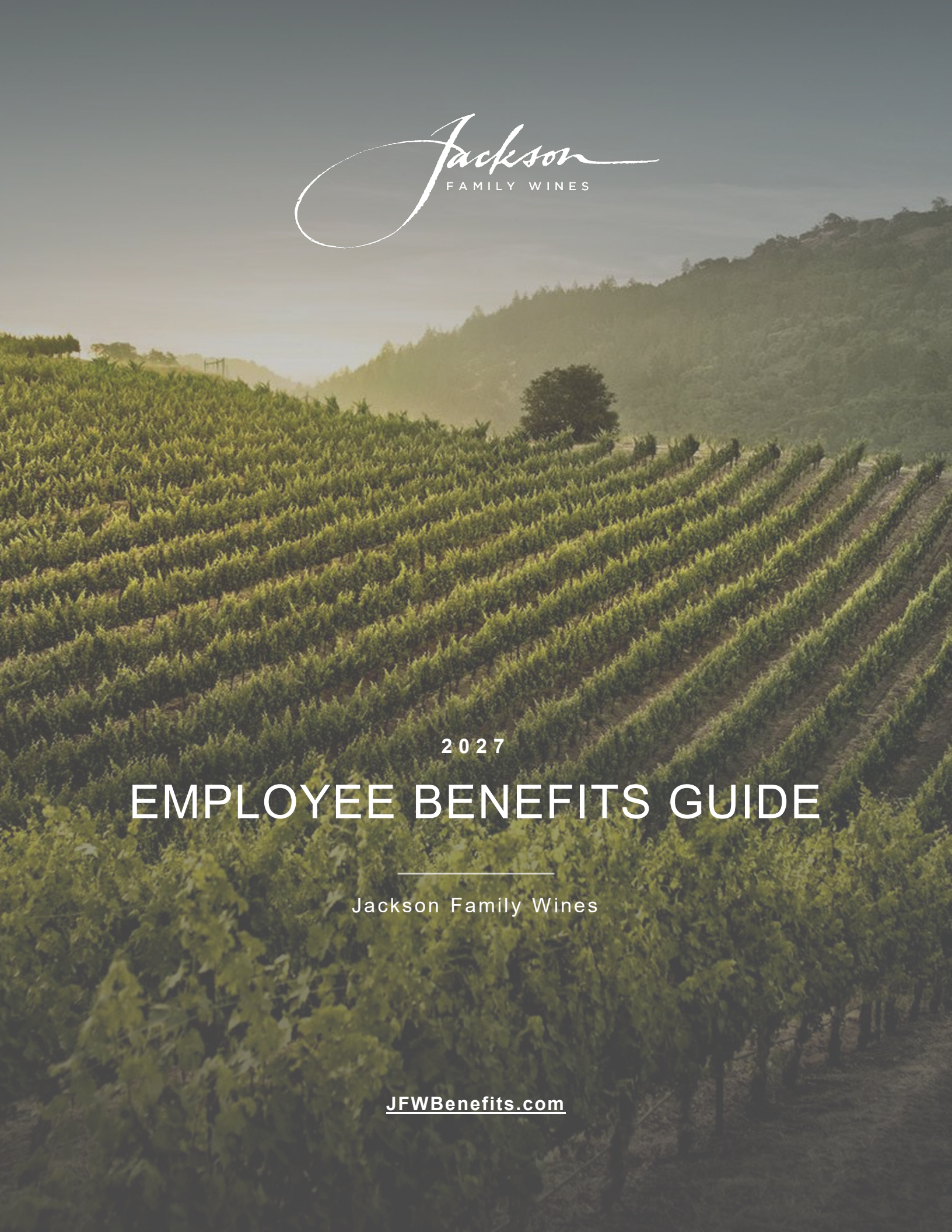


2027

EMPLOYEE BENEFITS GUIDE

Jackson Family Wines

JFWBenefits.com

WELCOME TO YOUR 2027 BENEFITS

Your Jackson Family Wines benefits support your health, financial wellbeing, family and life outside work. Use this guide to compare your options, understand how your benefits work and find help when you need it.

BENEFITS AT A GLANCE

Select a benefit or page number in the digital guide to jump to that section.

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BENEFIT SUPPORT & CONTACTS

NOT SURE WHERE TO START?

Call Benefit Support. Benefit Advocates can help with questions about your coverage, claims, bills and finding a provider.

