Care Account.

- You may not claim expenses paid from your Health Care Account as deductions on your tax return.
- If you stop working at Unum you may continue your Health Care Account (but not the Daycare account) on a post-tax basis through the end of that calendar year.

Dependent care checklist
Dependent Care circumstances can change during the year—but you cannot change the amount you contribute to the reimbursement account unless you have a status change.

Here’s a checklist of items to consider in estimating year-ahead expenses:

- Will any of your children turn 13 during 2014?
- Will any of them start school in 2014?
- Will they use a summer camp? (Overnight camp expenses are NOT eligible.)
- Will you have a pre-schooler in nursery school in 2014?
- Will your spouse work outside the home or attend school full time? (Important because child care is not a qualified expense unless both parents work or attend school on a full-time basis.)
- Will you take a leave of absence or go out on disability? (Important because participation is suspended for the period an employee is on leave.)
Reimbursement worksheet

Review each item on this worksheet and ask, “Will I definitely be spending money on this item in 2014?” If the answer is yes, record the amount you expect to spend.

**HEALTH CARE EXPENSES**

<table>
<thead>
<tr>
<th>Anticipated Expenses</th>
<th>Employee</th>
<th>Dependent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical plan copays</td>
<td>$________</td>
<td>$________</td>
</tr>
<tr>
<td>Medical plan co-insurance</td>
<td>$________</td>
<td>$________</td>
</tr>
<tr>
<td>Prescription drug copays</td>
<td>$________</td>
<td>$________</td>
</tr>
<tr>
<td>Dental plan deductible</td>
<td>$________</td>
<td>$________</td>
</tr>
<tr>
<td>Dental plan co-insurance</td>
<td>$________</td>
<td>$________</td>
</tr>
<tr>
<td>Orthodontia expenses</td>
<td>$________</td>
<td>$________</td>
</tr>
<tr>
<td>Eye exams</td>
<td>$________</td>
<td>$________</td>
</tr>
<tr>
<td>Eyeglasses/contacts</td>
<td>$________</td>
<td>$________</td>
</tr>
<tr>
<td>Hearing aids</td>
<td>$________</td>
<td>$________</td>
</tr>
<tr>
<td>Other</td>
<td>$________</td>
<td>$________</td>
</tr>
</tbody>
</table>

Total annual expenses (total all above items for employee and dependent) $________

Divide total annual expenses by 26 to calculate your payroll deduction $________

**DEPENDENT DAYCARE EXPENSES**

<table>
<thead>
<tr>
<th>Dependent care in the home</th>
<th>Employee</th>
<th>Dependent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wages to provider</td>
<td>$________</td>
<td>$________</td>
</tr>
<tr>
<td>FICA and other taxes</td>
<td>$________</td>
<td>$________</td>
</tr>
<tr>
<td>Related household services</td>
<td>$________</td>
<td>$________</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Dependent care outside the home</th>
<th>Employee</th>
<th>Dependent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amount paid to provider</td>
<td>$________</td>
<td>$________</td>
</tr>
<tr>
<td>Other services</td>
<td>$________</td>
<td>$________</td>
</tr>
</tbody>
</table>

Total 2014 expenses (total all above items) $________

Total annual expenses $________

Divide total annual expenses by 26 to calculate your payroll deduction $________

**Commuter Reimbursement Account**

This account allows you to set aside pre-tax dollars to be reimbursed for qualified work-related transportation expenses, such as mass-transit costs (up to $125 per month) and parking at work (up to $240 per month). Once you enroll, your monthly election amount will continue until you either make a change to your election or suspend contributions to the plan. You may change the amount of your election or suspend it at any time. Inquire through WageWorks or Towers Watson for details on enrolling.
Life insurance

Eligibility
The Company provides full-time employees with $50,000 of life insurance coverage with no cost to employees.

Those who work at least 30 hours but less than 40 hours per week have $37,500 in life insurance paid by Unum.

Employees who work at least 20 hours per week but less than 30 hours per week have $25,000 in life insurance paid by Unum.

Employees can buy additional supplemental coverage in $25,000 increments. All life insurance amounts purchased by employees will be purchased with after-tax dollars.

Medical underwriting
Medical underwriting for life insurance is required in the following instances:

• When a life insurance increase is requested for an employee or spouse/partner. Increases in child life insurance beyond the $5,000 level require medical underwriting.
• When a new employee selects a coverage amount in excess of three times base salary (or when new hire coverage may exceed $750,000) for himself, or more than $50,000 for spouse/domestic partner. The employee limit includes any employer-paid life coverage.

Maximum life amount
The maximum life insurance amount allowed is $1,500,000.

Family life insurance
Employees can purchase life insurance for spouses/domestic partners and children.

The following options are available for spouse/domestic partner coverage:
• $10,000
• Any increment of $10,000, up to a maximum of 50% of your coverage amount or $600,000, whichever is less.

The following options are available for child coverage:
• $2,000
• $5,000
• $10,000
• $15,000
• $20,000
As with your coverage, you have the option of continuing the family coverage after you retire or leave the Company.

Beneficiary designations
Annual enrollment is a good time of year to review your beneficiary designations for Life, AD&D and BTA. Please take a few moments on the Towers Watson website to make sure your beneficiary information is as you want it.

Support for beneficiaries
Your life insurance comes with a valuable service unique to Unum’s product portfolio. Life Planning Financial & Legal Resources, provided through Ceridian Corporation, is a financial counseling service that helps designated beneficiaries manage major financial decisions that can coincide with the loss of a loved one. The service also includes emotional support and website support.

