

FAST TRACK TO **YOUR** SALES TARGETS VIA

OUR ROBUST B TO B AND B TO C REACH.



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MY25 IS POWERED BY MAINSTAY, INC.



HIGHLIGHTS ***



My25's expertise and innovation are accelerating critical outcomes on a broad basis—including increases to quality, enjoyment, and length of life and reductions to associated expenses for invested stakeholders.



Mainstay is the name of our company and My25 is the brand defining our preventive health/disease management education and mealtime resources content—all delivered electronically with personalization and high engagement value.

Mainstay's team of professionals has a longstanding track record of success. Our founders sold their first start-up to Fortune 500 health care leader Baxter International and spearheaded the corporate integration...this Baxter division was ultimately spun off with \$5 billion in annual revenue.

We've built a rock-solid foundation—to now leverage and propel forward.

Via an innovative B to B and B to C combination model, we strategically reach some of the most influential entities in the U.S. and their key decision makers (our subscribers, B to B) and...uniquely, a base of individual consumers (subscriber constituents and our audience, B to C).

My25's subscribers and audience present substantial opportunity and exposure for our partners doing business in these industries: pharmaceutical, food, health care, medical devices, technology, and entertainment/leisure.

Our weekly email send has a 100% open rate. Our subscription retention rate is 98%.

7 days each week, approximately 15,000 professionals at work—such as leaders and staff in for-profit and nonprofit business, health care, and government—and individuals at home, across 30 states, engage with My25's content. This is our launch pad; our base will grow exponentially over the next 24 months and continue upwards a result of trends and strategic next steps and alliances in place.

On average, approximately 86% of the My25 audience responsible for purchases buys exactly (including brand specific) what we recommend in our weekly email send.

Compelling...My25's overall audience potential is conservatively 70 million individuals throughout the U.S.

The Nielsen Company and Fifth Quadrant Analytics conclude that My25's audience spends more and makes more shopping trips than all households in the U.S., with annual disposable income exceeding 1 trillion dollars.

Stakeholders (our subscribers)—spanning formidable organizations and government entities—have urgent financial need to educate and bolster preventive health improvement throughout My25's audience (subscriber constituents). A key segment of the My25 audience ranges in age from 18 to 85 years old and unnecessarily struggles with two to three times the average rates of costly and debilitating overweight conditions, diabetes, hypertension, and associated chronic conditions; prescription medication use is inordinately high. Average, annual health care costs range between \$17,300 and \$35,200 per person—well above the national average.

The My25 Network, available to sponsor and advertiser partners, includes a variety of multi-media platforms delivering our robust content and weekly toolkit. There is unique benefit to leveraging My25's rock-solid foundation and growing stronger together.





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MAINSTAY'S MY25 TEAM

My25's team is comprised of preventive health, disease management, nutrition, culinary, business development, technology, and additional professionals—each with an impressive and respected track record.





Mainstay's founders—James D. Vail and Sylvia Landy Vail, both Northwestern University Kellogg MBAs—launched their first start up in their basement. The company focused on customized patient care; elevated quality; streamlined operations; and reduced expense for hospitals. The business was quickly steered to a nation-wide concern (and out of the basement) and was acquired by Fortune 500 health care leader Baxter International. This division was ultimately spun off with \$5 billion in annual revenue.

Jim and Sylvia apply the same passion and acumen to Mainstay. They started the company after years of industry experience and identifying a need to support organizations and entities urgently driving enhanced preventive health and disease management for broad-based constituencies throughout the U.S. Targeted constituencies struggle with highly elevated rates of costly obesity, diabetes, hypertension and associated chronic conditions.

The duo is particularly adept at customizing deliverables at a reasonable cost, managing scale and quality, and realizing profitable growth to the benefit of multiple stakeholders. The United States Department of Agriculture (USDA), taxed with improving the health of the U.S. population, backed initial trails of *My*25 on a nationwide basis to test the efficacy of Mainstay's approach. Based on highly positive and multi-faceted outcomes, the company commercialized and hasn't looked back since.

Jim and Sylvia have built a pivotal reputation within the preventive health and disease management sphere, human services industry, and government sector...which they leverage daily while spearheading all aspects of Mainstay and its *My*25 Network.

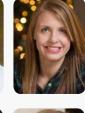


MAINSTAY/MY25 CORE MOVERS & SHAKERS

























ABOUT ***

Hold tight...we know this must seem, at a quick glance, like too long of a story to fit in your busy day. But we know you'll appreciate hearing how we're generating primary demand that is benefitting a highly receptive audience and influential stakeholders with an urgent need.

Very unlike run-of-the-mill preventive health efforts, we laser focus on a distinct, growing, and sizable niche via personalized resources and an innovative B to B and B to C combination reach model. Below we share more, so you understand how we're able to offer pinpointed exposure, opportunity, and unique stickiness to our sponsor and advertiser partners.