(888) 907-1391

Benefit Advocates • (925) 945-3070
JFWBenefits.com • jfwbenefits@alliant.com

CARRIERS & PROGRAMS

Medical — CDHP
Anthem Blue Cross • Policy L00834
(866) 207-9878 • Anthem.com/ca

Medical — PPO
Anthem Blue Cross • Policy L00834
(800) 888-8288 • Anthem.com/ca

Medical — HMO
Anthem Blue Cross • Policy L00834
(833) 913-2236 • Anthem.com/ca

Medical — CA
Kaiser Permanente • (800) 464-4000
Policies 38765/229286 • KP.org

Medical — OR
Kaiser Permanente • (800) 813-2000
Policy 19769 • KP.org

Dental
Delta Dental • Policy 01633
(800) 765-6003 • DeltaDentalIns.com

Vision
VSP • Policy 12146160
(800) 877-7195 • VSP.com

HSA
HealthEquity • (866) 735-8195
HealthEquity.com

FSA
WEX • Policy 16125
(866) 451-3399 • WEXinc.com

Life & Disability
New York Life • (800) 362-4462
MyNYLGBS.com

MiSalud Health
MiSalud app • Invitation code: **JFW2027**
MiSaludHealth.com

EAP (New York Life)
(800) 344-9752 • Web ID: NYLGBS
GuidanceResources.com

401(k) • Plan 095683
Vanguard • (800) 523-1188
OwnYourFuture.Vanguard.com

Business Travel
The Hartford • Policy ETB-112402
(800) 243-6108 • TheHartford.com

Pet Benefits
Pets Best • (888) 984-8700
PetsBest.com

HR Direct
HR Direct • hrdirect@jfwmail.com
Kristy Van Lare • (707) 525-6213

ELIGIBILITY

EMPLOYEES

You are eligible for benefits if you are actively working 30 or more hours per week and are designated as a full-time employee.

Employees with variable hours and seasonal schedules may also be considered eligible for benefits.



ELIGIBLE DEPENDENTS

- Your lawful spouse.
- Your domestic partner who meets the plan criteria.
- Your biological children, stepchildren, adopted children, or children under your legal guardianship who are under age 26.
- Your unmarried child over age 26 who lives with you, depends on you for support and can't support themself because of a mental or physical disability.

DOMESTIC PARTNER ELIGIBILITY CRITERIA

If you are enrolling a domestic partner, you will be asked to attest to your domestic partner relationship and that you have met all the eligibility requirements below for the previous 12 months:

- You share a common principal place of residence and intend to do so in the future.
- You are jointly responsible for each other's basic living expenses.
- You are both 18 years or older and mentally competent to enter into a legally binding contract.
- Neither of you is married or a member of another domestic partnership.
- You are not related by blood to a degree that would prevent you from marrying in the state where you live.
- You agree to notify Jackson Family Wines immediately if you no longer meet any of these criteria.
- You understand it is a fraudulent act to obtain health coverage by misrepresenting any facts stated here.

Covering a domestic partner will likely reduce your take-home pay by more than the cost of coverage. See Domestic Partner Taxes on page 5.

DOMESTIC PARTNER TAXES

IMPORTANT NOTE REGARDING DOMESTIC PARTNER TAXATION

If you enroll a domestic partner and/or their children in company benefits, **it is likely there will be tax implications that reduce your net pay *in addition* to the cost of coverage.**

Under federal IRS rules, the value of the Company's contribution toward coverage for a domestic partner must generally be treated as **taxable income (called "imputed income").**

This means:

- Your cost for domestic partner coverage will be deducted **after taxes**, not before taxes.
- The **Company contribution toward your domestic partner's coverage will be added to your taxable income**, which may further reduce your net pay.

As a result, your take-home pay may decrease by more than just the cost of the coverage.

Example: If the cost to add your domestic partner is **$100 per pay period**, your actual reduction in net pay may be higher due to the additional taxable income associated with the Company's contribution.

The taxable value of the Company's contribution for your domestic partner (and their dependents, if applicable) will be reported as **imputed income on your W-2.**

RARE EXCEPTION: IRS TAX DEPENDENTS

In limited situations, these tax rules may not apply if your domestic partner qualifies as your **IRS tax dependent**. This determination is based on specific IRS criteria and is uncommon.

If your domestic partner **does qualify as your IRS tax dependent**, you must notify JFW by emailing hrdirect@jfwmail.com.

Please consult a **tax advisor** if you have questions about how this tax treatment may apply to you.

ENROLL & MAKE CHANGES

31

DAYS

New hires and employees with an eligible qualifying life event generally have a 31-day window to make benefit elections or changes.



NEW HIRE

Elect benefits within 31 days of your date of hire. Coverage becomes effective the first day of the month following your date of hire.

ANNUAL OPEN ENROLLMENT

Existing employees can enroll or make changes during annual Open Enrollment for January 1 coverage.

QUALIFYING LIFE EVENT

Outside Open Enrollment, an eligible life event may allow changes. Examples include marriage or divorce; a change involving a dependent, employment or other coverage; a move affecting network access; a Medicare or Medicaid eligibility change; or a court order requiring coverage for a child.

YOUR BENEFITS, ALL IN ONE PLACE

JFWBenefits.com

Use JFWBenefits.com year-round to review options and costs, enroll or make eligible changes, access plan documents and carrier resources, and get help.

Benefit Support • jfwbenefits@alliant.com • (888) 907-1391

IF YOU DON'T ENROLL

If you do not log in and elect or waive coverage, eligible employees are automatically enrolled in basic life and AD&D, short- and long-term disability and the New York Life EAP.
If you don’t enroll when you’re first eligible, you can’t sign up for medical, dental or vision until the next Open Enrollment or a qualifying life event.