Beneficiaries can access attorneys, financial planners, tax advisors, financial consultants, and Master’s-level consultants trained in grief counseling. The types of issues counselors assist with include mortgage decisions, the tax consequences of financial decisions, helping a grieving child, and availability of Social Security benefits, among others.

The timeframe for receiving Life Planning Financial & Legal Resources support is 12 months. The service is provided over the telephone, and is free and voluntary.

Employees facing a terminal illness also can take advantage of the Life Planning program. Ceridian’s contact number is 1-800-422-5142.
**Accelerated Benefit**

If it is determined that you or a covered dependent are terminally ill and have 12 or fewer months to live, you may elect to have part of your life insurance benefit paid to you in a one-time lump-sum payment.

**Portability**

Employees can take their life insurance coverage with them, at group rates, after retiring or leaving the Company. You pick up the full premium cost at that point; $750,000 is the maximum amount that can be “ported” in this way.

**Changes in coverage**

You may request an increase or decrease in your life insurance coverage when you deem the change necessary. (Requests for any increases are subject to medical underwriting.) A status change is not required in order to adjust your coverage.

**Accidental death and dismemberment**

Employees can buy group Accidental Death and Dismemberment coverage with pre-tax dollars. The plan allows you to choose $20,000 to $1,000,000 in coverage in increments of $10,000. You may purchase AD&D coverage on your spouse/domestic partner in increments of $5,000 up to 60% of your coverage (or $600,000 whichever is less). Child coverage may be purchased at the levels of $2,000, $5,000, $10,000, $15,000 etc. up to 50% of your coverage (or $150,000, whichever is less).

If you or a covered dependent die or suffer a loss within one year of an accident, the plan will pay the insurance amount or a percentage of this amount, depending upon the loss. See the following chart for details.

<table>
<thead>
<tr>
<th>For a loss of:</th>
<th>The plan pays:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Life</td>
<td>The AD&amp;D benefit (100%).</td>
</tr>
<tr>
<td>Both hands, both feet, or sight of both eyes</td>
<td>The AD&amp;D benefit (100%).</td>
</tr>
<tr>
<td>One hand and one foot</td>
<td>The AD&amp;D benefit (100%).</td>
</tr>
<tr>
<td>Speech and hearing</td>
<td>The AD&amp;D benefit (100%).</td>
</tr>
<tr>
<td>One hand or foot, and sight of one eye</td>
<td>The AD&amp;D benefit (100%).</td>
</tr>
<tr>
<td>One hand or one foot</td>
<td>One-half the AD&amp;D benefit (50%).</td>
</tr>
<tr>
<td>Speech or hearing</td>
<td>One-half the AD&amp;D benefit (50%).</td>
</tr>
<tr>
<td>Sight of one eye</td>
<td>One-half the AD&amp;D benefit (50%).</td>
</tr>
<tr>
<td>Thumb and index finger of the same hand</td>
<td>One-quarter the AD&amp;D benefit (25%).</td>
</tr>
</tbody>
</table>
Besides portability, the plan also includes the following features:

- **Seat belt and airbag benefit:** If you or a covered dependent die in an auto accident and were wearing a seat belt, the plan pays an additional amount equal to 10% of your elected amount to a maximum benefit amount of $25,000. An additional benefit of 5% of your elected amount to a maximum of $5,000 will be paid if the insured’s seat is protected by an air bag.

- **Rehabilitation physical therapy benefit:** If you suffer a covered dismemberment and require rehabilitative physical therapy, the plan will pay you an additional 10% of your AD&D Benefit up to $10,000.

- **Education benefit:** If you die as a result of an accidental bodily injury within 365 days of the injury, the plan will pay an education benefit equal to 25% of your benefit, up to a maximum amount of $25,000 per academic year. The maximum total amount is $100,000. The benefit will be paid if your child is enrolled full time in an accredited post-secondary (beyond the 12th grade) school. The maximum payments are four per lifetime, and the maximum benefit period is six years from the date of the first benefit payment.

- **Child care benefit:** If you or your covered spouse/partner die as a result of accidental bodily injury, the plan will pay an annual benefit equal to the lesser of 5% of your or your spouse’s/partner’s AD&D benefit or $3,000 to you, your spouse or an authorized representative on behalf of each of your qualified children. Qualified children are under the age of 14 and have been enrolled in a licensed daycare or school facility for at least 90 consecutive days before the date of the accident. The maximum benefit is $3,000 per year for four years.

- **Repatriation benefit:** If you or a covered dependent die as a result of a covered accident, and your death occurs at least 100 miles from your principal place of residence, the plan will pay up to $5,000 to transport your or your covered dependent’s body to a mortuary chosen by you or your authorized representative.

- **Exposure and Disappearance benefit:** If you or a covered dependent sustain an accidental bodily injury and are unavoidably exposed to the elements and suffer a loss, the plan will pay the full benefit. If you or your covered dependents are travelling in a common public passenger carrier, and that carrier is involved in an accident and is wrecked, sinks, is stranded or disappears, and you or your covered dependent’s body is not found within one year of the accident, the plan will pay the full benefit.
Business travel accident (BTA) insurance

The Business Travel Accident plan, paid for by the Company, pays benefits if you lose your life, a limb, your eyesight, speech, or hearing in an accident while traveling on Company business.

The plan pays benefits up to five times your base salary (your principal amount) within certain minimums and maximums, depending on your loss, as shown on the chart below.
(To minimize benefit is $100,000; the maximum is $1 million.)