The fundamental problem My25 addresses has to do with the poor health of people with disabilities living in the same kinds of community-based houses and apartments most of us reside in; these individuals typically work, attend school, or participate in day programs in their surrounding neighborhoods. Living arrangements are permanent, not transient. For the most part, activities of daily living and health care-related decisions largely rest with the individual and associated caregivers and family members. All households plan, shop for, and cook their own meals.

Some households are comprised of two to six individuals with disabilities and paid caregivers called staff members. Additional residences are made up of one or two people living fairly independently, but with some episodic support from parents and others. The remaining households largely have one person with a disability residing with family or foster-caregivers who are not disabled.

A majority of the population of people with disabilities in community-based residences—as a result of eating the wrong foods in the wrong amounts and genetic, pharmacological, and environmental complications—unnecessarily struggles with

> two to three times the mainstream rates of obesity, diabetes, hypertension, and associated chronic conditions that are debilitating, expensive, and relentlessly tapping out health care funding streams due to extremely high acute care and medication expense. Use of prescription drugs is inordinately elevated, averaging 10+ different medications per day per person to control diabetes, metabolic syndrome, hypertension, depression, mental illness, and more. Annual health care costs average between \$17,300 to \$35,200 per person—outpacing national averages by far.

Effective, tailored tools and education have not been available to address the unique health, nutrition and mealtime needs of these individuals on a broad basis. Associated caregivers and family members often face similar heath challenges due to their own poor health and eating habits and scant knowledge. In combination...caregivers, family members and people with disabilities (those with challenges related to: mental illness, traumatic brain injury, and intellectual/developmental/

behavioral complications) are conservatively a population of 70 million individuals in the U.S.

As a result of diminished health, quality of life for people with disabilities is subpar, often impacting the individual's ability to proactively engage in daily life within their community. In addition to a solution for the individual and associated family/foster caregivers, Mainstay recognized that allied stakeholders—for-profit and nonprofit human services organizations with oversight and revenue responsibilities and private-business and government funders—are on the hook for unnecessary and run-away expenses as a result of these circumstances.



So Mainstay developed an innovative, content-based approach to turn the tide for a broad basis of this vital population and, in the process, benefit multiple stakeholders that have an urgent need. Our efforts have always centered on what respected health care professionals and experts confirm: Food is the primary driver behind preventive health for most anyone, including people with disabilities who have a variety of complicating issues.

PRE-MY25, 70% of people with disabilities in community-based households are overweight/obese and moving away from a normal BMI.

AFTER MY25 START, 6 MONTHS IN, 50% of people with disabilities in community-based households are at or moving toward a normal BMI; the number increases to 70%, 18 months in.

We facilitate these outcomes as a result of My25's preventive health/disease management education and mealtime toolkit content. Included are menu plans, grocery shopping lists, and recipe prep steps that are: tailored to the special needs of this population; customized for the routines of each household (such as breakfast choice on Saturday mornings, pizza night on Thursdays, only half of the household eats in on Monday evenings since it's bowling night, and more); and personalized for each individual, no matter how complicated, such as for: obesity, diabetes, GERD, lactose intolerance, allergies, gluten-free, dysphagia, food likes/dislikes, and more.

Overall needs and individual food preferences are gathered through a simple intake profile form. This information is combined within each household to create what we refer to as common denominator menu plans that streamline recipe prep on a daily basis (meaning, as an example: one dinner meal that satisfies all nuances for all household members). No two households have the same menus. Our proprietary software, Pinpoint, is a major workhorse behind this effort, as is My25's high-touch customer support team.

Spearheaded by our chef and preventive health and nutrition experts, menus are continually refreshed to reflect food trends/prices, the season, birthdays, and celebrations on the calendar. Routinely, we also update specifics associated with individuals in each household, so we are always current regarding health and food preferences/dietary needs. On average, approximately 86% of the *My*25 audience responsible for purchases buys exactly (including brand specific) what we recommend in our weekly email send.

My25's toolkit of personalized, mealtime-related content is emailed to subscribers each week; for a variety of reasons, subscribers do not usually directly interface with our Pinpoint software. This email send has a 100% open rate. From here, individual recipients typically download the information for printing out and posting on kitchen refrigerator and cupboard doors as the must-follow meal plan for the week. My25's weekly email is also forwarded to multiple individuals within each subscribing organization. All told, approximately 15,000 professionals at work and individuals in their homes (together comprising the My25 audience) currently interface with My25 content, every day throughout the year.

My25's approach to eating better is built on moderation versus deprivation—there are very few foods considered off limits. Yes, this means pizza and French fries are fair game every once in a while. My25's nutrition and health improvement foundation conforms to the Dietary Guidelines for Americans and hinges on plate rebalancing and eating at least 25 grams of fiber each day. Fiber is a super nutrient advocated by highly-respected heath care experts, because fiber is filling and naturally reduces empty-calorie snacking. Fiber also has cancer and heart disease prevention benefits. Foods with a high fiber content include whole wheat and whole grain items, fruits, vegetables, nuts, and beans.









We scaffold the weekly toolkit send, just outlined above, with multi-media, educational and engagement-driven content that focuses on: preventive health, disease management, nutrition, mealtime, kitchen skills, community, celebration, and enjoyment of life. This enhanced content is accessed through our web-based, mobile-optimized Portal and pushed through a variety of additional platforms. All of these resources comprise the *My25* Network, available to our sponsor and advertiser partners.