MEDICAL PLAN OPTIONS

JFW offers three types of medical plans: the Anthem Advantage Plus CDHP paired with a Health Savings Account (HSA), PPO options and HMO options. Use this page to find the type of plan you want to explore, then compare the detailed tables that follow.

CDHP + HSA

Lower-premium + savings account

- PPO-style provider flexibility
- Deductible-first cost structure for many services
- Includes a tax-advantaged HSA

PPO

More provider flexibility

- Use in-network or out-of-network providers
- See specialists without a referral
- Out-of-network care costs more

HMO

Predictable cost, in-network care

- In-network only
- No annual deductible
- Predictable copays for many services

JFW CONTRIBUTES TO YOUR HSA (EMPLOYEE ONLY / FAMILY)

Salary under $100,000	Salary $100,000 or more
$1,000 / $1,500	$750 / $1,250

BEFORE YOU CHOOSE

Compare your biweekly contribution, deductible, copays or coinsurance, annual out-of-pocket maximum, provider network and JFW's HSA contribution if you are considering the CDHP + HSA.

ANTHEM MEDICAL COMPARISON

Both Anthem plans provide PPO-style provider access. Their biggest difference is how you pay for care: the CDHP generally requires the deductible before the plan shares many costs, while the Value PPO uses copays for several common services.

	ANTHEM ADVANTAGE PLUS CDHP-HSA		ANTHEM VALUE PPO	
BENEFIT	**IN-NETWORK**	**OUT-OF-NETWORK**	**IN-NETWORK**	**OUT-OF-NETWORK**
Annual deductible	$1,750 individual $3,500 member $3,700 family	$1,750 individual $3,500 member $3,700 family	$1,000/member family max: 3 deductibles	$2,000/member family max: 3 deductibles
Out-of-pocket maximum	$4,000/member $8,000 family	$10,000/member $20,000 family	$4,000/member $8,000 family	$10,000/member $20,000 family
Coinsurance	20% after deductible	50% after deductible	20% after deductible	50% after deductible
Primary care	20% after deductible	50% after deductible	$30 deductible waived	50% after deductible
Specialist	20% after deductible	50% after deductible	$50 deductible waived	50% after deductible
Preventive care	No charge	50% after deductible	No charge	50% after deductible
Labs / X-rays	20% after deductible	50% after deductible	20% after deductible	50% after deductible
Urgent care	20% after deductible	50% after deductible	$30 deductible waived	50% after deductible
Emergency room	20% after deductible	20% after deductible	20% after deductible	20% after deductible
Outpatient surgery	20% after deductible	50% after deductible	20% after deductible	50% after deductible
Hospital stay	20% after deductible	50% after deductible	20% after deductible	50% after deductible

HMO COMPARISON

All three HMO options use in-network care only and have no annual deductible. Kaiser California and Kaiser Oregon are different plans with different copays. Official plan documents govern.

HMO CARE STAYS IN-NETWORK

BENEFIT	ANTHEM VALUE HMO — CA	KAISER HMO — CA
Annual deductible	None	None
Out-of-pocket maximum	$3,500/member $7,000 family	$3,000/member $6,000 family
Primary care	$30	$30
Specialist	$50	$30
Preventive care	No charge	No charge
Labs / X-rays	No charge; $100 advanced imaging	$10/encounter
Urgent care	$50; additional charges may apply	$30
Emergency room	$150; waived if admitted	$150; waived if admitted
Outpatient surgery	$400/admission	$250/procedure
Hospital stay	$750/day, 3-day max	$500/admission

Kaiser Oregon members: copays differ from California; see the Kaiser Oregon SBC. Prescription drug coverage is on page 15.

HOW THE CDHP + HSA WORKS

Think of the CDHP as a simple three-step path through the year. Your HSA can help you pay eligible expenses along the way.



PAY TOWARD THE DEDUCTIBLE

You pay the negotiated cost of many non-preventive medical services and prescriptions until the calendar-year deductible is met. Use HSA money for eligible expenses.

SHARE THE COST

After the deductible, you generally pay coinsurance for covered services until you reach the annual out-of-pocket maximum.

THE PLAN PAYS 100%

After you reach the out-of-pocket maximum, the plan pays 100% of covered services for the rest of the calendar year. Out-of-network charges above reasonable and customary limits may still be your responsibility.

USE HSA DOLLARS FOR ELIGIBLE EXPENSES

The account is yours, and unused money can remain available for future eligible expenses.

$1,750 employee-only deductible

$3,700 family deductible

PREVENTIVE CARE

In-network preventive care is covered at 100% without a deductible. Certain preventive maintenance medications may also be covered at 100%; see the BenefitSolver Reference Center for the current medication list.

YOUR HSA

Salary under $100,000

$1,000 / $1,500

Salary $100,000 or more

$750 / $1,250

Amounts are annual: employee only / covering one or more family members. Your tier is based on your salary as of October 1, 2026, or the date you become benefits-eligible. JFW funding is prorated for mid-year elections, and your payroll and JFW contributions count together toward the IRS limit.

