



FOCUS ON YOU



2025 BENEFITS GUIDE

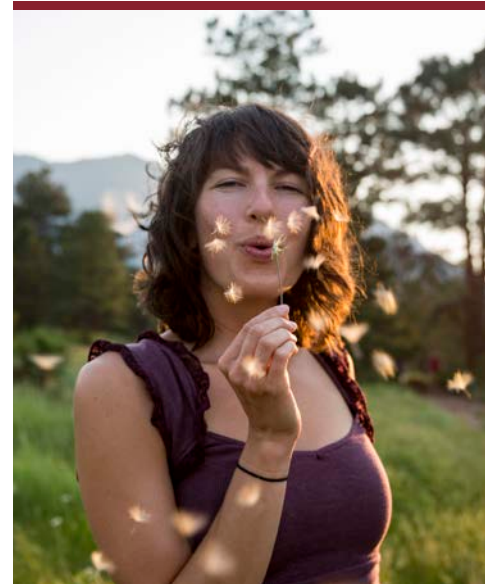
MOOG



WELCOME TO MOOG

At Moog, we appreciate your commitment and contribution to our products, services, and the company's success. As part of our commitment to making Moog a great place to work, we are proud to offer a suite of quality benefits and resources that are comprehensive, flexible, and competitive to help you and your loved ones maintain and improve your health and financial well-being.

We put together our 2025 Benefits Program with you in mind – from benefits that are designed to meet your everyday needs, to programs that help you plan for your future. These valuable benefits are affected by the choices each of us makes and how we use the plans, so we encourage you to thoroughly and thoughtfully review the available options to ensure they meet your needs in 2025.



How To Enroll

You have 30 days from your start date to complete your enrollment. Once enrolled, benefits will be retroactive to your start date.



SELF-SERVICE ONLINE VIA WORKDAY - You can only enroll in Workday while connected to the Moog network at <https://wd5.myworkday.com/moog/login.html>. You can visit our interactive enrollment portal at www.benefitsgo.com/moog for detailed benefit plan information.

Preparing for Your Enrollment Session

Review this guide to learn more about the benefits offered for 2025. You will need the following information to enroll:

- The full names, dates of birth, and Social Security numbers of your dependents if applicable.

YOUR 2025 BENEFITS



YOUR BENEFITS ARE VALUABLE!

Moog provides a full range of benefits that address your needs now and in the future.

BENEFITS PUT THE FOCUS ON YOUR FINANCIAL SECURITY

Moog provides a full range of benefits that address your needs now and in the future. Your benefits are the foundation of your financial security, protecting you from the high cost of getting sick or injured, protecting your income if you become disabled, and much more. Review your benefits to make sure they meet your needs for today and tomorrow. Take the time to focus on what you need to make sure you are getting everything our benefits plan has to offer.

FOCUS ON:

YOUR HEALTH

- Medical Insurance
- Prescription Drug Benefits
- Dental Insurance
- Vision Insurance

YOUR SECURITY

- Hospital Indemnity Insurance
- Accident Insurance
- Critical Illness Insurance
- Life Insurance
- Disability Insurance

YOUR LIFESTYLE

- Health Savings Account
- Flexible Spending Account
- Legal Insurance
- Auto/Home Insurance
- Identity Theft Insurance
- Pet Insurance

Dependent Eligibility and Verification

Eligible dependents are a legal spouse or California state-certified domestic partner; natural or adopted children up to age 26; step-children up to age 26; persons over whom you have legal guardianship up to age 26; children over the age of 26 who are incapable of self-sustaining employment by reason of mental or physical disability, so long as the disability persists and began prior to reaching age 26.

Personalized Support with Accolade

Accolade provides personalized support for your health and benefits needs throughout the year for those on a Blue Cross Blue Shield (BCBS) plan. Accolade is a confidential service that helps make navigating your benefits easier and less stressful — at no additional cost to you.

Accolade can provide personalized, in-depth guidance about the medical benefit options that would work best based on your unique circumstances and upcoming medical needs. Your Accolade Health Assistant can discuss ways you can maximize your benefits and reduce your out-of-pocket costs. Get in touch with a Health Assistant by calling **1-866-336-0773**, Monday – Friday, 8AM – 8PM ET. When you are ready to select your 2025 benefits, you can complete your enrollment independently online at <https://wd5.myworkday.com/moog/login.html>.



YOUR 2025 MEDICAL PLANS

Each person's health care needs are different. Our medical plans from BlueCross BlueShield (Kaiser Permanente in CA) offer multiple options so you can select the coverage level best-suited to your situation. The **Bronze CDHP** (Consumer Driven Health Plan) includes access to a Health Savings Account (HSA). Moog will contribute \$1,000 for an individual, or \$2,000 for a family, into your HSA for the year to assist you in paying for eligible medical expenses. This contribution is pro-rated based on date of hire.

