

BENEFITS VOYAGE

Learn more about the benefits
of independence.

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CORPORATE

WELCOME TO SONY PICTURES' OPEN ENROLLMENT FOR 2026



At Sony Pictures, our people are our greatest strength. Your dedication, creativity, and passion inspire everything we do, and we are committed to supporting you and your family with comprehensive benefits at every stage of life.

2026 Open Enrollment will take place from October 20 to November 3. This is your opportunity to review your options and select the benefits that best align with your goals, priorities, and lifestyle.

We encourage you to take the time to explore the resources available — from health and financial tools to family care support — and choose the benefits that matter most to you and your loved ones.

Wishing you a healthy and successful year ahead!

Stacy Green
Executive Vice President &
Chief People Officer

WHAT'S NEW IN 2026

Here are the new and changing benefits for 2026.

2026 employee contributions – In 2026, employee medical plan premiums will increase by 3%. While our overall benefit costs continue to rise at a much higher rate, we remain committed to minimizing the impact on our employees.

Sony Consumer Choice Plan deductibles – Deductibles will increase in 2026 in compliance with IRS requirements:

- **In-network deductible:** From \$1,650 to \$1,700 for employee only coverage, and from \$3,300 to \$3,400 for family coverage
- **Out-of-network deductible:** From \$3,300 to \$3,400 for employee only coverage, and from \$6,600 to \$6,800 for family coverage

Health Savings Account (HSA) increase – In 2026, you'll be able to contribute more to your HSA:

- \$4,400 if your medical plan covers only you (\$100 increase over 2025)
- \$8,750 if your medical plan covers at least one other person (\$200 increase over 2025)

Please note, HSAs are available only with the **Sony Consumer Choice Plan**. Visit **page 11** for more details.

Expanded cancer care through Aetna plans – Our Aetna plans will extend 100% coverage to more in-network cancer preventive screenings, including diagnostic colonoscopies and breast cancer screenings. Visit **page 9** for more details.

No copay for Teladoc under Sony Consumer Choice Plan – Starting in 2026, Aetna will not require a copay for Teladoc appointments before meeting your deductible. This includes appointments for general medicine, mental health, and dermatology care. Visit **page 13** for more details.

Kaiser HMO fertility care – Kaiser is enhancing its fertility services to support the diagnosis and treatment of infertility, offer fertility services like IVF, and include egg retrievals and embryo transfers. Kaiser HMO is available only in California. Visit **page 19** for more details.

CVS/Caremark will replace Express Scripts – CVS/Caremark will replace Express Scripts as our pharmacy plan administrator for the Aetna medical plans. This change will result in many enhancements and conveniences, such as a new combined ID card for medical and pharmacy plans. There will be no changes to the pharmacy plan's copays and coinsurance, but coverage **may differ for certain prescriptions**. For more information about Caremark, visit **CaremarkRxPlanInfo.com/SPE** and see **page 15** for more details.

Progyny Pregnancy and Postpartum program – Progyny's offerings will be expanded to include the services currently provided by Aetna's Maternity Services, including access to nurses, clinical coaching support from conception through 12 months postpartum, postpartum screenings, two pre-term and two postpartum virtual doula visits, and much more. Visit **page 19** for more details.

Digestive care support – Through a partnership with Oshi, Aetna will offer digestive care services to help you understand the cause of gastrointestinal (GI) symptoms. Oshi's services are available to you and your covered family members. Visit **page 19** for more details.

Dental plan enhancement – Delta Dental will offer three periodontal and denture cleanings per year instead of two (in addition to three regular cleanings per year). Visit **page 25** for more details.

Vision plan enhancement – The contact lens fitting copay will be capped at \$60. This expense won't count toward the \$200 contact lens allowance, which means you'll have more allowance to spend on contacts. Visit **page 27** for more details.

Dependent Care Flexible Spending Account (FSA) – The IRS is increasing the contribution limit from \$5,000 to \$7,500 in 2026. You can use this FSA on eligible dependent care costs like day care, after-school care, and elder care. Visit **page 29** for more details.

Student loan assistance – Sony Pictures is increasing its monthly contribution toward the principal of your student loan from \$100 to \$150, up to a lifetime maximum of \$25,000. Visit **page 41** for more details.



Enroll at Sony Pictures Benefits Center:
benefitscenter.spe.sony.com.

Get answers to your questions from a Sony
Pictures Benefits Center Representative:
1-833-9-SONY-01

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A copy of the updated Summary Plan Description (SPD) for your Sony Pictures Entertainment Health and Welfare Benefits Plan ("Plan") is posted on benefits.sonymovies.com. This important document explains the terms and conditions of your Plan, including eligibility, coverage amounts, and exclusions. Please share this with your family members who are also covered under this Plan. If you want a paper version of the SPD, please request one by emailing spe_benefits@spe.sony.com

ABOUT THIS GUIDE

This is a summary of certain Sony Pictures benefits. Not all employees are eligible for all the benefits described in this guide. When you log in to the Sony Pictures Benefits Center website, you'll see only the benefits available to you.



For information about Medicare Part D, please see the Legal Notices section of this guide, page 48.



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ENROLL YOURSELF AND YOUR DEPENDENTS

Because we know that where you go, they go.

LIGHTS! CAMERA! ACTION!

During your enrollment period, you can enroll in or make changes to your current benefits, and enroll in a Flexible Spending Account (FSA) or Health Savings Account (HSA).



If you don't take action, your current benefits will carry over to 2026 (except FSA and HSA contribution amounts). If you want an FSA or HSA (including the employer contribution), you must actively enroll.

ENROLLMENT

NEW EMPLOYEES — Your Sony Pictures benefits coverage is effective on your first day of employment; however, you have 31 days from your date of hire to enroll in benefits. No matter when you enroll within that 31-day window, your benefits will be effective retroactively to your date of hire.

If you're a new employee and do not enroll within 31 days, Sony Pictures automatically enrolls you, **but none of your dependents**, in the Sony Consumer Choice medical plan, vision coverage, prescription drug coverage, Basic Life and Accidental Death and Dismemberment (AD&D), and Basic Long-Term Disability. You won't be enrolled in dental coverage.

You're locked into your benefit choices until the next open enrollment unless you experience a change in status or qualifying life event.

YOU HAVE 45 DAYS TO ENROLL IN THE 401(K)

You have 45 days from your date of hire to change or waive the Sony USA 401(k) Plan. You'll get a packet of information from T. Rowe Price, Sony's 401(k) administrator, with details about the plan.

If you don't act within 45 days, you'll be defaulted into the plan with a 6% contribution rate. Contributions will automatically increase 1% annually on your enrollment anniversary date until you reach a contribution rate of 10%.

Find out more at www.troweprice.com/workplace, or 1-877-766-9728.

CURRENT EMPLOYEES — If you don't enroll during open enrollment, your current benefits will carry over to 2026, except for FSA and HSA contribution amounts. If you want to participate in an FSA or HSA (including the employer HSA contribution) in 2026, you must enroll during open enrollment.

MAKING BENEFIT CHANGES DURING THE YEAR

You may make changes during the year if you have a change in status or qualifying life event. These events may include:

- Marriage or the declaration of a domestic partnership
- Legal separation, divorce, or termination of a domestic partnership
- Birth, adoption, or getting legal custody of a child
- Death of a dependent or loss of legal custody
- A dependent's loss of eligibility
- Losing other coverage

If you experience one of these events, you must submit your benefits-change request to the Sony Pictures Benefits Center within 31 days of the event date to make changes to your coverage. Any change in your benefits must be consistent with your status change.

ENROLLMENT CHECKLIST

- ✓ Review your current benefits and access the enrollment materials at benefits.sonypictures.com.
- ✓ If you're enrolled in an Aetna plan, check to see if your doctor is in-network at www.aetna.com/dsepublic/#/sony.
- ✓ "Ask EMMA" at benefitscenter.spe.sony.com, Sony Pictures' online Benefits Advisor, to help you understand which plan is right for you.
- ✓ Review the Summary of Benefits Coverage (SBC) at benefits.sonypictures.com for a summary of each plan.
- ✓ Enroll in or waive coverage through Sony Pictures Benefits Center at benefitscenter.spe.sony.com or call 1-833-9-SONY-01.

After you enroll, please print or save your confirmation page. Notify the Sony Pictures Benefits Center immediately if you see a discrepancy between the benefits you elected and withholding from your pay for your benefits.

If you miss this enrollment window, you must wait until the next open enrollment to make changes, unless you have a change in status or qualifying life event. See your plan's Summary Plan Description (SPD) on benefits.sonypictures.com for a full list of qualifying life events and change in status rules.



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WHO'S ELIGIBLE

Generally, you're eligible for the benefits described in this guide if you're:

- Classified by Sony Pictures as a regular full-time, non-union employee working in the United States, and
- Regularly scheduled to work at least 20 hours per week over a five-day work week

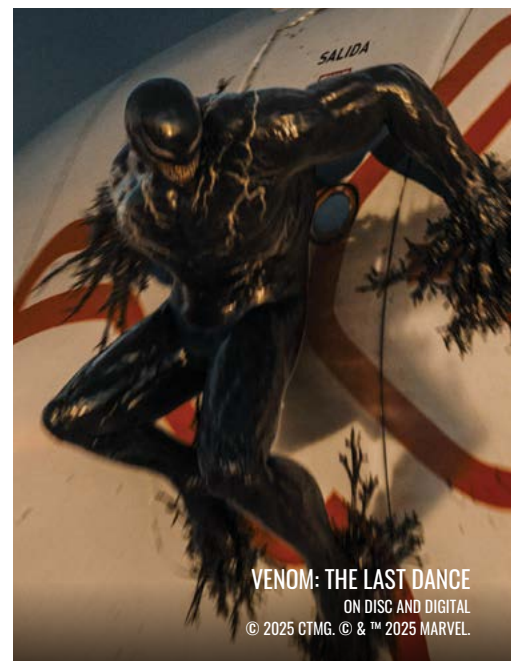
ELIGIBLE DEPENDENTS

When enrolling dependents for coverage, you must provide each dependent's Social Security number. This is required by the Affordable Care Act so Sony Pictures can properly report your coverage.

Dependents are eligible if they're your:

- Legally married spouse or domestic partner
- Children up to 26 years old who meet the program's definition of an eligible dependent, regardless of full-time student status, through the end of the month in which they turn 26, or
- Children of any age who became physically or mentally disabled by age 26 and who depend on you for financial support (validation of disability required)

Note: Eligible children are your biological children, stepchildren, legally adopted children, foster children, or children of your legally married spouse or your domestic partner, provided that for stepchildren or children of a domestic partner you furnish more than half their support. You may enroll your domestic partner's children only if your domestic partner is enrolled.



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PROOF OF DEPENDENT ELIGIBILITY

You must provide proof of eligibility when enrolling a dependent for the first time. Sony Pictures Benefits Center will request copies of appropriate documentation to verify your dependent's eligibility.

DOMESTIC PARTNER

You and your domestic partner must meet these requirements to be eligible for coverage:

A

You're not legally married and are registered domestic partners, or entered into a lawful civil union in the state where you live; or

B

You must meet and attest to all these requirements and complete an affidavit of spousal equivalency, which you can find on **benefits.sonypictures.com**:

- You and your domestic partner are each other's sole domestic partner, and are emotionally committed to each other for mutual care and support, and intend to remain so indefinitely, and
- You've lived together in the same home for a full six months and intend to remain so indefinitely, and
- You're jointly responsible for each other's financial welfare and basic living expenses (you're financially interdependent), and
- You're both at least age 18 and mentally competent to consent to a contract under the laws of the state in which you live, and
- You're not related by blood closer than would bar marriage under applicable law in effect where you live, and
- You're not legally married to each other and aren't legally married to or separated from anyone else

DID YOU KNOW?

TAX IMPLICATIONS OF COVERING DOMESTIC PARTNERS

If you enroll your domestic partner and their eligible dependents in Sony Pictures benefits, the IRS requires that you pay federal income tax on the fair-market value of their coverage. This cost is in addition to the employee contribution you must make for their coverage as determined by Sony Pictures.



See your medical plan SPD on **benefits.sonypictures.com** for details about domestic partner coverage.



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Let your medical benefits be your best friend.

IMPORTANT DEFINITIONS

These terms will help you as you read through this guide.

Deductible	This is the amount you have to pay out-of-pocket before the plan starts to pay.
Coinsurance	Once you meet the deductible, this is the percentage the plan will pay. If the coinsurance is 80%, you'll pay 20% of the cost of care.
Copay	The flat amount you pay when you receive care. For example, if your plan has a copay for doctor visits, you pay just that amount and the plan pays the rest. In some medical plans, some kinds of care require copays and other kinds of care require coinsurance.
Annual out-of-pocket maximum	This is the most you'll pay in a plan year. Once you reach this, the plan will cover 100% of your qualified medical care for the rest of the plan year. You won't have to pay any more costs once you meet the out-of-pocket maximum, as long as you stay in-network. This includes the deductible, coinsurance, copays, and prescription drug costs.
Employee premiums	This is the amount taken out of your paycheck to pay for health insurance.

Sony Pictures provides four medical plan options to meet the needs of you and your family:

Aetna
Sony Consumer Choice

Aetna Sony PPO

Aetna Sony EPO

Kaiser HMO
(California only)

WHEN YOUR DOCTOR'S NOT IN OUR NETWORK

Health care providers are either in-network or out-of-network. It sounds like a small difference but going out-of-network could drastically increase your health care expenses.

In-network doctors partner with Aetna to offer discounted rates to Aetna members like you. You get the discounted rate and your doctor submits your claim to Aetna. What you pay out of pocket for covered expenses counts toward your deductible and out-of-pocket maximum. And, when you stay in-network, you keep health care costs down for you and Sony Pictures, which helps keep everybody's rates down.

Out-of-network doctors don't offer discounted rates so you spend more out of pocket — sometimes a lot more. Out-of-network doctors will be reimbursed by the plan at a lower rate, which may mean you pay more. Plus, out-of-network doctors don't file claims for you; you pay up front then file claims yourself.

To be a savvy health care consumer, here are some important reminders:

- Even if a doctor, clinic, lab, or hospital "accepts" your insurance, it doesn't mean they're in the Aetna network
- Don't assume that because your doctor is in-network, the hospital (or lab, imaging center, pharmacy, etc.) is too
- Check to see if your doctor is in-network using Aetna's provider search tool at www.aetna.com/dsepublic/#/sony

AETNA'S PREVENTIVE SERVICES

Preventive services offered by Aetna include:

- In-network annual exams, which Sony medical plans cover at 100%
- Women's Health Program that provides 3D mammograms, a Breast Health Education Center, and confidential genetic testing for breast and ovarian cancer
- In-network cancer preventive screenings covered at 100%: diagnostic colonoscopies and breast cancer screenings (mammograms, ultrasounds, breast MRIs, and medically necessary BRCA testing)
- Certain preventive care prescriptions, contraceptives, vaccines, and tobacco-cessation medications covered in full so there's no cost to you

Visit www.aetna.com to learn more.

DID YOU KNOW?



USUAL AND CUSTOMARY

If you go to an out-of-network provider, they can set their own rates.

The Sony Aetna plans will only pay what's "usual and customary" — the amount Aetna determines is the normal charge for specific health-related care and procedures within a geographic region.

If what your out-of-network provider bills you is higher than Aetna's usual and customary rate, you'll be responsible for paying the difference between Aetna's approved rate and the provider's fee. This amount will not count toward your deductible.

SONY CONSUMER CHOICE PLAN WITH HEALTH SAVINGS ACCOUNT (HSA)

THE SONY CONSUMER CHOICE PLAN IS A HIGH-DEDUCTIBLE PREFERRED-PROVIDER ORGANIZATION (PPO) THAT INCLUDES AN HSA.

The Sony Consumer Choice Plan has **lower** monthly premiums than our other plans, but **higher** annual deductibles. You may visit any doctor or specialist you choose, in- or out-of-network, and these services will be covered in accordance with the plan terms.

Services that qualify as either “preventive care services”¹ or “preventive care prescriptions” you receive through in-network providers are covered 100% by the plan. Other services, including many prescription drugs, are subject to your medical plan deductible. Please note: Any amounts paid to out-of-network doctors that exceed the “usual and customary” standard of the plan will not apply to your deductible or out-of-pocket maximum.