**YOUR BTA BENEFICIARY**

Your beneficiary under this plan is the same person(s) you name for your life insurance coverage, unless you specifically request otherwise. To name a beneficiary for your BTA coverage, access the Towers Watson website through Inside Unum or [https://unumebenefits.ehr.com](https://unumebenefits.ehr.com), or call Towers Watson’s Benefit Service Center at 800 678 2436.

### If you lose

<table>
<thead>
<tr>
<th>The plan pays</th>
</tr>
</thead>
<tbody>
<tr>
<td>Your life</td>
</tr>
<tr>
<td>Any two of the following:</td>
</tr>
<tr>
<td>hands, feet, sight in one eye</td>
</tr>
<tr>
<td>Speech and hearing</td>
</tr>
<tr>
<td>One foot or hand, the sight in one eye, speech or hearing</td>
</tr>
<tr>
<td>Thumb and index finger of the same hand</td>
</tr>
</tbody>
</table>

### Part-time employees and BTA

- If you work less than 20 hours per week, you do not qualify for the Business Travel Accident plan.
- If you work between 20 hours and 40 hours per week, the maximum benefit you can receive under BTA is $100,000.
- On-call benefit counselors are eligible for a flat benefit of $100,000.

### When the BTA plan does not pay benefits

The BTA plan does not pay benefits for losses resulting from:

- Air travel, other than business-related travel as a passenger on any civilian, military, or Company-sponsored or owned aircraft.
- Illness, disease or infection unless it results from an accidental injury.
- Travel to and from work.
- War or any act of war, declared or undeclared.
- Bona fide vacation or a vacation in the midst of a business trip.
- Suicide or intentionally self-inflicted injuries.
- Serving in the armed forces.
The following sections show per paycheck costs for Unum life and health benefits effective January 1, 2014. These costs correspond to 26 paydays per year. Also listed is whether your contribution is made on a pre-tax or post-tax basis. All benefits listed are for full-time employees. Please consult your enrollment worksheet on the Towers Watson website for detailed information on your costs.

### Life

<table>
<thead>
<tr>
<th>Type</th>
<th>Rates per $1,000/bi-weekly</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Basic Life</strong></td>
<td>$50,000 Company paid</td>
</tr>
<tr>
<td><strong>Supplemental Life</strong></td>
<td></td>
</tr>
<tr>
<td>No Tobacco</td>
<td>Tobacco</td>
</tr>
<tr>
<td>Age Bands</td>
<td></td>
</tr>
<tr>
<td>&lt; 35</td>
<td>.0217 0.0429</td>
</tr>
<tr>
<td>35-39</td>
<td>.0300 0.0485</td>
</tr>
<tr>
<td>40-44</td>
<td>.0411 0.0978</td>
</tr>
<tr>
<td>45-49</td>
<td>.0665 0.1560</td>
</tr>
<tr>
<td>50-54</td>
<td>.1214 0.2732</td>
</tr>
<tr>
<td>55-59</td>
<td>.1989 0.4131</td>
</tr>
<tr>
<td>60-64</td>
<td>.2534 0.4726</td>
</tr>
<tr>
<td>65-69</td>
<td>.4255 0.7108</td>
</tr>
<tr>
<td>70+</td>
<td>1.6251 3.5072</td>
</tr>
<tr>
<td><strong>Spouse/Partner Life</strong></td>
<td></td>
</tr>
<tr>
<td>No Tobacco</td>
<td>Tobacco</td>
</tr>
<tr>
<td>Age Bands</td>
<td></td>
</tr>
<tr>
<td>&lt; 35</td>
<td>.0423</td>
</tr>
<tr>
<td>35-39</td>
<td>.0638</td>
</tr>
<tr>
<td>40-44</td>
<td>.0808</td>
</tr>
<tr>
<td>45-49</td>
<td>.1365</td>
</tr>
<tr>
<td>50-54</td>
<td>.2100</td>
</tr>
<tr>
<td>55-59</td>
<td>.3419</td>
</tr>
<tr>
<td>60-64</td>
<td>.3958</td>
</tr>
<tr>
<td>65-69</td>
<td>.6885</td>
</tr>
<tr>
<td>70+</td>
<td>1.5384</td>
</tr>
<tr>
<td><strong>Child Life</strong></td>
<td></td>
</tr>
<tr>
<td>$2000</td>
<td>.11</td>
</tr>
<tr>
<td>$5000</td>
<td>.23</td>
</tr>
<tr>
<td>$10,000</td>
<td>.42</td>
</tr>
<tr>
<td>$15,000</td>
<td>.57</td>
</tr>
<tr>
<td>$20,000</td>
<td>.68</td>
</tr>
</tbody>
</table>

The premium for life insurance coverage is paid for through post-tax payroll deductions.

### Medical

<table>
<thead>
<tr>
<th>Benefit</th>
<th>Employee &amp; Spouse</th>
<th>Employee &amp; Children</th>
<th>Family</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>MEDICAL</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>UHC PPO</td>
<td>47.44</td>
<td>130.43</td>
<td>213.42</td>
</tr>
<tr>
<td><strong>DENTAL</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ameritas 100</td>
<td>5.40</td>
<td>14.01</td>
<td>14.01</td>
</tr>
<tr>
<td>Ameritas 150</td>
<td>4.64</td>
<td>9.29</td>
<td>9.29</td>
</tr>
<tr>
<td><strong>VISION</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>VSP</td>
<td>3.68</td>
<td>6.46</td>
<td>6.61</td>
</tr>
</tbody>
</table>

Contributions toward medical, dental, and vision coverage are paid for through pre-tax payroll deductions. Medical rates include the health assessment discount.

