

StanleyBlack&Decker

2025 Benefits Guide

**Welcome to Stanley
Black & Decker Benefits!**

Look inside for helpful
information to choose
your benefits.

BENEFITS MADE FOR YOU



Benefits Made for You

Welcome to Stanley Black & Decker (SBD). Cultivating an environment where each and every one of us can thrive starts with our physical and mental well-being. We offer quality, affordable options that enhance your experience and allow you to bring your best self to work.

As you begin at Stanley Black & Decker, there are some benefits you will want to enroll in right away—medical, dental, vision, tax-free health care accounts, life insurance and other coverage. Use this guide to help you choose the coverage that is right for you and your family. This guide will also tell you about the many benefits you have at SBD to support you and your well-being.

We hope you find this resource helpful as you make your benefit selections. We remain committed to supporting your personal and professional success. We are excited to have you as part of our team.

Deborah K. Wintner
SVP, CHIEF HUMAN RESOURCES OFFICER



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Who Is Eligible

You are eligible for SBD-offered health and group benefits if you are a U.S. employee regularly scheduled to work at least 20 hours per week.¹

If you are a temporary employee or intern paid by SBD payroll working at least 30 hours per week, you are eligible for medical, prescription drug, the Employee Assistance Program (EAP), Torchlight Caregiving Solutions, and Care for Business Work/Life Services after the 90-day waiting period is satisfied.

You may also cover your:

- Legal spouse
- Same- or opposite-sex domestic partner²
- Children (including children of a domestic partner) under age 26
- Children who are mentally or physically unable to work as a result of a condition that began prior to age 26

Parents and grandchildren are not eligible dependents. Grandchildren are only covered if you are their legal guardian (court papers required).

¹ Part-time employees working less than 20 hours per week as well as agency workers, casual, irregular and independent contractors are not eligible.

² The value of the domestic partner coverage is added to your taxable earnings as imputed income and will reduce your take-home pay. For more information, including the tax implications per the IRS, refer to the Domestic Partner Policy guide at sdbenefitscenter.com.

Coverage categories:

When you make your elections for medical, dental and vision coverage, you will choose a coverage category based on the dependents you plan to cover.

- Employee Only
- Employee + Spouse/Domestic Partner
- Employee + Child or Children
- Employee + Family (Spouse/Domestic Partner and Child or Children)

Dependent Verification

Dependent verification is required for any dependents you add to your coverage. Once you add your dependents, they will have a verification status of “pending.” Submit supporting documentation during the enrollment process or within 31 days of enrolling. Dependent information will not be sent to the carriers until the proper documentation is submitted to the SBD Benefits Center and approved.

Dependent Eligibility Audit

For SBD to continue to offer comprehensive and affordable benefit options, we need to ensure we are only covering SBD employees and dependents who meet all the eligibility requirements. To do this, we may conduct a random audit of covered dependents during the 2025 plan year to ensure they meet plan eligibility requirements.

A random selection of employees will be required to provide documents to verify their dependents upon request from the SBD Benefits Center. Employees who have been audited or have completed ongoing dependent verification in the last 36 months will be excluded.

Important!

You must enroll within 31 days of your hire date to ensure you have the coverage that you and your family need.

When Benefits Begin

When your benefits begin depends on these factors:

If you are a regular full-time employee or part-time employee working 20 or more hours per week, your benefits coverage begins the first day of the month following your date of hire. If you are hired on the first of the month, your benefits begin the first day of the following month (for example, if you are hired on June 1, your benefits begin on July 1).

If your company is acquired by Stanley Black & Decker, you are eligible for Stanley Black & Decker benefits as of the benefits effective date designated by Stanley Black & Decker.

If you are a temporary employee or an intern and are working 30 hours or more a week, you are eligible after a 90-day waiting period. Your benefits will be effective on the 91st day following your date of hire.



Contact Information

If you have benefits questions or need to enroll or make changes, we have answers. See some key contact information below and turn to the back of this guide for more contact information.

SBD Benefits Center

This is your first point of contact if you wish to enroll in SBD benefit coverage or need to make benefit changes due to a qualified life event. Find comprehensive benefits information and well-being resource guides online.

☎ **1-800-795-3899**

🌐 **sbdbenefitscenter.com**

Cigna Healthcare

For medical, dental and vision coverage and Health Savings Accounts with HSA Bank

1-800-243-3280

myCigna.com

SupportLinc

Employee Assistance Program

1-888-508-1170

sbdsupportlinc.com

Group code: sbd

Securian Financial

Life Insurance and AD&D

Medical Underwriting:

1-800-872-2214

Claims:

1-888-658-0193

Supplemental Health Insurance Benefits

Questions & Claims:

1-855-750-1906

Benefit resources:

securian.com/sbd-insurance

WEX

Flexible Spending Accounts & Commuter Benefits

Enrollment Assistance:

1-844-561-1337

Participant Services:

1-866-451-3399

wexhealthinc.my.site.com/

wexbenefitscontactus.com

MetLife

Disability and leave management

1-866-270-4994

mybenefits.metlife.com

Your Medical Options

Depending on where you live, you have up to four Cigna medical options to choose from.¹

For a list of in-network health care professionals and facilities, visit cigna.com and click on “Find a Doctor.” If you continue as a guest, you will need to select a network for your medical coverage option. Review the chart and your preferred plan for the associated network.

Need help choosing which medical option is right for you?

Check out the scenarios on [page 15](#) to see some examples.

| | Basic HSA | Plus HSA |
|--|---|---|
| Network | Open Access Plus, OA Plus, Choice Fund OA Plus | Open Access Plus, OA Plus, Choice Fund OA Plus |
| Out-of-Network | Out-of-network coverage for any reason | Out-of-network coverage for any reason |
| Health Savings Account (HSA) Money from SBD and your contributions (if elected) | From SBD: Individual: \$250 Family: \$500 | From SBD: Individual: \$500 Family: \$1,000 |
| Payroll Contributions See pages 28–29 for contributions | \$\$ | \$\$\$ |
| Calendar-Year Deductible² The amount you pay before SBD begins paying for most health care services | \$\$\$\$\$ | \$\$\$ |
| Out-of-Pocket Maximum | \$\$\$\$\$ | \$\$\$ |

¹ If you live in California in a Kaiser-eligible coverage area, you are eligible for the Kaiser medical option in addition to the Cigna medical options. If you live in Hawaii, you are eligible for the HMSA PPO medical option only. For additional details on the Kaiser Traditional HMO or HMSA medical options, visit the SBD Benefits Center at sbdbenefitscenter.com.

² The medical and pharmacy deductibles are combined for the HSA options. There is no pharmacy deductible for the OAP options.

| | OAP | LocalPlus OAP |
|--|--|--|
| | Open Access Plus, OA Plus, Choice Fund OA Plus | LocalPlus |
| | Out-of-network coverage for any reason | No out-of-network coverage except for emergencies ³ |
| | N/A | N/A |
| | \$\$\$\$\$ | \$\$ |
| | \$ | \$ |
| | \$ | \$ |

³ Emergency services are covered at the in-network cost-sharing level as required by applicable state or federal law if services are received from a non-participating (out-of-network) provider. Ambulance services used as non-emergency transportation (e.g., transportation from hospital back home) generally are not covered.



Medical Coverage

Here is what **you** pay when you get care.

Learn More About Your Medical Coverage Options

View the Cigna Medical Options Guide at sdbenefitscenter.com for more on your medical coverage options and how you and the plan share in costs for services.

¹ The Plan will pay the percentage shown for covered services that do not exceed the Plan's maximum reimbursable charge. When using an out-of-network provider, you may be responsible for the charges exceeding the maximum reimbursable charge, even if you have met your annual deductible and/or out-of-pocket maximum. These charges are not accumulated toward your deductible or out-of-pocket maximum. Out-of-pocket limits do not apply to penalties for failure to obtain pre-authorization for services, certain drug coupon amounts, premiums, balance-billing charges and health care this Plan does not cover.

² In the OAP and LocalPlus OAP options, the deductible applies to each covered individual up to the family deductible. Copays do not count toward the deductible, but do count toward the out-of-pocket maximum.