The Sony Consumer Choice Plan works in conjunction with an HSA. Review the plan comparison chart on **page 13** for more information.

¹ Please refer to each plan for a specific list of covered preventive services. Not all prenatal care services qualify as preventive care.

HOW THE DEDUCTIBLE WORKS

The Sony Consumer Choice Plan's family deductible works differently from the Sony PPO Plan. “Family coverage” is any coverage that includes more than just you (e.g., employee + children or spouse/partner). You must meet the family deductible before the plan starts paying any benefits. Remember, until you meet the deductible, you pay 100% of the cost of most health care and prescription drugs.

Once you meet the family in-network deductible, the plan's coinsurance kicks in; you'll pay 20% for all covered in-network medical services and most prescription drugs until you reach the out-of-pocket maximum. Once you hit that, the plan will pay 100% of covered care for the rest of the plan year.

Prescription drugs will be paid at the rates shown on **page 15**.

EXAMPLE 1: MEETING YOUR DEDUCTIBLE

Marisol has medical coverage for herself, her spouse, and their two children. To date, these are the expenses that apply to the in-network family deductible. They will continue to pay 100% of care and prescriptions until they meet the \$3,400 deductible. These expenses can be paid or reimbursed from Marisol's HSA.

Once they've met the deductible, the plan pays 80% of covered care and prescription drugs for the family until the out-of-pocket maximum is met. This is called coinsurance.

PARTICIPANT	APPLIED TO DEDUCTIBLE
Marisol	\$1,350
Spouse	\$100
Child 1	\$250
Child 2	\$50
TOTAL	\$1,750

EXAMPLE 2: MEETING YOUR OUT-OF-POCKET MAXIMUM

Once Marisol's family met the \$3,400 in-network family deductible, the plan paid 80% of covered care and prescription drugs for the family until the \$8,000 family in-network and out-of-pocket maximum was reached.

As a result, the plan will now pay 100% of covered in-network care and prescription drugs for the rest of the plan year.

PARTICIPANT	APPLIED TO OUT-OF-POCKET MAXIMUM
Marisol	\$2,000
Spouse	\$4,500
Child 1	\$1,000
Child 2	\$500
TOTAL	\$8,000

HEALTH SAVINGS ACCOUNT (HSA)

If you enroll in the Sony Consumer Choice Plan, you may enroll in an HSA, which is a tax-deferred account for paying qualified health care expenses. Unused funds roll over year-to-year. Unlike an FSA, there is no “use it or lose it” penalty.

The HSA is a lot like an interest-earning bank account, but the interest your HSA earns is tax-free. If you leave the company, you can take the HSA with you because the account belongs to you. The HSA is not a Sony Pictures-sponsored benefit; it’s an account you own.

Contributions

Sony Pictures contributes tax-free money to your account; you can contribute with deductions from your paycheck. Your contributions are taken out of your paycheck before federal taxes are calculated on your income, so you pay less income tax, too.

The 2026 maximum HSA contribution is \$4,400 for individual coverage and \$8,750 for family coverage. This includes the Sony Pictures contribution. You can change your contributions during the year and make an after-tax contribution, too.

If you’re 55 or older, you can make an additional \$1,000 “catch-up” contribution each year — also free from federal taxes (state taxes may apply).

Sony Pictures will contribute \$750 (employee only) and \$1,500 (family) to your HSA. Sony Pictures’ full HSA contribution for 2026 will be made in January so you’ll be able to use the funds early in the year. If you’re a new employee, you’ll get a prorated HSA funding amount the first month after you join the plan and set up your HSA.

2026 HSA Annual Contribution Limits

HSA TYPE	SONY PICTURES’ CONTRIBUTION	AMOUNT YOU MAY CONTRIBUTE	TOTAL ALLOWED CONTRIBUTION
Employee Only Coverage	\$750	\$3,650	\$4,400
Family Coverage	\$1,500	\$7,250	\$8,750

Qualifying for an HSA

When you enroll in the Sony Consumer Choice Plan, you will verify your eligibility for an HSA and select your annual contribution amount through the Benefits Center.

To be eligible, you:

- Must be enrolled in the Sony Consumer Choice Plan
- Have no other health coverage (except what the IRS allows)
- Aren’t enrolled in Medicare
- Aren’t claimed as a dependent on someone else’s tax return, and
- Your spouse doesn’t have a general purpose Health Care FSA or Health Reimbursement Account (HRA); however, you can enroll in a Limited Purpose Health Care FSA (see **page 29**)

If you’re Medicare-eligible or approaching Medicare eligibility, email spe_benefits@spe.sony.com.

SETTING UP YOUR HSA

Inspira Financial will automatically open your account when you enroll in the Sony Consumer Choice Plan. They’ll notify you if they need more information for verification purposes.

Sony won’t contribute to your HSA until the account is open and active.

Make sure your legal name matches your Social Security card and your Sony Pictures file. If it doesn’t, there may be a delay in establishing your HSA.

Once Inspira Financial has established your HSA, you can use the funds to pay qualified expenses. The HSA “establishment date” is important because you can’t use the funds to pay medical expenses you incurred before that date.

For example, if you go to the doctor January 5, but don’t open your account until January 30, you can’t pay the January 5 expenses with HSA funds.

You can only use your HSA funds on health care for yourself and for your federal tax dependents.

Review the IRS rules on HSAs for more details: www.irs.gov (Publication 969).

SONY PREFERRED PROVIDER ORGANIZATION (PPO) PLAN

The Sony Preferred Provider Organization (PPO) Plan has **higher** monthly premiums than our other plans, but **lower** annual deductibles than the Sony Consumer Choice Plan.

This plan allows you to visit any health care provider you want, but pays more when you use in-network providers. The Sony PPO Plan's network of providers is the same as the Sony Consumer Choice Plan.

The plan covers in-network preventive care at 100%. For in-network office visits, you pay a copay. For other care, you pay 100% of all expenses until you meet the deductible before the plan starts paying. If you cover dependents on your plan, each person must meet the individual deductible until the family deductible is met. You may meet the family deductible by any combination of covered medical expenses you and your covered family members incur.

SONY EXCLUSIVE PROVIDER ORGANIZATION (EPO) PLAN

This plan's monthly premiums are between the Sony Consumer Choice Plan and the Sony PPO, but the annual deductibles are the lowest of the three plans because you may **only see doctors in the Aetna Select EPO network**. You may visit any doctor in this network without a referral. You don't have to choose a primary care physician (PCP), but having a PCP results in a higher level of care continuity.

This plan covers in-network preventive care at 100%. For in-network office visits, you pay a copay. For other care, you pay 100% of all expenses until you reach the deductible.

HOW THE DEDUCTIBLE WORKS IN THE SONY PPO/EPO PLANS (EXAMPLES ARE IN-NETWORK)

EXAMPLE 1: INDIVIDUAL DEDUCTIBLE MET WITH FAMILY COVERAGE

Seth and his family are in the Sony PPO plan. The expenses below have been applied to his deductibles. Since Seth has met the \$700 individual deductible, the plan will begin paying 80% coinsurance for his care; however, the \$1,400 family deductible hasn't been met yet. His spouse and child will continue to pay Aetna's full negotiated rate for services until the family deductible is met.

PARTICIPANT	APPLIED TO DEDUCTIBLE
Seth	\$700
Spouse	\$100
Child	\$200
Total	\$1,000

EXAMPLE 2: FAMILY DEDUCTIBLE MET

Seth's family has met the family deductible, so the plan will now pay 80% coinsurance for the whole family until they meet the out-of-pocket maximum. Once they meet that, the plan will pay 100% of covered services for the rest of the plan year.

PARTICIPANT	APPLIED TO DEDUCTIBLE
Seth	\$600
Spouse	\$200
Child	\$600
Total	\$1,400

KAISER HEALTH MAINTENANCE ORGANIZATION (HMO) PLAN (AVAILABLE IN CALIFORNIA ONLY)

You must use health care providers and facilities in the Kaiser network only. You choose a primary care physician (PCP) who will refer you to specialists if necessary. Most services require a copay, and there is no deductible to meet.

For more information, review the "2026 Medical Plans at a Glance" table on **page 13**.

2026 MEDICAL PLANS AT A GLANCE

This table is an overview of your medical plan options and the coverage available under each plan. For details, see the applicable Summary Plan Description (SPD) or Summary of Benefits and Coverage (SBC) on benefits.sonypictures.com.

PLAN FEATURE	SONY CONSUMER CHOICE	SONY PPO	SONY EPO	KAISER HMO (CA ONLY)
Type of plan	PPO	PPO	EPO	HMO
Payroll contribution	Lowest	Highest	Moderate	Moderate
	IN-NETWORK	IN-NETWORK	IN-NETWORK ONLY	IN-NETWORK ONLY
Annual deductible	\$1,700 individual ¹ \$3,400 family ¹	\$700 individual \$1,400 family	\$250 individual \$500 family	None
Annual out-of-pocket maximum (includes deductibles, copays & prescriptions)	\$4,000 individual \$8,000 family ³	\$4,200 individual \$8,200 family	\$3,200 individual \$6,400 family	\$1,500 individual \$3,000 family
YOU PAY				
Preventive care	0% (free)	0% (free)	0% (free)	0% (free)
Office visits (primary care)	20% coinsurance ²	\$25 copay	\$20 copay	\$20 copay
Office visits (specialists)	20% coinsurance ²	\$40 copay	\$35 copay	\$35 copay
Teladoc	\$0 (free)	\$0 (free)	\$0 (free)	N/A
Coverage for most services	20% coinsurance ²	20% coinsurance ²	10% coinsurance ²	\$20 copay
Emergency room	20% coinsurance ²	20% coinsurance ²	10% coinsurance ²	\$150 copay
Inpatient hospital	20% coinsurance ²	20% coinsurance ²	10% coinsurance ²	\$250 per admission
Outpatient testing	20% coinsurance ²	20% coinsurance ²	10% coinsurance ²	\$50 per procedure
Diagnostic X-ray and laboratory	20% coinsurance ²	20% coinsurance ²	10% coinsurance ²	No charge
Inpatient mental health & substance misuse	20% coinsurance ²	20% coinsurance ²	10% coinsurance ²	\$250 per admission
Outpatient services copay/coinsurance	20% coinsurance ²	\$25 office visit copay	\$20 office visit copay	\$20 copay
Physical, occupational, and speech therapy ⁴	20% coinsurance ² up to 75 visits per year in- and out-of-network combined ⁴	20% coinsurance ² (other outpatient services); \$40 copay for doctor visit; up to 75 visits per year in- and out-of-network combined ⁴	10% coinsurance ² (other outpatient services); \$35 copay for doctor visit; up to 75 visits per year in- and out-of-network combined ⁴	\$20 copay
OUT-OF-NETWORK				
Annual deductible	\$3,400 individual ¹ \$6,800 family ¹	\$1,400 individual \$2,800 family	No coverage	No coverage
Your coinsurance after deductible	40%	40%	No coverage	No coverage
Annual out-of-pocket limit Note: Any amount over maximum allowable charge is not included.	\$8,000 individual \$16,000 family	\$8,400 individual \$16,400 family	No coverage	No coverage
Preventive care; you pay:	20% coinsurance	20% coinsurance	No coverage	No coverage

¹ All services, including prescriptions, are subject to the annual deductible except for certain preventive care services defined under the plan as being covered at 100%. **Note:** You may pay a copay for some medications on the preventive list. Out-of-network expenses in excess of "usual and customary" charges under the plan will not count toward the annual out-of-network deductible.

² After deductible.

³ Family out-of-pocket maximum has an embedded per-member out-of-pocket maximum of \$6,850 for in-network services.

⁴ Visit limit does not apply to habilitative treatment for autism and development delays; however exclusions may apply.

Note: If you meet the in-network deductible in an Aetna plan, it counts toward the out-of-network deductible, and vice versa. Example: If you're in the Sony PPO and meet the \$700 in-network deductible, you've met half of the \$1,400 out-of-network deductible.

YOUR COST FOR 2026 MEDICAL COVERAGE

Below is a breakdown of your cost per month for each plan. How much you pay is based on the benefits you choose, your base salary when you're hired (and each September 1 after that), and who you cover under your plan.

Sony Pictures shares the cost of most of your benefits with you as part of our commitment to offering you the protection you need. Your payroll deductions — taken weekly or biweekly depending on your pay frequency — are generally taken out of your pay on a pre-tax basis, which means you pay less income tax. Consult your tax advisor for details.

Employees will see only a 3% increase in medical, dental, and vision premiums for 2026.



MEDICAL PLAN EMPLOYEE CONTRIBUTION RATES (includes prescription drug coverage)				
BASE SALARY	Under \$60,000	\$60,000 to \$199,999	\$200,000 to \$299,999	\$300,000 and above
EMPLOYEE MONTHLY COST				
SONY CONSUMER CHOICE PPO				
Employee only	\$71	\$71	\$71	\$71
Employee + spouse/partner	\$173	\$203	\$253	\$334
Employee + child(ren)	\$139	\$163	\$199	\$259
Employee + family	\$243	\$287	\$358	\$468
SONY PPO				
Employee only	\$254	\$302	\$350	\$412
Employee + spouse/partner	\$510	\$607	\$713	\$861
Employee + child(ren)	\$409	\$470	\$561	\$640
Employee + family	\$701	\$835	\$983	\$1,181
SONY EPO				
Employee only	\$140	\$156	\$184	\$200
Employee + spouse/partner	\$280	\$323	\$380	\$430
Employee + child(ren)	\$226	\$254	\$304	\$347
Employee + family	\$410	\$462	\$556	\$573
KAISER HMO (CALIFORNIA ONLY)				
Employee only	\$118	\$129	\$162	\$178
Employee + spouse/partner	\$267	\$311	\$359	\$398
Employee + child(ren)	\$227	\$259	\$307	\$388
Employee + family	\$361	\$409	\$488	\$504

CIGNA MEDICAL BENEFITS ABROAD (MBA)

Sony Pictures offers a benefit of up to \$200,000 per calendar year if you have an accident or illness while you're traveling on company business outside your home country or the country in which you live.

www.cignaenvoy.com or call **1-800-441-2668** (Policy Number 02428A).

INTERNATIONAL SOS

Sony Pictures provides medical and travel assistance, and security services to those traveling internationally on company business. For more information, contact International SOS at **1-800-523-6586** (U.S.) or www.internationalsos.com (Member Number 11BCPA000212).

CARE YOU CAN COUNT ON

DOC (SEASON 1)
NOW ON DIGITAL

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New prescription drug benefits you'll want to remember.

All Sony Pictures medical plans:

- Offer prescription drug coverage — the benefit depends on the plan you choose and type of drug prescribed
- Cover the full cost of certain preventive care prescriptions, contraceptives, and tobacco-cessation medications

New for 2026: CVS/Caremark (Caremark) will replace Express Scripts as the pharmacy plan administrator for Sony's Aetna plans. You'll receive one ID card instead of two for medical and prescription drugs.

KEEPING COSTS DOWN AND QUALITY UP

We work with Caremark to help keep prescription drug costs down while maintaining access to clinically proven medications. What this means to you is that the formulary — the list of drugs your medical plan will cover — can change; new drugs get added and others get taken off.

If you take regular medications, we encourage you to occasionally review the formulary to make sure the medications you need are still on the list. If your covered drug is removed, talk to your doctor about similar medications your plan does cover.

When the formulary changes and it affects a medication you take, Caremark will contact you before the change goes into effect so you have time to work with your doctor to find alternatives.

	SONY CONSUMER CHOICE ¹ / SONY PPO / SONY EPO		KAISER HMO (CALIFORNIA ONLY)	
	RETAIL (30-DAY SUPPLY)	MAIL ORDER, CVS, KROGER, OR COSTCO (90-DAY SUPPLY)	RETAIL (30-DAY SUPPLY)	MAIL ORDER (90-DAY SUPPLY)
	YOU PAY			
Generic	\$10 copay	\$20 copay	\$10 copay	\$20 copay
Preferred	30% coinsurance \$25 minimum \$75 maximum	30% coinsurance \$55 minimum \$125 maximum	\$20 copay	\$40 copay
Non-Preferred	40% coinsurance \$40 minimum \$100 maximum	40% coinsurance \$70 minimum \$150 maximum	\$20 copay	\$40 copay

¹ After you meet the deductible in the Sony Consumer Choice Plan.