| | GOLD PPO | SILVER PPO | BRONZE CDHP | KAISER PERMANENTE ² (CA ONLY) |
|---|---|--|---|--|
| | In-Network | In-Network | In-Network | In-Network |
| Annual Deductible (Individual/Family) | \$750 per person, up to \$1,500 per family Deductible does not apply for copay or preventive services | \$1,500 per person, up to \$3,000 per family Deductible does not apply for copay or preventive services | \$2,000 per person, up to \$4,000 per family Deductible applies for all medical and Rx expenses except for preventive care | \$1,000 per person, up to \$2,000 per family Deductible does not apply for preventive and Rx services |
| Out-of-Pocket Maximum (Individual/Family) | \$2,250 per person, up to \$4,500 per family for Non-Rx benefits | \$4,500 per person, up to \$9,000 per family for Non-Rx benefits | \$4,000 per person, up to \$8,000 for family | \$2,000 per person, up to \$4,000 per family for Non-Rx benefits |
| Rx Out-of-Pocket Maximum (Individual/Family) | \$1,500/\$3,000 | \$1,500/\$3,000 | N/A | None |
| Preventive Care | Covered 100% | Covered 100% | Covered 100% | Covered 100% |
| Primary Care Physician | \$20 copay | \$10 copay | 20% coinsurance after ded. | \$20 copay after ded. |
| Specialist | \$40 copay | \$20 copay | 20% coinsurance after ded. | \$20 copay after ded. |
| ER Visit | \$150 copay | \$250 copay | \$150 copay after ded. | 20% coinsurance after ded. |
| Urgent Care Visit | \$40 copay ¹ | \$40 copay ¹ | 20% coinsurance after ded. | \$20 copay after ded. |
| Diagnostic Laboratory Services ** | 20% coinsurance after ded. | 20% coinsurance after ded. | 20% coinsurance after ded. | \$10 copay after ded. |
| Immunizations** | \$0 copay | \$0 copay | Covered 100% | \$0 copay |
| Rehabilitation Therapy (PT, OT, etc)** | \$20 copay | \$20 copay | 20% coinsurance after ded. | \$20 copay after ded. |
| Teladoc - General Medical Care and Dermatology *** | \$0 copay | \$0 copay | Covered 100% after ded. | Not eligible, available through Kaiser for \$0 copay |
| Teladoc - Mental Health**** | \$0 copay | \$0 copay | Covered 100% after ded. | Not eligible |
| Mental/behavioral health outpatient services | \$20 copay | \$20 copay | 20% coinsurance after ded. | \$20 copay after ded. |
| Mental/behavioral health inpatient services | 20% coinsurance after ded. | 20% coinsurance after ded. | 20% coinsurance after ded. | \$20 copay after ded. |
| Rx Retail and Mail (30-day Supply) | | | | |
| Generic | \$5 copay | \$5 copay | \$5 copay | \$10 copay |
| Formulary* | 20% coinsurance, max \$70 | 20% coinsurance, max \$70 | 20% coinsurance after ded., max \$70 | \$30 copay |
| Non-Formulary* | 40% coinsurance, max \$135 | 40% coinsurance, max \$135 | 40% coinsurance after ded., max \$135 | N/A |
| Specialty***** | \$0 per Rx if enrolled in PrudentRx; 30% coinsurance if not enrolled in PrudentRx (Specialty Rx administered by CVS Caremark Specialty Pharmacy) | | Formulary or Non-Formulary tier coinsurance applies | 20% coinsurance, max \$250 |
| Rx Retail and Mail (90-day Supply) | | | | |
| Generic | Maximum \$15 copay | Maximum \$15 copay | Maximum \$15 copay | \$20 copay |
| Formulary* | 20% coinsurance, max \$210 | 20% coinsurance, max \$210 | 20% coinsurance after ded., max \$210 | \$60 copay |
| Non-Formulary* | 40% coinsurance, max \$405 | 40% coinsurance, max \$405 | 40% coinsurance after ded., max \$405 | N/A |

* Where noted Rx coinsurance is not subject to medical deductible.

** Services are offered at the Moog Family Wellness Center, where available, at no cost for those enrolled in the Gold and Silver Plans and for a nominal fee for those enrolled in the Bronze CDHP Plan.

*** Teladoc general medical care includes sinus problems, respiratory infection, allergies, urinary tract infection, cold and flu symptoms and many other non-emergency illnesses.

**** Teladoc mental health includes licensed therapists that can provide support for a wide range of issues, including anxiety, eating disorders, depression, grief, family difficulties and more.

***** See more details on Specialty Pharmacy on page 15.

¹Services with a mental health and/or substance abuse diagnosis may be billed at a reduced rate.

²Kaiser has changed coverage criteria for GLP-1s used for weight loss. Check with Kaiser for specific details on your eligibility if you are currently taking GLP-1s for weight loss.

This chart serves as a summary and does not include all covered services.

Medical deductibles and OOP maximums are embedded for the Gold and Silver plans. Combined Medical/Rx Deductibles and OOP Maximums are non-embedded for the Bronze Plan. See page 5 for an explanation of embedded/non-embedded deductibles.

If you use out-of-network providers, you will be subject to a separate deductible and out-of-pocket maximum.

MEDICAL PLAN KEY TERMS

Coinsurance: A percentage of the cost of a medical service that you pay after you meet the deductible.

Consumer Driven Health Plan (CDHP): A medical plan that gives you the protection of a traditional health plan, plus access to a tax-advantaged HSA. The CDHP offers higher deductibles.

Copay: A flat dollar amount you pay at the time you receive a specific service. Copays do not count toward your deductible, but do count towards your out-of-pocket maximum.

Deductible: The amount of medical expenses you pay each year out-of-pocket before receiving most benefits from the medical plan.

Dependents: Those who are eligible to be covered under Moog's medical plans including your spouse and children up to age 26, regardless of their student or dependent status.