Via an innovative B to B and B to C combination model, we strategically reach some of the most influential entities in the U.S. and their key decision makers (B to B) and ...uniquely, a base of individual constituents/consumers (B to C). The benefit to our sponsors and advertisers is outlined below.

SUBSCRIPTIONS...B TO B

provides opportunity and considerable exposure for sponsor and advertiser partners to their own corporate/organization/government targets and decision makers regarding products and services in these industries:

 pharmaceutical, food, health care, medical devices, human services, technology, entertainment/leisure, and more.

MY25 CONTENT/AUDIENCE...B TO C

—provides opportunity and considerable exposure to sponsor and advertiser partners' own end-user consumers/targets for their products and services in these industries: pharmaceutical, food, health care, medical devices, human services, technology, entertainment/leisure, and more.

Currently, My25 delivers content throughout 30 states to our subscribers—including the four largest human services organizations in the U.S. (one of which is the largest in the world), managed care organizations, state governments, and state association groups—for:

- 1) their constituents who are in poor health and driving up associated expense that subscribers are bankrolling; and
- 2) others also considered constituents because of their association with the targeted individuals. In total, both sets of constituents make up the audience (four groups) interfacing with the *My25* Network on an everyday basis. Profiles of these individuals are outlined on page 11.

The My25 Network gets its heartbeat—and therefore its differentiable value—from our ability to: leverage and tie together our experiences and an innovative B to B and B to C combination model so effectively; reach a formidably-sized, captive and sticky niche through personalized resources; uniquely tailor information to the urgent, multi-faceted needs within human services; and solidify relationships based on compelling health, disease management and financial outcomes.

There is currently no direct competitor to My25. Mainstream diet programs are often attempted; typically, these "solutions" are abandoned as unsuccessful and missing the mark in a vast majority of instances. This is largely due to a lack of the laser focus and expertise we apply to the human services sphere and its four dynamic audience groups.

We recently introduced our next generation of content-based, outcomes-driven products to address the burgeoning expansion within the human services industry into foster and home-based support for people with disabilities. Learn more on pages 24 and 26.

SUBSCRIBER & AUDIENCE PROFILES

Via an innovative B to B and B to C combination model, we strategically reach some of the most influential entities in the U.S. and their key decision makers (B to B) and...uniquely, a base of individual constituents/consumers (B to C).

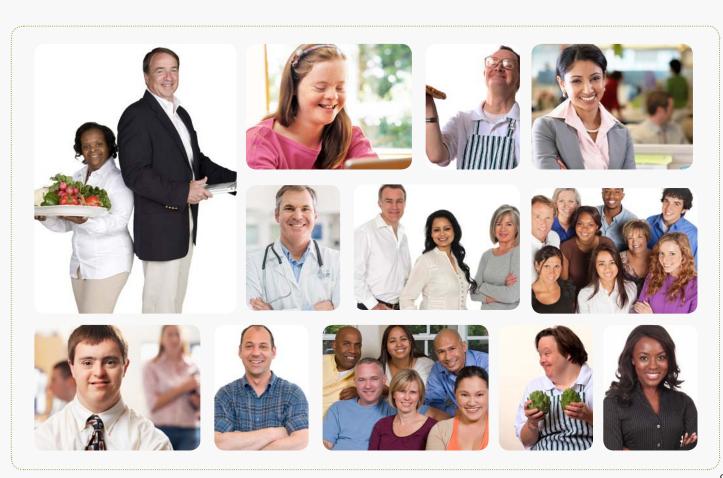
THE BENEFIT TO OUR SPONSORS AND ADVERTISERS...

SUBSCRIPTIONS...B TO B

provides opportunity and considerable exposure for sponsor and advertiser partners to their own corporate/ organization/government targets and decision makers regarding products and services in these industries: pharmaceutical, food, health care, medical devices, human services, technology, entertainment/leisure, and more.

MY25 AUDIENCE...B TO C

provides opportunity and considerable exposure to sponsor and advertiser partners' own end-user consumers/targets for their products and services in these industries: pharmaceutical, food, health care, medical devices, human services, technology, entertainment/leisure, and more.



SUBSCRIBERS





Currently, My25 delivers content throughout 30 states to our subscribers that include the four largest human services organizations in the U.S. (one of which is the largest in the world), managed care organizations, state governments, and state association groups. In each instance, these for-profit, nonprofit and governmental entities are interested in impactful, tailored education and tools to help the constituencies they underwrite achieve positive preventive health outcomes. The primary interest behind a My25 subscription centers on quality of life improvement and acute care and prescription medication reductions.

Professionals and staff within subscribing organizations represent these responsibilities, areas of knowledge, and routine interface: health care, disease management, nutrition, finance, business, and human services.

We award Gold Health Leadership Excellence Recognition to organizations/ entities when they subscribe to My25 for their constituencies. We award Platinum recognition when beneficial health, quality and expense outcomes are achieved.