### Accidental Death and Dismemberment (AD&D)

<table>
<thead>
<tr>
<th>Benefit</th>
<th>Rates per $10,000/ bi-weekly</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Employee</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Spouse/Partner</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Child</strong></td>
<td></td>
</tr>
<tr>
<td>$10,000/</td>
<td>0.0692</td>
</tr>
<tr>
<td>$10,000/</td>
<td>0.0692</td>
</tr>
<tr>
<td>$10,000/</td>
<td>0.0692</td>
</tr>
</tbody>
</table>

The premium for AD&D coverage is paid for through pre-tax payroll deductions.

### Short Term Disability

**BASIC COVERAGE** Company paid

### Long Term Disability (LTD)

**BASIC COVERAGE** Company paid

- **Supplemental LTD** $0.775 per $100 of covered income per month

Maximum monthly benefit is $10,000.

The premium for LTD coverage is paid for through post-tax payroll deductions.
Disability management

Unum is committed to providing a work environment that supports reasonable accommodations for employees who are impaired or disabled. In connection with the short term and long term disability plans, the disability management program includes both return to work efforts and stay at work efforts.

Return to work

Unum has a corporate-wide Return-to-Work program to help employees transition back to the workplace. People heal from illnesses and injuries incrementally, and getting back to normal daily activities, including work, is part of that process. Besides economic value, work confers dignity and contributes to self-identity. Since most employees can and do want to return to work following a disability, they may be able to access a program called RAMP (Return to work through Accommodation, Management and Planning).

Under this program a plan will be developed for an employee who is able to return to work but has restrictions and limitations. Discussions will occur with his/her manager to determine if and how the employee could return to work. The discussions may include the need for reasonable accommodations, such as a part-time schedule, modified work load, or physical equipment changes. There will be clear communications as to the length of time any reasonable accommodation will last.

Stay at work

The Unum Stay at Work policy provides managers and their employees with options that may be utilized to support employees in staying at work and preventing or minimizing a potential need for a disability claim through reasonable accommodation.

Who qualifies for Stay At Work? An employee with limitations which are due to a medical condition and who is also not on claim (STD, LTD or Workers’ Compensation). An HR Disability Management Consultant (DMC) will work with managers and employees to determine what can be done to help employees stay at work. The DMC will obtain permission from the employee to speak to his or her physician; from that dialogue, the DMC can determine what needs to occur in the way of accommodation, if any, to help the employee stay at work.

Short term disability (STD)

STD is a benefit that helps to protect individual financial security. This benefit is designed with both income protection and support for continued productivity in mind. Excellent case management is among the resources that will help keep people at work and encourage return to work.

The STD program covers 26 weeks of disability, at which time you may be eligible for LTD.

APPLYING FOR STD BENEFIT

You should call 866 390 1737 if you believe you will be out of work due to sickness or injury for more than a week (7 calendar days). Placing this phone call is all you need to do to apply for benefits and activate the claims process. A physician’s written certification of the sickness or injury is required as part of the STD approval process.

COORDINATION WITH PAID TIME OFF

Employees qualify for STD after being out for 7 consecutive full or partial days. You are eligible for STD benefits beginning on the 8th day. Once you qualify for STD, coverage would start from the 8th day.

Five PTO days, if available, will be used to satisfy the first week’s elimination period. An employee may use up to 5 additional PTO days to bridge any timing gap between the end of the elimination period and the actual start of STD benefits. These additional PTO days will be credited back to the employee’s PTO bank if STD is approved.

STD INCOME PROTECTION

Income protection of 70 percent is the STD standard in the plan. Those with one or more years of service qualify for some initial weeks at 100 percent income replacement.
Short term disability, continued

The number of weeks you receive 100 percent is tied to your years of service, as follows:

<table>
<thead>
<tr>
<th>Years of Service</th>
<th>STD Weeks at 100% Replacement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Time from date of hire until Dec. 31 of hire year</td>
<td>0 Weeks</td>
</tr>
<tr>
<td>1</td>
<td>2 Weeks</td>
</tr>
<tr>
<td>2</td>
<td>4 Weeks</td>
</tr>
<tr>
<td>3</td>
<td>6 Weeks</td>
</tr>
<tr>
<td>4+</td>
<td>8 Weeks</td>
</tr>
</tbody>
</table>

The maximum benefit period is 26 weeks during a period of continuous disability.

EXAMPLES

You have been with the Company one year and an illness keeps you from work for seven weeks.

You have been with the Company six years and an illness keeps you from work for seven weeks.

COORDINATION WITH OTHER BENEFITS

Payments from STD are reduced by, among other benefits, any Workers’ Compensation or state disability payments that you may be eligible for.

Paying for your benefits while out on disability

STD checks are paid bi-weekly in the same cycle as regular paychecks. Your benefit deductions will be taken from your STD check.

Long term disability (LTD)

Long term disability pays up to 60 percent of your monthly income. Payments from LTD are reduced by any benefits you may be eligible for from Social Security, Workers’ Compensation and/or any other benefits from group disability plans.

This benefit integrates with your STD benefit, with eligibility for LTD determined once you have been out of work for 26 weeks.