Embedded/Non-Embedded Deductible: A health plan with an embedded deductible actually has two deductible amounts. When a health plan has embedded deductibles, it means that a single member of a family doesn't have to meet the full family deductible for after-deductible benefits to kick in. Instead, the person's after-deductible benefits will kick in as soon as he or she has met the individual deductible, even if the coverage is through a family plan. With a non-embedded deductible, when enrolled in family coverage, all family members qualify for the after-deductible plan benefit if the total annual family deductible amount is met by one or any combination of covered individuals.

Flexible Spending Account (FSA): An account to which you can contribute before-tax dollars and later reimburse yourself for eligible expenses. You can roll over up to \$660 from one plan year to the next. This limit is subject to change. This is not the same as an HSA.

Formulary: A preferred list of prescription drugs available to you at a reduced cost.

Generic: A prescription drug that is equal in therapeutic power to the brand name original because they contain the same active ingredients but are available to you at a lower cost.

Health Savings Account (HSA): An HSA is like a bank account that works with the CDHP. You can use it to pay for eligible health care expenses now or in future years. There are no "use it or lose it" rules like there are for an FSA.

Non-Formulary: A brand-name drug that is not listed on the formulary. You'll pay more for non-formulary drugs than for drugs listed on the formulary.

In-Network: Services provided through a group of doctors and hospitals who have agreed to charge negotiated fees. Using in-network providers will lower your out-of-pocket costs because your in-network coverage is higher than when you use an out-of-network provider.

Mail Order: Through the mail-order program, you'll pay less for the prescription drugs you use on a regular basis. You can receive up to a 90-day supply all at once delivered right to your home, for the cost of a 60-day supply.

Out-of-Pocket Maximum: The maximum amount of deductibles and coinsurance you pay in one year. Once you reach the out-of-pocket maximum, the medical plan pays 100% of the contracted rate for covered services for the rest of the calendar year. With the two PPO plans, Rx and Non-Rx out-of-pocket maximums are separate and do not apply to one another.

Preventive Care: Medical services, such as annual physicals and screenings, that are intended to help prevent an illness or serious medical condition.

Preferred Provider Organization (PPO): A type of medical plan that uses a network of physicians, hospitals, and other health care providers who have agreed to provide medical care at negotiated prices. You are not required to designate a primary care physician.

Retail: Prescription drugs you fill at local pharmacies (normally a 30-day supply).

Specialist: A physician who focuses on a specific illness, disease, or area of the body. HMO medical plans require you to be referred to a specialist by a primary care physician for the care to be covered. PPOs do not require referrals to a specialist, but you may pay more for those visits.

NOTE: Your medical plan options must offer certain preventive care benefits to you in-network without cost sharing and these preventive care benefits generally are updated annually. Under the Affordable Care Act, the medical plans generally may use reasonable medical management techniques to determine frequency, method, treatment or setting for a recommended preventive care service. Review the Summary Plan Description (SPD) for a list of preventive care services.



DENTAL BENEFITS

Dental care plays an important role in your overall health. Besides factoring in your overall health, dental care can go a long way in preventing costly out-of-pocket dental expenses for you and your family. Moog offers two PPO dental plans that are administered through MetLife. Both of these plans are designed to provide high-quality dental care while controlling the cost of such care. For this reason, discounted rates have been negotiated with dentists and dental care facilities that are in MetLife's network.

With both MetLife PPO Dental plans, you are free to choose any dental care provider. However, dental care providers in MetLife's PPO network have agreed to accept lower discounted rates for services. To encourage employees to use the discounted services, you pay less for in-network care. If you select a provider from outside the network, you may have higher copays and deductibles.

MetLife pays 100% of the negotiated cost of preventive services. If you use an in-network dental provider, you will not pay anything for these services. If you use an out-of-network provider and they charge more than the network rate for preventive services, you will be responsible for paying the additional cost. To find a participating MetLife dental care provider and review your claims, visit MetLife's website, www.mybenefits.metlife.com and setup an account. When setting up your account, the group name is Moog INC.

| | STANDARD DENTAL PLAN | | PREMIUM DENTAL PLAN | |
|--|----------------------|----------------|---------------------|----------------|
| | In-Network | Out-of-Network | In-Network | Out-of-Network |
| Annual Maximum | \$1,500 | \$1,500 | \$2,000 | \$2,000 |
| Annual Deductible (Individual/Family) | \$50/\$150 | \$50/\$150 | \$25/\$75 | \$25/\$75 |
| Preventive Services <ul style="list-style-type: none">• Cleanings• Oral Exams• X-rays• Fluoride Treatments (until age 19)• Topical Sealants | 100% | 100% | 100% | 100% |
| Basic Services <ul style="list-style-type: none">• Fillings• Perio Surgery• Root Canal• Simple Extractions• Repairs & Maintenance of Crowns, Bridges & Dentures | 80% | 70% | 90% | 80% |
| Major Restorative Services <ul style="list-style-type: none">• Surgical Extractions• Bridges & Dentures• Dental Implants• Single Crowns | 50% | 40% | 60% | 50% |
| Orthodontia Services | 50% | 0% | 60% | 50% |
| Orthodontia Lifetime Maximum | \$1,000 | \$0 | \$1,500 | \$1,500 |

See page 16 for Dental Plan premiums.