WHY AN HSA CAN BE VALUABLE

- Contribute your own pre-tax dollars when eligible.
- Use HSA money tax-free for qualified healthcare expenses.
- Roll over unused money from year to year.
- Keep the account if you change medical plans or leave JFW.
- Use the money now or save it for future healthcare expenses.

ARE YOU ELIGIBLE TO CONTRIBUTE?

- You are enrolled in the Anthem Advantage Plus CDHP-HSA.
- You are not enrolled in other non-CDHP medical coverage, including Medicare, Medicaid or TRICARE.
- You are not claimed as another person's tax dependent.
- You are not enrolled in a regular healthcare FSA. A limited-purpose FSA for dental and vision expenses is allowed.

OPEN OR MANAGE YOUR ACCOUNT

HealthEquity administers JFW HSA accounts. Visit **HealthEquity.com** to open or manage your account. If you enroll in the CDHP + HSA for the first time, you must actively open your HSA. You may change your HSA payroll contribution during the year through JFWBenefits.com by selecting the HSA Change option.

STAY IN-NETWORK

In-network providers agree to negotiated rates with your plan. The CDHP and PPO include out-of-network coverage, but your costs are higher. HMO options generally require in-network care.

ANTHEM BLUE CROSS

Find a provider at **Anthem.com/ca/find-care**

CHOOSE YOUR PLAN

Select Medical Plan or Network, California and Employer Sponsored.

SELECT THE NETWORK

CDHP + HSA or Value PPO: Prudent Buyer PPO. Value HMO: California Care HMO.

SEARCH

Search by location, provider or specialty.

KAISER PERMANENTE

Find a provider at **KP.org**

START WITH DOCTORS & LOCATIONS

Choose Doctors & Locations.

SELECT YOUR REGION

Choose Northern California, Southern California or Oregon/Washington.

SEARCH

Find doctors, facilities and other care locations in your service area.

BEFORE YOU RECEIVE CARE

Confirm that a provider participates in the network for your specific plan. Network status can change, and out-of-network care can cost substantially more.

Staying in-network usually means negotiated rates, more predictable costs and fewer billing surprises.

VIRTUAL & TRAVEL CARE

ANTHEM

LIVEHEALTH ONLINE

24/7 doctor visits

Board-certified doctor visits are available around the clock.

- Therapy support is available.
- Psychiatry support is available for adults.
- Call (888) 548-3432 for assistance.

KAISER

CARE WHILE TRAVELING

- Within a Kaiser service area, use the nearest Kaiser urgent care location when appropriate.
- Outside a Kaiser service area, MinuteClinic or the nearest urgent care location may be options for domestic travel when appropriate.
- For international travel, use the nearest urgent care center or hospital when you need care.

ANTHEM: CARE WHILE TRAVELING

- In the U.S., outside California: show your Anthem ID card. Anthem works with Blue Cross Blue Shield plans nationwide, so you can find in-network providers at Anthem.com/ca.
- Outside the U.S.: call Member Services before you go to check your Blue Cross Blue Shield Global Core benefits, or call (800) 810-2583 anytime.
- LiveHealth Online virtual visits are available wherever you are in the U.S.

EMERGENCY CARE

For a medical emergency, call 911 or go to the nearest emergency room.

Virtual care and travel-care options vary by medical plan, location and clinical need.

CHOOSE WHERE TO GO FOR CARE

The right care setting can help you get the support you need while managing your cost. For a medical emergency, call 911 or go to the nearest emergency room.

Nurse line
Questions about symptoms, self-care or where to seek care — $

Virtual visit
Common non-emergency conditions — $

Primary care
Routine, preventive and ongoing care — $$

Urgent care
Prompt attention for non-life-threatening concerns — $$$

Emergency room
Serious or life-threatening emergencies — $$$$

PLANNED CARE CAN COST LESS IN THE RIGHT SETTING

Outpatient surgery: Ask whether an ambulatory surgery center is appropriate instead of a hospital setting.

Physical therapy: Independent outpatient facilities may cost less than hospital-based settings.

Sleep studies: A home sleep test may be an option when clinically appropriate.

Infusion therapy: Ask whether home or outpatient infusion is appropriate.

Actual costs vary based on the service, provider, network and medical plan.

PRESCRIPTION DRUGS

Prescription costs can vary based on the medication, your plan's formulary and the pharmacy you use. A formulary is your plan's list of covered prescription drugs.