³ In the Basic HSA and Plus HSA options, once an individual with family coverage meets the individual out-of-pocket maximum of \$8,150, the Plan will pay 100% of all covered expenses for that person, even if the family maximum has not been met. Once the family out-of-pocket maximum is reached, the Plan will pay 100% of all covered expenses for every covered individual—regardless of whether each family member has reached the individual maximum.

| | Basic HSA | | Plus HSA | | OAP | | LocalPlus OAP |
|--|--|-----------------------------|---|-----------------------------|----------------------------|-----------------------------|--------------------------------------|
| | In-Network | Out-of-Network ¹ | In-Network | Out-of-Network ¹ | In-Network | Out-of-Network ¹ | In-Network Only |
| Annual Deductible² | | | | | | | |
| Individual | \$2,500 | \$5,000 | \$1,750 | \$3,500 | \$700 | \$1,400 | \$700 |
| Family | \$5,000 | \$10,000 | \$3,500 | \$7,000 | \$1,400 | \$2,800 | \$1,400 |
| Out-of-Pocket Maximum | | | | | | | |
| Individual | \$5,500 | \$11,000 | \$4,500 | \$7,000 | \$3,500 | \$7,000 | \$3,500 |
| Family | \$11,000 or \$8,150 for any one individual under the family coverage ³ | \$22,000 | \$9,000 or \$8,150 for any one individual under the family coverage ³ | \$14,000 | \$7,000 | \$14,000 | \$7,000 |
| SBD HSA Contribution | | | | | | | |
| Individual | \$250 | | \$500 | | N/A | | N/A |
| Family | \$500 | | \$1,000 | | N/A | | N/A |
| Routine Preventive Care (including preventive X-ray and/or lab services) | | | | | | | |
| | \$0 no deductible | | \$0 no deductible | | \$0 no deductible | | \$0 no deductible |
| Primary Care Office Visit (including mental health/substance abuse visits and physical therapy) | | | | | | | |
| | 30% after deductible | 50% after deductible | 20% after deductible | 50% after deductible | \$25 copay ⁴ | 50% after deductible | \$25 copay ⁴ |
| Specialist Office Visit (including OB/GYN) | | | | | | | |
| | 30% after deductible | 50% after deductible | 20% after deductible | 50% after deductible | \$50 copay ⁴ | 50% after deductible | \$50 copay ⁴ |
| Emergency Room (you will pay 50% of any out-of-network expenses incurred for non-emergency use) | | | | | | | |
| | 30% after deductible | 30% after deductible | 20% after deductible | 20% after deductible | 20% after deductible | 20% after deductible | 20% ⁷ after deductible |

| Basic HSA | | Plus HSA | | OAP | | LocalPlus OAP |
|------------|-----------------------------|------------|-----------------------------|------------|-----------------------------|-----------------|
| In-Network | Out-of-Network ¹ | In-Network | Out-of-Network ¹ | In-Network | Out-of-Network ¹ | In-Network Only |



LocalPlus OAP

Confirm your eligibility for this option with the SBD Benefits Center.

The LocalPlus OAP offers the same benefits as the regular OAP option, but the LocalPlus OAP is an in-network-only option with a narrow network of providers. You must seek care in-network in order for services to be covered. You will pay full price for any care outside of the LocalPlus network.

Before enrolling, check if your doctors, hospital and other providers are in the narrow LocalPlus network, or consider switching to providers that are part of the LocalPlus network.

⁴ There is no charge after the copay if only X-ray and/or lab services are performed and billed.

⁵ Cigna will process all claims with a primary mental health/substance use diagnosis under the MH/SU cost share, regardless of the place of service.

⁶ Includes testing and fitting of hearing aid devices at physician office cost share; in-network benefit only. For hearing aids, Amplifon is the preferred in-network vendor and must be used for hearing aids to be covered as in-network benefit. Customers/providers may contact Amplifon directly for assistance to locate a hearing aid professional by calling **1-877-806-7062** or online at amplifonusa.com/cigna.

⁷ Emergency services are covered at the in-network cost-sharing level as required by applicable state or federal law if services are received from a non-participating (out-of-network) provider. Ambulance services used as non-emergency transportation (e.g., transportation from hospital back home) generally are not covered.

Urgent Care

| | | | | | | |
|----------------------|----------------------|----------------------|----------------------|------------|------------|------------|
| 30% after deductible | 30% after deductible | 20% after deductible | 20% after deductible | \$50 copay | \$50 copay | \$50 copay |
|----------------------|----------------------|----------------------|----------------------|------------|------------|------------|

Hospital Services

| | | | | | | |
|----------------------|----------------------|----------------------|----------------------|--|----------------------|--|
| 30% after deductible | 50% after deductible | 20% after deductible | 50% after deductible | \$200 per admission copay, then 20% after deductible | 50% after deductible | \$200 per admission copay, then 20% after deductible |
|----------------------|----------------------|----------------------|----------------------|--|----------------------|--|

Cigna Virtual Care Through MDLive

| | | | | | | | |
|--|-----------------------|-----|-----------------------|-----|-------------------------|-----|-------------------------|
| Preventive Care | \$0 before deductible | N/A | \$0 before deductible | N/A | \$0 | N/A | \$0 |
| Primary Care, Urgent Care, Behavioral Care, Mental Health and Substance Abuse ⁵ | \$0 after deductible | N/A | \$0 after deductible | N/A | \$0 | N/A | \$0 |
| Dermatology | 30% after deductible | N/A | 20% after deductible | N/A | \$50 copay ⁴ | N/A | \$50 copay ⁴ |

Mental Health and Substance Abuse⁵

| | | | | | | | |
|------------|-----|-----|-----|-----|---|-----|---|
| Inpatient | 30% | 50% | 20% | 50% | 20% after \$200 copay, 20% independent facility | 50% | 20% after \$200 copay, 20% independent facility |
| Outpatient | 30% | 50% | 20% | 50% | \$25 doctor's office, 20% independent facility | 50% | \$25 doctor's office, 20% independent facility |

Hearing Aid Equipment/Devices⁶ (in-network only; up to \$3,000 maximum every 3 years)

| | | | | | | |
|---------------|-----|---------------|-----|---------------|-----|---------------|
| Up to \$3,000 | N/A | Up to \$3,000 | N/A | Up to \$3,000 | N/A | Up to \$3,000 |
|---------------|-----|---------------|-----|---------------|-----|---------------|

Looking to Save on Health Care in 2025?

Here are some tips.



Stay in the network.

Be sure to always use in-network doctors, hospitals and facilities in order to keep your costs lower. You will pay less if you stay in the network.



Save on prescriptions.

There are a few ways you can save money on your prescription drugs.

- **Prescription Drug Price Quote Tool** estimates your medication costs and lets you review lower-cost options. Available at myCigna.com.
- **Rx Savings Solutions** is ready to assist you with savings opportunities. Enroll in your account at myrxss.com or call **1-800-268-4476**, Monday through Friday, 7 a.m.–8 p.m. CT.
- **Insulin Cost Cap Patient Assurance Program** makes certain diabetes medications more affordable by capping your out-of-pocket costs. Contact Cigna at **1-800-243-3280** to learn more and verify which medications are eligible.
- **SaveOnSP** is a specialty medication program for those in the OAP/LocalPlus OAP options only, helping to lower out-of-pocket costs on select specialty medications to \$0 (requires first specialty fill via mail order with Accredo, a Cigna-owned company).
- **Pathwell Specialty** helps make specialty medications more affordable and easier to manage, so you can focus on your health.

Head to cigna.com/pathwellspecialty to see a list of in-network providers in your area for infused and injected medications, or connect with a Specialty Care Manager, who has a strong understanding of your condition, the specialty medication(s) you are receiving and your insurance benefits, at **1-877-505-3681**, Monday–Friday, 7 a.m.–6 p.m. CT.



Get your preventive care.

Any eligible in-network preventive wellness checkups and screenings are 100% covered by Cigna, which means you do not pay anything for these services. Note that not all preventive care services are eligible. For example, immunizations for travel are generally not covered. Visit [myCigna.com](https://mycigna.com) to see what preventive care services are covered.



Save money with a tax-free health care account.

No matter which medical option you choose, you will have at least one tax-free health care account that you can contribute to. They are a great way to save on taxes for health care expenses you expect to have throughout the year.

How it works:

1. You choose to contribute money.
2. The money comes out of your paycheck before taxes.
3. You can use the money for eligible medical, dental, vision, or prescription expenses like doctor visit copays, lab work, eyeglasses, etc.

See more about the accounts on [page 16](#). If you have childcare expenses, consider enrolling in a Dependent Day Care Flexible Spending Account to save on dependent day care.



Prepare for the unexpected with Supplemental Health Insurance Benefits.

Supplemental Health Insurance Benefits offer extra financial support in some of those unexpected and challenging moments. Consider Accident Insurance, Critical Illness Insurance and Hospital Indemnity Insurance. You can choose any of these benefits even if you do not enroll in an SBD medical option. Learn more about Supplemental Health Insurance Benefits online and what is covered at securian.com/sbd-insurance.

Make the Most of Your Cigna Benefits

When you enroll in a Cigna medical option, you have access to easy-to-use tools and programs.

myCigna and the myCigna app. Get instant access to cost estimator tools, personalized provider searches and wellness resources.

24/7 One Guide live customer service.

Whether you have benefits questions or you need help finding in-network care, call **1-800-243-3280**—anytime, anywhere.

Virtual Care from MDLIVE. Save money and time with 24/7 care accessible from anywhere. MDLIVE preventive care services will continue to be covered at 100% pre-deductible under all Cigna Healthcare medical options. Medical urgent care, primary care and behavioral health care, including therapy and psychiatrist visits, will be covered at 100% (after deductible for the HSA coverage options). Dermatological services are subject to coinsurance and will be covered at cost-share. Call **1-888-726-3171**, visit [myCigna.com](https://mycigna.com) or use the myCigna app to get started. And check out virtual dental care through the Teledentists. You can view any out-of-pocket costs for virtual dental care by logging in to [myCigna.com](https://mycigna.com).