VISION BENEFITS

Moog offers a vision benefit that is administered by VSP. You are able to choose between VSP's Base and Buy-Up plans. If you're enrolled in a Moog medical plan, the Base Plan is automatically included with your election, or you can choose to enroll in the Buy-Up Plan for an added cost. Both plans are also available to those who are not enrolled in a Moog medical plan; and with either plan, you will get coverage that takes care of your eye care and eyewear needs. Moog offers a Buy-Up plan design, called **EasyOptions**, that allows members to select one of five custom upgrades.

With VSP's Vision benefit, you are free to see any eye care provider. However, you will experience greater savings and discounts when you use an eye care provider in VSP's network. To find a participating VSP eye care provider or check your benefit eligibility and review your plan coverage, visit www.vsp.com and set up a member account.

| 2025 VSP BASE PLAN | | | 2025 VSP BUY-UP PLAN | |
|-------------------------------|---|---|---|--|
| Benefit | Description | Copay | Description | Copay |
| Well Vision Exam | Every Calendar Year | \$20 | Every Calendar Year | \$20 |
| Prescription Glasses | | \$20 | | \$20 |
| Frames | <ul style="list-style-type: none"> • \$175 allowance for wide selection of frames • \$225 allowance for featured frame brands • 20% savings on the amount over allowance • \$95 Costco or Walmart frame allowance • Every other calendar year | Included in Prescription Glasses | <ul style="list-style-type: none"> • \$220 allowance for wide selection of frames • \$270 allowance for featured frame brands • 20% savings on the amount over your allowance • \$120 Costco or Walmart frame allowance • Every calendar year | Included in Prescription Glasses |
| Lenses | <ul style="list-style-type: none"> • Single vision, lined bifocal, and lined trifocal lenses • Polycarbonate lenses for dependent children • Every calendar year | Included in Prescription Glasses | <ul style="list-style-type: none"> • Single vision, lined bifocal, and lined trifocal lenses • Polycarbonate lenses for dependent children • Every calendar year | Included in Prescription Glasses |
| Lens Enhancements | <ul style="list-style-type: none"> • UV Protection • Anti-Reflective Coatings • Standard progressive lenses • Premium progressive lenses • Custom progressive lenses • Average savings of 30% on other lens enhancements • Every calendar year | Discounted Discounted Covered 100% \$95-\$105 \$150-\$175 | <ul style="list-style-type: none"> • UV Protection • Anti-Reflective Coatings • Standard progressive lenses • Premium progressive lenses • Custom progressive lenses • Average savings of 30% on other lens enhancements • Every calendar year | Covered 100% EasyOptions* Covered 100% EasyOptions* EasyOptions* |
| Contacts (Instead of Glasses) | <ul style="list-style-type: none"> • \$175 contacts allowance; copay does not apply • Contact lens exam (fitting and evaluation) • Every calendar year | Up to \$60 | <ul style="list-style-type: none"> • \$220 contacts allowance; copay does not apply • Contact lens exam (fitting and evaluation) • Every calendar year | Up to \$60 |
| Diabetic Eyecare Plus Program | <ul style="list-style-type: none"> • Services related to diabetic eye disease, glaucoma and age-related macular degeneration (AMD). Retinal screening for eligible members with diabetes. • As needed | \$20 | <ul style="list-style-type: none"> • Services related to diabetic eye disease, glaucoma and age-related macular degeneration (AMD). Retinal screening for eligible members with diabetes. • As needed | \$20 |

* EasyOptions coverage: Each covered family member may select ONE of the following FIVE custom upgrades at the time of service: +\$75 Retail Frame Allowance or +\$75 Elective Contact Lens Allowance or Anti-Reflective Coatings covered in full or Photochromic Lenses covered in full or Premium Progressive Lenses covered in full.

See page 16 for Vision Plan premiums. • If you plan to see a provider other than a VSP Network provider, visit www.vsp.com for details.



HOSPITAL INDEMNITY INSURANCE

If you are admitted into a hospital, it doesn't take long for the out-of-pocket costs to pile up. Hospital Indemnity Insurance pays the entire benefit directly to you if you are admitted into a hospital for care. This full benefit is paid even if you have other coverage.

You receive a benefit as soon as you are admitted and then an additional benefit based on the number of days you are confined to the hospital. The benefit increases if you are admitted and confined to an intensive care unit.

You also receive a benefit for the following:

- Inpatient Rehabilitation
(15 days per calendar year)

Plan Features

- **Guaranteed Acceptance:** There are no health questions or physical exams required.
- **Family Coverage:** You can elect to cover your spouse and children.*
- **Payroll Deduction:** Premiums are paid through convenient payroll deductions.
- **Portable Coverage:** You can take your policy with you if you change jobs or retire.

** If you elect coverage for your dependent children, you must provide notification to your employer when all of your dependent children exceed the dependent child age limit or no longer otherwise meet the definition of a dependent child. If you elect coverage for your spouse, you must provide notification to your employer if your spouse no longer meets the definition of a spouse.*

The policy or its provisions may vary or be unavailable in some states. The policy has exclusions and limitations which may affect any benefits payable.

This plan is not a replacement for medical insurance.

HOW HOSPITAL INDEMNITY INSURANCE WORKS

Injuries from a car accident put Cindy in the hospital for four days. She also receives rehabilitation therapy for three of those days. Cindy's medical insurance carries a \$2,500 deductible and a \$5,000 out-of-pocket maximum. Even with her medical plan, Cindy's out-of-pocket costs add up to more than \$4,000 just for hospital services.

