

**SUMMARY ANNUAL REPORT FOR  
DUNN INVESTMENT COMPANY & SUBSIDIARIES WELFARE BENEFIT PLAN**

This is a summary of the annual report of the DUNN INVESTMENT COMPANY & SUBSIDIARIES WELFARE BENEFIT PLAN, a health, life insurance, dental, temporary disability and long-term disability plan (Employer Identification Number 63-0739798, Plan Number 501), for the plan year 01/01/2024 through 12/31/2024. 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 insurance contracts with DELTA DENTAL INSURANCE COMPANY, SUN LIFE ASSURANCE COMPANY OF CANADA, BLUE CROSS BLUE SHIELD OF ALABAMA, PRE-PAID LEGAL SERVICES INC DBA LEGALSHIELD, HARTFORD LIFE AND ACCIDENT and PRUDENTIAL INSURANCE COMPANY OF AMERICA to pay certain Dental, Life insurance, Temporary disability, Long-term disability, Health, Prescription drug, Baby Yourself; Air Med, Legal Services Plan Memberships, Critical Illness, and AD&D claims incurred under the terms of the plan. The total premiums paid for the plan year ending 12/31/2024 were \$6,579,072.

Because they are so called "experience-rated" contracts, 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 12/31/2024, the premiums paid under such "experience-rated" contracts were \$5,035,978 and the total of all benefit claims paid under these experience-rated contracts during the plan year was \$0.

**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 Shane Huff, who is a representative of the plan administrator, at P.O. BOX 247, BIRMINGHAM, AL 35201 and phone number, 205-592-3866. 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 also have the legally protected right to examine the annual report at the main office of the plan: P.O. BOX 247, BIRMINGHAM, AL 35201, 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](http://www.efast.dol.gov).