Health Coaching. Ready to start meeting your health goals? Work 1:1 with a Cigna Healthcare health coach. Call **1-800-243-3280** to talk to a coach.

Healthy Pregnancies, Healthy Babies. Get support to stay healthy before and during your pregnancy and in the weeks following your baby's birth. Call **1-800-615-2906**. You can even earn a \$200–\$400 incentive if you enroll before the third trimester.¹

My Medical Ally, powered by Alight. Count on My Medical Ally for expert health care guidance to find in-network providers, reliable medical

information and personalized support from a team of doctors, nurses and researchers. Visit mymedicalally.alight.com (company code: **sbd**) or call **1-888-361-3944**.

Surgery Decision Support Program Requirement

Under Stanley Black & Decker's medical plan, if your doctor recommends any lower back, hip, knee, hysterectomy, or weight loss surgery, you must enroll in the Surgery Decision Support (SDS) program at least 30 days before your surgery date to avoid a \$400 penalty. By participating in the SDS program, you avoid the penalty and are eligible to receive a \$400 prepaid card¹. This rule applies to you, your covered spouse/domestic partner, and any covered dependent child 18 or older. The SDS program does not apply to emergency surgeries, and other rules may apply.

Cigna Pathwell Bone & JointSM. Connect with a dedicated Care Advocate for support in understanding your health plan benefits and finding the right resources and care for your muscle or joint pain. If surgery is recommended, our program, in partnership with My Medical Ally, offers zero- or low-cost surgery benefits, as well as pre- and post-surgery support and a travel benefit. For more information, visit cignapathwellboneandjoint.com.

Vida Health. A personalized virtual program with a focus on weight loss and management of diabetes, high blood pressure and more. To sign up for health coaching, go to vida.com/sbd or call **1-833-732-2242**.

¹ Incentive rewards may be considered taxable income. Please contact your tax advisor for details.

For the Expected ... and the Unexpected

Life is full of little—and big—surprises. Sometimes that is good. And sometimes it is not so good. Either way, Stanley Black & Decker has benefits that can help.

Supplemental Health Insurance Benefits for a Little Extra Support

Supplemental Health Insurance Benefits offer extra support in some of those unexpected and challenging moments. Accident Insurance, Critical Illness Insurance and Hospital Indemnity Insurance provide additional coverage that provides a cash payment directly to you. You can use the money any way you wish for any non-medical or medical expenses you have such as a mortgage payment, groceries, payment toward your medical deductible and more.

Visit the Securian Financial education microsite to learn more about your Supplemental Health Insurance Benefits and what is covered. You can also access Benefit Scout®—an online benefits-decision tool—to help you determine the coverage that meets your needs and budget. Go to securian.com/sbd-insurance or call 1-855-750-1906.

Accident Insurance

Accidents happen, but you may not realize how much they can cost. Accident Insurance can help cover extra expenses incurred. Accident Insurance provides a cash payment to you regardless of income or other insurance coverage for injuries and treatment because of a covered accident.

Critical Illness Insurance

Critical illnesses can be expensive. While you cannot prevent a critical illness in your family, you can help protect your finances with additional coverage. It is difficult to anticipate the extra expenses a serious illness may bring, but after a diagnosis of a covered critical illness, Critical Illness Insurance provides a cash payment to you. You have the option to elect coverage of \$10,000 or \$20,000. The benefit for a spouse or child is 50% of the employee benefit.

Hospital Indemnity Insurance

Hospitalization can happen unexpectedly. All the extra expenses can add up fast. Hospital Indemnity Insurance provides a cash payment for expenses related to a hospital stay, admission and a routine childbirth stay. It is a cost-effective way to help with the expenses above and beyond what your health insurance plan already covers, giving you the flexibility to spend the money on anything you wish, such as medical bills, loss of income, travel expenses or a dog sitter.

Ask Yourself This

before choosing your medical option.



How do you prefer to pay for care?

More from my paycheck and less at the time of care. The OAP or LocalPlus OAP options could be good choices for you. These have higher paycheck contributions, but you pay set copays when you need care. Keep in mind the LocalPlus OAP option is only available in certain ZIP codes and is an in-network-only plan with no coverage out of network. You must use doctors, hospitals and other providers/facilities in the narrow LocalPlus network if you choose the LocalPlus OAP option.

Less from my paycheck and more out-of-pocket costs if I need care. The Basic HSA or Plus HSA could be good choices for you. With these options, you pay less in paycheck contributions, but your deductible and coinsurance—what you pay when you get care—are higher.

How much health care do you expect to use next year?

Only preventive care. You only need to consider the paycheck contributions for each option, as preventive care is covered at 100% under all the plans. Keep in mind that any diagnostic care, prescription drugs or non-preventive care will be subject to the plan deductible and coinsurance resulting in out-of-pocket costs to you. The Basic HSA and LocalPlus OAP have the lowest paycheck contributions.

A lot of care¹ or high-cost prescription drug needs. You may want to consider the deductible and out-of-pocket maximum for each option in addition to your paycheck contributions when you compare the options. The OAP and LocalPlus OAP have lower out-of-pocket maximums.

Do you have several thousand dollars on hand if you have a large medical expense?

Yes. The Basic HSA or Plus HSA could save you money in the long term, but these options have higher deductibles, which means if you do need care, you may be faced with a large out-of-pocket bill payable all at once in order to first meet your deductible.

No. If you do not have the money on hand to pay a large deductible in the event of a large medical expense or an emergency, then the Basic HSA and Plus HSA may not be good options for you.

¹ Such as an upcoming birth or surgery or if you have a chronic condition such as diabetes or hypertension.

Your Prescription Drug Coverage

All of the SBD Cigna medical options come with prescription drug coverage.



View the 2025 Prescription Drug List at sbdbenefitscenter.com.

Dispense as Written Policy

The pharmacy will dispense your medication exactly as your doctor has indicated on the prescription order. If your doctor requests a brand-name medication on your prescription, you will only have to pay the applicable copay. If a brand-name medication is not specified by your doctor and you request a brand-name when a generic equivalent is available, you must pay the difference between the cost of the generic and brand-name medication, plus the brand copay.

Here is what you pay when you fill a prescription.

How you pay for prescriptions differs across the options.

- In the **Basic HSA and Plus HSA** options, you pay the full cost of your prescriptions until your medical plan deductible is met.¹ Then, you pay the copays and coinsurance for your prescription drugs.
- In the **OAP and LocalPlus OAP** options, you will immediately pay the copays and coinsurance for your prescription drugs. These options do not have a pharmacy deductible.

Retail (30-day supply)

| | |
|--------------------------|-------------------------------------|
| Generic | \$12 copay |
| Preferred Brand Name | 25% (\$35 min, \$95 max) |
| Non-Preferred Brand Name | 35% (\$55 min, \$115 max) |

Retail 90 Program and Express Scripts Pharmacy, Cigna's Home Delivery Pharmacy (90-day supply)²

| | |
|--------------------------|--------------------------------------|
| Generic | \$24 copay |
| Preferred Brand Name | 20% (\$70 min, \$190 max) |
| Non-Preferred Brand Name | 30% (\$110 min, \$230 max) |

¹ The deductible is waived for specified Preventive Medications in the Cigna Preventive Plus Medication Program. See the 2025 Prescription Drug List on myCigna.com.

² If you have medications that you take regularly, you will only be allowed three 30-day refills at a retail pharmacy before having to switch to a 90-day fill.

Which Option Is Right for You?

Medical coverage needs can change from year to year, so it is important to consider the care you and your family may need in the year ahead.

Before you enroll in coverage, consider any changes in your health care needs. A few example scenarios are provided here that may help you find a good medical coverage fit.



Need Help Choosing?

Are you having a hard time choosing the right medical option? Watch the video to see how Jordan, the Clarks, the Patel family and Marcella thought about their decision—and how you might think about your decision.

Find more details about the options and cost assumptions for each scenario in the 2025 Cigna Medical Plan Options Guide and supplement at sdbenefitscenter.com.

Jordan

Single, young and healthy.

Age: Early 30s

Lifestyle: Not married and does not have children

Medical status: He is pretty healthy and feels optimistic about the future.

BEST FIT

He goes for a preventive care checkup once a year but generally does not visit the doctor much. If you do not need a lot of care, the **Basic HSA** could be a good, low-cost choice.

The Clarks

A growing family.

Age: Early 30s

Lifestyle: Young couple expecting their first child

Medical status: They expect to meet their annual deductible this year with pregnancy- and birth-related expenses. They receive all medical care in-network.

BEST FIT

If you are expecting a lot of medical care, the **OAP** or **LocalPlus OAP**¹ might be a good choice. Remember, with the LocalPlus OAP, you must be eligible for the option and you must use doctors and providers in the LocalPlus network for services to be covered.

The Patel Family

Married with young children.