CVS/CAREMARK

YOUR COST FOR PRESCRIPTIONS

If you buy a brand name drug (preferred or non-preferred) when a generic is available, you'll pay the coinsurance plus the difference in cost between the brand name and generic drugs, unless your prescription doesn't allow a generic substitution.

MAINTENANCE MEDICATIONS

If you take a maintenance medication to manage a chronic condition, you may fill it the first three times at any participating retail pharmacy.

Starting with the fourth refill, you must fill at a CVS, Kroger, or Costco retail pharmacy, or you can fill it through the CVS/Caremark Mail Service Pharmacy.

You can fill 90-day supplies of maintenance medications at CVS/Caremark Mail Service Pharmacy, or at a CVS, Kroger, or Costco retail pharmacy.

SONY CONSUMER CHOICE PLAN AND PRESCRIPTIONS

For most prescriptions, you'll pay 100% of the cost of a prescription until you reach the plan's deductible; however, some "preventive care" medications (as defined by the plan) that help you avoid or manage certain illnesses and conditions may be covered at 100%. Medications that may be covered at 100% treat these conditions:

- Asthma
- Cholesterol
- Diabetes
- High blood pressure
- Heart disease
- Side effects of cancer treatment

For a complete list of covered preventive prescriptions covered at 100%, go to benefits.sonypictures.com. **Note:** *In 2026, you'll pay a copay for certain weight loss medications, even if they appear on this list. For more information about Caremark, visit [CaremarkRxPlanInfo.com/SPE](https://caremarkrxplaninfo.com/SPE).*

OMADA HEALTH

Looking to lose weight, lower your blood pressure, or better manage diabetes and don't know where to start?

Omada Health is a digital program that helps you achieve your health goals and reduce your risk of chronic diseases by helping you build healthy habits, one small step at a time.

Omada Health's program includes:

- Personalized content, activities, and support based on your specific goals
- A personal health coach or specialist invested in your success
- Digitally connected devices to help track your progress

Sony Pictures provides you and your adult dependents access to Omada Health at no cost.

To apply and get started today, please visit omadahealth.com/SPE.

CVS MINUTECLINIC

When you need quality care but can't see your regular doctor, visit MinuteClinic at select CVS pharmacies. Find your closest MinuteClinic at www.cvs.com/minuteclinic/clinic-locator. View wait times and hold your place in line at www.cvs.com/minuteclinic or on the CVS pharmacy app.



HELPFUL PRESCRIPTION TERMS

BRAND NAME DRUGS: Drugs marketed under trademark-protected names, like Lipitor or Prozac.

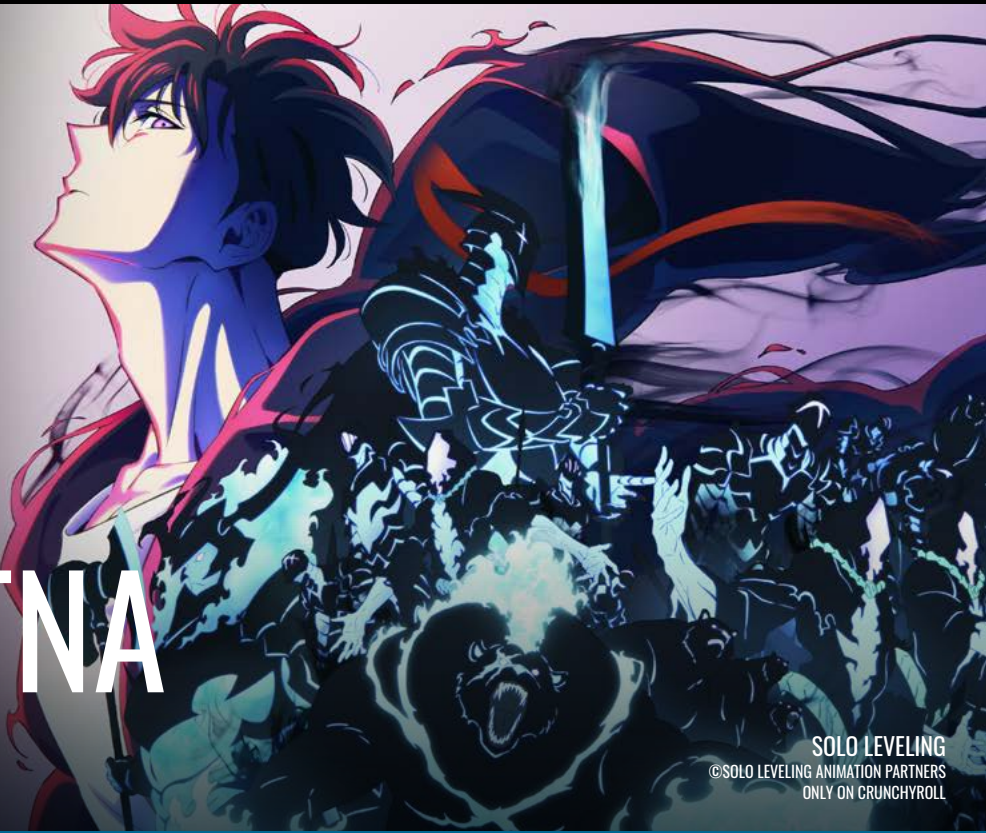
GENERIC DRUGS: This is equivalent to the brand name drug in dosage, safety, strength, quality, performance, and intended use. By law, the amount of active ingredient in a generic drug must be identical to the brand name product.

COMPOUND MEDICATIONS: Medications that are combined, mixed, or altered by a licensed pharmacist. The FDA doesn't verify the quality, safety, or effectiveness of compound medications so *they're not covered under Sony Pictures' plans*.

PREFERRED DRUGS: Generic and brand name medications for which you'll pay less under the plan.

NON-PREFERRED DRUGS: Prescriptions for which you'll pay more under the plan.

LEVEL UP WITH AETNA



SOLO LEVELING
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ONLY ON CRUNCHYROLL

Open the gates to Aetna's extensive services.

AETNA HEALTH APP & MEMBER WEBSITE

You can:

- View or print your electronic ID card
- Check what's covered by your plan
- Track your progress toward meeting your deductibles
- View your Explanation of Benefits (EOB)
- View discount programs available to you as an Aetna member



www.aetna.com

TELADOC

With Sony Pictures' telemedicine program, you can call a doctor 24/7 for diagnosis and treatment of minor conditions.

With Teladoc, you can get:

- Short-term prescriptions
- Skin conditions diagnosed by sending a photo

Teladoc offers behavioral health counseling seven days a week for you and your covered dependents. Therapists provide help with anxiety/stress management, relationships, depression, PTSD, and many other issues. It's confidential and convenient.

Call Teladoc at **1-855-Teladoc (1-855-835-2362)** or download the Teladoc app from your favorite app store.

TALK TO A REGISTERED NURSE 24/7

Aetna members will have round-the-clock access to a registered nurse with the 24 Hour Nurse Line at **1-800-556-1555**.



ASK EMMA, AND OTHER TOOLS



EMMA is Sony Pictures' online virtual assistant. She can help you get the most from your benefits.

EMMA asks you questions to make sure you get — and understand — the benefits information you need. Her plan recommendations are based on your answers. The information you share with EMMA is confidential; it's used only to help you find the health plan that best fits your needs.

Try out EMMA as your benefits advisor in the Sony Pictures Benefits Center: **benefitscenter.spe.sony.com**.

TRANSFORM ONCOLOGY CARE PROGRAM

If you or an enrolled dependent is facing a cancer diagnosis, Aetna's Transform Oncology Care Program provides an enhanced, personalized level of support to help you navigate your cancer journey. To learn more, contact Aetna at **1-888-385-1053**.

AETNA HEALTH YOUR WAY

This platform is Aetna's wellbeing program. It will help you better understand, address, and improve your health — and it's customized for you.

Through Aetna Health Your Way, you have access to:

- Health assessment
- Health records (PHR)
- Guided pathways
- Wellbeing educational content
- Recorded wellness webinars
- Activity tracking and device integration
- Personalized digital health actions
- Personal and team challenges

To get started, download the MyActiveHealth app from the App Store or Google Play.

AETNA TOOLS & RESOURCES

To find an Aetna-network doctor¹ — or to find out if yours is in the Aetna network — check out Sony's custom provider search tool:

1. Visit **www.aetna.com/dsepublic/#/sony**.
2. Choose the search method: ZIP code, doctor name, specialty, hospital affiliation, or provider's gender.
3. When prompted for your plan type, choose the network/plan you're interested in: Sony Consumer Choice Plan, Sony PPO, or Sony EPO.

WILL I GET AN AETNA ID CARD IN THE MAIL?

Yes! Because Sony is switching to Caremark — and Caremark and Aetna are part of the same company — all employees enrolled in Aetna for 2026 will receive a new combined medical/prescription drug ID card before January 1, 2026.

AETNA CONCIERGE PROGRAM

The Aetna concierge program delivers easy access to health resource consultants.

The program can help with billing, provider, and plan design questions. A concierge can help you make informed choices about your health care.

You can reach Sony Pictures' concierge team at **1-888-385-1053**.

¹ Providers may not show up in the provider search, based on the way they are registered or if they're part of a provider group. If you can't find your doctor, call Aetna.

HINGE HEALTH

As an Aetna member, you'll have access to Hinge Health, which offers innovative digital programs for back, knee, hip, neck, shoulder pain, and pelvic floor disorders in easy-to-do 15-minute exercise therapy sessions. Learn more and register at www.hingehealth.com/sony.

PRECONCEPTION, FERTILITY, PREGNANCY, POSTPARTUM, AND MENOPAUSE CARE WITH PROGNY

COMPREHENSIVE FERTILITY COVERAGE

Sony Pictures partners with Progyny to offer comprehensive fertility benefits to support every path to parenthood, including single parents, LGBTQ+ individuals and couples, and those who want to preserve their fertility. You must be enrolled in the Sony Consumer Choice Plan, Sony PPO, or Sony EPO to use Progyny benefits.

Your coverage includes up to four rounds of Smart Cycle fertility care. Smart Cycle coverage includes IUI, IVF, egg freezing, donor eggs or sperm, urological treatment for men, surrogacy and adoption counseling, and more. Progyny connects you to leading fertility specialists who provide the most advanced, effective fertility treatment. There are no precertification or treatment hurdles; you can find the course of treatment that's best for you. Progyny includes unlimited guidance and support throughout your fertility journey from a dedicated patient-care advocate (PCA).

Kaiser also provides fertility care to support the diagnosis and treatment of infertility, offer fertility services like IVF, and include oocyte retrievals and embryo transfers. Visit kp.org or call **1-800-464-4000** to learn more.

PREGNANCY AND POSTPARTUM CARE

New for 2026: Progyny's Pregnancy and Postpartum program will replace Aetna's Maternity Services. This program offers many services including:

- Access to nurses and clinical coaching support from conception through 12 months postpartum
- Two pre-term and two postpartum virtual doula visits
- 24/7 virtual lactation support

MENOPAUSE AND MIDLIFE CARE

Progyny provides access to specialized menopause-related medical care. A virtual menopause expert will work with you to determine a treatment path that may include FDA-approved prescriptions and hormones to improve your quality of life.

For more information about these programs, including transition of care, visit progyny.com/smart-benefits/ or call **1-833-404-2011**.

DIGESTIVE HEALTH CARE WITH OSHI

New for 2026: Oshi, an in-network partner with Aetna, delivers holistic digestive care to get to the root cause of your gastrointestinal (GI) symptoms. Whether your symptoms are occasional or you live with a chronic condition like Crohn's disease or IBS, Oshi can help. Visit oshihealth.com/sony to learn more.

MEDICARE AND MEDICAL BENEFITS

Employees reaching Medicare eligibility (age 65+) may continue enrollment in SPE medical plans and defer Medicare enrollment until they leave the company.

Note: If you enroll in any part of Medicare, you're no longer eligible to contribute to the Health Savings Account (HSA) without tax implications. SPE has partnered with Via Benefits to provide employees support and guidance when planning for retirement.

Visit discoverviabenefits.com or call **1-888-491-6527** to learn more.

HEALTH PLANS MEET WORLD PROFESSIONAL ASSOCIATION FOR TRANSGENDER HEALTH (WPATH) STANDARD

We're proud that our Aetna medical plans — Sony Consumer Choice Plan, Sony PPO, and Sony EPO — meet the WPATH standards of care for employees seeking medical transition. This means our Aetna plans provide employees who are part of the diverse transgender, nonbinary, and gender nonconforming communities with primary, specialty, and mental health care.

Please review the Transgender and Nonbinary Resource Guide at benefits.sonypictures.com/resources.



COBRA KAI (SEASON 6)

NOW ON NETFLIX

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Protect your mental health and emotional wellbeing.

MENTAL HEALTH & EMOTIONAL WELLBEING RESOURCES

We've heard clearly from you that caring for your mental and emotional health is just as important as your physical health. We're excited to provide a fully integrated suite of resources available by phone, computer, or in-person (as available) through providers like Spring Health. It provides convenient and confidential resources to help you navigate all your mental, emotional, and behavioral health and wellbeing needs.

SPRING HEALTH MENTAL HEALTH AND EMOTIONAL WELLBEING BENEFITS

Sony Pictures employees and their family members can access a full continuum of convenient and confidential mental health and emotional wellbeing benefits through Spring Health — all provided at no cost to you.

Just like exercising regularly or going to the doctor for an annual checkup, Spring Health gives you and your family the tools to improve your mental wellness.



In-app wellness exercises. Support your mental fitness on-the-go, with exercises in meditation, better sleep, and more.



Personalized recommendations. Assessments to identify the right care for your needs, learn more about yourself, and track your progress.



Dedicated support. Receive guidance along your journey from your personal Care Navigator.



Crisis support line. Talk to a caring professional when you need urgent help.



Therapy. Book sessions with trusted providers at times that fit your schedule. Costs for the first eight sessions are paid for by Sony Pictures.



Medication Management. Speak with a Spring Health prescriber to manage medications, when appropriate.



Coaching. Receive tips for managing stress, increasing focus, and more.



Work-life services. Access services to help you navigate life's challenges, from legal guidance to financial planning. Work-life access code: sonypictures.



GETTING STARTED IS EASY:

Get started with Spring Health in four easy steps.

- 1 Activate your Spring Health account.
 - Online: **benefits.springhealth.com/sonypictures**
 - Phone: **1-855-629-0554**
 - Mobile App: download "Spring Health Mobile" in the Google Play and Apple app stores
- 2 Complete your mental health and emotional wellbeing assessment at **benefits.springhealth.com/sonypictures** and receive your personalized care plan based on your exact needs.
- 3 Connect with your dedicated Care Navigator to help you along your journey.
- 4 Access in-app mental wellbeing exercises, up to eight free therapy sessions (paid for by Sony Pictures), and more.



MEDICAL PLAN COVERAGE FOR MENTAL HEALTH & SUBSTANCE MISUSE

In addition to Spring Health, all of the Sony Pictures medical plans provide coverage for mental health and substance misuse diagnostic and treatment services.

You can find an in-network provider as well as learn more about covered services and additional resources when you contact your plan:

Aetna:
1-888-385-1053
www.aetna.com/dsepublic/#/sony

Kaiser Permanente:
1-800-464-4000
www.kp.org

If you're enrolled in an Aetna medical plan and you see a Spring Health provider for therapy services, you can continue to see them as an in-network provider, subject to your deductible, copay, and coinsurance, after the first eight visits paid for by Sony Pictures.

If you're enrolled in the Kaiser plan, a behavioral health liaison can help you transition to a Kaiser network provider if you need services beyond those provided by Spring Health.

WHAT IS SPRING HEALTH?

Spring Health provides mental wellness services that are confidential, convenient, and available anytime, anywhere.

WHAT CAN I USE SPRING HEALTH FOR?

With Spring Health, you can book therapy sessions that fit your schedule, access work-life resources for help navigating life's challenges, and more. They also provide a library of on-demand self-help exercises and pair each employee or covered family member with a dedicated Care Navigator.

WHO CAN USE SPRING HEALTH?

It's available to Sony Pictures U.S. benefits-eligible employees and their dependents age 6 and older.