$

GENERIC

Usually the lowest-cost covered tier



$$

BRAND NAME

Often costs more than generic



$$$

SPECIALTY

Complex or chronic-condition drugs

PLAN-SPECIFIC PRESCRIPTION COSTS

PLAN	RETAIL	MAIL ORDER / SPECIALTY
Anthem CDHP + HSA	After deductible: $15 / $50 / $70	After deductible: $30 / $125 / $175; specialty 30%, max $250/fill
Anthem Value PPO	$15 / $50 / $70	$30 / $125 / $175; specialty 30%, max $250 retail / $500 mail
Anthem Value HMO	$15 / $50 / $70	$30 / $125 / $175
Kaiser HMO	CA: $10 / $30 OR: $10 / $30 / $60	CA: $20 / $60 • OR: $20 / $60 / $120 Specialty: 20%, max $250



WAYS TO MANAGE PRESCRIPTION COSTS

- Check the formulary before filling a new prescription.
- Ask whether a generic or preferred alternative is available when appropriate.
- Compare retail and mail-order costs for maintenance medications.
- Cash discount programs may not count toward your plan deductible or out-of-pocket maximum.

MEDICARE

Most people become eligible for Medicare at age 65, but your next step can depend on whether you are still working, have other coverage or are planning to retire.



ALLIANT MEDICARE SOLUTIONS CAN HELP WHEN

- **A dependent child is aging out:** Review individual coverage and next-step options.
- **You are turning 65 and continuing to work:** Call at least 3 months before your 65th birthday to compare your JFW plan with Medicare options.
- **You are preparing to retire or leave JFW:** Review Medicare timing and transition considerations.

MEDICARE RESOURCE	Alliant Medicare Solutions Premier • (877) 638-1413 • **AMSPremier.com**

If you or an enrolled dependent has Medicare or expects to become eligible, also review the Medicare Part D creditable coverage notice, available at JFWBenefits.com in the BenefitSolver Reference Center.

DENTAL

Delta Dental coverage helps pay for preventive, basic, major and orthodontic services. Using a Delta PPO network dentist generally gives you the greatest savings through negotiated rates. With an out-of-network dentist, reimbursement is based on usual, customary and reasonable (UCR) charges and you may owe amounts above the plan allowance.

DELTA DENTAL PLAN HIGHLIGHTS

BENEFIT	DELTA PPO DENTIST	OUT-OF-NETWORK
Annual deductible	$50/person • $150/family	$50/person • $150/family
Annual maximum	$2,000/person	$1,500/person
Preventive / diagnostic	No charge	No charge based on UCR
Basic services	10% after deductible	20% after deductible
Major services / implants	40% after deductible	50% after deductible
Orthodontia	50%, up to $2,000 lifetime/person	Same

Staying in network saves you money.
Out-of-network dentists can bill you for the difference between their charge and what Delta Dental allows, so you will usually pay more. More dentists are leaving insurance networks, but Delta Dental still has one of the largest dental networks in the country. Find a Delta PPO dentist at DeltaDentalIns.com.

VISION

VSP coverage helps with routine eye exams, glasses and contact lenses.

VSP PLAN HIGHLIGHTS

BENEFIT	IN-NETWORK	OUT-OF-NETWORK ALLOWANCE
Eye exam	$25 copay; every calendar year	Up to $45
Materials copay	$25	Per plan
Frames	$200 allowance ($220 featured brands; $110 at Walmart/Costco); every other calendar year	Up to $70
Single / bifocal / trifocal lenses	Covered after materials copay	$30 / $50 / $65
Contacts instead of glasses	$180 allowance	Up to $105
Contact fitting / follow-up	Up to $60	Per plan

20%

off additional glasses or sunglasses within 12 months of your WellVision exam

15%

average laser vision correction discount at contracted facilities

Find an in-network vision provider at **VSP.com**.

WHAT YOUR COVERAGE COSTS

MEDICAL — BIWEEKLY EMPLOYEE CONTRIBUTIONS

COVERAGE	CDHP + HSA	VALUE PPO	ANTHEM HMO	KAISER HMO
Employee only	$90	$164	$142	$153
Employee + spouse/DP	$198	$361	$313	$336
Employee + child(ren)	$162	$295	$256	$275
Employee + family	$279	$509	$442	$474

DENTAL & VISION — BIWEEKLY EMPLOYEE CONTRIBUTIONS

COVERAGE	DENTAL	VISION
Employee only	$10.24	$1.22
Employee + spouse/DP	$18.32	$1.71
Employee + child(ren)	$17.91	$1.94
Employee + family	$27.64	$3.10

TAX NOTE

Healthcare contributions are generally deducted on a pre-tax basis.
Domestic partner coverage is taxed differently. See Domestic Partner Taxes on page 5.

HEALTHCARE FSA

A healthcare Flexible Spending Account (FSA) lets you set aside pre-tax money from your paycheck for eligible healthcare expenses. WEX administers the account. For 2027, you can contribute up to $3,500, and up to $700 of unused money can carry over to the next year.

1 CHOOSE YOUR ANNUAL ELECTION	You must re-enroll each year if you want to contribute.
2 YOUR ANNUAL ELECTION IS AVAILABLE	Your full annual healthcare FSA election is generally available at the beginning of the plan year.
3 PAY OR REIMBURSE	Use your WEX debit card or submit eligible expenses for reimbursement.
4 USE FUNDS BY THE PLAN DEADLINES	Submit eligible prior-year expenses within the plan's run-out period. A limited amount may carry over; unused amounts above the permitted carryover are forfeited.