Age: Kelly, 48; Emily, 44; Devin, 6; and Bettina, 12

Lifestyle: Busy, active and very healthy

Medical status: The Patels do not have any major health conditions or expect any surgeries during the year. They receive all medical care in-network.

BEST FIT

If you do not need a lot of care, the **Basic HSA** could be a good, low-cost choice.

Marcella

Single woman with diabetes.

Age: 52

Lifestyle: Eats right, exercises and gets support from Vida Health (chronic condition management program for employees and covered dependents enrolled in Cigna medical coverage)

Medical status: She is concerned about large medical and pharmacy expenses, or needing to pay a lot out of pocket all at once.

BEST FIT

If you are managing a chronic condition, the **OAP** or **LocalPlus OAP**¹ might be a good choice. Remember, with the LocalPlus OAP, you must stay in the network to be covered.

¹ Residing in a LocalPlus OAP-eligible home ZIP code

Save With a Tax-Free Health Care Account

Depending on which medical option you choose, consider contributing to a tax-free health care account to help you save.

Have Dependents? You Could Save!

You can contribute pre-tax to a Dependent Day Care FSA to help you pay for dependent day care so you and your spouse/domestic partner can work, look for work or attend school full time. Eligible dependents include children under age 13 or dependents of any age who are physically or mentally incapable of caring for themselves. You can elect to contribute between \$250 and \$5,000, or \$2,500 if you and your spouse file separate tax returns, on a pre-tax basis. Find out more on sbdbenefitscenter.com.

What to Do if You Enroll in the Basic HSA or Plus HSA Medical Option

- Complete the HSA attestation during the enrollment process in order to have access to your HSA funds.
- Designate a beneficiary for your spending account through HSA Bank. Log in to your **myCigna.com** account to connect to the HSA Bank Customer website to designate a beneficiary once you are enrolled.

If you want to contribute pre-tax money to an HSA, make sure you:

1. Are enrolled in or will enroll in a high deductible health plan, like Stanley Black & Decker's Basic HSA option or Plus HSA option.
2. Are not enrolled in a separate health plan that is not a high deductible health plan, such as a spouse's HMO or PPO.
3. Are not enrolled in any part of Medicare, even Part A or TRICARE.
4. Are not enrolled in Medicaid.
5. Are not enrolled in a general use Health Care Flexible Spending Account in the same plan year.
6. Cannot be claimed as a dependent on someone else's 2025 tax return. If you receive a letter from HSA Bank after you enroll asking you to verify your address or other personal information, you must respond within 90 days. Failure to respond will prohibit access to your account.

¹ Even if you do not contribute to your HSA, if you elect an HSA medical option, an HSA account will be automatically set up with HSA Bank and a debit card will be mailed to your home address. If you receive a letter from HSA Bank after you enroll asking you to verify your address or personal data, you must respond within 90 days to complete the verification process. If you do not respond, you will not have access to the funds in your account and you will forfeit the Stanley Black & Decker contribution for the Plan year.

² You are responsible for monitoring your HSA contributions so as not to exceed the annual maximums.

³ HSA Invest makes it easier to invest your Health Savings Account (HSA) funds. There are three investment options, including a managed option in which a professional advisor will manage your investments for you.

Here is how the accounts compare.

| | Health Care Flexible Spending Account (FSA) <small>The deadline for 2025 FSA claim submission is March 31, 2026, and \$640 may be carried over from 2025 into 2026.</small> | Limited Purpose Flexible Spending Account (FSA) <small>The deadline for 2025 FSA claim submission is March 31, 2026, and \$640 may be carried over from 2025 into 2026.</small> | Health Savings Account (HSA)¹ |
|---|---|---|--|
| Which medical option does it go with? | OAP, LocalPlus OAP, Kaiser, HMSA, waived medical coverage | Basic HSA, Plus HSA | Basic HSA, Plus HSA |
| What can I use it for? | Eligible medical, prescription, dental and vision expenses | Eligible dental and vision expenses (before or after you reach your plan deductible) Medical expenses (after you meet your plan deductible) | Eligible medical, prescription, dental and vision expenses |
| Who can contribute? | You | You | Money from SBD and you (if elected) SBD contributes: <ul style="list-style-type: none"> Basic HSA: \$250 Employee \$500 Employee + 1 or more Plus HSA: \$500 Employee \$1,000 Employee + 1 or more |
| How much can I contribute in 2025? | Minimum: \$250 Maximum: \$3,200 A debit card will be issued from WEX. | Minimum: \$250 Maximum: \$3,200 A debit card will be issued from WEX. | Minimum: \$250 Maximum you and SBD can contribute combined: ² <ul style="list-style-type: none"> \$4,300 if you cover just yourself \$8,550 if you cover your family Additional \$1,000 if you are 55 or older A debit card will be issued from HSA Bank. |
| Can I change my contributions during the year? | No Unless you have a qualified life event | No Unless you have a qualified life event | Yes |
| Does it carry over from year to year? | Only \$640 can be carried over from 2025 to 2026. | Only \$640 can be carried over from 2025 to 2026. | Yes , the account and the full amount in it belong to you. |
| What happens if I leave Stanley Black & Decker? | You cannot take your FSA funds with you. | You cannot take your FSA funds with you. | The HSA belongs to you, even if you leave SBD. |
| Can I invest the funds? | No | No | Once your HSA balance reaches \$1,000 , you can begin to invest those funds. ³ Any investment earnings are also tax-free. |

Dental

You have up to three dental options, depending on your home ZIP code.

The options differ in how you pay for care and which providers you can see.



Here is how the options work.

1

Cigna Dental Basic PPO

You are free to go to any dentist but will receive enhanced benefits with in-network providers. With the Basic PPO, you will pay less in paycheck contributions but more when you receive care.

2

Cigna Dental Plus PPO

With the Plus PPO, you will pay more in paycheck contributions and less when you receive care. The Plus PPO also covers orthodontia, which is not covered under the Basic PPO.

3

Cigna Dental HMO (in-network only)

Eligibility depends on your home ZIP code. This option only covers services within the Cigna Dental Care Access Plus network, so you must use DHMO providers and facilities for dental coverage. After you enroll, a general dentist will be assigned to you, and you must see this dentist to receive covered services. You can change your general dentist anytime, with changes made by the 15th of the month taking effect the next month.

The DHMO option has no annual deductible or maximum limits and has lower paycheck contributions compared to the dental PPO options. It also has fixed charges for services, making your out-of-pocket costs more predictable.



Visit cigna.com and go to “Find a Doctor” to search for an in-network dentist or to check if your dentist is in-network. If you continue as a guest, for the Basic PPO and Plus PPO, choose the Cigna DPPO Advantage network, and for the DHMO, choose the Cigna Dental Care Access Plus network. When you enroll on the SBD Benefits Center enrollment site, you will see which options are available to you based upon your home ZIP code.

Here is what you pay when you get care.

| | Cigna Dental Basic PPO ¹ | | Cigna Dental Plus PPO ¹ | | Cigna DHMO |
|--|-------------------------------------|-------------------------|---|-------------------------|---|
| | In-Network | Out-of-Network | In-Network | Out-of-Network | In-Network Only |
| Network | Cigna DPPO Advantage | | Cigna DPPO Advantage | | Cigna Dental Care Access Plus |
| Annual Deductible ² | | | | | |
| Individual | \$100 | \$200 | \$50 | \$100 | None |
| Family | \$200 | \$400 | \$100 | \$200 | None |
| Class I: Preventive/Diagnostic ³ (exams, cleaning, etc.) | \$0 no deductible | | \$0 no deductible | | \$0 You incur no charge for routine cleaning, X-rays, oral exams and topical fluoride. |
| Class II: Basic Restorative (fillings, root canals, etc.) | 20% after deductible | 30% after deductible | 10% after deductible | 20% after deductible | Set costs for services based on a Patient Charge Schedule (PCS), which is a list of fees for each covered service. Learn more on the SBD Benefits Center website. |
| Class III: Major Restorative (crowns, dentures, bridges, implants) | 50% after deductible | 60% after deductible | 40% after deductible | 50% after deductible | |
| Class V: TMJ | 50% after deductible | 60% after deductible | 40% after deductible | 50% after deductible | |
| Class IV: Orthodontia (children and adults) | Not covered | | 40% after deductible | 50% after deductible | |
| Calendar-Year Maximum | \$1,000 ⁴ | | Up to \$2,500 lifetime maximum (combined in- and out-of-network) | | None |

¹ You must use a DPPO Advantage dentist for in-network coverage.

² In- and out-of-network deductibles and maximums cross-accumulate.

³ Oral Health Integration Program (OHIP) is available to all Cigna Dental customers under any SBD dental plan (you do not have to have medical coverage with Cigna). Cardiovascular disease, diabetes and maternity, head and neck cancer radiation, cerebrovascular disease (stroke), chronic kidney disease, and organ transplants are the qualifying conditions that make a member eligible for OHIP benefits. OHIP provides 100% reimbursement for coinsurance/copays for additional dental procedures that help to promote optimal

oral health for patients with the identified medical conditions. A customer with a qualifying condition is auto-enrolled in the OHIP program. A customer may also choose to register if not auto-enrolled. The registration form is found on [myCigna.com](https://mycigna.com) or by calling Cigna at 1-800-243-3280.