HOW MUCH DOES IT COST?

Sony Pictures employees and each of their covered dependents receive up to eight free therapy sessions every year with a Spring Health provider.

Those enrolled in an Aetna medical plan through Sony Pictures can continue seeing their Spring Health provider as an in-network provider after the first eight sessions.





ADDITIONAL MENTAL HEALTH RESOURCES

ON THE LOT (AND VIRTUAL) COUNSELING

Sony Pictures has a dedicated counselor in California, with an office on the lot in Culver City. In addition to counseling, you can get referrals, resources, support, and information on many work-life issues.

Wendy Talley, PhD, is available 9 a.m. to 2 p.m. PT, Tuesday and Wednesday.

Email: theleseconsultinggroup@gmail.com.

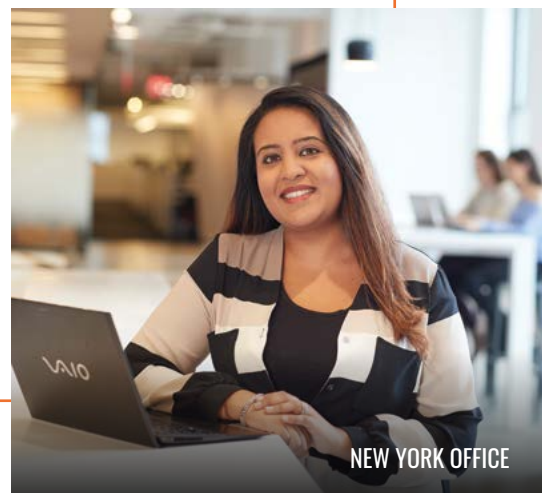


TELADOC COUNSELING

If you're enrolled in the Sony Consumer Choice, Sony PPO, or Sony EPO medical plans, and comfortable with the Teladoc platform, you can connect 24/7 with a Teladoc virtual doctor.

In addition to diagnosis and treatment of minor medical conditions, Teladoc offers behavioral health counseling seven days a week for you and your covered dependents. Therapists provide help with anxiety/stress management, relationships, depression, PTSD, and many other issues. It's confidential and convenient. No copays are required for counseling sessions.

Call Teladoc at **1-855-Teladoc** (1-855-835-2362) or download the Teladoc app from your favorite app store.



YOUR BIG BOLD BEAUTIFUL SMILE

A BIG BOLD BEAUTIFUL JOURNEY
IN THEATERS FALL 2025
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Illuminate your smile in the here and now.

There are two dental plan options to choose from: the High Plan and Standard Plan.

The High and Standard plans use the Delta Dental PPO and Premier networks. You'll receive benefits for services with any dentist, but Delta Dental's PPO network provides you with the deepest discounts on your dental costs. If you can, it's best to find Delta Dental PPO dentists and specialists to minimize your out-of-pocket costs and maximize your benefits.

With the High Plan, you'll pay more out of each paycheck but less when you need care. The Standard Plan is a less generous plan, but your per-paycheck contributions are less. Only the High Plan covers orthodontia, so if you need that benefit, the High Plan is for you.

Like your medical plan, dental coverage also includes preventive care benefits at 100%. Take advantage of this and schedule regular checkups with your dentist.

For more information about the plans, or to view the provider directory, visit www.deltadentalins.com/sony, or call 1-800-471-7059.

YOUR MONTHLY COST FOR 2026 DENTAL COVERAGE

COVERAGE LEVEL	SONY HIGH PLAN	SONY STANDARD PLAN
	IN-NETWORK	IN-NETWORK
Employee only	\$26	\$9
Employee + spouse/partner	\$55	\$22
Employee + child(ren)	\$59	\$24
Employee + family	\$90	\$35



SONY DENTAL PLANS AT A GLANCE

PLAN FEATURE	SONY HIGH PLAN	SONY STANDARD PLAN
	IN-NETWORK	IN-NETWORK
Annual deductible	\$50 per person \$150 per family	\$25 per person \$50 per family
Annual maximum benefit ¹	\$3,000 (includes orthodontia)	\$1,500
YOU PAY		
Preventive and diagnostic services ¹ (exams, routine cleanings, ³ X-rays, etc.)	0% (free) ² (3 cleanings and exams per year)	0% (free) ² (3 cleanings and exams per year)
Basic restorative services (fillings, extractions, root canals, periodontal ³)	10% after deductible	20% after deductible
Major restorative services (crowns, bridges, dentures, ⁴ implants)	15% after deductible	40% after deductible
Orthodontia (for adults and dependent children)	50% after deductible	Not covered
OUT-OF-NETWORK ⁵		
Preventive ⁶	0%	0%
Basic	20%	20%
Major	50%	50%
Orthodontia	50%	Not covered

¹ Preventive and diagnostic services don't count toward the annual maximum.

² You don't need to meet the deductible for preventive and diagnostic services to be covered at 100%.

³ Three periodontal cleanings are covered in addition to three covered routine cleanings.

⁴ Three denture cleanings and inspections per year.

⁵ For services received out-of-network, you will be reimbursed the plan's benefit based on the highest in-network allowance for any covered service; however, you are responsible for an out-of-network dentist's entire bill. That means you may be "balance billed" by your dentist and are ultimately responsible for any amount billed by your dentist, even if that amount exceeds your reimbursement from the plan.

⁶ Includes sealants to protect teeth against cavities.

WE ♥ YOUR EYES

HEART EYES
ON DISC AND DIGITAL
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Fall in love at first sight with our killer vision coverage.

VSP is Sony Pictures' vision plan provider. You and your family are covered for eye exams, lenses, and frames once per calendar year.

If you use an in-network provider, your plan covers your eye exam and glasses (frame and lenses), or contact lenses. You may also be eligible for discounts on additional products or services you buy during the same visit or even later in the same year.

KidsCare enhanced vision benefit for dependents under age 26 allows for two exams per year and a second set of lenses per year when there's a prescription change.

If you use an out-of-network provider, your plan may or may not cover the full cost of your exam, and your glasses or contact lens allowance will vary by selection.

You'll find a list of certified network optometrists and ophthalmologists at www.vsp.com.

YOUR MONTHLY COST FOR 2026 VISION COVERAGE

COVERAGE LEVEL	STANDARD PLAN
Employee only	\$6.75
Employee + spouse/partner	\$10.50
Employee + child(ren)	\$10.50
Employee + family	\$17.00

SONY VISION PLAN AT A GLANCE (IN-NETWORK BENEFITS¹)

PLAN FEATURE	DESCRIPTION	YOUR COPAY	FREQUENCY
WellVision exam	Focuses on your eyes and overall wellness	No copay	
Retinal Imaging	Diagnostic test	\$10	
Prescription glasses		\$10	See frames & lenses below
Contact lens exam (fitting and evaluation)		Up to \$60 copay on exam (fitting and evaluation); covered in full after copay	

FRAMES & LENSES

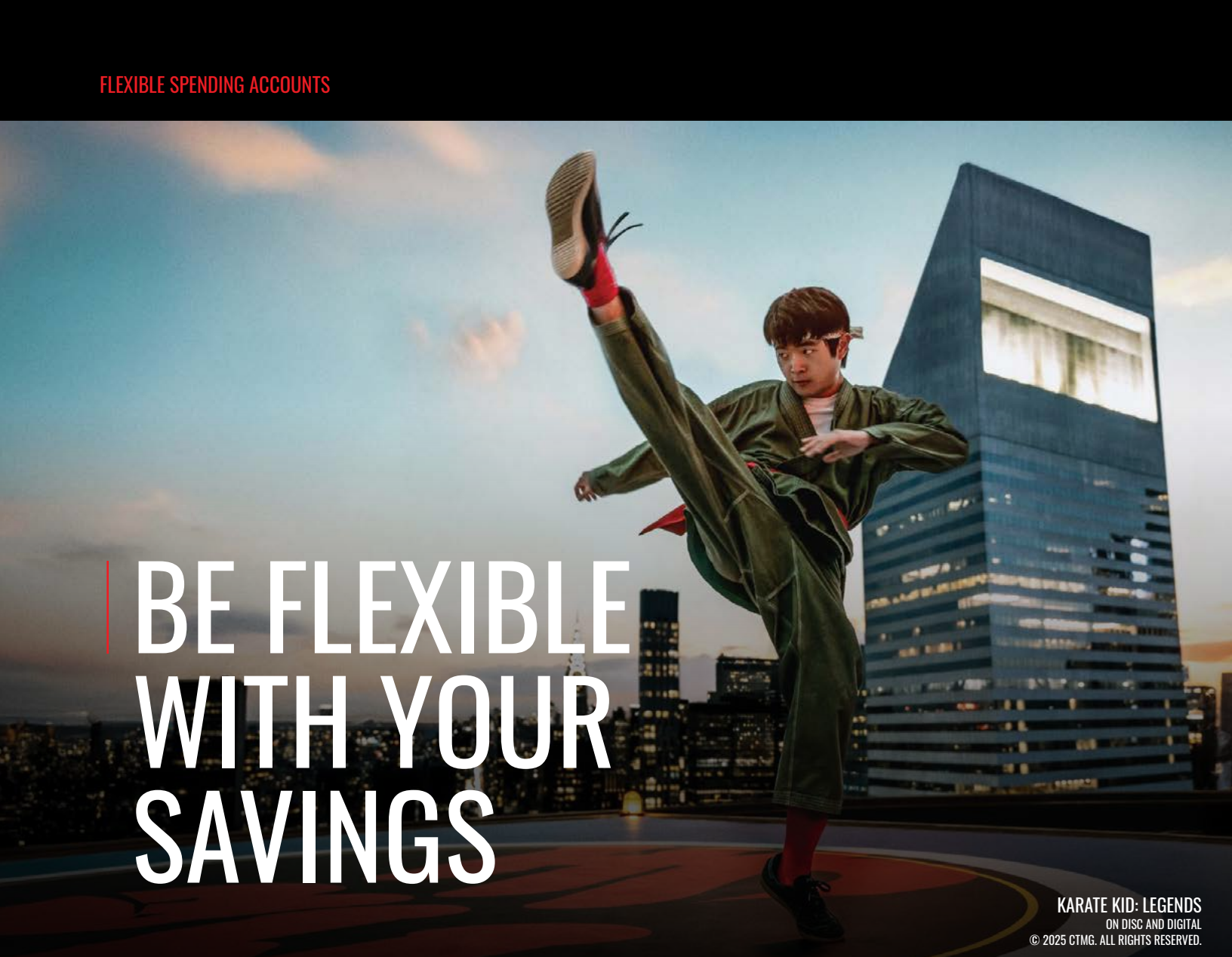
Frames	\$200 allowance on a wide selection of frames \$220 allowance on featured frame brands 20% savings on the amount over your allowance - Or \$110 allowance at Costco Optical or Walmart	No copay Combined with exam	Every calendar year
Lenses ²	- Single vision, standard progressive, lined bifocal, and lined trifocal lenses - Polycarbonate lenses for dependent children		Every calendar year
Contacts (instead of glasses)	\$200 allowance for contacts 15% off contact lens exam (fitting and evaluation)		Every calendar year
Extra savings	Glasses and sunglasses 30% savings on additional glasses and sunglasses, including lens enhancements, from the same VSP provider on the same WellVision exam - Or 20% savings from any VSP provider within 12 months of your last WellVision exam Laser vision correction (LASIK) - Average 15% off the regular price - Or 5% off the promotional price; discounts only available from contracted facilities		

COMPUTER VISION CARE (EMPLOYEE ONLY)

PLAN FEATURE	DESCRIPTION	YOUR COPAY	FREQUENCY
Computer Vision Exam	Evaluates your needs related to computer use	\$0 for exam	Every calendar year
Frames	\$90 allowance on a wide selection of frames \$110 allowance on featured frame brands 20% savings on the amount over your allowance	\$10 for glasses	Every calendar year
Lenses	- Single vision, lined bifocal, lined trifocal, and occupational lenses - Anti-reflective coating	Combined with frames	Every calendar year

¹ Out-of-network benefits are available; contact VSP for details.

² Lens enhancements include UV protection and standard/premium/custom progressive lenses.



BE FLEXIBLE WITH YOUR SAVINGS

KARATE KID: LEGENDS
ON DISC AND DIGITAL
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Master how you pay for health and dependent care.

USE IT OR YOU MAY LOSE IT

Flexible Spending Accounts (FSAs) allow you to set aside pre-tax money to pay eligible health care and dependent day care expenses. Choose a contribution amount during the enrollment period to participate in an FSA.

You must spend Dependent Care FSA funds by December 31, 2026. If you don't, you'll lose whatever money is left in your account. For health-related FSAs, some remaining funds will carry over to next year.

We offer three types of FSAs:

- Health Care FSA
- Limited Purpose FSA
- Dependent Care FSA

You determine how much to contribute to each account. Your contributions are deducted from your paycheck on a before-tax basis (subject to IRS limits). FSAs and the HSA are administered by Inspira Financial.

HEALTH CARE FSA (GENERAL PURPOSE)

ANNUAL CONTRIBUTION: UP TO \$3,400 EACH YEAR

You may use funds to pay medical and dental plan deductibles, copays and coinsurance; prescription drugs; vision care expenses, including contacts; orthodontics; medical equipment; and more. The IRS doesn't allow individuals with HSAs to also have a general purpose Health Care FSA.

LIMITED PURPOSE HEALTH CARE FSA

ANNUAL CONTRIBUTION: UP TO \$3,400 EACH YEAR

If you're enrolled in the Sony Consumer Choice Plan (with the HSA), Sony Pictures offers a Limited Purpose Health Care FSA. You can use it to pay only dental and vision expenses until you meet your medical plan's deductible. Once you do, you can use this FSA for qualified medical expenses, too.

For a complete list of qualified Health Care FSA expenses, see IRS Publication 502, www.irs.gov.

DEPENDENT CARE FSA

ANNUAL CONTRIBUTION: UP TO \$7,500 EACH YEAR

If you pay for dependent care, you may enroll in the Dependent Care FSA to pay qualified dependent day care and elder care expenses. Highly compensated employees (those who earned more than \$160,000 in 2025) will be limited to a \$4,800 annual contribution.¹

Qualified caregivers include:

- Licensed child care centers
- Nursery schools and preschools
- In-home care (au pair/nanny) and babysitting
- After-school care and summer day camps
- Elder/senior day care

Qualified dependents include:

- Your children age 12 and younger
- A spouse or dependent of any age who lives with you, relies on you, and is physically or mentally unable to care for herself/himself, and is listed as a dependent on your federal income tax return



Consult your tax advisor on whether you should enroll in the Dependent Care FSA or take advantage of the federal dependent care tax credit.



MIAMI OFFICE



CULVER CITY OFFICE



NEW YORK OFFICE

¹ Cutback amount for highly compensated employees is subject to change based on non-discrimination testing.

MEDICAL SPENDING ACCOUNTS

ELIGIBLE EXPENSES FOR FSAs AND HSAs

There are three kinds of tax-favored medical spending accounts:

HSA – Available only with the Sony Consumer Choice Plan.

FSA – Available only if you DO NOT have an HSA.

Limited Purpose FSA – Available only if you have an HSA; use this account to pay only dental and vision expenses until you've met your deductible in the Sony Consumer Choice Plan. Once you've met your deductible, you may also use your LP-FSA to pay qualified medical expenses.

These accounts are designed to cover expenses not covered by your benefit plans, including:

- Expenses that count toward the deductible
- Copays and coinsurance
- Prescription drugs
- Dental care, including braces
- Hearing aids
- Contact lenses and LASIK surgery
- Wheelchairs

Depending on which plan you choose, these expenses will be paid in different ways. See IRS Publication 502 for a complete list of qualified health care expenses you can pay with HSA and FSA funds, www.irs.gov.

Check Aetna Navigator at www.aetna.com for more information. There's even a tool to help you organize medical expenses and HSA withdrawals online.

FSA AND HSA ADMINISTRATION

You can access your accounts on the Inspira Financial self-service website, and set up payment specifications, file claim submissions, and see your debit card transactions. You can sign into the website through Aetna Navigator, www.aetna.com, or at inspirafinancial.com.