IF YOU CONTRIBUTE TO AN HSA

IRS rules generally prevent you from contributing to a regular healthcare FSA while you are HSA-eligible. You may use a limited-purpose FSA for eligible dental and vision expenses and may also participate in the Dependent Care FSA if eligible.

For account support, visit WEXinc.com or call (866) 451-3399.

HSA OR FSA?

Both accounts can help you pay eligible healthcare expenses with tax-advantaged dollars, but they work differently.

HSA

WHICH ACCOUNT CAN I USE?
Available with the Anthem Advantage Plus CDHP-HSA when you meet HSA eligibility rules.

WHO OWNS THE MONEY?
You own the account.

WHAT HAPPENS TO UNUSED MONEY?
Unused money carries over completely.

WHEN IS THE MONEY AVAILABLE?
You can use only amounts deposited so far.

DOES JFW CONTRIBUTE?
Yes. Salary under $100K: $1,000 / $1,500. $100K or more: $750 / $1,250 (employee only / family).

HEALTHCARE FSA

WHICH ACCOUNT CAN I USE?
Available to eligible employees, subject to HSA compatibility rules.

WHO OWNS THE MONEY?
The account is part of the employer plan.

WHAT HAPPENS TO UNUSED MONEY?
Only the permitted carryover amount carries over.

WHEN IS THE MONEY AVAILABLE?
The full annual election is generally available up front.

DOES JFW CONTRIBUTE?
JFW does not contribute.

HSA contributions may be changed during the year. Healthcare FSA changes generally require a qualifying life event.

DEPENDENT CARE & COMMUTER ACCOUNTS

DEPENDENT CARE FSA

The Dependent Care FSA can help you pay eligible dependent-care expenses so you and, if applicable, your spouse can work. For 2027, you can contribute up to $7,500 per household ($3,750 if married filing separately).

- Childcare & preschool
- Before- / after-school care
- Summer day camp
- Eligible adult dependent care

Reimbursements are limited to the amount already contributed to the account. Unused funds are forfeited under the plan rules.

TRANSIT

Set aside up to $350 a month in pre-tax money for qualified public-transit expenses.

PARKING

Set aside up to $350 a month in pre-tax money for qualified commuter parking expenses.

ADMINISTERED BY WEX

Visit WEXinc.com or call (866) 451-3399. Use the same WEX platform that supports the healthcare FSA.

LIFE INSURANCE

JFW PAYS 100%

of the basic life and accidental death and dismemberment (AD&D) premium for eligible employees.

BASIC LIFE BENEFIT

ANNUAL SALARY	BASIC LIFE BENEFIT
Less than $175,000	$50,000
$175,000 or more	1x annual compensation, up to $600,000

Benefits reduce to 65% at age 70 and 50% at age 75. Life insurance coverage above $50,000 may create taxable imputed income under federal tax rules.

ADD PROTECTION FOR YOURSELF AND YOUR FAMILY

EMPLOYEE

Life: $25,000 increments up to $1,050,000. Combined basic + voluntary life maximum: $1,200,000. AD&D matches the elected voluntary life amount.

SPOUSE/DP

$25,000 increments up to $525,000, not to exceed 50% of the employee amount. Employees earning under $175,000 may instead elect a flat $13,000.

CHILD

$5,000 through age 26.

DISABILITY & PAID FAMILY LEAVE

Disability pay and Paid Family Leave can replace income during an eligible absence.

100%

Short-term disability pay

1+ year of service: up to 11 weeks, offset by state benefits.

60%

Short-term disability pay

90 days to 1 year of service: up to 11 weeks, offset by state benefits.

66⅔%

Long-term disability

After 90 days, up to $15,000 a month, offset by state and/or workers' comp benefits. Pre-existing-condition limits apply.

All regular full-time, benefits-eligible employees with 90+ days of service: up to 12 weeks of coverage in a rolling 12 months (1-week waiting period, then up to 11 weeks of pay). Apply through HR with a Leave of Absence Request Form and appropriate medical certification.

Work injuries go through workers' compensation.

CALIFORNIA EMPLOYEES

- You must apply for California SDI.
- 1-week SDI waiting period. You may use Paid Health Time or vacation (not FTO); if you have none, the week is unpaid.
- JFW tops up SDI to 60% or 100% of base pay.

EMPLOYEES OUTSIDE CALIFORNIA

- If your state has a disability or paid leave benefit, you must apply.
- Any state waiting period applies; you may use Paid Health Time or vacation (not FTO).
- JFW tops up the state benefit to 60% or 100% of base pay.
- Commission pay is averaged over one year.

PAID FAMILY LEAVE

More than 1 year of service: up to 8 weeks at 100% salary continuation for qualifying bonding/care events. Less than 1 year of service: up to 2 weeks for qualifying bonding/care events. If a state paid family leave program is available, you must apply for the state benefit. JFW Paid Family Leave may run concurrently with FMLA, CFRA or other applicable leave programs.

