

**SUMMARY ANNUAL REPORT FOR
ERDMAN AUTOMATION CORPORATION EMPLOYEE BENEFITS PLAN**

This is a summary of the annual report of the ERDMAN AUTOMATION CORPORATION EMPLOYEE BENEFITS PLAN, a health, life insurance, dental, vision, temporary disability and long-term disability plan (Employer Identification Number 41-1764411, 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 BLUE CROSS AND BLUE SHIELD OF MINNESOTA AND BLUE PLUS, COMPANION LIFE INSURANCE COMPANY and METROPOLITAN LIFE INSURANCE COMPANY to pay certain Health, Life Insurance, Dental, Vision, Temporary disability, Long-term disability and other claims incurred under the terms of the plan. The total premiums paid for the plan year ending 12/31/2024 were \$1,408,768.

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 plan administrator, at 1701 14TH STREET SOUTH, PRINCETON, MN 55371 and phone number, 763-389-9475.

You also have the legally protected right to examine the annual report at the main office of the plan: 1701 14TH STREET SOUTH, PRINCETON, MN 55371, 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.