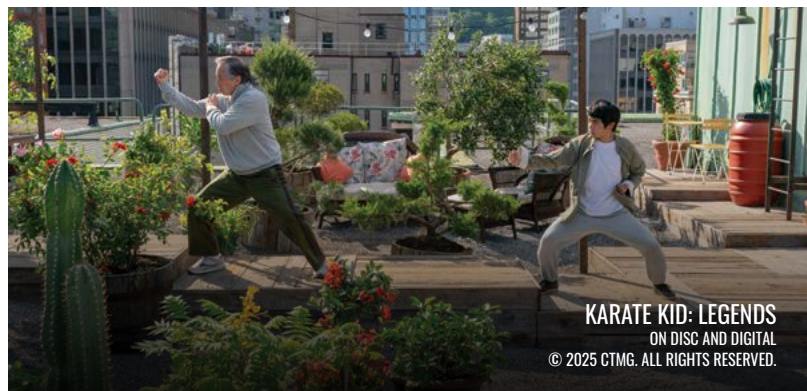
You may use HSA and FSA funds to pay qualified medical expenses for yourself, your spouse, and eligible dependents without tax penalty. If you use the funds for non-qualified expenses, penalties may apply.

More information about how and when to submit claims is available at inspirafinancial.com. You can have FSA and HSA reimbursements deposited directly into your regular bank account.

HSA VS. FSA

The HSA offers more opportunities for tax savings (subject to IRS rules). Plus, the account is yours to keep if you leave the plan or Sony Pictures. Here's how an HSA compares with a general purpose Health Care FSA.

PLAN FEATURE	HSA	FSA
Sony Consumer Choice Plan required?	Yes	No
Use it or lose it?	No	Yes
Take it with you?	Yes	No
Are contributions taxed?	No (except for certain states)	No (except for certain states)
Is earned interest taxed?	No	Does not earn interest
Investment options?	Yes	No
Are qualified withdrawals taxed?	No	No
Who can contribute?	You and Sony Pictures	You
Contribution limit?	\$4,400 individual \$8,750 family	\$3,400



KARATE KID: LEGENDS
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BE PREPARED FOR ANYTHING

28 YEARS LATER

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Coverage that's built to last, even in the unpredictable.

Sony Pictures provides you with basic LTD coverage, administered by Reliance Matrix.

LTD pays benefits if an illness or injury prevents you from working for an extended period.

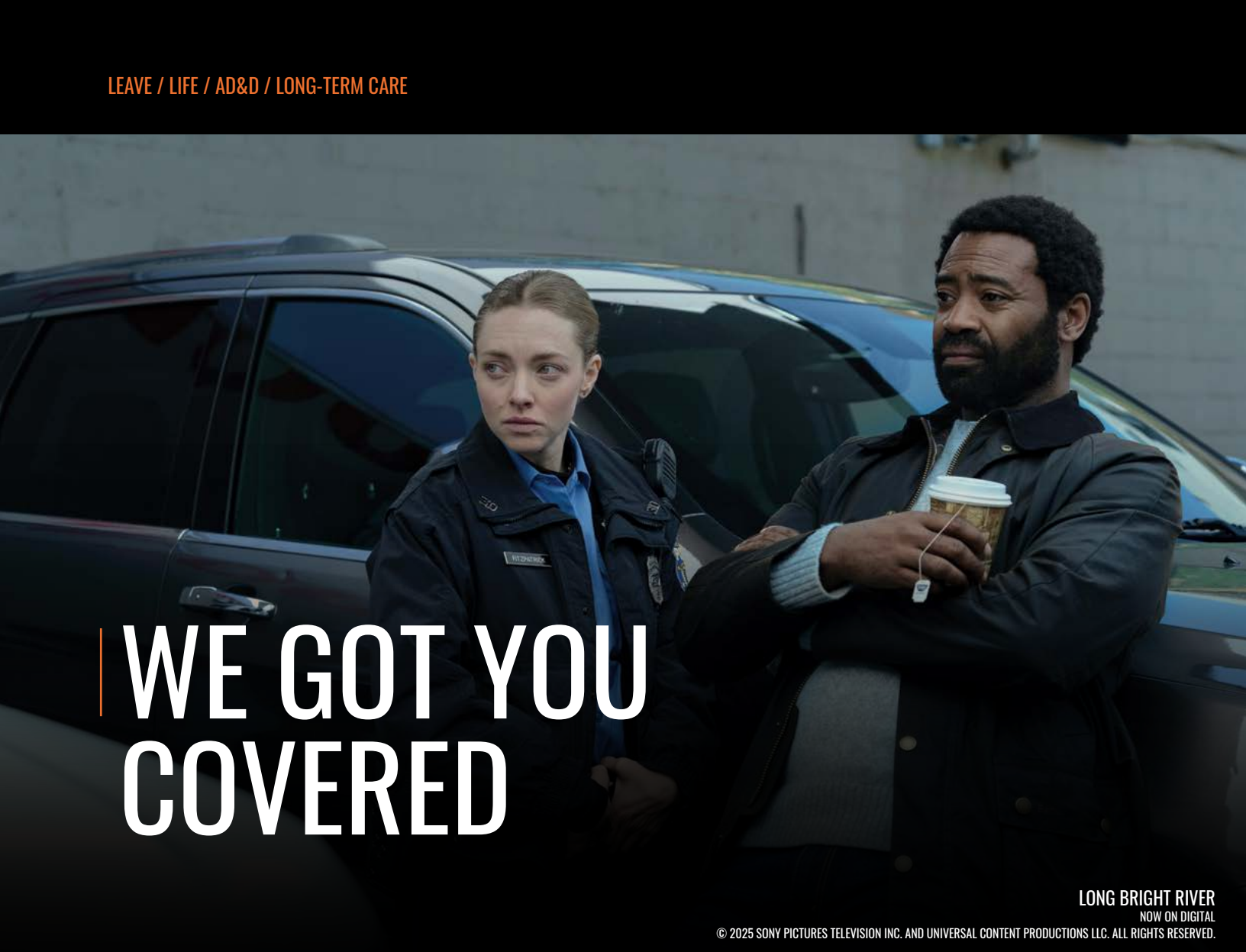
You're automatically enrolled in basic coverage. It pays 60% of your monthly base pay up to \$400,000, for a maximum benefit of \$20,000 per month (after 180 days of disability).

You're taxed on the premium Sony Pictures pays for you; however, the LTD benefit, should you ever need it, won't be taxed.

You may buy optional coverage, which increases the amount you'd receive to 70% of your monthly base pay. The combined (company-paid and optional coverage) maximum benefit is \$20,000 per month.

OPTIONAL LTD EMPLOYEE CONTRIBUTION RATES (RELIANCE MATRIX)

AGE	ADDITIONAL EMPLOYEE LTD MONTHLY COST (PER \$100 OF COVERED EARNINGS)
Under 25	\$0.029
25-29	\$0.033
30-34	\$0.037
35-39	\$0.063
40-44	\$0.083
45-49	\$0.137
50-54	\$0.212
55-59	\$0.253
60-64	\$0.253
65-69	\$0.270
70 and older	\$0.362



WE GOT YOU COVERED

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Benefits to support you when you need it the most.

Like physical health, financial health is important. We all have concerns about how loved ones would get by if something happened to us. Sony Pictures offers you the opportunity to build a solid financial plan to protect your loved ones.

Life insurance provides your beneficiary with a benefit in the event of your death.

Accidental Death and Dismemberment (AD&D) insurance provides an additional benefit if you suffer a serious injury in an accident, or in the event of your accidental death.

The Hospital Indemnity and Accident plans pay you cash if you're hospitalized, or injured and need care.

LEAVES OF ABSENCE

Sony Pictures provides many types of leaves of absence that allow you to take time off when you need it.

Sony Pictures offers eligible employees 12 weeks of paid time off for qualifying leaves, to care for or bond with family members.

For information about all the types of leave Sony Pictures offers and the Short-Term Disability policy, please see the Leave of Absence section in the Employee Handbook. Contact Sony Pictures Leave Administration at **1-888-256-4094** or **www.matrixabsence.com** to report a leave.

BASIC LIFE AND AD&D INSURANCE

Sony Pictures provides eligible employees with basic life¹ and AD&D insurance of 1x annual base salary² at no cost to you. Coverage is provided by Securian Financial.

IMPUTED INCOME

If you have company-provided employee life insurance coverage of more than \$50,000, the IRS requires that the fair-market value of the premium above \$50,000 be treated as taxable income.

The imputed income amount is shown on your paystub and on your year-end W-2 form. Talk to your tax advisor for more information.

¹ Executive life insurance provided by MetLife; different limits may apply.

² Up to a maximum of \$1 million.

CHOOSING YOUR BENEFICIARIES

Choosing who will receive your survivor benefits for life insurance, AD&D, and 401(k) is an important decision.



You're required to name your beneficiaries when you enroll. After your first enrollment, you should periodically review your beneficiary elections to make sure their information is up to date. You may change beneficiaries at any time.

Everyone's situation is unique. Visit the life insurance decision support tool, Benefit Scout, in the Benefits Center website to get an estimate of the amount of life insurance you should have and the associated costs.



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You may buy additional life¹ and AD&D insurance coverage beyond the basic benefit.

Supplemental life insurance coverage:

- **Employee** – 1–9x annual base salary up to a maximum of \$1.5 million; age reductions apply²
- **Spouse/partner**³ – \$10,000, \$25,000, \$50,000, \$100,000, \$250,000, \$350,000, or \$500,000
- **Child**³ – \$10,000, \$20,000, or \$25,000

Supplemental AD&D insurance coverage:

- **Employee** – 1–9x annual base salary up to a maximum of \$1.5 million²
- **Family** – Spouse/partner, up to a maximum of \$750,000; child maximum of \$100,000:
 - Spouse/partner (with children): 40%⁴
 - Spouse/partner (no children): 50%⁴
 - Each child (with spouse/partner): 10%⁴
 - Each child (no spouse/partner): 25%⁴

¹ Executive life insurance provided by MetLife; different limits and rates may apply.

² At age 65, basic and supplemental employee life and AD&D coverage decrease to 65% of the amount in effect before age 65.

³ If your spouse/partner/child is eligible for coverage as an employee, they cannot be covered as a dependent. A child may be covered by both parents if both are Sony Pictures employees. Children are eligible from live birth to age 26.

⁴ Supplemental spouse/partner and child AD&D coverage is a percentage of the employee's supplemental AD&D amount.

SUPPLEMENTAL LIFE AND AD&D INSURANCE

EVIDENCE OF INSURABILITY (EOI)

EOI — proof that you are healthy — is sometimes required for higher levels of supplemental life coverage and spouse life coverage.

CURRENT EMPLOYEES – Securian will allow you to enroll in or increase your supplemental life insurance 1x your salary during open enrollment without submitting EOI as long as your increase is under the guaranteed issue limit of 5x your salary or \$1 million, whichever is less. You can enroll in or increase your spouse/partner coverage by one increment up to the guaranteed issue of \$50,000.

SUPPLEMENTAL LIFE INSURANCE: EMPLOYEE CONTRIBUTION Rates per \$1,000/month (Rates increase with age)

AGE	EMPLOYEE	SPOUSE/PARTNER
Under 25	\$0.029	\$0.050
25-29	\$0.035	\$0.060
30-34	\$0.046	\$0.080
35-39	\$0.053	\$0.090
40-44	\$0.058	\$0.100
45-49	\$0.087	\$0.150
50-54	\$0.133	\$0.230
55-59	\$0.250	\$0.430
60-64	\$0.382	\$0.660
65-69	\$0.734	\$1.270
70 and older	\$1.190	\$2.060
Supplemental Child Life	\$10,000 coverage: \$0.20 per month \$20,000 coverage: \$0.40 per month \$25,000 coverage: \$0.50 per month	

SUPPLEMENTAL AD&D: EMPLOYEE CONTRIBUTION Rates per \$1,000/month

Employee only	\$0.011
Employee and family	\$0.023



LONG-TERM CARE COVERAGE

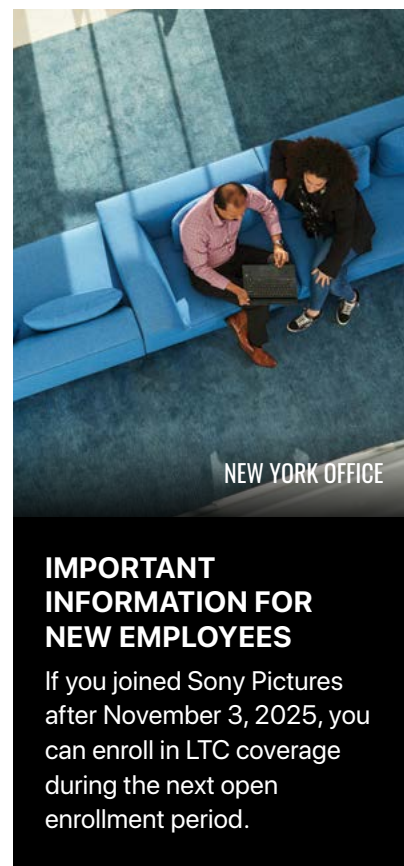
Sony Pictures offers optional long-term care (LTC) coverage that includes life insurance.¹

Trustmark's LTC benefit covers services that support you if you ever need help with essential daily activities. It can be especially important for people with chronic illnesses or disabilities, and people who require help with activities like bathing, dressing, eating, medication management, and mobility.

Note: This is a separate policy from the basic and supplemental life insurance offered by Sony Pictures. See **page 33** for information on the life insurance benefit.

LTC coverage is an important part of your health and financial planning because:

- The average cost of long-term care is \$43,000 a year²
- It can help protect your retirement savings and ease the burden of caregiving by your loved ones
- It allows you to choose where you get care: at home, an assisted living facility, a nursing home, or an adult day care center
- Health insurance, disability coverage, and Medicare don't cover long-term care costs
- Although your need for LTC may be many years away, premium rates are locked in based on your age as of your initial coverage date; rates may significantly increase the longer you wait



BENEFIT HIGHLIGHTS

- New hires under the age of 64 qualify for guaranteed acceptance, which means there are no health questions during the enrollment
 - All other employees who didn't enroll during their previous enrollment opportunities are still eligible to enroll in coverage during this period by answering limited health questions
 - Previously enrolled employees are also eligible to elect more coverage by answering limited health questions during this enrollment
- You must enroll in Trustmark life insurance to get the LTC benefit through a separate LTC enrollment portal; elections for this coverage are not made at **benefitscenter.spe.sony.com**
- If you leave Sony, you can take your LTC coverage with you
- Benefits are payable as long as you pay your premiums through convenient ACH payment (not payroll deductions)
- Your monthly LTC benefit is equal to 4% of your life insurance
 - Example: You elect a Trustmark life insurance benefit of \$50,000, so your LTC benefit is \$2,000 per month up to \$100,000 maximum benefit

We understand there are many factors in determining the amount of LTC coverage you may need and whether it's right for you and your family. J. Manning, Sony's LTC broker, can help you with personalized support. You can contact J. Manning at **1-855-549-8911** or visit **getltci.com/sony** for help or to request a personalized quote.

¹ Several states are exploring legislation to implement a state-run LTC benefits program funded by a mandated payroll tax. While the details and legislation haven't been finalized, these proposed programs could offer a reduced or waived tax rate to residents who have already enrolled in LTC coverage individually.

² Source: U.S. Department of Health and Human Services.

ACCIDENT AND HOSPITAL INDEMNITY PLANS

We offer two voluntary benefit plans, provided by Aetna: An accident plan and a hospital indemnity plan. Because the plans are "voluntary," you pay 100% of the premiums with after-tax dollars. And because the premiums are deducted after-tax, any benefits the plans pay to you are tax-free.

You may enroll yourself and your covered dependents during open enrollment; you must keep the plan for the entire year unless you have a qualifying change in status. For more information, visit www.myaetnasupplemental.com or call 1-800-607-3366.

VOLUNTARY ACCIDENT PLAN

Accidents are just that — accidents. You can't plan for them. But, you can protect yourself financially as much as possible. This plan will pay you benefits if you're hurt in an accident and:

- Have to visit the emergency room or urgent care
- Require follow-up visits, physical therapy, etc.
- Are hospitalized (hospital-stay limit is 365 days)

BONUS! The plan also pays \$75 when you get preventive care and screenings.