OTHER KEY LTD FEATURES

- The cost of LTD coverage is paid by Unum for the first $50,000 of covered income. You choose whether to pay for coverage above $50,000 of covered income.
- The maximum monthly benefit in the group plan is $10,000.
- The LTD benefit includes the Disability Plus feature, which increases the benefit to 80 percent when a person loses two activities of daily living or suffers a cognitive impairment. These activities include bathing, dressing, toileting, transferring, continence and feeding. This feature has a pre-existing condition requirement and a requirement that no activities of daily living be lost prior to the effective date of Disability Plus.
- Survivor Benefit pays three times the gross monthly disability benefit if a plan member dies while receiving disability benefits.
- Plan covers spouses and domestic partners if they have a loss of two activities of daily living or a cognitive impairment. Coverage pays a $1,000 monthly benefit after a 60-day waiting period. There is a lifetime maximum payment period of two years.
- Benefits are limited to 24 months for mental and nervous conditions and self-reported conditions.
- Plan has a continuous disability feature so if you return to work for 30 days or less during the 26-week elimination period, the elimination period count does not re-start. The interim of days not disabled, however, would not count toward the elimination period.

continued on next page
Long term disability, continued

EMPLOYMENT STATUS AND LTD

After 12 months away from work, the employment of any person*, including those on LTD, is terminated. Unum reserves the right to change this provision at any time. LTD benefits still continue as long as the person meets the definition of disability, but not beyond Social Security normal retirement age.

Medical coverage and other benefits would terminate with employment. However, medical, dental, and vision coverage, as well as health care reimbursement accounts, are offered under COBRA. This coverage would be the same as the coverage offered to active employees. Towers Watson’s Benefit Service Center would bill the individual for continued coverage under COBRA.

*Excluding an employee on active military leave.
Additional benefits

**Tuition reimbursement**

To support employees in their professional development, Unum provides tuition reimbursement for educational courses. The Company will provide 100% reimbursement for successfully completed courses, to a maximum of $4,000 per calendar year for full-time employees and $1,500 per calendar year for part-time employees. Coursework must be related to the employee’s present job or development plan, and other restrictions apply.

This program, administered by Edcor, is available to regular, full-time and part-time employees who:

- Work a minimum of 20 hours per week;
- Have been employed by the Company for at least one year prior to the start of approved educational courses;
- Remain employed through the completion of the approved educational courses; and
- Are performing and continue to perform at a satisfactory level.

Repayment of reimbursement monies must be made if an employee leaves Unum within one year of course completion.

Complete details on the program are contained on Inside Unum.

**Long term care insurance**

Unexpected illness or injury, as well as the aging process, can leave you in a vulnerable position both personally and financially. Without insurance protection, your assets could disappear quickly, along with your ability to make choices and maintain control over your life.

**COVERAGE**

The Company’s Long Term Care insurance allows you to choose who will give you care and where you will receive your care. Coverage options include nursing home care, assisted living facility care, professional home care, and total home care. There are multiple benefit amounts to choose from, as well.

**ELIGIBILITY**

Employees who work at least 20 hours per week are eligible for group Long Term Care coverage.

Long Term Care insurance is also available to the spouses/domestic partners, adult children, siblings, parents, parents-in-law, grandparents, and grandparents-in-law of eligible U.S.-based Unum employees.

**APPLYING FOR COVERAGE**

You may apply for long term care insurance with medical underwriting on the total amount of coverage. New hires have one month from their date of hire to apply without medical underwriting for coverage levels at or below the guarantee issue maximums.

**HOW TO ENROLL**

To view and print materials related to the Long Term Care offering, including details on the plan, rates and an application, visit [http://w3.unum.com/enroll/UnumGroup/index.aspx](http://w3.unum.com/enroll/UnumGroup/index.aspx). For answers to questions, or to obtain a paper enrollment kit, call the Long Term Care Customer Service Center at **800 227 4165**.
Additional benefits

**Worldwide emergency assistance when traveling**
—business & personal travel benefit

Whether you are traveling for business or pleasure, you can receive help for medical or personal emergencies 24 hours a day through Assist America. You must be at least 100 miles away from your home or in another country to qualify for assistance. Assist America’s Operations Center is staffed with trained, multilingual and medical personnel who will provide referrals to Western-trained, English speaking doctors, medical specialists or legal support. Emergency Medical Evacuation may be provided if necessary to transport a member to a facility capable of providing a high standard of care.

**Family protection**

Your spouse and children also are eligible for these services whether they are traveling with or without you. However, spouses who are traveling on business are not eligible for the services. Children are eligible up to their 26th birthday.

**800-Number access**

Call Assist America immediately should an emergency arise while away from home. The number is **800 872 1414** if within the U.S., or **609 986 1234** (collect) if outside the U.S.

Smartphone users can go to [assistamerica.com](http://assistamerica.com) and scan in a mobile application that allows for emergency phone calls, locating a U.S. embassy and viewing intelligence updates. Use this reference number to log in: **01-AA-UN-762490**

Visit Inside Unum for an online brochure and printable wallet card.
Retirement

It’s a financial planning rule-of-thumb that most people need to replace about 80% of their pre-retirement income to maintain the same standard of living after retirement. The major sources to reach a comfortable retirement income are contributions to a 401(k) Plan over a career, Social Security, other retirement savings plans, and personal savings.

Unum provides two retirement plans and several programs to help you reach your retirement goals:

Plans

• A Defined Contribution Plan that provides a 4.5 percent contribution by the Company every payday based on your earnings.

• A 401(k) retirement program available to all eligible employees that has a Company savings match to encourage participation.

Programs/tools

Because in today’s world each of us is responsible for ensuring that we are financially able to retire, the Company provides:

• 401(k) / Defined Contribution investment advice from Financial Engines. The advice is objective and available online, 24 hours a day—and is personalized to your retirement goals. There are two different programs: one that is free and geared toward those who want to actively manage their account, and a managed accounts option available for a fee, for those who want to take a passive approach or want help with making investment decisions. Advice is available through the NetBenefits homepage at www.401k.com.

• retirement income planning and modeling tools at Fidelity. Log onto your NetBenefits account at www.401k.com.

• workplace financial planning and education from Ameriprise in the form of free financial education seminars to assist you in meeting your daily personal financial objectives and preparing for your retirement needs. These seminars are meant to encourage you to develop a financial plan, including a retirement plan, as early as possible in your career.

Retirement plan eligibility

DEFINED CONTRIBUTION

Regular employees are eligible to begin receiving the company’s 4.5 percent defined contribution once they have worked 1,000 or more hours and completed one year of service.

You become vested in the balance in your Defined Contribution Plan immediately.

401(k) PLAN

Employees regularly scheduled to work at least 20 hours per week are eligible to enroll in the 401(k) Plan. Other employees may participate after working 1,000 or more hours within a year. On-call benefit counselors and temporary employees, among others, are not eligible to participate in the plan.

New hires who are eligible for the plan will be automatically enrolled at 3% in an age-appropriate Vanguard Target Retirement Fund.

Eligibility for the Company match begins with the pay period following completion of 12 months of service and attaining 1,000 hours.

continued on next page
Retirement benefits

**Defined Contribution Plan**

Beginning January 1, 2014, the company will offer a defined contribution retirement plan in which Unum will contribute 4.5 percent of your pay each payday. Your pay includes your base salary and incentive-based awards, such as Performance Based Incentive (PBI).

**ELIGIBILITY**

You are eligible to receive a defined contribution from the company after you have been with the company for a year and worked 1000 hours - the same eligibility requirement as for the company match into the 401(k) plan.

**HERE’S HOW IT WORKS**

You do not need to enroll in the defined contribution plan. Contributions are made by the company to your account automatically once you have met the eligibility requirement. The contributions made by the company will be invested in the same manner as your 401(k) contributions. If you are not contributing to the 401(k) plan, your 4.5 percent defined contribution from the company will be invested in an age-appropriate Vanguard Target Retirement Fund.

**MANAGING YOUR ACCOUNT**

The defined contribution plan is managed by you in a similar fashion to your 401(k) account, allowing you to choose how to best invest your retirement savings. You can actively manage your account through www.401k.com. The funds that you have picked for your 401(k) account will be the same funds in which your defined contributions are invested. You can change your investment choices whenever you deem it necessary.

As with the 401(k) plan, the performance of your investments will determine your ultimate payout.

The defined contribution plan is administered for the company by Fidelity Investments.

**VESTING**

You are 100 percent vested in your defined contribution account.

---

**401(k) Plan**

The 401(k) Plan is an easy way to save for retirement on a pre-tax basis. Matching contributions from the Company make your savings grow faster.

**HERE’S HOW IT WORKS**

You can put up to 50% of your pre-tax earnings in the 401(k) Plan. Your earnings include base salary and performance-based incentives. You select the amount in any percentage increment between 1% and 50%. As a new hire, if you do not elect otherwise, you are automatically enrolled in the plan at a 3% contribution level in an age-appropriate Vanguard Target Retirement Fund.

**The Internal Revenue Service limits** certain highly compensated employees in the amount that may be contributed annually and in the amount of salary that the percentage contribution may be based upon. The 2014 retirement plan limits were not available at press time. They will be posted on Inside once released.

**The Company matches dollar for dollar** the first 5% of your contributions. Participants are eligible for the match after the completion of 1000 hours and 12 months of service.

**401(k) VESTING**

Participants in the plan are 100% vested in Company contributions.

**401(k) PLAN MANAGEMENT**

The Unum Group 401(k) Plan is managed by Fidelity Investments. Fidelity is the largest privately held investment management organization in the United States and is a leading provider of investment management, record-keeping services, investment education and comprehensive customer service. Founded in 1946, Fidelity currently administers more than $2.1 trillion in total customer assets, offering services and financial products to more than 20 million individuals and institutions.

You may actively manage your 401(k) and Defined Contribution account with Fidelity through the 401k.com site. On this site you may:

- check your account balance
- change your deferral
- review your online quarterly statement
- name a beneficiary
- re-allocate your investment elections
- sign up for Financial Engines investment advice
- set your deferral rate to increase automatically each year
Retirement benefits

A tale of two savers

This graph shows the advantage of starting to invest earlier—rather than later—in a 401(k) plan.

Maria
Start Age 25
$1,000 contributed annually for 10 years
$10,000 Contribution

Tom
Start Age 35
$1,000 contributed annually for 30 years
$30,000 Contribution

This hypothetical example is based on monthly contributions made at the beginning of the month to a tax-deferred workplace savings plan and a 7% annual rate of return compounded monthly. Your own plan account may earn more or less than this example, and income taxes will be due when you withdraw from your account. Investing in this manner does not ensure a profit or guarantee against loss in declining markets.

401(k) 2014 Investment options

The following funds are options for investing your 401(k) dollars:

- Managed Income Portfolio - Class 4
- PIMCO Total Return Fund - Institutional Class
- Vanguard Inflation - Protected Securities Fund - Institutional Class
- Vanguard Total Bond Market Index Fund - Institutional Class
- Fidelity Puritan® Fund - Class K
- T. Rowe Price Mid-Cap Value Fund
- American Beacon Small Cap Value Fund - Institutional Class
- Spartan® 500 Index Fund - Institutional Class
- Vanguard Target Retirement Funds Investor Shares (12)
- Spartan® Extended Market Index Fund - Fidelity Advantage Class
- Fidelity Contrafund K Fund
- Goldman Sachs Growth Opportunities Fund - Institutional Class
- Baron Growth Fund - Institutional Class
- MFS Institutional International Equity Fund
- Spartan® International Index Fund - Institutional Class
- American Funds New Perspective Fund
- Unum Group Unitized Stock Fund

COMPANY MATCH SCHEDULE

<table>
<thead>
<tr>
<th>Employee Contribution</th>
<th>Company Match</th>
</tr>
</thead>
<tbody>
<tr>
<td>1%</td>
<td>1%</td>
</tr>
<tr>
<td>2%</td>
<td>2%</td>
</tr>
<tr>
<td>3%</td>
<td>3%</td>
</tr>
<tr>
<td>4%</td>
<td>4%</td>
</tr>
<tr>
<td>5%</td>
<td>5% (no added match beyond this level)</td>
</tr>
<tr>
<td>6%</td>
<td>5%</td>
</tr>
<tr>
<td>50%</td>
<td></td>
</tr>
</tbody>
</table>
The following scenario shows the **tax advantages** of choosing to save with a 401(k) Plan. It also shows the added value of a company match.

Jane is single and has annual earnings of $52,500 per year ($50,000 base salary and $2,500 PBI). She takes the standard deduction and one exemption on her tax return. She elects to save 5% of her earning—or $2,625. This means she is eligible to receive the full employer match.

Here’s how Jane benefits from saving through Unum’s 401(k) Plan:

1) **Pre-tax savings advantage:** By saving money through the 401(k) Plan, Jane saves $650 per year on taxes.

<table>
<thead>
<tr>
<th>Source</th>
<th>Pre-tax saving</th>
<th>After-tax saving</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual earnings</td>
<td>$52,500</td>
<td>$52,500</td>
</tr>
<tr>
<td>Pre-tax deferral to 401(k)</td>
<td>– $2,625</td>
<td>NONE</td>
</tr>
<tr>
<td>Taxable salary</td>
<td>$49,875</td>
<td>$52,500</td>
</tr>
<tr>
<td>Estimated federal income tax*</td>
<td>– $8,499</td>
<td>– $9,149</td>
</tr>
<tr>
<td>Take-home covered salary</td>
<td>$41,376</td>
<td>$43,351</td>
</tr>
<tr>
<td>After-tax savings</td>
<td>NONE</td>
<td>– $2,625</td>
</tr>
<tr>
<td>Net earnings</td>
<td>$41,376</td>
<td>$40,726</td>
</tr>
</tbody>
</table>

— Jane saves an extra $650

2) **Employer match:** Saving on taxes is not the only way Jane’s money grows. **Here’s how matching contributions boost Jane’s retirement savings:**

<table>
<thead>
<tr>
<th>Source</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual earnings</td>
<td>$52,500</td>
</tr>
<tr>
<td>Annual 401(k) deferral (5% of Jane’s earnings)</td>
<td>$2,625</td>
</tr>
<tr>
<td>5% Employer match</td>
<td>$2,625</td>
</tr>
<tr>
<td>401(k) Savings total</td>
<td>$ 5,250</td>
</tr>
</tbody>
</table>

As you can see, by saving through Unum’s 401(k) Plan, instead of a regular after-tax savings account, Jane’s combined tax savings ($650) and Company match ($2,625) are worth an extra $3,275 per year.

*Based on 2012 tax rates. This is only an example. Your particular situation may be different.
Workplace financial planning 

& education

With the recent market fluctuations, employees everywhere—regardless of age, income, and marital status—are faced with a number of financial issues and uncertainties about their future. They need to plan for near-term events as well as retirement down the road. Balancing these issues and plotting out a financial course is time-consuming for most employees, and overwhelming for some. To help you better manage these issues, the Company sponsors a financial education program.

The objective of the program is financial preparedness for life events, which can range from reducing debt to living independently for the first time, to saving for a college education, to being divorced or widowed, to retiring. The program is provided through Ameriprise Financial Services.

The financial education program with Ameriprise is an annual, comprehensive curriculum that covers fundamental areas of financial education, such as income taxation, saving for life’s “rainy days,” retirement preparation and education planning—all critical to helping you understand and manage to financial events that occur during your lifetime. It provides the information, tools and resources that enable you to identify your personal financial goals and build a plan to achieve these goals. In short, the program helps you manage the economy that matters most: yours.

The program uses a 3-step approach towards financial preparedness: education, personalized financial planning, and taking action.

EDUCATION

WORKSHOPS

The program is comprised primarily of onsite workshops offered every other month, with varying topics each time. Workshops are scheduled at our main campuses. Employees located in a field office may request the same seminars by contacting Ameriprise directly at 1 888 942 9813.

Each “financial fitness” workshop is developed with one of three focuses in mind:

• Retirement
• Family Security
• Tax and Investing

Watch Connections and Inside for information about the workshops throughout the year.

PERSONALIZED FINANCIAL PLANNING

COMPLIMENTARY INITIAL CONSULTATION

The program includes one free, no-obligation initial consultation with an Ameriprise financial advisor. You may call 800 437 3500 to request a consultation, or go online at ameriprise.com/unum.