DISABILITY SUPPORT

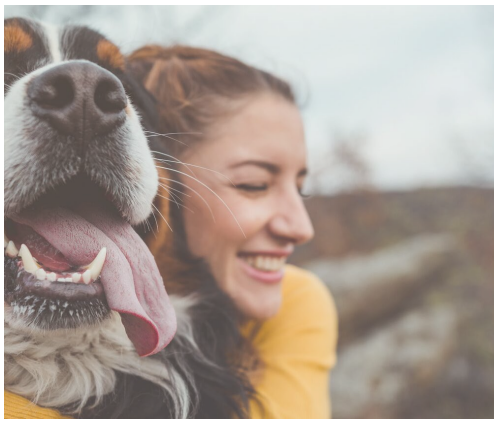
Short-term disability: JFW Human Resources • (707) 525-6213
Long-term disability: New York Life • (800) 362-4462

PET BENEFITS

Pets Best pet health insurance helps pay for unexpected accidents and illnesses for your dogs and cats. **You choose the plan that fits your pet: Silver, Gold or Platinum.**

EVERY PLAN INCLUDES

- $500 annual deductible and 80% reimbursement
- Unlimited annual coverage for accidents and illnesses
- Any licensed vet in the U.S. or Canada, including specialists and emergency clinics
- Pets as young as 7 weeks, with no upper age limit
- Pre-existing conditions are not covered



COVERAGE	SILVER	GOLD	PLATINUM
Accidents, illnesses, cancer, hereditary conditions, emergency surgery, covered Rx	✓	✓	✓
Exam fees to diagnose an accident or illness	—	✓	✓
Rehab, acupuncture and chiropractic care	—	✓	✓
BestWellness routine care (up to $535 a year, no deductible)	—	—	✓

Accident-only coverage: For pets with certain chronic conditions (such as diabetes, cancer or Cushing's disease). Covers up to $10,000 a year for accidents only, starting at $9 a month for dogs and $6 a month for cats.

HOW TO ENROLL

Choose your plan and enroll at JFWBenefits.com (BenefitSolver), which connects you to Pets Best to view your pet's personalized premium. Premiums are paid through payroll deductions, and coverage renews automatically each year. Questions: (888) 984-8700 or PetsBest.com.

401(k)

3%	+1%	100%
Automatic enrollment	Automatic annual savings increase	Vested in your contributions and company match

JFW COMPANY MATCH

100% of the first 3% + 50% of the next 2%

The company may make a discretionary match using this formula, up to $5,200 per calendar year. You must be actively contributing during the pay period to receive the discretionary match.



WHO CAN PARTICIPATE?

- Regular full-time employees age 18+: eligible the first day of the month following hire.
- Other employees age 18+: eligible after completing 1,000 hours in a consecutive 12-month period or two consecutive years with 500+ hours of service.

HOW AUTOMATIC ENROLLMENT WORKS

If you do not make another election, 3% of your pre-tax pay is automatically contributed 30 days after your eligibility date and invested in an age-appropriate Target Date Fund. Your savings rate increases by 1% each January until it reaches 6%, unless you change or opt out of the automatic increase.

Manage your 401(k) at **OwnYourFuture.Vanguard.com** or call (800) 523-1188.

CHEERS TO YOU! / SALUD

Cheers to You!/Salud is JFW's online rewards and recognition program. Use it to thank colleagues, celebrate wins and recognize the people who make a difference in your day.

RECOGNITION MAY INCLUDE REWARD POINTS FOR

JFW merchandise

Gift cards

Experiences

Charitable donations

Certain learning, festive or company activities may also provide opportunities to earn additional points.

GET STARTED

Access Cheers to You!/Salud through JFWNow → My Favorites → CTY/Salud or visit JFW.Awardco.com. Sign in using your JFW access, choose the colleague you want to recognize and add your message.

RECOGNIZE • CELEBRATE • THANK

Small moments of recognition help build connection across teams.

MISALUD HEALTH



BILINGUAL CARE, ON YOUR PHONE

New for 2027, MiSalud Health is for everyone at JFW, especially Spanish speakers. You and your family get a care team in English or Spanish, at no cost to you, with no cap on visits or coaching sessions.

- Same-day virtual primary care visits.
- Mental health coaching, with a licensed clinical social worker when you need more support.
- Programs for diabetes, high blood pressure, cholesterol and weight, with physician oversight.
- Nutrition support, including help with GLP-1 medications.
- Help finding in-network care and discounts on prescriptions.

COVER YOUR FAMILY & GET STARTED

You can add up to 3 adult family members at no extra cost. Use MiSalud in the app to schedule a visit, chat with the care team or talk to a health coach. Visits run 7 a.m. to 8 p.m. PT Monday through Friday, plus weekend hours. Your health information stays private: JFW sees only anonymous, combined reports. MiSalud is separate from your medical plan and the New York Life EAP, and you can use both.

