## **SUMMARY ANNUAL REPORT FOR The Signature Benefits Plan (TFCF)**

This is a summary of the annual report of The Signature Benefits Plan (TFCF), a health, life insurance, dental, vision, temporary disability, prepaid legal, long-term disability and death benefits plan (Employer Identification Number 13-3249610, Plan Number 506), for the plan year 01/01/2023 through 12/31/2023. The Form 5500 annual report has been filed with the Employee Benefits Security Administration, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

TFCF America, Inc. has committed itself to pay certain health, dental and vision claims incurred under the terms of the plan.

## **Insurance Information**

The plan has insurance contracts with Kaiser Foundation Health Plan Inc., Cigna Healthcare of California, Delta Dental of California, Hartford Life and Accident, MetLife Legal Plans, Securian Life Insurance Company, ACE American Insurance Company and CIGNA Health and Life Insurance Company to pay certain health, prescription drug, HMO contract, dental, temporary disability, long-term disability, legal, life insurance, and ADD claims incurred under the terms of the plan. The total premiums paid for the plan year ending 12/31/2023 were \$708,058.

## **Your Rights to Additional Information**

You have the right to receive a copy of the full annual report, or any part thereof, on request. The items listed below are included in that report:

1. Insurance information, including sales commissions paid by insurance carriers.

To obtain a copy of the full annual report, or any part thereof, write or call the office of Pascale Thomas, who is a representative of the plan administrator, at 500 South Buena Vista Street, Burbank, CA 91521 and phone number, 818-558-2709.

You also have the legally protected right to examine the annual report at the main office of the plan: 500 South Buena Vista Street, Burbank, CA 91521, and at the U.S. Department of Labor in Washington, D.C., or to obtain a copy from the U.S. Department of Labor upon payment of copying costs. Requests to the Department should be addressed to: Public Disclosure Room, Room N-1513, Employee Benefits Security Administration, U.S. Department of Labor, 200 Constitution Avenue, N.W., Washington, D.C. 20210. The annual report is also available online at the Department of Labor website www.efast.dol.gov.