Subscribers can, and do, include the emblem on their web sites and in newsletters, annual reports, and more.







































AND MANY MORE!

AUDIENCE

450,000 IMPRESSIONS EACH MONTH.

A broad spectrum of constituents associated with subscribing organizations/entities comprises four audience groups interfacing with the My25 Network on an everyday basis throughout 30 states. In combination, these groups make up the current 15,000 professionals at work and individuals at home utilizing our content on a daily basis, 7 days/week. Based on directions outlined on page 26, our audience and subscriber base attractive to My25's sponsor and advertiser partners will increase exponentially in the near term.

PEOPLE WITH DISABILITIES
related to intellectual and developmental challenges, mental illness, behavioral complications, and traumatic brain injury who permanently live in the same kinds of community-based houses and apartments most of us reside in (as opposed to individuals in transient or institutional settings); these individuals typically work or attend school or day programs in the surrounding neighborhood and a vast majority are actively involved in activities of daily living, including: personal health care and financial decisions, menu planning, grocery shopping, meal preparation, knowledge attainment, and skill building.

ASSOCIATED FAMILY MEMBERS OR FOSTER CAREGIVERS

who are intent on helping their loved one (or foster dependent) with a disability improve quality of life and opportunities. Many family members/foster caregivers also have personal challenges related to preventive health and eat-better habits that they are attempting to manage. These individuals are involved in making decisions regarding health care and financial issues and mealtime activities—including for their loved one (or foster dependent) with a disability and others in the same household.

ASSOCIATED CAREGIVERS

who are staff members of the organizations that are footing the bill for the My25 subscription. This personnel pool has first-line responsibility and a wide berth regarding decision-making as it relates to health improvement and mealtime activities for people within their daily oversight. Many caregivers also have personal challenges related to preventive health and eat-better habits that they are attempting to manage.

ASSOCIATED PROFESSIONALS

include those with oversight responsibilities regarding health care, financial decisions and mealtime activities who are allied, in one way or another, with the subscriber footing the bill for the My25 subscription, including: top management, primary care physicians, nurses, case managers, nutritionists, dietitians, psychologists, psychiatrists, social workers, wellness committee members, federal/state officials, and regulatory and licensing agents. Many of these individuals report utilizing My25 resources and content for their own personal use with their own families as a way to improve health and eating habits.

AUDIENCE SPECIFICS

Each of our four audience groups represents active and involved decision makers/consumers regarding their health care, disease management, medications, grocery and household items, and more. Access to multiple forms of technology is available to almost 100% of the individuals in each of the audience groups.

The Nielsen Company and Fifth Quadrant Analytics conclude that *My*25's audience—conservatively 70 million individuals—spends more and makes more shopping trips than all households in the U.S., with annual disposable income exceeding over 1 trillion dollars.

On average, approximately 86% of the My25 audience responsible for purchases buys exactly (including brand specific) what we recommend in our weekly email send.

The following charts and bullet points, representing U.S. general population distribution for gender, age, ethnicity, education and earnings, are a base of reference for My25 audience-specific profiles provided on the next page.

U.S. GENERAL POPULATION SPECIFICS

| LOCATION | MALE | FEMALE | TOTAL |
|---------------|------|--------|-------|
| United States | 49% | 51% | 100% |

| LOCATION | CHILDREN 0-18 | ADULTS 19-25 | ADULTS 26-34 | ADULTS 35-54 | ADULTS 55-64 | 65+ | TOTAL | |
|---------------|------------------|-----------------|-----------------|-----------------|-----------------|-----|-------|--|
| United States | 25% | 10% | 12% | 26% | 13% | 15% | 100% | |

| LOCATION | WHITE | BLACK | HISPANIC | ASIAN | AMERICAN INDIAN/ALASKA NATIVE | NATIVE HAWAIIAN/ OTHER PACIFIC ISLANDER |
|---------------|-------|-------|----------|-------|-------------------------------------|---|
| United States | 61% | 12% | 18% | 6% | 1% | 0% |

Source: Henry J. Kaiser Family Foundation, 2015

- These approximate percentages apply to the U.S. general population regarding education attainment: 89% are high school graduates and 33% hold a bachelor's college degree.
- Median annual household income among the U.S. general population is approximately \$53,000.

| PEOPLE WITH DISABILITIES | | | | | | | |
|---|---|--|--|--|--|--|--|
| AGE & GENDER | EDUCATION | RACE & ETHNICITY | ANNUAL INCOME | HEALTH | | | |
| Distribution is reflective of the general population ages 18 to 65 years. | A majority are high school graduates. Across all disability types, the number of high school graduates will increase even further over the next 5 years as mandates are in place ensuring high school education opportunities to individuals with disabilities up to the age of 21. | Distribution shows a slightly higher percentage, relative to the U.S. general population, of non-Caucasian individuals— primarily due to Hispanic and African American presence. | Provided from family, public funding streams dedicated to people with disabilities, and—for an increasing majority—income from a job; a majority portion of income is spent on housing, food, transportation and for manytheir mobile phone. | 70% unnecessarily struggle with two to three times the U.S. general population rates of costly obesity, diabetes, and related chronic conditions such as: hypertension, osteoarthritis, cancer, gastrointestinal complications, and depression. Acute care needs and medication usage are similarly elevated as a result. Use of prescription drugs is inordinately high, averaging 10+different medications per day per person to control diabetes, metabolic syndrome, hypertension, depression, mental illness, and more. Annual health care costs currently average between \$17,300 to \$35,200 per individual. | | | |

| | ASSOCIATED FAMILY MEMBERS | | | | | | | | |
|--|--|---|-------------------------|--|--|--|--|--|--|
| AGE & GENDER | EDUCATION | RACE & ETHNICITY | ANNUAL INCOME | HEALTH | | | | | |
| Distribution is reflective of the U.S. general population, ages 18 to 70+ years. | Consistent with U.S general population distribution. | Distribution shows a slightly higher percentage, relative to the U.S. general population, of non-Caucasian individuals—primarily due to Hispanic and African American presence. | \$30,000- \$200,000+ | A majority fall within nationwide mainstream population statistics of: 2 in 3 individuals are overweight or obese; 9.3% struggle with diabetes; 33% are pre-diabetic; and 1 in 3 people have high blood pressure. Associated chronic conditions such as: hypertension, osteoarthritis, cancer, gastrointestinal complications, and depression are elevated, as are acute care needs and medication usage. | | | | | |

| ASSOCIATED CAREGIVERS | | | | | | | | |
|---|--|---|-----------------------|--|--|--|--|--|
| AGE & GENDER | EDUCATION | RACE & ETHNICITY | ANNUALINCOME | HEALTH | | | | |
| Distribution is heavily skewed to individuals between the ages of 18 and 45 and gender distribution is consistent with the U.S. general population. | A majority are high school graduates, approximately 15% hold an associates or technical degree, and approximately 11% hold bachelor's college degrees. | Distribution shows a slightly higher percentage, relative to the U.S. general population, of non-Caucasian individuals—primarily due to Hispanic and African American presence. | \$25,000- \$65,000 | Approximately 68% unnecessarily struggle with two times the U.S. general population rates of costly obesity, diabetes, and related chronic conditions such as: hypertension, osteoarthritis, cancer, gastrointestinal complications, and depression. Associated chronic conditions such as: hypertension, osteoarthritis, cancer, gastrointestinal complications, and depression are similarly elevated, as are acute care needs and medication usage. | | | | |

| ASSOCIATED PROFESSIONALS | | | | | | | | |
|--|---|---|------------------------|---|--|--|--|--|
| | | | | | | | | |
| Distribution is reflective of the U.S. general population, ages 25 to 65+ years. | Over 64% hold a bachelor's college degree, approximately 9% hold advanced, higher-education degrees. | Distribution shows a higher percentage, relative to the U.S. mainstream population, of white Caucasian individuals. | \$50,000- \$300,000 | Approximately 57% are overweight or obese; 9.3% struggle with diabetes; 33% are pre-diabetic; and 1 in 3 people have high blood pressure. | | | | |

THE MY25 NETWORK: SPONSOR & ADVERTISER OPPORTUNITIES

We engage, support and retain our subscribers and audience via the following multi-media platforms that are available to our sponsor and advertiser partners doing business within these industries: pharmaceutical, food, health care, medical devices, human services, technology, entertainment/leisure, and more. In this way, our sponsor and advertiser partners have:

Exposure and opportunities regarding formidable business/government targets and decision-makers.



Exposure and opportunities regarding interested end-user consumer targets.

The six platforms highlighted below and outlined on pages 15-24 revolve around subscriptions to My25 Choice (weekly, personalized mealtime toolkit), My25 Elevate Portal (web-based/mobile-optimized engagement, education and training resources), and My25 Flex newsletter and My25 Bullseye Texts.



THE MY25 NETWORK, PLATFORM: CHOICE EMAIL



WEEKLY MY25 CHOICE EMAIL SEND



The My25 Choice weekly email send has a 100% open rate. We have a 98% subscription retention rate.

The My25 Choice send contains the following resources, customized/personalized for each household and all of the people in it: next week's menus, grocery shopping lists, recipe prep steps, and calorie and nutrition detail. These resources highlight a media partner's ad (970 x 250) front and center as shown below.

In all subscribing organizations, the My25 resources in this email are sent to designated, key individuals (My25's audience). Then, these key individuals typically forward the information multiple times to additional people in all four audience groups; think of a pyramid.

The email and its attachments are viewed online and then, in almost all instances, printed. Hard copies are usually attached to refrigerator doors/cupboards, used in the grocery store, and referred to in the kitchen every day during breakfast, lunch and dinner meal prep. Below are abbreviated samples.



THE MY25 NETWORK, PLATFORM: TICKLER EMAIL



MY25 MONTHLY TICKLER ENGAGEMENT EMAIL

Our monthly tickler email is provided to both My25 Choice and My25 Elevate subscribers and has an 85% open rate. We tickle to enhance engagement in healthy activities/education/celebration.





Ticklers include brief, highly appealing, and seasonally-oriented visuals and tips regarding preventive health, disease management, nutrition, recipes, meal prep, community, celebration, and more.

The monthly tickler, at a minimum, can highlight concise information about a media partner along with their logo. At a maximum, the tickler's entire content can be directed by our media partner's brand and information.

In all subscribing organizations, the monthly tickler is sent via email to designated, key individuals (*My*25's audience). Then, these key individuals typically forward the information multiple times to additional people in all four audience groups; once again, think of a pyramid.

The information is largely viewed online, but sometimes printed in hard copy (such as placed onto bulletin boards and into payroll envelopes) to scaffold a subscribing organization's efforts aimed at galvanizing audience members from all four audience groups. My25 ticklers are also often incorporated into subscribers' online newsletters and posted to internal portals for their broader constituencies as a means of preventive health engagement and demonstrating support for wellness.

Monthly Tickler Email Samples









THE MY25 NETWORK, PLATFORM: TICKLER EMAIL



MORE TICKLING TO CONTINUALLY ENGAGE & EDUCATE THROUGHOUT THE YEAR . . .

Slice Into Summer



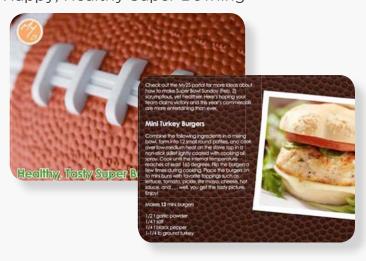


Garden Mania





Happy, Healthy Super Bowling





THE MY25 NETWORK, PLATFORM: ELEVATE PORTAL

THE WEB-BASED, MOBILE OPTIMIZED MY25 ELEVATE PORTAL

The My25 Elevate Portal subscriber and audience bases are undergoing a monumental, exciting expansion in the coming months, which we outline on page 26.



The Portal provides multi-media preventive health/nutrition/mealtime/enjoyment-of-life engagement, training and education, aimed at our four audience groups—and is refreshed weekly and available on-demand from any computer or mobile device in 81 languages. The *My*25 Elevate Portal was originally developed in response to subscribing organizations requesting scaffolding to use in tandem with the *My*25 Choice toolkit of mealtime resources.

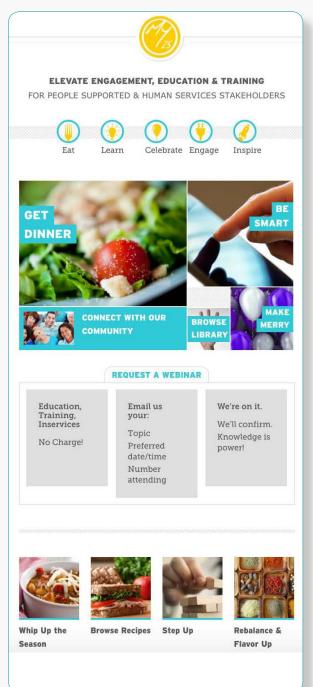
Sponsor partner & advertiser content, logos and links can be incorporated into multiple sections of the *My*25 Portal, in various multi-media formats. Educational content, scalable recipes, enjoyment of life tips/enticements, and more.

The My25 Elevate Portal





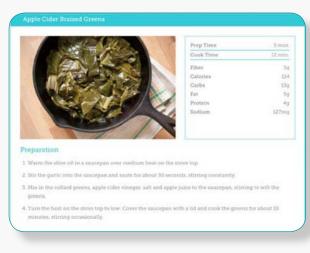
My25 Elevate Portal by going to: www.my25elevate.com



THE MY25 NETWORK, PLATFORM: ELEVATE PORTAL



SCALABLE, HEALTHY, EASY-TO-PREPARE RECIPES





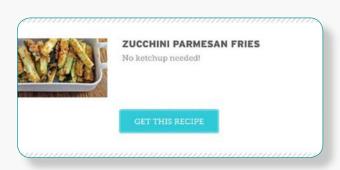














PORTAL ARTICLES TO ENGAGE AND EDUCATE

50 FIBER-RICH FOODS Library



Ahhhh... fiber! That super nutrient we suggest you eat at least 25 grams of each day. Fiber fills you up so you snack on empty-calories less often. Fiber also has cancer and heart disease prevention properties. So which foods are rich in fiber?

READ MORE

ABOUT DIABETES



With growing numbers of people impacted by diabetes, it's important to understand as much as possible about this chronic disease.

READ MORI

COOKING TOGETHER Library



Food is fun. And when cooking with your date or with the girls for a gal pal evening of chitchat, well . . sky is the limit when it comes to warm, cozy and making memories. We have some general tips and also some ideas about which recipes might just best fit the bill.

READ MORE

HIGH BLOOD PRESSURE & THE FOOD YOU EAT



Plain and simple... what you eat impacts your heart health. The good news is that following My25's guidelines for eating better can help lower blood pressure and reduce medications needed to control hypertension.

READ MORE

CELEBRATE EASTER!