Fortunately, Cindy has Hospital Indemnity Insurance. She receives a benefit for being admitted into the hospital, a benefit for each day of her inpatient stay and benefits for X-ray and rehab services.



HOW CINDY'S HOSPITAL INDEMNITY BENEFIT WAS CALCULATED:

| Medical Service | Benefit | Total |
|---|-----------------------|---------|
| Hospital Admission (4 times per calendar year) | \$1,000 per admission | \$1,000 |
| Three-day Hospital Stay (up to 365 days per calendar year) | \$165 per day | \$ 495 |
| Two Days of Rehab (up to 15 days per calendar year) | \$165 per day | \$ 330 |

| | |
|------------------------------|----------------|
| CINDY'S TOTAL BENEFIT | \$1,825 |
|------------------------------|----------------|

This scenario does not reflect the benefits of a specific Hospital Indemnity Insurance plan schedule. The benefits are generic benefits for the purposes of this example to show how the benefit total of a Hospital Indemnity plan is calculated. The plan offered to you may offer different benefit amounts and may not cover all services. See the plan details for the benefit schedule for the plan offered to you. This plan is not a replacement for medical insurance.

ACCIDENT INSURANCE

Accidents happen. You can't always prevent them, but you can take steps to reduce the financial impact.

Voluntary Accident Insurance provides benefits for covered injuries and specified accident-related expenses for an individual or family. Since health insurance only covers certain expenses (and plan limits can apply), this individual policy is designed to help cover the out-of-pocket expenses that result from a covered accident. The plan covers a wide variety of injuries and accident-related expenses such as: hospitalization, physical therapy, hospital intensive care, transportation, and lodging for family.

Plan Features

- Benefits are paid for accidents that occur on or off the job, so you have 24-hour coverage.
- You can also elect to cover your spouse and children.*
- There are no health questions or physical exams required.
- Your coverage is individually owned, which means you can take your policy with you if you retire or leave the company.

Your Benefits Counselor can give you detailed information on the plan and costs during your enrollment session.

The policy or its provisions may vary or be unavailable in some states. The policy has exclusions and limitations which may affect any benefits payable. This plan is not a replacement for medical insurance.

CRITICAL ILLNESS INSURANCE

Even the most generous medical plan does not cover all of the expenses of a serious medical condition like a heart attack or cancer. Critical Illness Insurance pays the full lump-sum benefit directly to you if you are diagnosed with a covered illness. The benefit is paid in addition to any other insurance coverage you may have.

Covered Illnesses include:

- Heart Attack
- End Stage Renal (Kidney) Failure
- Cancer
- Stroke
- Coronary Artery Bypass Surgery**
- Major Organ Transplant

Plan Features

- **Guaranteed Acceptance:** There are no health questions or physical exams required.
- **Family Coverage:** Coverage options are available for your spouse and children.*
- **Health Screening Benefit:** The plan provides a \$75 benefit per covered person per calendar year if you or your covered dependents complete a covered health screening test such as a physical exam, total cholesterol blood test, mammogram, lipid panel, and more.
- **Portable Coverage:** You can take your policy with you if you change jobs or retire.

*** If you elect the Bronze Plan, you will automatically be enrolled in a \$3,000 Employer Paid Critical Illness Policy with matching tiers of coverage.**

The policies/certificates of coverage have exclusions and limitations which may affect any benefits payable. The policies/certificates of coverage or their provisions, as well as covered illnesses, may vary or be unavailable in some states for supplemental medical benefits.

This plan is not a replacement for medical insurance.

** If you elect coverage for your dependent children, you must provide notification to your employer when all of your dependent children exceed the dependent child age limit or no longer otherwise meet the definition of a dependent child. If you elect coverage for your spouse, you must provide notification to your employer if your spouse no longer meets the definition of a spouse.*

*** The coverage pays 25% of the face amount of the policy once per lifetime for coronary artery bypass surgery.*



LIFE INSURANCE

Your family depends on your income for a comfortable lifestyle and for the resources necessary to make their dreams – such as a college education – a reality. Like anyone, you don't like to think of the scenario where you're no longer there for your family. However, you do need to ensure their lives and dreams can continue if the worst does happen.

Moog knows how difficult it can be to provide this peace of mind on your own, which is why we have made it a priority to give you the ability to assemble a complete life insurance portfolio.

Basic Term Life and Accidental Death and Dismemberment Insurance

Moog provides eligible employees with basic term life and accidental death and dismemberment coverage at no cost to you and enrollment is automatic.

Basic Term Life:

The benefit is equal to a multiple of your annual salary.

Accidental Death and Dismemberment:

If you are seriously injured or lose your life in an accident, you will be eligible for a benefit equal to your basic term life coverage.



HOW MUCH LIFE INSURANCE DO YOU NEED?

Many financial experts recommend you have at least five to eight times your household income in life insurance. To calculate the level sufficient to cover your needs, you should consider your current income and how much it costs to maintain your family's standard of living. You should also consider your current expenses and your family's future financial needs such as the following:

Current Expenses

- Home Mortgage
- Car Payments
- Credit Card Debt
- Other Debt

Future Needs

- Child Care
- College Tuition
- Spouse's Retirement
- Routine Household Expenses

After you add your financial responsibilities, how does the sum compare with your current coverage?

SUPPLEMENTAL LIFE INSURANCE

Supplemental Life Insurance is the most affordable way to protect your family’s financial security if something happens to you. It replaces your income in the event of your death, and ensures that the ones who depend on you can support themselves financially in your absence.