⁴ If you receive preventive dental care in a Plan year, your annual dental maximum will increase by \$50 in the following year (up to a maximum of \$150 after three years). This is known as a progressive calendar-year maximum.

Vision

You can enroll in our vision coverage through Cigna.



You will pay less when you use providers in the Cigna Vision Network serviced by EyeMed. See eyedoclocator.eyemedvisioncare.com/cigna/en to find participating providers.

¹ Coverage may vary at participating discount retail and membership club optical locations, please contact Customer Service for specific coverage information.

² Out-of-network reimbursement will be the lesser of the listed amount or the actual cost from the out-of-network provider. In certain states, you may be required to pay the full retail rate and not the negotiated discount rate with certain participating providers. Please see the Cigna Vision Network serviced by EyeMed (eyedoclocator.eyemedvisioncare.com/cigna/en) to determine which participating providers have agreed to the discounted rate.

³ Safety eyewear coverage will not supersede any local site support for prescription safety glasses; employees should work with local HR for prescription safety glasses needs first.

⁴ Coverage for therapeutic contact lenses will be provided when visual acuity cannot be corrected to 20/70 in the better eye with eyeglasses and the fitting of the contact lenses would obtain this level of visual acuity; and in certain cases of anisometropia, keratoconus, or aphakia; as determined and documented by your vision eye care professional.

Here is what you pay when you get care.

| | In-Network ¹ | Out-of-Network ² |
|--|--|-----------------------------|
| Eye Exam (one per calendar year) | \$0 | Charges above \$50 |
| Lenses (one pair per calendar year) | | |
| Single Vision | \$25 copay | Up to \$45 allowance |
| Lined Bifocal | \$25 copay | Up to \$65 allowance |
| Lined Trifocal | \$25 copay | Up to \$85 allowance |
| Lenticular | \$25 copay | Up to \$65 allowance |
| Lens Enhancements/Options | | |
| Polycarbonate | \$0 (for children under 19) Up to \$40 copay max out-of-pocket cost (ages 19 and up) | N/A |
| Standard and Premium Progressives | \$25 copay | Up to \$65 allowance |
| Standard Anti-reflective | \$45 | N/A |
| Additional Enhancements | 20% off retail | N/A |
| Contact Lenses Allowances (one pair or single purchase per calendar year) | | |
| Elective | Charges above \$200 | Charges above \$105 |
| Therapeutic ⁴ | \$0 | Charges above \$200 |
| Frames (one pair per calendar year) | | |
| | Charges above \$200; you will get a 20% discount on amounts above \$200 | Charges above \$65 |
| Safety Eyewear³ (one pair per calendar year) | Charges over \$45 retail for safety frames permanently designated with a Z87-2 monogram and the manufacturer's trademark \$0 for prescription lenses (single vision, bifocal or trifocal, glass, plastic or polycarbonate materials with side shields) that meet ANSI standards for basic and/or high-performance tests | |

Help from SBD

No matter what is happening in your life

Life has ups and downs, and SBD offers you free support.

SupportLinc Employee Assistance Program (EAP) provides expert guidance for emotional, work/life, and everyday challenges. You and your household members can reach out to licensed clinicians 24/7/365 through calls, texts, live chat or email. Access digital content like virtual group support sessions and on-demand trainings. Additionally, each household member can receive up to six free mental health support sessions with a licensed clinician per issue, per year. For assistance, call **1-888-508-1170** or online at sbdsupportlinc.com, group code: sbd.

Care for Business offers a comprehensive suite of services designed to make your life easier, whether you are managing a major life event or dealing with daily tasks. Access 24/7 personalized assistance through an online request or by phone along with informative tips, tools and events, plus major discounts on products and services nationwide.

Take advantage of your **Care membership** offering unlimited access to an online network of background-checked caregivers for your family, pets, home and personal needs. SBD covers your membership costs so you can more easily find and book short- and long-term care based upon your needs and preferences. Whether you need a sitter while you are at work, housekeeping help, tutoring assistance or pet care, simply post a job, connect with local caregivers and book care online.

Torchlight, by LifeSpeak Inc., offers a digital platform and 1:1 advisory services for comprehensive support to help you manage caregiving and family needs. Receive personalized guidance and access resources and tools to help you navigate the complexities of caregiving, parenting and managing work/life balance.



To view the resources guides and more information on all of the support programs listed here, visit sdbbenefitscenter.com.

Pelago is a 24/7 digital program that offers personalized substance use care to help you: reduce your drinking or fully give up alcohol; cut back on or quit smoking, vaping, or smokeless tobacco use; re-evaluate your cannabis use habits; and overcome opioid dependence. Call **1-877-349-7755** or online at pelago.health/sbd.

Through Pelago's mobile app, you will have easy access to a dedicated coach or counselor, progress tracking tools, an on-demand resource library and much more.

WW (Weight Watchers) is here to help you achieve your weight-loss goals and improve your overall health. As an SBD employee, you can join WW at a discounted rate (50% off the cost of your program of choice). Learn more at sbd.ww.com or call **1-866-204-2885**. The employer ID is 12157, and your unique ID is your employee ID (shown on your MySBD profile or on your paycheck statement). Spouses or domestic partners can register using their name and the employee ID, with "SWK" added at the end.

Resource guides:

- **Financial Well-being Guide** offers tactical resources to help boost your financial resiliency and help you get or stay financially fit.
- **Parental Leave Guide** provides all the SBD resources you will need for your pregnancy and Parental Leave.
- **LGBTQ+ Guide** offers additional resources and benefits to support your sense of belonging.
- **Cancer Guide** offers care navigation, detailed benefits information and financial support resources for those facing a cancer diagnosis.

Income Protection

There are a few other benefit programs that you need to enroll in to have coverage.

Think about your lifestyle and income needs for you and your dependents as you consider these benefits.

Life Insurance and AD&D

Life and Accidental Death & Dismemberment (AD&D) coverage protects your income in the event of your death or illness or injury that prevents you from working. Your loved ones will have added financial security for medical bills, funeral costs and more.

You automatically receive Basic Life and AD&D coverage at no cost to you.¹ However, you will be taxed on the value of coverage over \$50,000 as imputed income. You can choose to buy additional coverage—Supplemental Life and AD&D coverage—for yourself and eligible family members for an additional paycheck cost.

If Evidence of Insurability (EOI) for life insurance is required, you will be notified during the enrollment process.

| | |
|--|---|
| Basic Life Insurance Basic AD&D Insurance (You automatically receive this coverage.) | 1.5x annual base pay, ² up to \$1 million |
| Supplemental Employee Life and AD&D | An amount that you elect in \$50,000 increments—up to the lesser of 8x your annual base pay or \$1.5 million |
| Supplemental Spouse/Domestic Partner Life and AD&D | \$25,000–\$250,000 in \$25,000 increments—up to 100% of Employee Supplemental Life coverage |
| Supplemental Child Life and AD&D | \$15,000 coverage |

Need Help Choosing Life Insurance?

Benefit Scout™, Securian Financial's benefits-decision support tool, can help you choose life insurance with confidence. By answering a few simple questions about your family and finances, you can determine the coverage that meets your needs and budget. Go to securian.com/sbd-insurance.

Name Your Beneficiaries

Protect your loved ones by naming beneficiaries for your Life and AD&D Insurance.

To name or update your beneficiary information, head to the SBD Benefits Center enrollment site or call **1-800-795-3899**.

You must designate beneficiaries for your Basic Life and AD&D Insurance, even if you do not enroll in any benefits. If you elect Supplemental Life or AD&D, you will need to designate beneficiaries for these as well. Assign each benefit to a beneficiary. If there are multiple beneficiaries, you will need to allocate a percentage to each.

¹ If your Collective Bargaining Agreement (CBA) states a flat dollar amount of Basic Life and AD&D insurance, the CBA governs. Also, certain employees covered by a CBA are not eligible for Supplemental Life and AD&D insurance or Basic or Buy-Up LTD.

² The benefit is based on your annual base salary as of October 1 of the previous year. If you are not actively at work on January 1 of the current Plan year, any change in life insurance coverage due to a salary increase will not take effect until you return to work in the Plan year. For new hires, or newly eligible employees, base pay is your salary at time of hire rounded up to the nearest \$1,000. For enrollment thereafter, it is recalculated for the new Plan year using base pay as of October 1 of the prior year.

Disability Insurance

Disability benefits protect your income if you are unable to work due to non-work-related illness or injury. You receive some coverage automatically, at no cost to you, and have the choice to buy additional Long-Term Disability coverage.

Short-Term Disability (STD). STD lasts for up to 180 days. Benefits vary based on whether you are an hourly or salaried employee. For more information, visit the SBD Benefits Center at sbdbenefitscenter.com.

