

Compensation Disclosure

Compensation.

Brown & Brown entities (“we”) receive commissions and fees from insurance carriers and other vendors as part of our compensation for placing and servicing your policies and products. Commissions are generally a percentage of the total premium and may be based on a schedule. In some cases, we may also receive direct compensation from the plan or the plan sponsor (service and/or consulting fees). Brown & Brown’s expected compensation (commissions and fees) for insurance products and related services placed on your behalf is hereby disclosed in the attached Addendum.

In addition to commissions and fees paid to Brown & Brown by insurance or reinsurance carriers or third-party vendors as mentioned above, Brown & Brown entities may also receive supplemental and/or bonus compensation from the carrier or vendor based on new sales volume or retention, for example. Such supplemental and/or bonus compensation may consist of guaranteed override income based on our agency’s business production and retention with the carrier or vendor, general agency fees, and/or sales or retention bonuses and is partially derived from your premium dollars, after being combined (or “pooled”) with the premium dollars of other insureds that have purchased similar types of coverage. Brown & Brown may not know in advance if such a supplemental and/or bonus payment will be made by a particular carrier or vendor, or the amount of any such payments until the underwriting year is closed. If we are unable to calculate the exact compensation that may be earned at the time of the contract, a formula with a good faith estimate of the expected amount will be provided in the attached Addendum. If the amount cannot be calculated or estimated at the time of this disclosure, we will indicate it as such on the Addendum & provide the information upon written request when available.

Brown & Brown entities may also receive invitations to programs sponsored and paid for by insurance carriers or other vendors to inform brokers regarding their products and services, including possible participation in company-sponsored events such as trips, seminars, and advisory council meetings, based upon the total volume of business placed with the carrier you select. We may also receive non-monetary compensation (including but not limited to the value of travel, meals and entertainment expenses associated with such meetings, gifts, tickets for sporting and entertainment events and awards). Such compensation allocated to your policy is not normally expected to equal or exceed a sum of \$250.00 in aggregate, when all non-monetary compensation items received are combined. If non-monetary compensation is estimated to exceed \$250.00 in aggregate, a good faith estimate will be included on the Addendum.

Brown & Brown entities may, on occasion, receive loans or credit from insurance companies. Additionally, in the ordinary course of our business, we may collect and remit premiums on behalf of the carrier or vendor and may earn and retain interest on premiums or administrative fees you pay from the date we receive them until the date remitted to the carrier or vendor.

If an intermediary is utilized in the placement of coverage, the intermediary may or may not be owned in whole or part by Brown & Brown, Inc. or its subsidiaries. Brown & Brown entities operate independently and are not required to utilize other companies owned by Brown & Brown, Inc., but routinely do so. In addition to providing access to the carrier or other vendor, the Wholesale Insurance Broker/Managing General Agent may provide additional services including, but not limited to: underwriting, quoting, plan implementation assistance, claims advocacy and eligibility administration services. . Compensation paid for those services is either derived from your premium payment, which may on average be up to 15% of the premium you pay for coverage and may include additional fees charged by the intermediary or is paid to the Wholesaler/Managing General Agent via override.

Questions and Information Requests. Should you have any questions, or require additional information, please contact this office at 1-800-733-3131 or, if you prefer, submit your question or request online at <http://www.bbinsurance.com/customerinquiry/>

ADDENDUM

Direct Compensation

Source of Compensation	Name of Carrier/Vendor or Other Payer	Coverage Line or Product	PEPM OR Commission/Fee \$ Amount, Percentage or Schedule
<input type="checkbox"/> Plan/Plan Sponsor <input checked="" type="checkbox"/> Carrier/Vendor <input type="checkbox"/> Other	MetLife	Dental	Flat 10% of premium
<input type="checkbox"/> Plan/Plan Sponsor <input checked="" type="checkbox"/> Carrier/Vendor <input type="checkbox"/> Other	Vision Service Plan	Vision	Flat 10% of premium

Indirect Compensation

Source of Compensation	Name of Carrier, Vendor or Other Payer	Type of Indirect Compensation	Amount of or Description of Calculation for Indirect Compensation
<input type="checkbox"/> Plan/Plan Sponsor <input checked="" type="checkbox"/> Carrier/Vendor <input type="checkbox"/> Other	MetLife	Bonus/Supplemental Compensation	Pending
<input type="checkbox"/> Plan/Plan Sponsor <input checked="" type="checkbox"/> Carrier/Vendor <input type="checkbox"/> Other	Vision Service Plan	Bonus/Supplemental Compensation	<input checked="" type="checkbox"/> No additional compensation expected- N/A