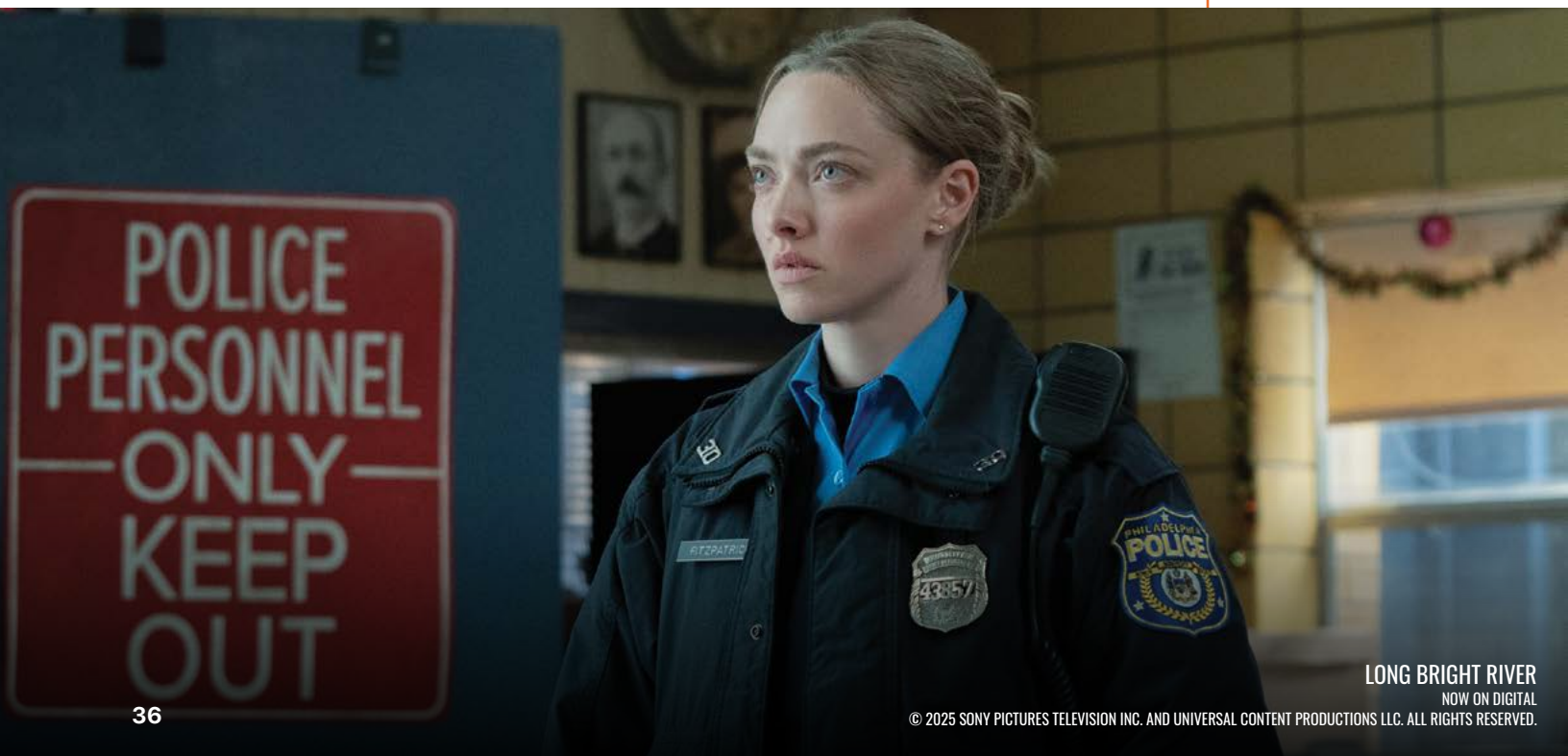
ACCIDENT PLAN MONTHLY RATES

Employee	\$10.58
Employee + spouse/partner	\$19.18
Employee + child(ren)	\$20.54
Employee + family	\$28.31

Example: Tyler enrolled himself and his son, Jake, in the Accident Plan. Jake got hurt riding his bike and went to the emergency room. They took X-rays and diagnosed a broken leg. After Jake's leg healed, he had six physical therapy visits.

ACCIDENT PLAN PAYOUT

Emergency room	\$300
X-ray	\$100
Broken leg	\$1,200
Crutches	\$100
Physical therapy: 6 sessions x \$50	\$300
Total benefit payment to Tyler	\$2,100



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VOLUNTARY HOSPITAL INDEMNITY PLAN

You can't work when you're in the hospital, so wouldn't it be nice to get "paid" for your hospital stay? The plan pays benefits for admission and a daily benefit for a covered hospital stay when you have a planned or unplanned hospital stay for an illness, injury, surgery, or having a baby. You can use the benefits to help pay out-of-pocket medical costs or personal expenses.

If you're hospitalized for rehabilitation and observation, mental health conditions including substance misuse, or many other reasons, this plan will pay you benefits, giving you extra cash when you need it most.

BONUS! The plan also pays \$75 when you get preventive care and screenings.

HOSPITAL INDEMNITY PLAN MONTHLY RATES

Employee	\$14.51
Employee + spouse/partner	\$31.97
Employee + child(ren)	\$25.37
Employee + family	\$42.21

Example: Jada is pregnant and due in early 2026. In March, she's admitted to the hospital and stays one night before delivering a healthy baby boy the next morning. After two nights in the hospital, she and her baby go home.

HOSPITAL INDEMNITY PLAN PAYOUT

Hospital admission	\$1,000
Hospital stay: \$100 per day x 2 days	\$200
Newborn benefit	\$100
Total benefit payment to Jada	\$1,300

Remember, the Voluntary Hospital Indemnity and Accident plans cover more than injuries or illnesses. You can also file a claim if you have eligible preventive care services.

BUSINESS TRAVEL ACCIDENT PLAN

Sony Pictures provides you with Business Travel Accident (BTA) insurance when you travel on company business. In the event of your death, the plan pays your beneficiary 3x your annual base salary to a maximum benefit of \$1 million. It also provides coverage if you're injured in a covered accident.

These plans don't count as minimum essential coverage under the Affordable Care Act. They supplement health insurance but are not a substitute for major medical coverage.

A LITTLE CAN GO A LONG WAY

PADDINGTON IN PERU
ON DISC AND DIGITAL
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Embark on a journey that leads to significant savings.

Visit www.troweprice.com/workplace to manage your account, or call the Sony Savings Plans Service Center at **1-877-SONY-SAVE (1-877-766-9728)** 7 a.m. to 10 p.m. Eastern time, Monday – Friday.

DARK MARKET MONITORING

Safeguarding your account is a top priority for T. Rowe Price. If your login credentials are associated with a compromised password, T. Rowe Price will email you to reset your password; if you don't reset it, they'll lock out your account for your protection.

¹ Eligible pay includes base salary, overtime, and bonus, and are eligible for company-matching contributions. In 2025, the IRS limits the amount of pay you can contribute to the plan to \$23,500 in pre-tax and/or Roth contributions. Combined employee pre-tax, Roth, and after-tax contributions under the plan may not be more than 50% of eligible compensation or the plan's annual deferral limit (\$54,250 for 2025), whichever is lower. In addition, the employer matching contributions may not be more than the plan's annual limit (\$15,750 for 2025). If you're age 50 or older, you can contribute \$7,500 in pre-tax and/or Roth catch-up contributions in addition to the \$54,250. These limits may change annually (the IRS had not announced the 2026 limits at the time of printing this guide). If you reach any limits, your contributions to the plan will stop and excess contributions will be returned to you.

SONY USA 401(K) PLAN

Everyone strives for a comfortable retirement. The Sony USA 401(k) Plan is the ideal way to achieve retirement dreams by investing money now so you can enjoy the benefits later. The plan offers several great features, including:

The opportunity to save a significant portion of your income – Up to 50% of your eligible pay¹ pre-tax, after-tax, and/or Roth dollars (combined), up to the annual IRS limits. You may make a carryover election, which allows you to make after-tax contributions after you reach the IRS pre-tax limit. You can also elect to automatically increase your contributions each year.

Free money – Sony Pictures will immediately match 100% of the first 3% of your eligible pay, then 50% of the next 3% you contribute. Pre-tax, after-tax, and Roth dollars are eligible for match; however, catch-up contributions are not.

Catch-up contributions – If you're 50 or older in 2026, you may make catch-up contributions of up to \$7,500. (This amount is based on 2025 limits; we anticipate the IRS will publish 2026 limits at the end of this year.)

New 2026 legislation: Catch-up contributions must be made on a Roth basis if your Sony FICA wages were over \$145,000 (adjusted for inflation) in the prior year. If you turn ages 60-63 in the calendar year, you can make a super catch-up contribution of up to \$11,250 annually.

A range of investment options – Including a series of target retirement date funds, core funds, and a self-directed brokerage account.

For information about the funds, go to www.troweprice.com/workplace or call **1-877-SONY-SAVE (1-877-766-9728)**. If you don't select an investment option or are auto-enrolled, any contributions will be invested in the Sony Target Date Fund closest to your estimated retirement age (generally at age 65).

You can change your contribution percentage, automatic increases, or investment elections anytime. You can name or update beneficiaries anytime. Please talk with a financial or tax advisor about the best options for you and your family.

RESOURCES FOR EVERY GENERATION

OUTLANDER: BLOOD OF MY BLOOD (SEASON 1)

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Feel supported from the very beginning.

FAMILY SUPPORT RESOURCES

SUPPORT FOR RAISING CHILDREN

RethinkCare gives parents and caregivers 24/7 access to tools and resources to help them understand, teach, and communicate with their children and teens.

RethinkCare helps families manage challenges at home and at school. Families caring for children who have challenges like ADHD and autism may benefit from the specialized content and coaching.

No diagnosis is required to use RethinkCare. Sony Pictures offers this benefit at no cost to you.

RethinkCare offers:

- One-on-one expert consultation with a dedicated clinician to address your specific parenting challenges
- Strategies and tips on issues ranging from problem behaviors to working with the child's school
- Assistance for parents helping their child with emotional and social skills, academics, focus, organization, managing emotions, and more

Download the RethinkCare app; search "RethinkCare" in the App Store or Google Play. To enroll, visit connect.rethinkcare.com/sponsor/spe (enrollment code: spe). If you have questions, email support@rethinkcare.com.

MILK STORK

Milk Stork provides mothers everything they need to ship their breast milk home quickly and safely. Sony Pictures will cover the cost of shipping milk for mothers traveling on business. To enroll, go to www.milkstork.com/sonypictures.



BENEFITHUB

Your one-stop-shop for discounted auto, home, and pet insurance. You can request quotes from different insurers to find the best deals.

You can also get discounts on event tickets, travel, dining, beauty products, and more.

Check out the BenefitHub mobile app to view and redeem local discounts on-the-fly!

Visit spe.benefithub.com/
Access code: JH4D2M

BACKUP CHILD AND ADULT CARE

For a small copay, Bright Horizons Back-Up Care provides working families access to the highest quality education and care for children and families. Whether your backup-care need is planned or unexpected, Bright Horizons provides reliable, flexible support.

You can use Bright Horizons Back-Up Care anytime you need to be at work but a family member needs help or support. You can book care up to 30 days in advance, or book same day or next day care when:

- A regular caregiver is unavailable or in need of respite
- A child is mildly ill and cannot attend school or child care
- An adult relative is unexpectedly ill or recovering from medical treatment

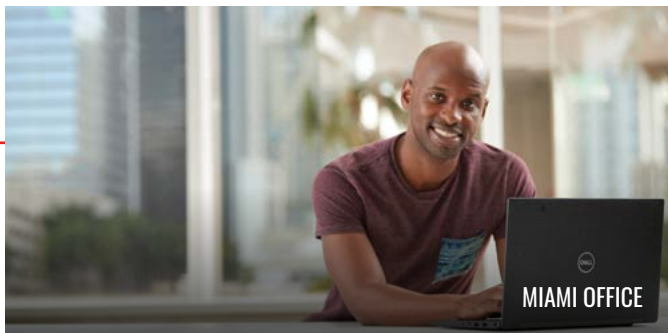
Eligible employees receive up to 25 days of temporary backup child and adult/elder care each calendar year at subsidized rates. Center-based care is \$15 per child or \$25 per family; in-home care is \$6 per hour. Watch this short video to learn more: webinars.on24.com/bh/buc.

ENHANCED FAMILY SUPPORT BENEFIT

This benefit includes discounts on child care options, tutoring, fun and educational enrichment programs, tools for your growing family, and more.

Support and services include:

- Early education and care at Bright Horizons child care centers, with wait-list priority and waived registration fees
- Discounts on camps and out-of-school activities
- Tutoring, STEM programs, summer camps, and educational activities for school-age children
- Needs assessments and companion care for older adults



EDUCATION AND HOMEWORK HELP

- Caregivers who can manage small-group learning pods through Sittercity
- Broad online tutoring and academic enrichment programs through Varsity Tutors and Sylvan Learning
 - 20% off most programs, including tutoring and small-group classes from Varsity Tutors & Revolution Prep
 - 15% off Sylvan's personalized support for your K-12 child in any subject and learning need
- Premium academic and test prep for all ages through Revolution Prep
 - 20% off hourly tutoring rates
 - 33% off interactive math adventure program
- Award winning digital learning for preschoolers through MarcoPolo Learning, including STEM and literacy curriculum

Watch this short video to learn more: webinars.on24.com/bh/efs.

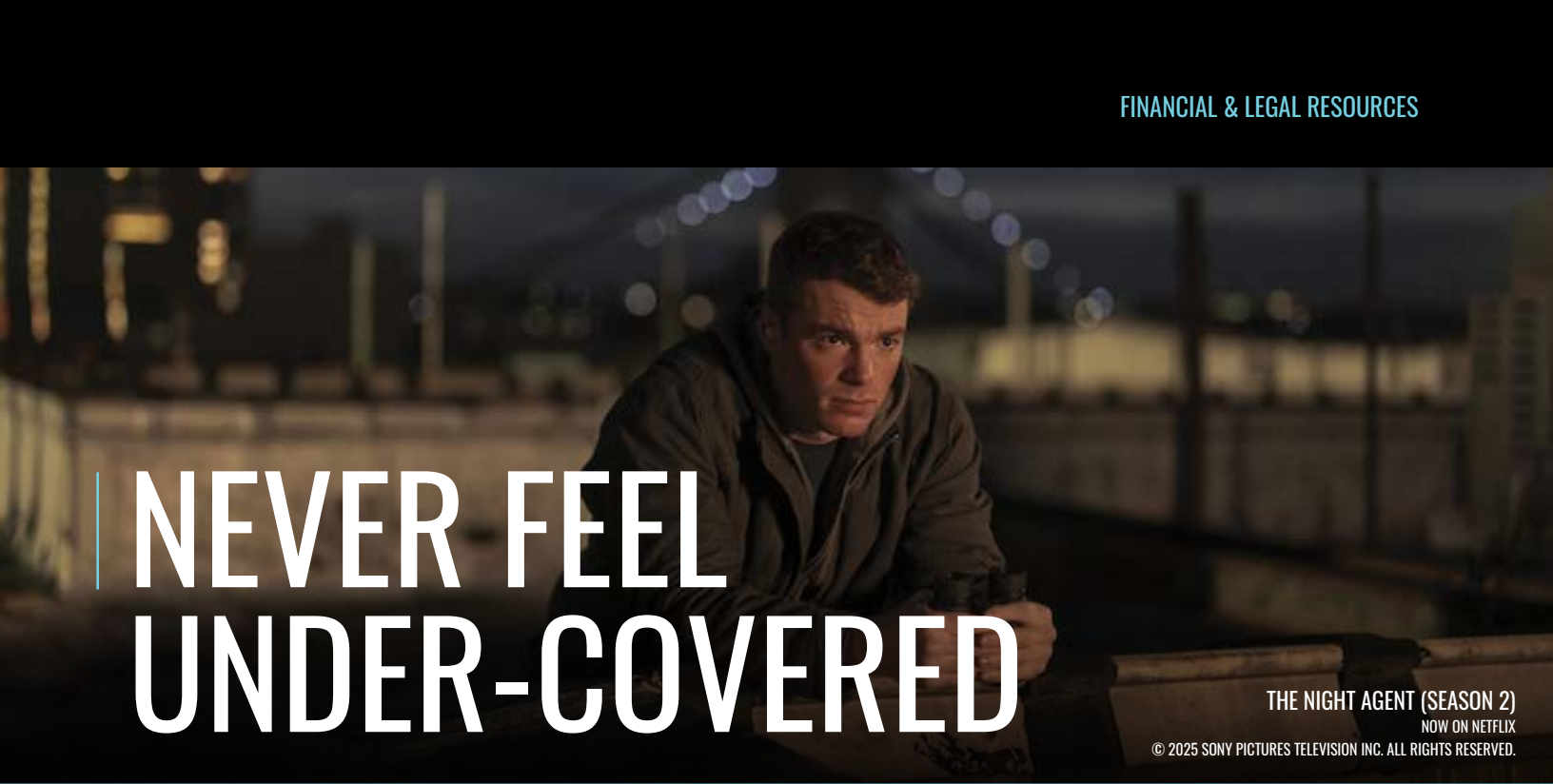
For more information on these Bright Horizon services, visit clients.brighthorizons.com/sonypictures (username: SPE; password: Benefits4You), or call **1-877-BH-CARES**.