Basic Long-Term Disability (LTD). Basic LTD replaces 40% of your income, up to \$15,000 per month. SBD pays for this coverage.¹

Buy-Up LTD. Buy-Up LTD replaces an additional 27% of your income above Basic LTD, so you will have coverage for 67% of your income if you become disabled. You pay for coverage through paycheck contributions.

Pre-existing condition limitations may apply to both LTD options and coverage is subject to actively at work provisions. A pre-existing condition means a sickness or accidental injury for which you received medical treatment, consultation, care, or services; or took prescribed medication or had medications prescribed in the 12 months before your LTD coverage or increase in LTD coverage becomes effective. Please see the LTD certificate of insurance found on the SBD Benefits Center website for more details.

Go to sbdbenefitscenter.com for disability coverage cost details and more information.

³ Under current IRS rules, where disability benefits are paid for by both employer and employees, a portion of the benefit, equal to the portion of coverage cost paid for by the employer, or on a pre-tax basis, over the past three policy years, is taxable. This portion is determined by the employer.



Not Sure You Will Need Buy-Up LTD?

One way to think about it is how much coverage you would need if you became disabled and what the benefit would be with and without Buy-Up LTD.

For example, if your annual salary is \$45,000, your Basic Long-Term Disability benefit would be \$1,500 per month, and with Buy-Up LTD, your benefit would be \$2,512 per month.³ That is over \$1,000 more per month.

Your Financial Well-being

We know that your financial well-being is an important part of your overall well-being, and SBD can help.

LegalEASE

LegalEASE legal insurance provides support and protection for unexpected personal legal issues. Network attorney fees are paid in full for most covered matters. Access to a national network of over 20,000 attorneys who are matched to your specific legal needs, including: home buying, selling, foreclosure and tenant disputes; debt collection, contracts; traffic matters and license suspensions; divorce, adoption, name change; and estate planning and wills. **If you would like this benefit, you must enroll during your enrollment period.** For more information, visit legaleaseplan.com/sbd.

Employee Stock Purchase Plan (ESPP)

Eligible employees have the opportunity to purchase shares of the company's common stock at a minimum of a 15% discount, through payroll deduction, without brokerage fees or commissions.

ESPP has a defined enrollment period each year and an active election is required to participate. Changes after the close of the enrollment period are not permitted except to cancel. For more information, log on to MySBD at mysbd.stanleyblackanddecker.com > Benefits > Wealth, and scroll to the ESPP section or view contact information at the back of this guide.



Other Benefits to Support You

Enroll in or use these programs at any time to help boost your financial well-being.



Parking and Transit

Use pre-tax income to save on qualified mass-transit, vanpooling and parking expenses. You can contribute from \$1 to the IRS maximum. Visit the SBD Benefits Center enrollment site to enroll.



Makers' Marketplace

Select insurance coverage that fits your needs and pay for coverage through payroll deductions. Plus, access discounted products and services. Visit sbdinc.corestream.com to learn more about these benefits and enroll at any time.¹

- Auto, home, pet insurance (now covering exotic pets in certain states) and ID theft protection with negotiated group rates
- Life Insurance with Long Term Care provides greater security for your family.



SBD Online

SBD Online Employee Store is available to all U.S. employees and allows the convenience of ordering thousands of products across the SBD family of brands, all with FREE shipping within the U.S.!

Visit employeestore.stanleyblackanddecker.com.²



IonTuition

IonTuition is a financial wellness advisory service designed to help you manage the repayment of federal and private student loans. Plus, they are experts when it comes to college financial planning. Advisory services are available at no cost to you and your family members. Call **1-855-456-2656** or visit portal.iontuition.com/sbd.



Principal® Milestones

Principal® Milestones can help you prioritize your goals and make more informed decisions by giving you access to financial resources in one convenient place at no additional cost to you. Visit principal.com/milestones to get started.



SmartConnect

Free access to Medicare resources, guidance and enrollment services for our Medicare-eligible employees. Call **1-833-919-4411** (TTY: 711) or visit gps.smartconnectplan.com/sbd.

Find more information on financial wellness benefits by visiting MySBD at mysbd.stanleyblackanddecker.com and search for these programs and more:

- Financial Wellness Guide
- Children's Scholarship Program
- Educational & Tuition Assistance Program
- Helping Our Makers in Emergencies (HOME) Program
- MyGiving & Benevity

¹ Certain eligibility requirements and program restrictions apply for voluntary benefits. Shopping discounts vary and are subject to change without prior notice.

² Disclaimer: The purchase of tools on the Stanley Black & Decker Online Employee Store is strictly for the employee's personal use, which includes giving such tools as a gift. Stanley Black & Decker does not allow employees to purchase tools for resale to any other individual, group or organization. Violating this condition subjects the offending employee to discipline (up to and including termination of employment).

Benefits for Your Future

Retirement Account Plan

We want you to have the peace of mind now for your future. That is why we offer the Retirement Account Plan (401(k)) with choice and flexibility in how you save.



How It Works:

You Contribute

You can start contributing to the Retirement Account Plan on the first of the month following your date of hire. You can choose to contribute from 1% to 25%¹ of your eligible pay as a pre-tax, after-tax or Roth deferral, or a combination of these options as long as you do not exceed a total contribution of 25% of your pay per pay period.

If you do not make an election, you will automatically be enrolled in pre-tax deductions at a rate of 3%, which will begin approximately 45 days after eligibility. Contributions are deducted from your pay throughout the year, and can be started, stopped or changed at any time.

Catch-up Contributions: If you turn age 50 or older during the year, you can make additional “catch-up” contributions up to the applicable IRS annual catch-up limit. Catch-up contributions are not eligible for the SBD match.

SBD Contributes

SBD provides a 50% match on the first 7% of eligible pay you contribute per paycheck on a pre-tax or Roth basis.

You Invest

The Retirement Account Plan offers a range of investment fund options, including Stanley Black & Decker stock. Plan investment fund information will be mailed to you after your employment begins, or you may find information on principal.com. If you do not make an investment election, your contributions will be invested 100% in a target retirement fund based on your date of birth and anticipated age 65 retirement date.

¹ Special rules apply for Highly Compensated Employees as defined by the Plan.

Check Your Beneficiaries

Protect your loved ones by naming beneficiaries for the Retirement Account Plan.

Call **1-800-547-7754** or go to **principal.com**, then:

- Select the “Overview” tab from the top navigation menu
- Select Beneficiaries

Rollover Contributions

If you receive an eligible distribution from a prior employer’s retirement plan, you may “roll over” the distribution to your Retirement Account Plan.

To complete a rollover:

- Follow the instructions on **principal.com** or call the Principal Contact Center at **1-800-547-7754**.
- Use the Principal app for a paperless transaction.

Rollover contributions are not eligible for the SBD match.

Find Out More

For more information about the Retirement Account Plan, visit **principal.com** or call the Principal Contact Center at **1-800-547-7754**.

The first time you access your account online, you will use your name, date of birth and phone number or Social Security Number and ZIP code if you do not have a phone number in your name.



Contributions

You and SBD share the cost for your health care coverage, with the company paying most of the cost.¹



| ANNUAL BASE PAY ² | Basic HSA | | Plus HSA | | OAP | | LocalPlus OAP IN-NETWORK ONLY | |
|---|-----------|---------|----------|---------|----------|---------|----------------------------------|---------|
| | WEEKLY | MONTHLY | WEEKLY | MONTHLY | WEEKLY | MONTHLY | WEEKLY | MONTHLY |
| Medical — Employee Only | | | | | | | | |
| Less than \$60,000 | \$5.77 | \$25 | \$30.69 | \$133 | \$38.77 | \$168 | \$23.31 | \$101 |
| \$60,000–\$120,000 | \$8.77 | \$38 | \$33 | \$143 | \$41.77 | \$181 | \$24.92 | \$108 |
| More than \$120,000 | \$11.08 | \$48 | \$35.08 | \$152 | \$44.54 | \$193 | \$26.77 | \$116 |
| Medical — Employee + Spouse/DP³ | | | | | | | | |
| Less than \$60,000 | \$49.15 | \$213 | \$79.62 | \$345 | \$100.62 | \$436 | \$60.23 | \$261 |
| \$60,000–\$120,000 | \$57.46 | \$249 | \$86.31 | \$374 | \$108.23 | \$469 | \$64.85 | \$281 |
| More than \$120,000 | \$64.38 | \$279 | \$91.62 | \$397 | \$115.38 | \$500 | \$69.23 | \$300 |
| Medical — Employee + Child(ren) | | | | | | | | |
| Less than \$60,000 | \$32.08 | \$139 | \$51.92 | \$225 | \$65.77 | \$285 | \$39.69 | \$172 |
| \$60,000–\$120,000 | \$37.62 | \$163 | \$56.08 | \$243 | \$70.38 | \$305 | \$42.23 | \$183 |
| More than \$120,000 | \$42 | \$182 | \$59.54 | \$258 | \$75.23 | \$326 | \$45.23 | \$196 |

¹ Costs are for tobacco-free users. There is a \$50 additional required monthly contribution for tobacco/smoking use (applies if any covered family members are tobacco users). If you are paid weekly, your paycheck deductions will be based on your weekly pay frequency. The tobacco surcharge may be removed upon completion of participation requirements in Pelago's tobacco cessation program. If you are eligible for the Kaiser medical option, your rates are included with this guide. For HMSA rates, visit the SBD Benefits Center enrollment site.

² Your annual base pay as of October 1, 2024.

³ Coverage of domestic partners and their children will be subject to additional costs resulting from taxation of the company-paid benefit (e.g., imputed taxable income).

The amount you contribute depends on the coverage you choose, the number of people you cover and whether or not you are a tobacco user. For medical coverage, your contribution amount is also determined by your base pay.

You pay for medical, dental and vision with pre-tax money. That means the money used to pay for these benefits is deducted from your pay before Social Security, federal and, in most cases, state and local taxes are withheld.

Consider This

Medical coverage needs can change from year to year, so it is important to consider the care you and your family may need in the year ahead. Watch the video to see a few example scenarios that may help you find a good medical coverage fit.



| ANNUAL BASE PAY ³ | Basic HSA | | Plus HSA | | OAP | | LocalPlus OAP IN-NETWORK ONLY | |
|---------------------------------|-----------|---------|----------|---------|--------|---------|----------------------------------|---------|
| | WEEKLY | MONTHLY | WEEKLY | MONTHLY | WEEKLY | MONTHLY | WEEKLY | MONTHLY |

Medical — Employee + Family

| | | | | | | | | |
|---------------------|---------|-------|----------|-------|----------|-------|---------|-------|
| Less than \$60,000 | \$62.31 | \$270 | \$101.08 | \$438 | \$127.85 | \$554 | \$76.85 | \$333 |
| \$60,000–\$120,000 | \$72.92 | \$316 | \$108.92 | \$472 | \$137.08 | \$594 | \$82.38 | \$357 |
| More than \$120,000 | \$81.69 | \$354 | \$115.85 | \$502 | \$146.54 | \$635 | \$87.92 | \$381 |

DENTAL CONTRIBUTIONS

| | Employee Only | Employee + Spouse/DP ² | Employee + Child(ren) | Employee + Family |
|---------------------------------|---------------|-----------------------------------|-----------------------|-------------------|
| Cigna DHMO | | | | |
| Weekly | \$1.62 | \$3.46 | \$3.23 | \$6 |
| Monthly | \$7 | \$15 | \$14 | \$26 |
| Cigna Dental — PPO Basic | | | | |
| Weekly | \$2.77 | \$6.46 | \$5.54 | \$10.62 |
| Monthly | \$12 | \$28 | \$24 | \$46 |
| Cigna Dental — PPO Plus | | | | |
| Weekly | \$3.92 | \$9 | \$8.31 | \$15 |
| Monthly | \$17 | \$39 | \$36 | \$65 |

VISION CONTRIBUTIONS

| | Employee Only | Employee + Spouse/DP ² | Employee + Child(ren) | Employee + Family |
|--------------|---------------|-----------------------------------|-----------------------|-------------------|
| Cigna | | | | |
| Weekly | \$1.52 | \$2.88 | \$3.01 | \$4.43 |
| Monthly | \$6.59 | \$12.46 | \$13.06 | \$19.18 |

How to Enroll

Enroll within 31 days of your hire date to ensure you have the coverage that you and your family need.

Enroll Online

1. Visit the **SBD Benefits Center** at sbdbenefitscenter.com.
2. Click the **Login** button.
3. Complete the one-time registration process by clicking on **“Register.”** Enter your last name, date of birth (MMDDYYYY) and last four digits of Social Security number (SSN).
4. Create a new unique password.
5. Upon successful registration, click on **“Show Employee ID.”** Write your Employee ID down as you will need this number for future logins to the enrollment site.¹
6. Select **“Continue.”**
7. Set up your challenge questions and create a new unique password.
8. Accept the disclaimer statement and then review and complete your benefit elections.

Next time you visit the SBD Benefits Center, use your Employee ID and unique password to log in to the enrollment site. If you use MySBD, you can log in automatically with single sign-on (SSO) functionality.

Or Use MySBD:

1. Log in to **MySBD** (mysbd.stanleyblackanddecker.com).
2. Click on **My Benefits** from the quick actions bar on the homepage.
3. Through SSO, you will automatically be logged in to the enrollment site.
4. Accept the disclaimer statement and then proceed to review and complete your benefit elections.

Review and Complete Your Benefit Elections

1. **Start enrollment.**
Click **“Enroll”** in the banner on the homepage.
2. **Review Enroll message disclaimer.**
When you select **“Enroll,”** you will see a message that indicates that you must complete the event for your elections to take effect. Select **“Continue.”**
3. **Follow the steps.**
Complete all steps in the enrollment process.
4. **Review your benefits elections.**
If OK, then proceed by checking the box next to **“I agree to Terms and Conditions,”** and click **“Complete Enrollment.”**
5. **Review Enrollment Confirmed page.**
If you have not reached this step, your enrollment is not complete and your elections will not be applied.

Or Call the SBD Benefits Center

at **1-800-795-3899**, Monday–Friday, 8 am–8 pm ET.

Speak with an English- or native-Spanish-speaking representative in real time.

SBD Benefits Center

The SBD Benefits Center is your primary source of benefits information with embedded decision support tools for quicker access to personalized information and a comprehensive library of resources to support you in making the best benefit decisions for you and your family.



¹ You can obtain your Employee ID (EE ID or employee number) at any time one of these ways. Locate your EE ID on your Pay Statement or locate your employee ID, which is called employee number on your MySBD profile, by clicking on the persona icon in the upper right corner and selecting My Profile from the dropdown. Your employee number will be listed on your profile page.



You must choose these benefits during your enrollment period if you want them for 2025:

- Medical
- Supplemental Health Benefits (Accidental Injury, Critical Illness & Hospital Care)
- Dental
- Vision
- Legal Insurance
- Flexible Spending Accounts (Health Care, Limited Purpose Health Care and Dependent Day Care)
- Health Savings Account contributions. HSA contributions may also be added or changed at any time throughout the Plan year.

You cannot make any changes to your benefit elections until next year's Annual Enrollment unless you experience a qualified life event during the year, such as marriage, divorce or birth of a child. You have 31 days after the qualified life event to make changes to your coverage.

Special Initial Enrollment Opportunity: Supplemental Life and AD&D Insurance

During your enrollment period, you have a special opportunity to enroll for Guaranteed Issue Supplemental Life and AD&D Insurance for yourself, your spouse/domestic partner and your dependent children. (You must enroll in Supplemental Employee Life and AD&D in order to enroll your spouse/domestic partner.) That means you will only need to provide Evidence of Insurability (EOI) if you elect Supplemental Employee Life or AD&D Insurance over the lesser of 3x your base pay or \$1,000,000 or if you elect more than \$50,000 in Supplemental Spouse/Domestic Partner Life or AD&D insurance. After your initial enrollment period, any future increases to coverage will require EOI.

After You Enroll

If you enroll through the Stanley Black & Decker Benefits Center by midnight ET on Wednesday, your eligibility data will be sent to the carriers on Friday. Carriers typically take 24–48 hours to update their systems with your enrollment data.

ID Cards

Cigna is no longer providing physical ID cards in the mail. Following enrollment and once coverage is effective, set up your account on **MyCigna.com** or on the myCigna app. Electronic ID cards are accessible online for medical, dental and vision. Call to request physical medical ID cards if needed. When you visit a health care provider, please show either your physical or digital ID card.

Get Confirmation

You will receive a confirmation statement/acknowledgment of your enrollment elections either in the mail or via email based on your notification preferences. Generally, as a new hire, you will receive a paper confirmation statement. Following the initial confirmation statement, future communications from the SBD Benefits Center will be sent by email to salaried employees and home-mailed to hourly employees. Email notifications will direct you to the Confirmation Center to retrieve an important benefits document.

Carefully review your benefits confirmation statement and your paycheck contributions to ensure proper benefits and contributions are reflected. If any information is not accurate, call the SBD Benefits Center at **1-800-795-3899**. You have 10 business days to review your confirmation statement and request any changes.

What Happens if You Do Not Enroll?

If you do not enroll, you will not have benefits coverage (beyond core benefits) in place for the plan year. You will not have an opportunity to change or enroll in coverage until next year's Annual Enrollment, unless you have a qualified life event and report it to the SBD Benefits Center within 31 days of the event.

More Benefits

Time Off

Whether you are welcoming a new addition to your family or just need some time to relax, you can take time off. Stanley Black & Decker recognizes 12 paid holidays, and eligible employees earn paid time off monthly.

While You Are Traveling

Global Guardian provides 24/7 comprehensive travel, security and medical resources when you are traveling abroad on company business to help keep you safe.



New Parent Benefits

Special Maternity Benefit

We know how important it is to be able to care for yourself and your child post-delivery. SBD offers a special maternity benefit in coordination with our Short-Term Disability plans, which provides new mothers with 100% of their pay for eight weeks, regardless of the delivery method. This benefit is available to all salaried and hourly non-union employees.