Download the MiSalud app and join with invitation code JFW2027 • Learn more at MiSaludHealth.com

MENTAL HEALTH & EVERYDAY SUPPORT

NEW YORK LIFE EAP

Confidential support for you and your household members, available 24/7 at no cost to you.

- Up to 3 in-person or virtual counseling sessions per issue, per year.
- Master's- or PhD-level counselors answer every call.
- Legal, financial and work-life consultations.
- Crisis support and referrals to local counselors.



MORE SUPPORT & HOW TO ACCESS

Well-being coaching: up to 5 phone sessions a year with a certified coach for stress, burnout, time management and weight loss. FamilySource: research and pre-screened referrals for childcare, elder care, adoption, education and pet care. Money coaching and online will-preparation resources are also available.

Call 24/7: (800) 344-9752 • Visit GuidanceResources.com • Web ID: NYLGBS

FITNESS RESOURCES



ANTHEM MEMBERS

ACTIVE&FIT DIRECT

Access to participating gyms nationwide with no long-term contracts or annual fees, plus 12,000+ on-demand workout videos at no cost.

Sign in at Anthem.com/ca, select Care, then Discounts, then Active&Fit Direct.

Anthem Member Services:
(866) 207-9878 (CDHP + HSA)
(800) 888-8288 (PPO)
(833) 913-2236 (HMO)

KAISER MEMBERS

ONE PASS SELECT AFFINITY

Multiple membership levels, participating gyms and boutique studios, on-demand and livestream fitness, digital planning tools and other wellness discounts.

Join at KP.org/exercise.

Kaiser Member Services:
(800) 464-4000 (California)
(800) 813-2000 (Oregon)

Fees, locations and participating facilities can change.

YOURWINESTORE

EMPLOYEE PRICING

YOUR WINE.
YOUR ACCESS.

YourWineStore gives JFW employees access to a broad selection of JFW wines at employee pricing and may include employee-only offers.



ORDER ONLINE OR FOR WILL-CALL

Visit **YourWineStore.com** to place an order for shipping or will-call. Sign in to see employee pricing. For current will-call, shipping and FAQ information, visit JFWNow.

SETTING UP YOUR EMPLOYEE ACCOUNT

Use your company email address. If you need help confirming your employee status, **email support** or call (707) 535-8477.

BENEFITS TERMS WORTH KNOWING

ALLOWED AMOUNT

The maximum amount a plan considers eligible for payment for a covered service.

FORMULARY

The prescription drugs covered by your medical plan.

COINSURANCE

The percentage of a covered cost you pay, generally after the deductible.

IN-NETWORK

Providers that contract with your plan and agree to negotiated rates.

COPAY

A fixed dollar amount you pay for a covered service.

OUT-OF-NETWORK

Providers that do not participate in your plan's network; your costs may be higher.

DEDUCTIBLE

The amount you pay for certain covered services before the plan begins sharing costs.

OUT-OF-POCKET MAXIMUM

The most you pay for covered services during the plan year before the plan begins paying 100% of covered costs, subject to plan rules.

PLAN DOCUMENTS & IMPORTANT NOTICES

This guide is a convenient overview. For complete plan terms, coverage rules and formal notices, use the official documents and resources available through JFW.

FIND YOUR PLAN DOCUMENTS

Access plan documents, including your plan's Summary of Benefits and Coverage (SBC), in the BenefitSolver Reference Center at JFWBenefits.com, or request paper copies through Human Resources.

WHAT YOU'LL FIND

- Summary Plan Description (SPD).
- Applicable Summary of Benefits and Coverage documents (SBCs).
- Any Summary of Material Modifications (SMM) provided for plan changes.

ANNUAL NOTICES

Required annual notices, including Medicare Part D, CHIP, HIPAA, provider choice, women's health and newborn, and Marketplace information, are available in the BenefitSolver Reference Center at JFWBenefits.com. Review the ones that apply to you.

ACCESS YOUR DOCUMENTS **JFWBenefits.com** • **hrdirect@jfwmail.com**

ABOUT THIS GUIDE

This guide briefly describes your benefit choices and enrollment options. All benefits and eligibility are subject to the terms and conditions of the applicable benefit plans and group insurance contracts. If this guide conflicts with an official plan document, the official plan document governs. The benefits described apply to benefits-eligible employees of Jackson Family Enterprises, Jackson Family Wines, Inc., Regal Wine Company, LLC., Jackson Family Investments, LLC, Hartford-Jackson, LLC and KJCB, Inc. (collectively, the Company). Jackson Family Wines reserves the right to modify or terminate benefits at any time. Some benefit programs require employee contributions. Benefits described in this guide are effective January 1, 2027 through December 31, 2027.

2027 EMPLOYEE BENEFITS GUIDE

Your benefits. Your resources. One place to start.

JFWBenefits.com

Benefit Support • jfwbenefits@alliant.com • (888) 907-1391

This guide is a summary of your benefits. Official plan documents and insurance contracts govern. Jackson Family Wines reserves the right to modify or terminate benefits at any time.

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