ADOPTION AND SURROGACY ASSISTANCE

Sony Pictures recognizes there are many ways to have a child. The adoption and surrogacy assistance program will reimburse eligible employees up to \$20,000 per adopted child or successful surrogacy. Reimbursable expenses include state-licensed adoption agency fees, legal costs, and medical expenses.

For more information, see the Sony Pictures Employee Handbook or contact Progyny at progyny.com/for-employees, or **1-833-404-2011**.

Learn more about the inclusive fertility and menopause benefits offered through Progyny on **page 19**.



NEVER FEEL UNDER-COVERED

THE NIGHT AGENT (SEASON 2)
NOW ON NETFLIX

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Life doesn't have to be a solo mission.

FINANCIAL & LEGAL RESOURCES

EDASSIST

If you've thought about going back to school to enhance your job performance, Sony Pictures wants to help.

We've established a tuition reimbursement program. If you're eligible, Sony Pictures will reimburse you for certain tuition costs and course-related expenses after you successfully complete approved courses.

Tuition costs are reimbursed up to \$5,250 per calendar year for undergraduate courses, extension courses, and certification programs; up to \$9,000 per calendar year for graduate level courses.

EdAssist is Sony Pictures' tuition reimbursement administrator. You can reach EdAssist at spe.edassist.com or at 1-855-853-5017.

Reimbursements for tuition and student loan assistance may have tax implications. You should talk to your tax advisor.

STUDENT LOAN ASSISTANCE

If you're paying student loans, Sony Pictures will help you reduce your debt by paying \$150 toward your loan principal each month, up to a lifetime maximum of \$25,000.

To qualify, you must:

- Be a regular full-time employee and completed one year of service, and
- Make less than \$150,000 (base salary) a year, and
- Be current on your payments, and
- Have the loan in your name

Other free perks include a repayment-strategy tool, refinancing options for you and your family members, access to college payment options, and a student loan cost calculator and coaching.

To learn more, visit sonypictures.tuition.io or call 1-855-353-9395.

IDENTITY THEFT PROTECTION WITH AURA

ID and credit theft can be devastating. Sony Pictures offers enhanced identity theft coverage through Aura,¹ the standard in digital security protecting the things you care about the most: Your identity, money, assets, family, and reputation.

Sony Pictures offers free coverage to employees. You have the option to buy up to a family plan, which covers 10 additional adults and unlimited minors for \$10.30 per month. Aura provides:

- **NEW! Removing your digital footprint** – Aura's online data removal feature will scrub your data from Google search results, and remove them from people sites and spam lists so you can reclaim your privacy
- **Financial fraud protection** – Aura quickly alerts you when changes happen on your credit report, like new accounts or credit inquiries
- **Identity theft protection¹** – Aura monitors the dark web and alerts you if your credit card, SSN, or other personal information is at risk
- **Identity theft insurance²** – Aura offers up to \$5 million per adult as insurance for eligible out-of-pocket expenses due to identity theft, including legal fees, lost wages, and more
- **VPN and online privacy** – Aura's VPN encrypts your online activities so you can browse, shop, and work safely with just one tap
- **NEW! Spam call, text, and email protection** – With smart spam blocking and call screening with AI-powered call assistant, Aura keeps your calls and messages safe from scammers who use phishing schemes to steal your money or personal info
- **Parental controls** – Set screen time limits, block inappropriate websites and apps, and get real-time alerts about cyberbullying or predators in online games
- **NEW! Balance for families (family plans only)** – Help your kids build healthy digital habits with science-backed insights powered by Aura Intelligence

Learn more at my.aura.com or call 1-833-552-2123.

COMMUTER BENEFITS

Sony Pictures encourages employees to take advantage of public transportation whenever possible. Commuter Benefits allow you to pay for certain work-related transportation expenses on a pre-tax basis.

In 2025, the monthly IRS pre-tax limits were \$325 for transit and \$325 for parking.

Parking: Pay for eligible work-related parking expenses, including:

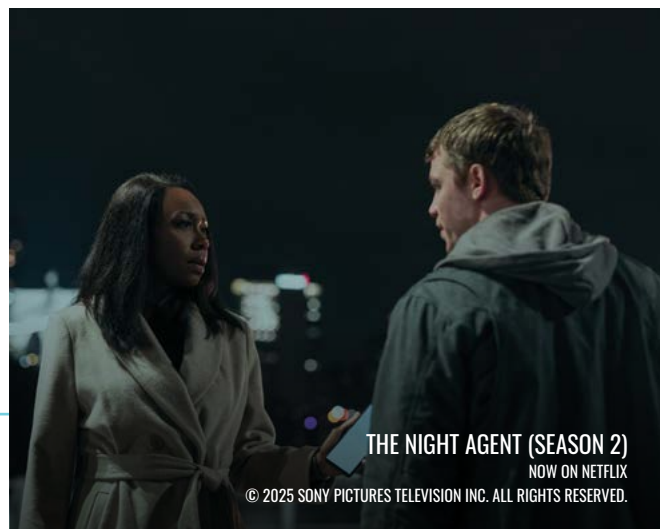
- The cost of parking at or near your worksite
- The cost of parking at a location from which you commute to work, either by mass transit or a qualifying commercial or non-commercial vehicle or carpool

Transit: Buy passes or vouchers to cover the cost of mass transit to and from work. Eligible expenses include subway, train, bus, and vanpool costs.

The IRS sets the monthly reimbursement rates, which are adjusted periodically for inflation. Visit www.irs.gov for more information or go to inspirafinancial.com.

¹ If you enroll in the Aura identity theft protection benefit, you consent to have Sony Pictures provide Aura with certain personal information, including your address and date of birth. You'll be able to review the amenities offered through Aura and provide additional personal information to customize your monitoring service.

² The Identity Theft Insurance is underwritten and administered by American Bankers Insurance Company of Florida, an Assurant company. Please refer to the actual policies for terms, conditions, and exclusions of coverage. Coverage may not be available in all jurisdictions.



METLIFE LEGAL PLAN

Legal matters — planned and unplanned — are part of life. Enrolling in the MetLife Legal Plan gives you the financial and emotional peace of mind to know you'll be covered for expected and unexpected legal events.

The MetLife Legal Plan provides you, your spouse, and dependents with fully covered legal services from a network of experienced attorneys.

Services include and help support:

- Estate planning, wills, powers of attorney, and trusts
- Sale and purchase of a primary home, including refinancing
- Tenant or landlord issues when you're the tenant
- Traffic offenses (except DUIs)
- Fertility care and surrogacy matters
- Immigration assistance
- Defense in civil lawsuits

Your coverage includes four hours of consultation with a legal professional for services that include divorce, post decree matters, post nuptial agreements, and services surrounding custody disputes.

There are no annual limits on covered services. Complex legal services are available at an additional cost. Certain services may be excluded.

Family First – Caregiving support

You and your loved ones have unlimited access to a team that can help you navigate caregiving challenges, from caring for children or elders to finding support for a cancer diagnosis to help with family dynamics.

Coverage for you and your family

MetLife Legal Plan monthly contribution: \$17.50.

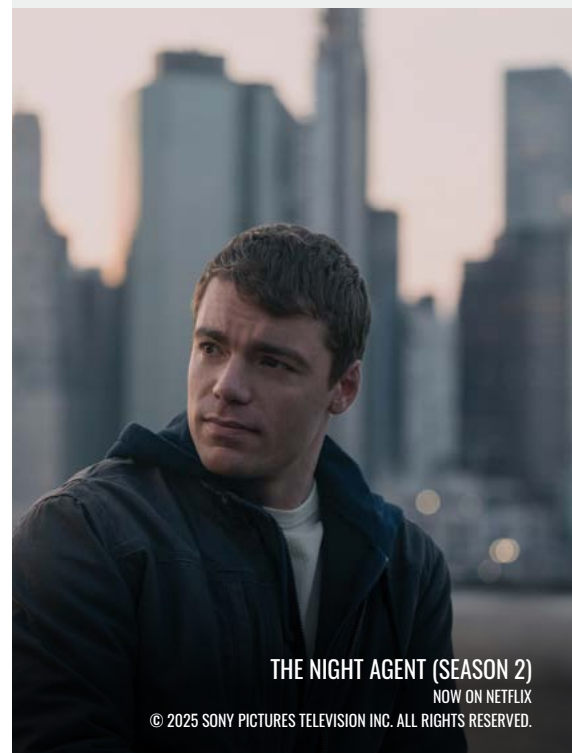
Parents Plus – Coverage for your parents

Through the MetLife Legal Plan you may buy up to a plan that provides your parents and parents-in-law access to legal help, from estate planning to elder care matters and identity theft issues.

MetLife Legal Plan buy-up monthly contribution: \$23.50.

Once you're enrolled, go to **members.legalplans.com** or download the MetLife Legal Plan mobile app. You can also call the MetLife Legal Plan at **1-800-821-6400**, 8 a.m. to 8 p.m. Eastern time, Monday – Friday.

Enrollment is for the entire year. You can change your election during the next open enrollment.



EMPLOYEE STOCK PURCHASE PLAN (ESPP)

Through the Employee Stock Purchase Plan (ESPP), you can buy Sony American Depositary Receipt (ADR) common stock through convenient after-tax payroll deductions.

Sony ADR stock is traded on the New York Stock Exchange (ticker symbol SONY) in U.S. dollars.

You can find the enrollment forms on **mySPE**.

PROTECTION FOR OUR PROTECTORS

KPOP DEMON HUNTERS
NOW ON NETFLIX
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Your pets are golden and their coverage should be, too.

PET PROTECTION RESOURCES

INSIDE RX PETS

Sony Pictures partners with Inside Rx Pets, a prescription savings program, at no cost or obligation for you.

If you're a pet parent, you can get discounts on brand name and generic human medications prescribed for pets.

Inside Rx Pets provides you with:

- 15% average savings on the cost of brand medications
- Easy access to 40,000 participating retail pharmacies nationwide

You can download your savings card and find participating pharmacies at insiderxpets.com/pets.

IN-HOME PET SITTERS

Sittercity Pet Services can help you find the right in-home caregiver for your furry or feathered family members.

- Find pre-screened dog walkers, pet sitters, groomers, trainers, and more
- Get free basic background checks to ensure reliable care
- Schedule daily or extended pet care in your own home
- Post a job or search for pet sitters to find the right fit

Visit www.sittercity.com/sonypictures to learn more.

PET INSURANCE

Check out options for discounted pet insurance on BenefitHub.

There are many insurance companies to choose from. You can request quotes from different insurers to find the best value that will keep your furry or feathered family members healthy and happy.

Visit spe.benefithub.com/
Access code: JH4D2M



WHAT IS...ON THE LOT?

JEOPARDY!

WATCH WEEKNIGHTS. CHECK YOUR LOCAL LISTINGS.
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It's no question you'll feel like a champion with these in-person and virtual benefits.

ON THE LOT RESOURCES

ON THE LOT OR VIRTUAL AETNA NURSE ADVOCATE

When you need health care advice, contact our Aetna Nurse Advocate.

Think of her as your personal benefits advisor — ready to answer your questions or connect you to the appropriate resources. She's also a professional nurse so she can help you navigate the health care system.

Contact Stephanie Vega at **1-312-549-3918**, or email **vegas@aetna.com**.

ON THE LOT OR VIRTUAL COUNSELING

Sony Pictures has an on the lot counselor in Culver City. In addition to counseling, you can get referrals, resources, support, and information on many work-life issues.

Wendy Talley is available 9 a.m. – 2 p.m. PT, Tuesday and Wednesday.

Email **theleseconsultinggroup@gmail.com**.

ON THE LOT OR VIRTUAL NUTRITIONIST

Whether you need to turn your lifestyle around or just want some motivation to make healthier choices, getting advice from a registered dietitian is a good place to start. You can meet with a registered dietitian free of charge.

You can get information about how proper nutrition can help medical diagnoses, weight management, proper meal planning, and more.

Email **medgate_medical@spe.sony.com**, or call **1-310-244-5560** to make an appointment. Located at Robert Young 1000.

ON THE LOT PHYSICAL THERAPY

A licensed physical therapist is available two times a week. Email **medgate_medical@spe.sony.com** or call **1-310-244-5560** to make an appointment. Located at Robert Young 1000.

BENEFITS THAT GROW WITH YOU: SUPPORTING EVERY STAGE OF LIFE

At Sony Pictures, we're proud to offer benefits that support you through every chapter of life. Here are just a few examples of how our programs meet you where you are:

EARLY CAREER

Henry recently graduated from college and is new to Sony Pictures. He's taking advantage of benefits that support his active lifestyle, like hiking and swimming with his dog. He uses physical therapy to keep small aches and pains from becoming big ones that might slow him down.

He's also focused on paying down his student loan debt and taking public transit to work to reduce his carbon footprint. He might be interested in the following Sony Pictures benefits:

- **Preventive care – medical, dental, vision**
- **Voluntary accident insurance**
- **Virtual care through Teladoc**
- **Physical therapy on the lot or virtually through Hinge Health**
- **Mental health care through Spring Health**
- **Student loan assistance through Tuition.io**
- **Commuter benefits through Inspira Financial**
- **Pet protection resources**
- **BenefitHub discounts**

STARTING A FAMILY

Carmen and Wesley are starting a family, so their priorities are shifting toward creating stability and support at home. With a new little one on the way, they're eager to plan for pregnancy, a hospital stay and postpartum care. They might be interested in the following Sony Pictures benefits:

- **Progyny family planning benefits** (including pregnancy and postpartum care and lactation support)
- **Voluntary hospital indemnity insurance**
- **Parental leave**
- **Breast milk shipping through Milk Stork**
- **Adoption reimbursement**
- **Surrogacy reimbursement**

SUPPORTING YOUR FAMILY

Bruce and Javier have two busy kids so they're focused on managing full schedules and household expenses, making sure their family has the health care they need, and raising healthy kids.

They take advantage of benefits that support flexibility, financial planning, and overall wellbeing of all family members. They might be interested in the following Sony Pictures benefits:

- **Support for raising children through RethinkCare**
- **Virtual care through Teladoc**
- **CVS MinuteClinic**
- **Health Care FSA and Dependent Care FSA**
- **Legal resources through MetLife Legal Plan** (for wills and trusts)
- **BenefitHub discounts**
- **Day care and backup care support through Bright Horizons**
- **Tutoring services through Bright Horizon's Enhanced Family Support**



MANAGING FINANCES AND PLANNING FOR THE FUTURE

Vikas and Julia are becoming more mindful with their money and maximizing savings opportunities to ensure a secure financial future.

They know this is the stage where planning pays off and they feel confident they're building lasting stability for themselves, their children and their families. They might be interested in the following Sony Pictures benefits:

- **ID theft protection through Aura**
- **Sony Employee Stock Purchase Plan**
- **Voluntary accident and hospital indemnity insurance**
- **Life insurance**
- **Legal resources through MetLife Legal Plan** (for wills and trusts)
- **Sony USA 401(k) Plan**
- **Health Savings Account (HSA)**
- **Long-term care**
- **BenefitHub discounts**

HEALTH CARE AS YOU AGE

For Nancy and Lisa, staying healthy is a top priority. Preventive care, condition management, and wellness programs help them feel their best while they balance work, life, and preparing for retirement.