Paid Parental Leave

Paid Parental Leave gives you time to bond with your newborn or adopted child, without worrying about loss of pay or benefits. If you have accumulated one year of continuous service and you qualify, you have up to six months from the date of the birth or adoption to take up to four weeks of continuous leave. For eligible birthing mothers, the four weeks of Paid Parental Leave is in addition to the eight weeks provided through the special maternity benefit noted above. Learn more at the SBD Benefits Center.

Adoption Assistance and Foster Parent Allowance

If you legally adopt a child, adoption assistance provides reimbursement of up to \$5,000 to help offset agency charges, legal fees and transportation expenses associated with the adoption process. You are eligible for this taxable benefit if you are an active, non-bargaining employee and have completed 31 days of continuous service at participating locations. You will receive the reimbursement after the adoption is final. Foster parents who legally adopt their foster child can receive a benefit as well. For more information about Stanley Black & Decker's adoption benefit or foster parent allowance, visit **MySBD** or look for more information at the SBD Benefits Center.

Our Commitment to Impact & Inclusion

We believe a thriving inclusive workplace is vital to our success.

Our company's purpose guides us to serve those who make the world, and that includes both our employees and our end users who use our tools to make a living.

We seek to cultivate and promote an inclusive workplace environment where our employees feel connected and effectively equipped to contribute to our business goals and priorities.

We continue to support a well-rounded employee population with a variety of skills and life experiences as a part of our aspiration to attract, develop and retain the workforce of the future.



Our Integrity Helpline

If you have a concern about a possible violation of our Code of Business Ethics or global policies, it is your responsibility to report it. Voicing your concerns does more than address a single issue, it often leads to positive organizational changes and a better work environment.

The Integrity Helpline can be used to report any work issue including discrimination, harassment, health & safety issues, conflicts of interest, fraud, bribes, inappropriate gifts, or any behavior that does not align with our values or that may be against the law. It is confidential and you may remain anonymous if you choose.

Call the 24/7 U.S. Helpline at
1-844-787-0313

Or report online at
integrity.sbdinc.com



Contacts

SBD Benefits Center¹

1-800-795-3899 M–F, 8-8 ET

Log in to MySBD

(mysbd.stanleyblackanddecker.com)
and select My Benefits from
the quick actions bar

SBD Benefits Center:
sbdbenefitscenter.com

Care for Business

Work/life services and perks

1-866-814-1638

MySBD, select Care from the
Pinned Apps for an integrated
single sign-on experience

Cigna

*Medical, Health Savings
Account (HSA), prescription,
dental, vision, behavioral health
and health coaching*

1-800-243-3280

myCigna.com

Home Delivery Pharmacy:
1-800-835-3784

Virtual Care through MDLIVE:
1-888-726-3171

Access MDLIVE on myCigna.com
and click on Talk to a doctor

Cigna Healthy Pregnancies, Healthy Babies

1-800-615-2906

Computershare, powered by EquatePlus

Employee Stock Purchase Plan

1-866-228-9623

www.na.equateplus.com

Global Guardian

1-703-566-9463

globalguardian.com

HMSA

Medical/Rx for Hawaii residents

1-800-776-4672 (press 5)

hmsa.com

IonTuition

*Student loan repayment
management tools*

1-855-456-2656

portal.iontuition.com/sbd

Kaiser

*Medical/Rx for California residents
in a Kaiser-eligible ZIP code*

Main:

1-800-464-4000

Enrollment Services:

1-800-324-9208

Away from Home:

1-951-268-3900

kp.org/thrive

LegalEASE

Legal insurance

1-800-248-9000

Reference Stanley Black & Decker
when calling

legaleaseplan.com/sbd

Makers' Marketplace, powered by Corestream

*Voluntary benefits and
discount shopping*

1-860-770-6639

sbdinc.corestream.com

Maven (through 6/30/2025)

Fertility and family building

mavenclinic.com/join/sbd or
download the Maven Clinic app

MetLife

Disability and leave management

1-866-270-4994

mybenefits.metlife.com

My Medical Ally, powered by Alight

*Your medical ally and Surgery
Decision Support*

1-888-361-3944

mymedicalally.alight.com

Code: SBD

Principal

Retirement Account Plan (401(k))

1-800-547-7754

M–F, 8am–10pm ET

principal.com

Pelago

*Smoking cessation and substance
abuse support*

1-877-349-7755

pelago.health/sbd

Rx Savings Solution

1-800-268-4476

TTY 1-800-877-8973

1-800-917-5572 (español)

myrxss.com

Securian Financial

Life Insurance and AD&D

Medical Underwriting:

1-800-872-2214

Claims:

1-888-658-0193

*Supplemental Health
Insurance Benefits*

Questions & Claims:

1-855-750-1906

Benefit resources:

securian.com/sbd-insurance

SmartConnect

*For actively working
Medicare-eligible employees*

1-833-919-4411

gps.smartconnectplan.com/sbd

SupportLinc

(Employee Assistance Program)

1-888-508-1170

sbdsupportlinc.com

Group code: sbd

The Work Number

*Employee proof of employment or
income assistance for mortgages/
loans proof of employment*

1-800-367-5690

Proof of Employment & Income:

1-800-367-2884

theworknumber.com

Employer Code: 10761

Torchlight, by LifeSpeak Inc.

Parenting and caregiving solution

sbd.torchlight.care

Vida Health

*Chronic condition management
and coaching*

1-833-732-2242

vida.com/sbd

WEX

*Flexible Spending
Accounts & Commuter Benefits*

Enrollment Assistance:

1-844-561-1337

Participant Services:

1-866-451-3399

Submit a form:

[wexhealthinc.my.site.com/
wexbenefitscontactus/s](https://wexhealthinc.my.site.com/wexbenefitscontactus/s)

WW (Weight Watchers)

1-866-204-2885

sbd.ww.com

Company ID: 12157

Passcode: WW12157



Annual Legal Notices

Stanley Black & Decker is required to provide you with annual legal notices concerning your rights under your health and group plans. For copies of these notices, please visit sdbbenefitscenter.com and search for Legal Notices.

Voluntary Self-Identification of Disability Form

Stanley Black & Decker does business with the government and is required to provide equal opportunity to qualified people with disabilities. To help us measure how well we are doing, we are asking you to tell us if you have a disability or if you ever had a disability. Completing a form online is voluntary, but we hope that you will choose to fill it out. Your answer will not be used against you in any way. To access the form, search using keyword “disability self-identification” in MySBD. Select the Workday link in the knowledge article to connect to the form.

Fixed Indemnity Plan Notice

REQUIRED LEGAL NOTICE FOR ACCIDENTAL INJURY, CRITICAL ILLNESS AND HOSPITAL INDEMNITY INSURANCE

IMPORTANT: This is a fixed indemnity policy, NOT health insurance

This fixed indemnity policy may pay you a limited dollar amount if you are sick or hospitalized. You are still responsible for paying the cost of your care.

- The payment you get is not based on the size of your medical bill.
- There might be a limit on how much this policy will pay each year.
- This policy is not a substitute for comprehensive health insurance.
- Since this policy is not health insurance, it does not have to include most federal consumer protections that apply to health insurance.

Looking for comprehensive health insurance?

- Visit [HealthCare.gov](https://www.healthcare.gov) or call **1-800-318-2596** (TTY: 1-855-889-4325) to find health coverage options.
- To find out if you can get health insurance through your job, or a family member's job, contact the employer.¹

Questions about this policy?

For questions or complaints about this policy, contact your state Department of Insurance. Find their number on the National Association of Insurance Commissioners' website ([naic.org](https://www.naic.org)) under “Insurance Departments.”

If you have this policy through your job, or a family member's job, contact the employer.

Please note: This guide provides general benefit Plan and enrollment information only. For specific details, conditions and exclusions, please refer to the Summary Plan Documents (SPDs), which are available on sdbbenefitscenter.com. If there is a discrepancy between this Guide and the SPDs, the SPDs will govern. The SPDs are available on sdbbenefitscenter.com. This guide serves as a summary of material modifications (SMM) and/or a Summary of Material Reductions (SMR) and provides general benefit plan and enrollment information only. Summaries of Benefits and Coverage (SBCs) are also available on the SBD Benefits Center. Note that if you opt out of coverage through Stanley Black & Decker and are not covered elsewhere, you may be subject to the Affordable Care Act (ACA) penalty when filing your taxes. Additionally, receipt of this Guide

does not guarantee employment or benefits eligibility with Stanley Black & Decker. The company expects to continue these plans but reserves the right to terminate, suspend, withdraw, amend or modify the plans at any time, with or without notice. The medical, prescription and dental information in this Guide does not apply to expatriates and eligible third country nationals who are eligible for the Cigna International Medical and Dental option. If you are covered by a Collective Bargaining Agreement (CBA), your CBA outlines your benefits eligibility and coverage provisions.

¹ Please note that you are eligible for health insurance coverage through Stanley Black & Decker, Inc. and can enroll in coverage as part of this enrollment process