Advantages Include:

- Helps provide for a family’s loss of income
- Covers short-term debts and needs
- Provides additional insurance protection during the child-raising years
- Provides longer term protection to help your family pay off a mortgage or to help pay for a college education

You can purchase life insurance for your eligible dependents as well. The cost for Spouse Life Insurance is based on the level of coverage you choose. For Child Life Insurance, the cost is also based on the level you choose; however, the cost is the same no matter how many children you are covering.

Plan Features

- You have the ability to purchase life insurance for yourself, your spouse, your children, and/or any other eligible dependents.
- Coverage for your needs, which means you purchase the amount of coverage that is right for your needs.
- No physical exams are required to apply for coverage (although health questions may be asked).
- Coverage is portable — you can take your policy with you if you leave the company and carry your life insurance coverage into your retirement.

WHOLE LIFE INSURANCE

Whole Life Insurance completes your family’s protection, providing a cost-effective benefit for final expenses such as funeral costs, credit card debt, and medical bills. As long as premiums are paid, this policy will not expire, and premiums will not change due to your age.

Plan Features

- **Guaranteed Acceptance:** No physical exams are required to apply for coverage (health questions may be asked).
- **Family Coverage:** You can purchase coverage for yourself, your spouse, and your children.
- **Portable Coverage:** You can take your policy with you if you leave the company or retire.
- **Coverage for Your Needs:** You can purchase the precise amount of coverage that is right for your needs.
- **Policy Builds Cash Value:** As the policy builds cash value, you can eventually use it to make premium payments or to pay urgent expenses while you are still alive.

The premium cost for this benefit is determined by your age and the amount of coverage you elect. Locking in a lower premium now will help you save money in the future.

| LIFE INSURANCE COMPARISON CHART | | |
|---|---|---|
| BASIC TERM LIFE | SUPPLEMENTAL LIFE | WHOLE LIFE |
| The premiums are fully company paid | The premiums increase as you age | The premiums don’t change |
| Replaces your income so that your family can cover items like mortgage, tuition, and household expenses | Replaces your income so that your family can cover items like mortgage, tuition, and household expenses | Pays for final expenses, such as funeral costs and nuisance debt such as credit cards |
| Coverage ends when you leave the company | This is an individual policy that you can continue | This is an individual policy that you can continue |



DISABILITY INSURANCE

A disabling injury or illness that keeps you out of work could have a devastating impact on your income, jeopardizing your ability to cover normal household expenses. With the right Disability Insurance, your income is protected, relieving you of the anxiety of depleting your savings to pay your bills.

According to the Social Security Administration, 25% of all 20-year-olds will become disabled and unable to work sometime before reaching the age of 67. Disability Insurance can keep your life on track, no matter what occurs.

- One in three women and one in four men will have a disability that keeps them out of work for 90 days or more at some point during their career.
— *The Life and Health Insurance Foundation for Education*
- Most disabilities are not work-related, and therefore not covered by workers' compensation.
— *National Safety Council*



Short-Term Disability Insurance

Short-Term Disability Insurance replaces a portion of your income if an injury or illness forces you out of work for an extended period of time. Moog provides basic short-term disability coverage at no cost to you and enrollment is automatic. The coverage protects your income in the event of a non-work related injury or illness, for up to 26 weeks.

Long-Term Disability Insurance

Moog also provides Long-Term Disability Insurance to protect your finances when your disability continues beyond the period covered by the short-term disability plan. This benefit is also fully paid for by the company and enrollment is automatic after one year of service.

Supplemental Long-Term Disability Insurance

Depending on your household budget, you may need additional long-term disability coverage. To help you increase your disability protection, Moog has negotiated a special rate that allows eligible employees to purchase additional coverage at an affordable cost.

NOTE: Supplemental Long-Term Disability Insurance coverage is available to purchase after one year of service.



FLEXIBLE SPENDING ACCOUNTS (FSAs)

Flexible Spending Accounts (FSAs) enable you to put aside money for important expenses and help you reduce your federal income taxes at the same time. Moog offers several types of Flexible Spending Accounts — a Health Care Flexible Spending Account, a Dependent Care Flexible Spending Account, and a Limited Purpose Flexible Spending Account. These accounts allow you to set aside pre-tax dollars to pay for certain out-of-pocket health care or dependent care expenses.

How Flexible Spending Accounts Work

1. Each year during the enrollment period, you decide how much to set aside for health care and/or dependent care expenses.
2. Your contributions are deducted from your paycheck on a before-tax basis in equal installments throughout the calendar year.
3. As you incur health care or dependent care expenses throughout the year, submit a claim form for reimbursement. Your claim will be processed and you will be reimbursed from your account. Or use your FSA card to pay for eligible expenses at the point of sale. You will not be paying out-of-pocket, so there's no need to fill out a claim form and wait for reimbursement.



Please note that these accounts are separate — you may choose to participate in one, both, or neither. You cannot use money from the Health Care FSA to cover expenses eligible under the Dependent Care FSA or vice versa. For more information, visit naviabenefits.com.

Plan Ahead: It is important to carefully estimate your health and dependent care expenses. The Health Care and Limited Purpose FSA plans allow you to roll over up to \$660 in FSA funds from one calendar year to the next. Under federal law, any unused FSA funds in excess of \$660 will be forfeited.

