

SUMMARY ANNUAL REPORT FOR THE FIRSTTRUST BANK HEALTH AND WELFARE PLAN

This is a summary of the annual report of the Firsttrust Bank Health and Welfare Plan, Plan Number 504, Employer Identification Number 23-0970971, for the plan year period beginning January 1, 2024 and ending 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).

UNINSURED COMPONENTS

The plan sponsor, Firsttrust Bank, Incorporated, has committed to pay certain medical, prescription drug, vision, and healthcare flexible spending account claims under the terms of the plan.

INSURED COMPONENTS - INSURANCE INFORMATION

The plan had contracts with insurance carriers to pay certain claims incurred under the terms of the plan. The type of benefit provided, name of the insurer, and premiums paid for each component are set forth in the table below. The total amount of premiums paid for contract years that ended during the 2024 plan year were \$762,694.

Type of Benefit	Name of Insurer	Premiums Paid
Dental	Delta Dental of Pennsylvania	\$231,405
Pre-Paid Legal	Countrywide Enterprises, Inc.	\$7,090
Vision	EyeMed Vision Care (Fidelity Security Life Insurance Company)	\$43,661
Employee Assistance Program	Carebridge Corporation	\$10,805
Life Insurance, Hospital Indemnity Short-Term Disability, Long-Term Disability Critical Illness, Accident Insurance Accidental Death and Dismemberment	Sun Life Assurance Company of Canada	\$469,733

Because all components of the plan are unfunded and insured, the plan did not have any reportable plan assets and did not earn any income during the plan year.

YOUR RIGHTS TO ADDITIONAL INFORMATION

You have the right to receive a copy of the full annual report, or any part thereof, on request. Insurance information, including sales commissions paid by the insurance carriers, is included in that report.

To obtain a copy of the full annual report, or any part thereof, write or call the office of Joyce Hess, who is a representative of the plan administrator, Firsttrust Bank, Human Resources Dept., One Walnut Grove Drive, Horsham, PA 19044, 215-728-8281. The charge to cover copying costs will be \$.25 per page for any part thereof.

You also have the legally protected right to examine the annual report at the main office of the plan: Firsttrust Bank, Human Resources Dept., One Walnut Grove Drive, Horsham, PA 19044 (or at any other location where the report is available for examination), 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.