

**Client Information:**

OPEN MOBILITY FOUNDATION  
 400 TRADECENTER STE 5900  
 WOBURN, MA 018017471  
 Phone: (781)425-5073  
 Fax:  
 Contact:  
 Client Associated Subclients: **4576200**

Client/Version No.: **4576200-93-1-R**  
 Date: 08/23/2022  
 Print Date: 10/19/2022  
 Business: NONPROFIT

Workforce Optimization - Full Bundle

Benefit Package: **Freedom Premier - U**  
 Life and AD&D: **Auto Enroll**  
 Basic STD and LTD: **Auto Enroll**

**Employee Monthly Contribution**

Coverage Group/Coverage Option	Employee Only	Employee + Spouse	Employee + Child	Employee + Children	Employee + Family
250 Deductible	0.00	0.00	0.00	0.00	0.00
# of Enrollment	0	1	0	0	1
500 Deductible	0.00	0.00	0.00	0.00	0.00
# of Enrollment	0	0	0	0	0
1500 Deductible - HDHP	0.00	0.00	0.00	0.00	0.00
# of Enrollment	0	0	0	0	0
5000 Deductible - HDHP	0.00	0.00	0.00	0.00	0.00
# of Enrollment	0	0	0	0	0
BCA HMO North	0.00	0.00	0.00	0.00	0.00
# of Enrollment	0	0	0	0	0
BCA HMO South	0.00	0.00	0.00	0.00	0.00
# of Enrollment	0	0	0	0	0
Kaiser HMO CA North	0.00	0.00	0.00	0.00	0.00
# of Enrollment	0	0	0	0	0
Kaiser HMO CA South	0.00	0.00	0.00	0.00	0.00
# of Enrollment	0	0	0	0	0
UHC of CA HMO North	0.00	0.00	0.00	0.00	0.00
# of Enrollment	0	0	0	0	0
UHC of CA HMO South	0.00	0.00	0.00	0.00	0.00
# of Enrollment	0	0	0	0	0
50 Deductible Dental and Vision	0.00	0.00	0.00	0.00	0.00
# of Enrollment	0	1	0	0	1

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Group No.	Group Name	No. of Employees	Service Fee Percentage*	Annual Payroll \$
10	EXECUTIVE	1	10.51%	\$180,000.00
11	MANAGEMENT	1	45.58%	\$128,400.00
12	MEMBER SUPPORT	1	37.31%	\$118,087.44
<b>Total:</b>		<b>3</b>	<b>28.49%</b>	<b>\$426,487.44</b>
		Full Time:	3	
		Part Time:	0	
		Seasonal:	0	

\*Composite Service Fee Percentage. The Insperity service fee percentages ("Service Fee Percentages") are established for each employee (Staff) based upon a number of factors and estimates regarding, but not limited to, the following: a) information provided by the Client on Schedule A, b) federal and state statutory requirements including taxes and fees, c) insurance costs, and d) professional services and administrative fees (together "Insperity Allocations"). Any changes in the Schedule A information provided by the Client (including payroll amounts, additions or reductions in Staff, individual employee benefit elections, or workers' compensation codes or location), any changes in Insperity's employer tax requirements, and any statutory changes required by law shall be reflected in the individual Service Fee Percentages for each Staff as they occur and may result in a change to the composite Service Fee Percentage. Each pay period Client shall pay Insperity the total service fee ("Total Service Fee"). The Total Service Fee is comprised of the actual gross payroll of Staff during such pay period plus the applicable Service Fee Percentage for each Staff multiplied by the gross payroll for each Staff, plus any other charges related to services provided to Client including, but not limited to, allocations for medical costs and professional services and administrative fees relating to Staff who do not receive an Insperity payroll check for that payroll period. All charges shall be reflected on the Insperity invoice.

Please note that to the extent that the language set forth above conflicts with the language contained in the Insperity Client Service Agreement ("Agreement") including any related addenda that are executed by you, the actual language contained in such Agreement and any related addenda shall control. Client acknowledges and agrees that the respective obligations of the parties are subject to the specific terms and conditions addressing applicable laws and other terms and conditions applicable to the Agreement set forth at [https://portal.insperity.com/cs/nsp/SitePage/site\\_information](https://portal.insperity.com/cs/nsp/SitePage/site_information) (login required) or available upon request, as revised from time to time. Client's continued use of Insperity's services indicate acceptance of these terms.

Special Provisions:

**R&R/#600000, #4576200**

Rate Schedule Effective From: \_\_\_\_\_ through \_\_\_\_\_ .

**FOR INSPERITY:**

Name:

Title: Managing Director, Client Relations & Renewals

**FOR CLIENT:**

Name:

Title: