



**LOYOLA
UNIVERSITY
CHICAGO**

**Breakdown of FY 2020 Fringe Benefit Rates
Lakeside and School of Nursing Grants Only**

	Full-time Faculty FB Rate 2020	Full-time Staff FB Rate 2020	Part-time Faculty & Staff FB Rate 2020
HEALTH	9.61%	9.68%	
DENTAL /VISION INSURANCE	0.27%	0.27%	
RETIREMENT	9.21%	9.27%	
FICA	6.67%	6.61%	7.70%
DISABILITY INSURANCE	0.20%	0.20%	
WORKERS COMPENSATION	0.10%	0.10%	0.10%
UNEMPLOYMENT COMPENSATION	0.12%	0.12%	
LIFE INSURANCE	0.15%	0.15%	
TUITION REMISSION	0.18%	2.01%	
OTHER	0.00%	0.00%	
	26.50%	28.40%	7.80%



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**Breakdown of FY 2020 Fringe Benefit Rates
SSOM Grants Only**

	Full-time Faculty FB Rate 2020	Full-time Staff FB Rate 2020	Part-time Faculty & Staff FB Rate 2020
HEALTH	5.92%	5.86%	
DENTAL /VISION INSURANCE	0.22%	0.22%	
RETIREMENT	8.55%	8.46%	
FICA	6.00%	5.88%	7.73%
DISABILITY INSURANCE	0.18%	0.18%	
WORKERS COMPENSATION	0.06%	0.06%	0.07%
UNEMPLOYMENT COMPENSATION	-0.01%	-0.01%	
LIFE INSURANCE	0.16%	0.16%	
TUITION REMISSION	1.11%	1.30%	
	22.20%	22.10%	7.80%