We fill you in on the foods, custo behind the Easter holiday and the spring each year!

READ MORE

WHAT ARE ANTIOXIDANTS?



What does it mean for foods to health benefits? We provide the scoop here . . .

READ MORE

ISP: KITCHEN & FOOD SAFETY BASICS



Following are a series of suggican use to develop an ISP aroo safety basics. Understanding to vary between individuals and organizations, our tips are a g which to make your own uniq

READ MORE

THE MY25 NETWORK, PLATFORM: ELEVATE PORTAL



VIDEOS TO ENGAGE AND EDUCATE





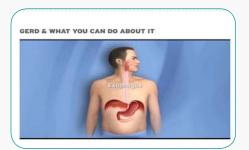
Read A Nutrition Facts Label



What Gluten-Free Really Means



Gerd and What You Can Do About It



An Apple vs. Apple Pie



Lactose Intolerence



Make Your Own Quesadillas

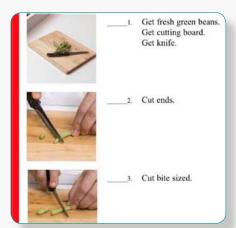


THE MY25 NETWORK, PLATFORM: ELEVATE PORTAL

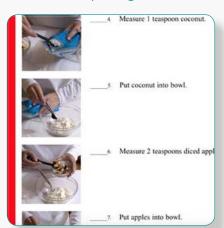
PHOTOSTEPS**

We also have hundreds of our popular PhotoStep™ Recipes that are task-analyzed prep steps ranging from the very basic—such as how to wash hands, cook vegetables in the microwave and on the stove top, make orange juice, prepare scrambled eggs to the more complicated (as skills and confidence grow), such as Chef's Salad, Turkey Chili, Spaghetti & Meatballs, and BBQ Chicken Drumsticks. Originally developed as an independent living skills development tool for people with disabilities, PhotoSteps[™] are frequently accessed and personally used by all four My25 audience groups.

PhotoStep[™] How to Slice Green Beans



PhotoStep™ Yogurt Parfait





We also white label the Portal for funders and stakeholder organizations (our subscribers), so they can, overnight, plant and tout a health leadership stake in the ground with their branding—which also entrenches *My*25 into the subscribing organization's DNA. White labeling of the *My*25 Elevate Portal will also be available to our media sponsors.

To view a sample private
label/branded Portal, go to:
http://samplebranding.my25.com/

My25 Elevate Portal with White Label/Color Coding





PROGRESS OVERVIEW REPORT EMAIL TO SUBSCRIBING DRGANIZATION/ENTITY TOP MANAGEMENT

100% open rate. Twice per year, we email an overview report regarding health and cost-cutting outcomes progress to each My25 Choice subscribing organization and its top management team.



Depending on progress and areas we note that need improvement, we typically attach additional education and resources, such as our Tips-For-Success Guides and My25's Famous Bump-Up-Veggie-Flavor Chart. These attachments are also forwarded to select individuals within each of the four audience groups associated with the subscribing organization. Typical areas of focus for these attachments revolve around health, disease management, nutrition, mealtime prep, household routines, and grocery shopping. Included on this page are some examples of the kinds of information we are sharing within these attachments.

Sponsor and advertiser partner content can be included in a variety of ways in the email attachments associated with My25 progress reports. At a minimum, sponsors and advertisers can highlight concise information along with their logo. At a maximum, an attachment's entire content can be directed by our media partner's brand and information.







To Save Money & Time

grocery expense coming down far enough . . .

- provider with this challenge.
- (or you are able to buy a lesser amount because of what you have on hand).
- between the grocery receipt and My25 between the grocery receipt and My25 shopping list can quickly confirm that items not on the shopping list are not ending up in the grocery cart and on the table at mealtime (which can lead to another problem—weight gain for people supported).
- fresh fruits) will increase grocery bills. Fresh is more expensive, spoilage is much higher, and nutrition values are similar between fresh and frozen (with frozen even providing better nutrient

Mainstay[∞]

- If individuals are gaining weight in a particular house, we should adjust portion sizes—which will generally reduce food expense.
- 6. Do we have the absolute correct number of consumers and staff members eating at each meal on each day?
- 7. Are expenses like Ensure and Zone

THE MY25 NETWORK, PLATFORM: FLEX NEWSLETTER & BULLSEYE TEXTS



MY25 FLEX NEWSLETTER

Engaging, health-forward, and education-based. In a warm, colossal-sized hug kind of way—supplying game-changing guidance, information, and encouragement regarding health and happiness acceleration.

Emailed three times per month to the broadest audience of stakeholders within the human services sphere. Yes, there's a lot about food, because food is the key driver behind preventive health—and fitting into cool-looking jeans—for most anyone. Also includes contests and giveaways to encourage ongoing subscription and buy-in. Go to: www.my25flex.com.

Blue Jeans, Baby, Blue Jeans



Demonstrate your improving health over a 9-month period—as in, your BMI progress on a monthly basis to show steady movement toward, or holding steady at, a normal BMI (and don't try to fool us, we didn't just fall off the turnip truck)—and we'll help you buy your dream pair of cool-looking jeans. Lookin' mighty fine...and we do mean fine.

