

SUMMARY ANNUAL REPORT

FOR THE SMART-TD HEALTH & WELFARE PLAN

This is a summary of the annual report of The SMART-TD Health & Welfare Plan, EIN 80-0616629, Plan No. 510, for period January 1, 2024 through December 31, 2024. The annual report has been filed with the Employee Benefits Security Administration, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

Insurance Information

The plan has a contract with Metropolitan Life Insurance Company to pay life insurance and accidental death and dismemberment claims incurred under the terms of the plan. The total premiums paid for the plan year ending December 31, 2024 were \$5,323,575.

Because it is a so called "experience-rated" contract, the premium costs are affected by, among other things, the number and size of claims. Of the total insurance premiums paid for the plan year ending December 31, 2024, the premiums paid under such an "experience-rated" contract were \$5,323,575 and the total of all benefit claims paid under the contract during the plan year was \$3,649,002.

Basic Financial Statement

The value of plan assets, after subtracting liabilities of the plan, was \$225,961,283 as of December 31, 2024, compared to \$269,304,570 as of January 1, 2024. During the plan year the plan experienced a decrease in its net assets of \$43,343,287. This decrease includes unrealized appreciation and depreciation in the value of plan assets; that is, the difference between the value of the plan's assets at the end of the year and the value of the assets at the beginning of the year or the cost of assets acquired during the year. During the plan year, the plan had total income of \$644,079,592, including employer contributions of \$509,818,356, employee contributions of \$122,783,851, earnings from investments of \$11,422,707, and other income of \$54,678.

Plan expenses were \$687,422,879. These expenses included \$36,844,193 in administrative expenses, and \$650,578,686 in benefits paid to participants and beneficiaries.

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:

- an accountant's report;
- financial information and information on payments to service providers;
- assets held for investment;
- fiduciary information, including non-exempt transactions between the plan and parties-in-interest (that is, persons who have certain relationships with the plan);
- transactions in excess of 5% of the plan assets;
- 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 Eureka Norment, National Health Plan Senior Manager, National Railway Labor Conference, Employee Benefits Department at 251 - 18th Street, South, Suite 750, Arlington, VA 22202, or by telephone at (571) 336-7600. The charge to

cover copying costs will be \$5.00 for the full annual report, or \$0.25 per page for any part thereof. You may also find the full report on our public website - <https://railnegotiations.com/resources/>.

You also have the right to receive from the plan administrator, on request and at no charge, a statement of the assets and liabilities of the plan and accompanying notes, or a statement of income and expenses of the plan and accompanying notes, or both. If you request a copy of the full annual report from the plan administrator, these two statements and accompanying notes will be included as part of that report. The charge to cover copying costs given above does not include a charge for the copying of these portions of the report because these portions are furnished without charge.

You also have the legally protected right to examine the annual report at the main office of the plan, 251 - 18th Street, South, Suite 750, Arlington, VA 22202 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.

Paperwork Reduction Act Statement

According to the Paperwork Reduction Act of 1995 (Pub. L. 104-13)(PRA), no persons are required to respond to a collection of information unless such collection displays a valid Office of Management and Budget (OMB) control number. The Department notes that a Federal agency cannot conduct or sponsor a collection of information unless it displays a currently valid OMB control number. See 44 U.S.C. 3507. Also, notwithstanding any other provisions of law, no person shall be subject to penalty for failing to comply with a collection of information if the collection of information does not display a currently valid OMB control number. See 44 U.S.C. 3512.

The public reporting burden for this collection of information is estimated to average less than one minute per notice (approximately 3 hours and 11 minutes per plan). Interested parties are encouraged to send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the U.S. Department of Labor, Office of the Chief Information Officer, Attention: Departmental Clearance Officer, 200 Constitution Avenue, N.W., Room N-1301, Washington, DC 20210 or email DOL_PRA_PUBLIC@dol.gov and reference the OMB Control Number 1210-0040.

OMB Control Number 1210-0040 (expires 03/31/2026)