**YOU MUST ACTIVELY RE-ENROLL IN FSA PLANS EACH YEAR.
YOU ARE NOT AUTOMATICALLY RE-ENROLLED.**

| PLAN | ANNUAL MAXIMUM CONTRIBUTION* | EXAMPLES OF COVERED EXPENSES |
|--|---|--|
| Health Care Flexible Spending Account | \$3,300 | Copays, deductibles, orthodontia, over-the-counter medications, etc.** |
| Dependent Care Flexible Spending Account | \$5,000 (\$2,500 if married and filing separate tax returns) | Day care, nursery school, elder care expenses, etc.** |
| Limited Purpose Flexible Spending Account (Bronze Plan participants only) | \$3,300 | Dental crowns, orthodontia, laser vision correction |

* Maximum contributions are subject to change per IRS guidelines.

** See IRS Publications 502 and 503 for a complete list of covered expenses.

NOTE: Employees in the DCFS are subject to non-discrimination testing and high earners may be required to decrease their contributions mid-year.



HEALTH SAVINGS ACCOUNT (HSA)

If you enroll in the Bronze CDHP medical plan, you'll have access to a Health Savings Account (HSA). You can think of your HSA as a personal savings account for your health care expenses, with some impressive tax advantages. Your HSA even includes a contribution from Moog that can be a big help throughout the year. To be eligible for an HSA, you must be covered under the CDHP plan, you cannot have other health coverage, be enrolled in Medicare, or claimed as a dependent on someone else's tax return.

Moog will contribute \$1,000 for those enrolled in individual coverage or \$2,000 for those enrolled in family coverage. This amount will be pro-rated based on date of hire. You also have the option of contributing to your HSA with payroll deductions. This allows you to contribute before taxes are deducted – which reduces your taxable income. When you incur a medical expense and you haven't hit your deductible yet, or your coinsurance, you will need to pay for those costs out-of-pocket or you can choose to use the money in your HSA to help pay for it. Unlike a Flexible Spending Account (FSA), the HSA funds are not use-it-or-lose-it. If you haven't used all the money in your HSA by the end of the year, any remaining funds will roll over year after year indefinitely. In addition, if you ever leave the company, you take your HSA balance with you.



Keys to Growing Your HSA:

- Try not to use your HSA for routine expenses. If you can pay out-of-pocket, leave your HSA funds alone because they may grow for when you need them in the future. Remember, the money in your HSA is yours. You keep it if you don't spend it.
- Have supplemental medical coverage so that unexpected serious injuries or accidents don't wipe away the money in your HSA.
- Monitor your fund's growth. Like a 401(k), your HSA funds may, in some circumstances, be invested. Make sure your money is growing at an acceptable and safe pace.

| | 2025 IRS Limits* | MOOG CONTRIBUTES | YOUR MAXIMUM CONTRIBUTION |
|------------------------|------------------|------------------|---------------------------|
| Employee Only Coverage | \$4,300 | \$1,000 | \$3,300 |
| Family Coverage | \$8,550 | \$2,000 | \$6,550 |

* Individuals age 55 or older in 2025 can contribute an additional \$1,000 in "catch-up" contributions.

NOTE: Amounts change yearly per IRS guidelines.

OTHER BENEFITS

NEW! VIRTa Nutrition Program

Virta is your guided nutrition program – available at \$0 cost to anyone enrolled in a BCBS medical plan. Personalized to your lifestyle and health goals, Virta uses nutrition science to build custom plans that help you lose weight, lower your blood sugar, and transform your health. For more information, visit www.virtahealth.com/join/moog.

Legal Insurance

Hyatt Legal Plan provides legal counsel for covered services, in addition to telephone advice and office consultations on a number of matters; including wills, estate and future planning, civil lawsuits, and more. Enroll in this voluntary plan for \$17.50 per month and be prepared for life's legal issues through convenient payroll deductions. For more information, visit www.legalplans.com or call **1-800-821-6400**.

Auto and Home Insurance

Moog is happy to introduce you to an opportunity to apply to obtain discounted auto and home insurance from Farmers GroupSelect. Farmers GroupSelect provides you with access to insurance coverage for your personal insurance needs. Policies available include auto, condo, renter's boat, personal excess liability, and more. Here are some of the premium discounts* and potential savings:

- Group discount up to 15%
- Bank account deduction discount
- Tenure discount up to 20% (not available in MA)
- Superior driver discount – up to 10% (not available in MA)
- Automated payment discount
- Multi-policy discount
- Multi-vehicle savings ... and more

For more information and your free no obligation quotes, call **1-800-438-6381**. Don't forget to mention your group discount code C03.

**Based on the average nationwide discount available*

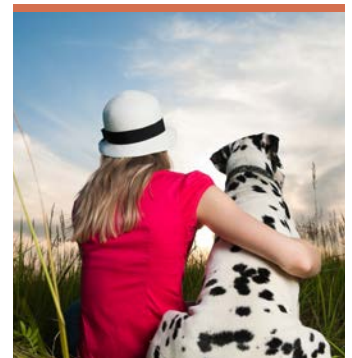
Identity Theft Insurance

Identity Theft Protection, through Norton LifeLock, delivers peace of mind. This proactive identity-monitoring service sends alerts at the first signs of fraud and restores the misuse of personal information that puts your identity at risk and is conveniently offered through payroll deductions. Enroll in this voluntary plan for \$9.99 per month for yourself, and \$17.98 per month for family coverage. For more information, visit www.nortonlifelock.com or call **1-800-607-9174**.