VALUE CERTIFICATE

Should you decide that financial planning can help you reach your goals, you have a $100 value certificate toward an Ameriprise Financial Advisory Service, which consists of written advice for a fee, based on your financial needs and goals.

TAKING ACTION

ONLINE FINANCIAL PLANNING TOOLS

Ameriprise hosts a Web site created especially for Unum to help employees learn more about financial topics and reach planning tools. The address is ameriprise.com/unum.

FINANCIAL SERVICES CENTER

Licensed Ameriprise Financial Advisors can help you determine if you are on track toward reaching your investment goals. Call 800 437 3500 for a retirement check-in.
## Contacts and information

When you have questions about your benefits in 2014 or need to make a change (such as adding a dependent to medical coverage), please contact:

**Benefit Service Center** • [https://unumeebenefits.ehr.com](https://unumeebenefits.ehr.com) • **800 678 2436**

To contact individual carriers and companies with specific questions, please refer to the following chart.

### Benefit contacts

<table>
<thead>
<tr>
<th>Carrier/Company</th>
<th>Benefit</th>
<th>Member Services</th>
<th>Web Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ameritas</td>
<td>Dental</td>
<td>800 487 5553</td>
<td><a href="https://www.group.ameritas.com/unum">www.group.ameritas.com/unum</a></td>
</tr>
<tr>
<td>Assist America</td>
<td>Emergency travel help</td>
<td>800 872 1414 (in the U. S.)</td>
<td><a href="https://www.assistamerica.com">www.assistamerica.com</a></td>
</tr>
<tr>
<td></td>
<td></td>
<td>609 986 1234 (outside the U. S.)</td>
<td></td>
</tr>
<tr>
<td>Caremark</td>
<td>Rx drug</td>
<td>888 790 4252</td>
<td><a href="https://www.caremark.com">www.caremark.com</a></td>
</tr>
<tr>
<td>Ceridian Life-Balance</td>
<td>Work-life balance</td>
<td>800 854 1446</td>
<td><a href="https://www.lifebalance.net">www.lifebalance.net</a> (enter lifebalance twice to log in)</td>
</tr>
<tr>
<td>Edcor</td>
<td>Tuition</td>
<td>800 374 5972</td>
<td><a href="https://unum.tap.edcor.com">https://unum.tap.edcor.com</a></td>
</tr>
<tr>
<td>Fidelity</td>
<td>401(k)</td>
<td>877 220 4015</td>
<td><a href="https://www.401k.com">www.401k.com</a></td>
</tr>
<tr>
<td></td>
<td>Stock plans</td>
<td>877 220 4015</td>
<td><a href="https://www.netbenefits.fidelity.com">www.netbenefits.fidelity.com</a></td>
</tr>
<tr>
<td>Financial Engines®</td>
<td>401(k)/DC investment advice</td>
<td>888 624 9055</td>
<td><a href="https://www.401k.com">www.401k.com</a></td>
</tr>
<tr>
<td>Towers Watson (Benefit Service Center)</td>
<td>Health benefits</td>
<td>800 678 2436</td>
<td><a href="https://unumeebenefits.ehr.com/">https://unumeebenefits.ehr.com/</a></td>
</tr>
<tr>
<td>UnitedHealthcare</td>
<td>Medical</td>
<td>855 868 6663</td>
<td><a href="https://www.myuhc.com">www.myuhc.com</a></td>
</tr>
<tr>
<td></td>
<td>Nurse Line</td>
<td>877 440 9219</td>
<td></td>
</tr>
<tr>
<td></td>
<td>STD, LTD, stay at work/ return to work, workplace injuries, work station eval, FMLA</td>
<td>866 390 1737</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Voluntary benefits</td>
<td>866 390 1737</td>
<td>option 2</td>
</tr>
<tr>
<td>VSP Vision Care</td>
<td>Vision</td>
<td>800 877 7195</td>
<td><a href="https://www.vsp.com">www.vsp.com</a> or <a href="https://www.group.ameritas.com/unum">www.group.ameritas.com/unum</a></td>
</tr>
<tr>
<td>WageWorks</td>
<td>Reimbursement accounts</td>
<td>877 924 3967</td>
<td><a href="https://www.wageworks.com">www.wageworks.com</a></td>
</tr>
</tbody>
</table>
Glossary & calendar

**Base salary**
Annualized salary or hourly wage, not including incentives such as bonuses.

**COBRA**
Federal law provision that allows employees and their families the option of extending their coverage.

**Exempt**
Exempt employees are paid salary on an annualized basis and are not eligible for overtime.

**Status change**
The Internal Revenue Service defines circumstances that permit you to make changes in benefit enrollment choices at any point in the year.

**Pension Plan**
Employer-funded pension program that provides a level of monthly income to eligible retirees based on a combination of age, years of service and salary.

**401(k) Plan**
Employee-funded retirement program that includes an employer-funded match to encourage employee participation.

**Holidays**
Holidays are separate from PTO days. Unum’s holiday schedule for 2014 includes 8 fixed days off for holidays and 3 days off as floating holidays. The calendar below indicates the 8 fixed holidays.

**Other time off**
In addition, time off for jury duty, bereavement, military duty, work-related injury or sickness (and paid holidays noted above) will be covered under separate policies and is not considered part of the PTO program.

---

### 2014 Calendar with paydays and holidays noted

![Calendar](calendar_image.png)

- **Payday**
- **Holiday**
Notes