(Anyone reading this can participate; we're an equal opportunity wardrobe enhancer.)

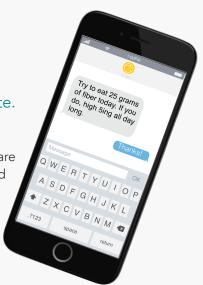
Subscribers include: individuals with disabilities; family members; caregivers; case managers; Qs; DSPs; house managers; CEOs; residential, programs, vocational, & day programs professionals; nurses; dietitians; primary care physicians; licensors; accreditors; DHS and CMS officials; human services industry vendors; and more.



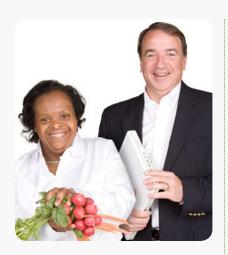
MY25 BULLSEYE TEXTS

Targeted, tailored, consistent text messaging that has a 100% open rate.

My25 Bullseye outreach is focused on messaging to improve health for people with disabilities. Text messages are directed to the individual as well as to their circle of care givers and supporters. Texts target specific, person-centered needs and are delivered at least 6 times per month. Go to: www.my25bullseye.com.



SPONSOR & ADVERTISER RATES





450,000 impressions each month.

We represent unique potential and incredible stickiness among loyal organizational subscribers and a captive, disposable income-robust audience of end-user consumers. B to B and B to C. We're facilitating substantial outcomes related to all-important acute care and medication reductions as a result of preventive health, disease management, nutrition, mealtime, and enjoyment-of-life education and tools.

We engage, support and retain our subscribers and audience via multi-media platforms that are available to our sponsor and advertiser partners doing business within these industries: pharmaceutical, food, health care, medical devices, human services, technology, entertainment/leisure, and more. As a result, our sponsor and advertiser partners have:

Exposure and opportunities regarding formidable business/ government targets and decision-makers.



Exposure and opportunities regarding interested end-user consumer targets.

We're new to sponsor partners and advertisers and want to do this right...for both sides. We want to collaborate with businesses interested in the foundation we've built, the opportunities we've mapped out, and the potential we've highlighted. We've always benefitted from roll-up-our-sleeves alliances that strategically leverage a rock-solid foundation and grow stronger together.

Let's have a conversation about what appeals to you and how we can maximize together—which our track record underscores we're capable of delivering with tremendous success.

SYLVIA LANDY VAIL

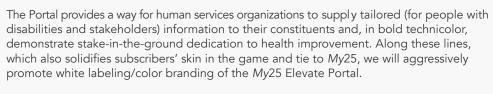
847.845.2815 sylvia.landy@my25.com

MY25'S IMMINENT DIRECTIONS BENEFICIAL TO SPONSORS & ADVERTISERS



The My25 Elevate Portal will ramp up to be accessed by at least 5 million audience members by 4th quarter, 2018.

We're broadening the Portal's subscriber and audience bases through free subscriptions, because stakeholders within the human services sphere are asking for a health-forward, community-centered, and education-based cornerstone—which has not been available previously. The industry drumbeat is escalating as a result of elevated acute care and medication costs. All eyes and expectations are on human services organizations (our subscribers) to step up, show commitment, and spearhead critical change under the auspices of value-based purchasing.



Based on our relationships and presence in the marketplace, we're well positioned to capitalize on our presence and reputation to implement this bold, strategic direction.



My25 Flex & My25 Bullseye introduced.

We're centering a new subscription around "pushed" weekly emails and text messages that will go directly to individuals within each of our four audience groups as a way to help people with disabilities improve their health (and along the way, as we have learned, also improve the health of those allied with the person supported). My25 Flex and My25 Bullseye head-on address trends indicating high percentage ownership of smart phones and tablet devices across all four audience groups and a rapid increase in individuals with disabilities living in supported apartments, on their own, and in home-based settings with family or foster caregivers.

Highly engaging content, leveraging My25 Elevate's robust arsenal and additional tactics such as contests and giveaways, will largely be employed. Our back-end will be smart technology in that we will develop personal profiles of end-user subscribers based on tracking and understanding individual click patterns; as a result, over time we will be able to personalize text messages surrounding individual interests and needs—which we have demonstrated is instrumental to driving preventive health improvement.



The National Institutes of Health (NIH) and My25.

Following in the footsteps of the United States Department of Agriculture (USDA) that early on backed nationwide trials to assess My25's impact on health, quality of life, and medical care expense (which resulted in successful outcomes across the board), NIH has expressed interest in studying the benefits of aggressively expanding My25's tailored resources. The goal is to meet the needs of individuals with mental health challenges living in supported-living and home-based settings—of which there are approximately 7 million people and, conservatively, over 20 million associated audience group stakeholders (such as family members, caregivers, health care professionals, and more). We are in the midst of preparing information for NIH to determine best, next steps—which My25 Flex and My25 Bullseye (above) will be a part of.