Pet Insurance

A voluntary Health and Accident Insurance plan through Nationwide is available to Moog employees for dogs, cats, birds, and a variety of exotic pets at a discounted rate. Visit benefits.petinsurance.com/moog to enroll online or call **1-888-**

899-4874 to enroll through a customer service representative. You are eligible to enroll in Pet Insurance at any time throughout the year as the number of pets you own changes.



Specialty Pharmacy

As part of your prescription plan with CVS/Caremark, Moog is introducing the **PrudentRx Copay Program**, which allows individuals to fill covered specialty prescriptions at no cost. PrudentRx will work with you and the drug manufacturers to get copay card assistance and will manage enrollment and renewals for those copay cards on your behalf. Applicable employees will receive communications from PrudentRx to enroll for the program.

2025 BENEFITS PLAN PREMIUMS

Below are the employee contribution amounts for benefits effective January 1, 2025 through December 31, 2025.

Medical Plans

| Monthly Rates* | GOLD PPO | SILVER PPO | BRONZE CDHP | KAISER PERMANENTE (CA ONLY) |
|-----------------------|----------|------------|-------------|-----------------------------|
| Employee Only | \$175.99 | \$141.09 | \$103.78 | \$130.10 |
| Employee + Spouse | \$401.26 | \$320.99 | \$235.18 | \$285.51 |
| Employee + Child(ren) | \$316.65 | \$253.83 | \$186.68 | \$259.77 |
| Family | \$544.31 | \$436.12 | \$320.46 | \$389.86 |

Dental Plans

| Monthly Rates | STANDARD DENTAL PLAN | PREMIUM DENTAL PLAN |
|-----------------------|----------------------|---------------------|
| Employee Only | \$3.96 | \$11.05 |
| Employee + Spouse | \$7.92 | \$22.09 |
| Employee + Child(ren) | \$7.92 | \$22.09 |
| Family | \$11.88 | \$33.13 |

Vision Plans

| Monthly Rates | 2025 VSP BASE PLAN | 2025 VSP BUY-UP PLAN | 2025 VSP BUY-UP PLAN (FOR THOSE ENROLLED IN MEDICAL COVERAGE) |
|-----------------------|--------------------|----------------------|--|
| Employee Only | \$5.86 | \$13.10 | \$7.24 |
| Employee + Spouse | \$9.33 | \$20.85 | \$11.52 |
| Employee + Child(ren) | \$9.57 | \$21.40 | \$11.83 |
| Family | \$15.41 | \$34.42 | \$19.01 |

Critical Illness Insurance

| Monthly Rates (per \$15,000 of coverage) | | | | | | | | | | | |
|---|---------|---------|---------|---------|---------|---------|---------|---------|---------|----------|----------|
| Age | <25 | 25-29 | 30-34 | 35-39 | 40-44 | 45-49 | 50-54 | 55-59 | 60-64 | 65-69 | 70+ |
| Employee | \$3.45 | \$4.15 | \$5.52 | \$7.60 | \$11.11 | \$16.63 | \$25.68 | \$36.72 | \$53.37 | \$79.75 | \$122.71 |
| Employee + Spouse | \$6.96 | \$7.61 | \$10.40 | \$14.56 | \$20.80 | \$31.92 | \$46.47 | \$65.85 | \$94.32 | \$139.36 | \$215.61 |
| Employee + Child(ren) | \$6.96 | \$6.96 | \$9.03 | \$10.39 | \$14.56 | \$20.09 | \$29.12 | \$40.23 | \$56.16 | \$83.20 | \$125.52 |
| Family | \$10.39 | \$11.12 | \$13.85 | \$18.00 | \$24.24 | \$35.35 | \$49.92 | \$69.36 | \$97.75 | \$142.80 | \$219.12 |

Accident Insurance

| Monthly Rates | |
|-----------------------|---------|
| Employee Only | \$9.00 |
| Employee + Spouse | \$17.52 |
| Employee + Child(ren) | \$20.56 |
| Family | \$24.44 |

Hospital Indemnity Insurance

| Monthly Rates | |
|-----------------------|---------|
| Employee Only | \$12.20 |
| Employee + Spouse | \$28.52 |
| Employee + Child(ren) | \$18.92 |
| Family | \$35.28 |

Whole Life Insurance

| Monthly Rates |
|---|
| Rates are calculated based on age, tobacco use, amount of coverage elected, and other such factors, and will be provided at the time of enrollment. |

Every effort has been made to ensure the information in this document is accurate. However, if there is any inconsistency between this document and the applicable plan documents, the official plan documents will always govern.

NOTE: Actual plan provisions for Moog (“the Company”) benefits are contained in the appropriate plan documents, including the Summary Plan Description (SPD) and incorporated benefit/carrier booklets. The Benefit Enrollment Guide is a summary only and does not describe each benefit option. This Benefit Enrollment Guide provides updates to your existing SPD as of the first day of plan year, which describes your health and welfare benefits in greater detail. Until the Company provides you with an updated SPD, this guide is intended to be a Summary of Material Modification (SMM) and should be retained with your records along with your SPD. As always, the official plan documents determine what benefits are available to you. If any discrepancy exists between this guide and the official documents, the official documents will prevail. The Company reserves the right to amend or terminate any of its plans or policies, make changes to the benefits, costs, and other provisions relative to benefits at any time with or without notice, subject to applicable law.