Benefits that support their physical, mental, and emotional health are especially important at this stage, ensuring they have the tools and resources they need to stay active, healthy, and engaged. They might be interested in the following Sony Pictures benefits:

- **Menopause and midlife care through Progyny**
- **Pelvic support program through Hinge Health**
- **Preventive care and vaccinations**
- **Dental and vision care**
- **Mental health care through Spring Health**
- **Nutrition counseling**
- **Health support through Omada Health**
- **Digestive health support through Oshi**

CARING FOR AGING PARENTS

Balancing work, family, and caregiving can be challenging, but resources and support can make a real difference. While managing their home and work responsibilities, Elizabeth and Hans are helping her mother navigate health care, manage daily needs, and plan for long-term care.

Benefits like caregiver leave and backup care allow Elizabeth and Hans to care for her mom while balancing the other aspects of their lives. They might be interested in the following Sony Pictures benefits:

- **Caregiver leave**
- **Backup elder care through Bright Horizons**
- **Legal services for parents** (including family first caregiving support through MetLife Legal Parents Plus)
- **ID theft protection through Aura**
- **Mental health care through Spring Health**

LEGAL NOTICES

SUMMARY OF BENEFITS AND COVERAGE

The health benefits available to you represent a significant component of your Sony Pictures Total Rewards package, in addition to your compensation, and provides important protection for you and your family in the case of illness or injury. Your Sony Pictures plan offers a series of health coverage options. Choosing a health coverage option is an important decision.

To help you make an informed choice, your plan makes available a Summary of Benefits and Coverage (SBC) to help you compare your options. The SBC is available on Sony Pictures Benefits Center at benefits.sonypictures.com/resources under the Forms and Documents section and at spe_benefits@spe.sony.com. You can also request a paper copy, free of charge, by contacting a Sony Pictures Benefits Center Representative at **1-888-9-SONY-01**. If you have dependents in your household who are enrolled in the Sony Pictures plan, please share this information with them. Be aware that any SBC provided to you will be deemed to have been provided to your dependents unless the plan is advised of a different address.

MEDICARE PART D PRESCRIPTION DRUG COVERAGE

Important Notice for Medicare-Eligible Employees and Covered Dependents

Sony Pictures Entertainment (Sony Pictures) is required to provide the notice that follows to all Medicare-eligible plan participants. The purpose of the notice is to provide you with a statement of assurance that while you are enrolled in Sony EPO, Sony PPO, Sony Consumer Choice or Kaiser HMO, the prescription drug coverage you have under any of these Sony Pictures medical plans is "Creditable Coverage." This means that, on average, your Sony Pictures coverage is at least as good as the standard Medicare prescription drug coverage. (For more information on Creditable Coverage, you can refer to the "Creditable Coverage" section of the notice below.)

Medicare prescription drug coverage is optional, and you may find that you have all the coverage you need with Sony Pictures. If you decide in a subsequent year that you want to enroll in a Medicare prescription drug plan, this notice will serve as confirmation to Medicare that you had Creditable Coverage in the interim. As a result, you will not have to pay a late penalty on your Medicare prescription drug plan monthly premium if you decide to enroll during a subsequent annual enrollment window. Note, however, that if you opt out (choose the "No Coverage" option) with Sony Pictures, you do not have Creditable Coverage and may be subject to a future premium penalty if you subsequently enroll in a Medicare prescription drug plan. The notice that follows explains the effect of having Creditable and non-Creditable Coverage.

IMPORTANT NOTICE FROM SONY PICTURES ABOUT YOUR PRESCRIPTION DRUG COVERAGE AND MEDICARE

Please read this notice carefully and keep it where you can find it. This notice has information about your current prescription drug coverage with Sony Pictures and about your options under Medicare's prescription drug coverage. This information can help you decide whether or not you want to join a Medicare prescription drug plan. If you are considering joining, you should compare your current coverage, including which drugs are covered at what cost, with the coverage and costs of the plans offering Medicare prescription drug coverage in your area. Information about where you can get help to make decisions about your prescription drug coverage is at the end of this notice.

There are two important facts you need to know about your current coverage and Medicare's prescription drug coverage:

1. Medicare prescription drug coverage became available in 2006 to everyone with Medicare.

You can get this coverage if you join a Medicare prescription drug plan or join a Medicare Advantage plan (like an HMO or PPO) that offers prescription drug coverage. All Medicare drug plans provide at least a standard level of coverage set by Medicare. Some

plans may also offer more coverage for a higher monthly premium.

2. Sony Pictures determined that the prescription drug coverage offered by Sony Pictures is, on average for all plan participants, expected to pay out as much as standard Medicare prescription drug coverage pays and is considered Creditable Coverage.

Because your existing coverage is, on average, at least as good as standard Medicare prescription drug coverage, you can keep this coverage and not pay a higher premium (a penalty) if you later decide to join a Medicare prescription drug plan.

WHEN CAN YOU JOIN A MEDICARE DRUG PLAN?

You can join a Medicare prescription drug plan when you first become eligible for Medicare and each year from October 15 through December 7. However, if you lose creditable prescription drug coverage through no fault of your own, you will be eligible for a two-month Special Enrollment Period (SEP) to join a Medicare drug plan.

WHAT HAPPENS TO YOUR CURRENT COVERAGE IF YOU DECIDE TO JOIN A MEDICARE DRUG PLAN?

If you decide to join a Medicare prescription drug plan, your current Sony Pictures coverage is not affected.

If you decide to join a Medicare prescription drug plan and drop your Sony Pictures prescription drug and medical coverage, be aware that you and your dependents may not be able to get this coverage back. Please remember that your Sony Pictures prescription drug coverage is bundled with your medical plan option. Therefore, there is no separate employee contribution for prescription drug coverage. If you want to keep your Sony Pictures coverage and you want to avoid duplicate premiums, you should NOT enroll in Medicare prescription drug coverage for 2026.

Please contact us for more information about what happens to your coverage if you enroll in a Medicare prescription drug plan.

WHEN WILL YOU PAY A HIGHER PREMIUM (PENALTY) TO JOIN A MEDICARE DRUG PLAN?

You should know that if you drop or lose your coverage with Sony Pictures and don't join a Medicare prescription drug plan within 63 continuous days after your current coverage ends, you may pay a higher premium (a penalty) to join a Medicare prescription drug plan later. If you go 63 continuous days or longer without creditable prescription drug coverage, your monthly premium may go up by at least 1% of the Medicare base beneficiary premium per month for every month that you did not have that coverage. For example, if you go 19 months without Creditable Coverage, your premium may consistently be at least 19% higher than the base beneficiary premium. You may have to pay this higher premium (a penalty) as long as you have Medicare prescription drug coverage. In addition, you may have to wait until the following October to join.

FOR MORE INFORMATION ABOUT THIS NOTICE OR YOUR CURRENT PRESCRIPTION DRUG COVERAGE

If you have questions, call a Sony Pictures Benefits Center representative toll-free at **1-833-9-SONY-01**.

NOTE: You'll get this notice each year. You will also get it before the next period you can join a Medicare prescription drug plan, and if this coverage through Sony Pictures changes. You also may request a copy of this notice at any time from a Sony Pictures Benefits Center representative toll-free at **1-833-9-SONY-01**.

FOR MORE INFORMATION ABOUT YOUR OPTIONS UNDER MEDICARE PRESCRIPTION DRUG COVERAGE

More detailed information about Medicare plans that offer prescription drug coverage is in the "Medicare & You" handbook. You'll get a copy of the handbook in the mail every year from Medicare. You may also be contacted directly by Medicare prescription drug plans.

For more information about Medicare prescription drug coverage:

- Visit **www.medicare.gov**
- Call your State Health Insurance Assistance Program (see the inside back cover of your copy of the "Medicare & You" handbook for the telephone number) for personalized help

- Call **1-800-MEDICARE (1-800-633-4227)**. TTY users should call **1-877-486-2048**

If you have limited income and resources, extra help paying for Medicare prescription drug coverage is available. For information about this extra help, visit Social Security on the Web at **www.socialsecurity.gov**, or call **1-800-772-1213**

REMEMBER: KEEP THIS CREDITABLE COVERAGE NOTICE.

If you decide to join one of the Medicare prescription drug plans, you may be required to provide a copy of this notice when you join to show whether or not you have maintained Creditable Coverage and whether or not you are required to pay a higher premium (a penalty).

Date: October 1, 2025
Name of Sender: Sony Pictures Entertainment
Contact Office: People & Organization - Total Rewards
Address: 10202 West Washington Boulevard, Culver City, CA 90232
Phone Number: **1-310-244-4000**

(TTY **1-800-325-0778**).

NOTIFICATION OF YOUR RIGHTS TO PLAN MODIFICATION, TERMINATION, AND INTERPRETATION

Sony Pictures reserves the right in its sole and absolute discretion to amend, modify, or terminate any or all employee benefit plans at any time and for any reason. This means that Sony Pictures may decide to change the design of the prescription drug benefit so that it no longer constitutes Creditable Coverage. If this happens, we will notify you of the change and of your options at that time.

In addition, Sony Pictures reserves the sole and absolute discretionary right to interpret and apply the terms of the medical plan and to render final and binding decisions about the plan and its coverage. In the event of a conflict between this notice and the terms of the plan, the terms of the plan will govern in all cases.

Consolidated Omnibus Budget Reconciliation Act of 1985 ["COBRA"] – requiring that most employers sponsoring group health plans offer employees and their families the opportunity for a temporary extension of health coverage (called "Continuation Coverage") at group rates in certain instances where coverage under the plan would otherwise end (called "qualifying events"). For additional information about your rights and obligations under the Plan and under federal law, you should review the Plan's Summary Plan Description or contact the plan administrator.

SPECIAL ENROLLMENT PERIODS

If you decline enrollment for yourself or your dependents (including your spouse) because of other health insurance or group health plan coverage, you may be able to enroll yourself and your dependents in this Plan if you or your dependents lose eligibility for that other coverage (or if the employer stops contributing toward your or your dependents' other coverage).

However, you must request enrollment within 31 days after your or your dependents' other coverage ends (or after the employer stops contributing toward the other coverage).

In addition, if you have a new dependent as a result of marriage, birth, adoption, or placement for adoption, you may be able to enroll yourself and your dependents. However, you must request enrollment within 31 days after the marriage, birth, adoption, or placement for adoption.

If you decline enrollment for yourself or for an eligible dependent (including your spouse) while Medicaid coverage or coverage under a state children's health insurance program is in effect, you may be able to enroll yourself and your dependents in this plan if you or your dependents lose eligibility for that other coverage. However, you must request enrollment within 60 days after you or your dependents' coverage ends under Medicaid or a state health insurance program.

If you or your dependents (including your spouse) become eligible for a state premium assistance subsidy from Medicaid or through a state children's health insurance program with respect to coverage under this plan, you may be able to enroll yourself and your dependents in this plan. However, you must request enrollment within 60 days after your or your dependents' determination of eligibility for such assistance.

To request special enrollment or obtain more information, contact a Sony Pictures Benefits Center representative toll-free at **1-833-9-SONY-01**. Individuals who have questions about HIPAA may contact The Centers for Medicare & Medicaid Services (CMS) toll-free at **1-877-267-2323**. The CMS website also provides answers to your questions about the provisions of HIPAA, which can be found at the following Internet address: **cms.gov**. Individuals may also contact CMS directly, by mail, at:

The Centers for Medicare & Medicaid Services, 7500 Security Boulevard
Baltimore, MD 21244

PATIENT PROTECTION NOTICE

The Kaiser Permanente HMO generally requires the designation of a primary care provider. You have the right to designate any primary care provider who participates in our network and who is available to accept you or your family members. Until you make this designation, Kaiser Permanente will designate one for you. For information on how to select a primary care provider, and for a list of the participating primary care providers, contact Kaiser at **1-800-464-4000**.

For children, you may designate a pediatrician as the primary care provider. You do not need prior authorization from Kaiser or from any other person (including a primary care provider) in order to obtain access to obstetrical or gynecological care from a health care professional in our network who specializes in obstetrics or gynecology. The health care professional, however, may be required to comply with certain procedures, including obtaining prior authorization for certain services, following a pre-approved treatment plan, or procedures for making referrals. For a list of participating health care professionals who specialize in obstetrics or gynecology, contact Kaiser at **1-800-464-4000**.

WOMEN'S HEALTH AND CANCER RIGHTS ACT OF 1998 ("WHCRA")

Your health care plan, as required by the Women's Health and Cancer Rights Act of 1998, provides benefits for mastectomy-related services, including all stages of reconstruction and surgery to achieve symmetry between breasts, prostheses, and complications resulting from a mastectomy (including lymphedema). These benefits will be provided subject to the same deductibles and coinsurance applicable to other medical and surgical benefits provided under the plan.

Call your health care provider at **1-888-385-1053**, Aetna or Kaiser at **1-800-464-4000**, for more information.

NEWBORNS' AND MOTHERS' HEALTH PROTECTION ACT OF 1996

Group health plans and health insurance issuers generally may not, under Federal law, restrict benefits for any hospital length of stay in connection with childbirth for the mother or newborn child to less than 48 hours for any vaginal delivery, or less than 96 hours following a cesarean section. However, Federal law generally does not prohibit the mother's or newborn's attending provider, after consulting with the mother, from discharging the mother or her newborn earlier than the 48 hours (or 96 hours as applicable). In any case, plans and issuers may not under Federal law require that the provider obtain authorization from the plan or issuer for prescribing a length of stay not in excess of 48 hours (or 96 hours).

SONY PICTURES GROUP BENEFIT PLAN ANNUAL SUMMARY REPORT

The 2024 Summary Annual Reports (SARs) summarize the financial information for Sony Pictures' Benefits Plans as required by the Employee Retirement Income Security Act (ERISA) of 1974, as amended. To view the reports, go to **mySPE>Resources>Benefits**. If you are unable to access the SAR document, please contact People & Organization (P&O) at **1-310-244-4748**. You can also contact P&O by email at **spe_benefits@spe.sony.com**.

PREMIUM ASSISTANCE UNDER MEDICAID AND THE CHILDREN'S HEALTH INSURANCE PROGRAM (CHIP)

If you or your children are eligible for Medicaid or CHIP and you're eligible for health coverage from your employer, your state may have a premium assistance program that can help pay for coverage, using funds from their Medicaid or CHIP programs. If you or your children aren't eligible for Medicaid or CHIP, you won't be eligible for these premium assistance programs but you may be able to buy individual insurance coverage through the Health Insurance Marketplace. For more information, visit **www.healthcare.gov**.

If you or your dependents are already enrolled in Medicaid or CHIP and you live in a State listed below, contact your State Medicaid or CHIP office to find out if premium assistance is available. If you or your dependents are NOT currently enrolled in Medicaid or CHIP, and you think you or any of your dependents might be eligible for either of these programs, contact your State Medicaid or CHIP office or dial **1-877-KIDS NOW** or **www.insurekidsnow.gov** to find out how to apply. If you qualify, ask your state if it has a program that might help you pay the premiums for an employer-sponsored plan.

If you or your dependents are eligible for premium assistance under Medicaid or CHIP, as well as eligible under your employer plan, your employer must allow you to enroll in your employer plan if you aren't already enrolled. This is called a "special enrollment" opportunity, and you must request coverage within 60 days of being determined eligible for premium assistance. If you have questions about enrolling in your employer plan, contact the Department of Labor at **www.askebsa.dol.gov** or call **1-866-444-EBSA (3272)**.

PARENTAL AND LACTATION LEAVES AND ACCOMMODATIONS

For more information about your rights and obligations under applicable federal, state, and local labor law, including with respect to parental leave and/or lactation accommodations, please refer to the employee handbook posted on **mySPE**.

To see if any other states have added a premium assistance program since July 31, 2025, or for more information on special enrollment rights, contact either:

U.S. Department of Labor Employee Benefits Security
www.dol.gov/agencies/ebsa
1-866-444-EBSA (3272)

U.S. Department of Health and Human Services
Centers for Medicare & Medicaid Services
www.cms.hhs.gov
1-877-267-2323, Menu Option 4, Ext. 61565

If you live in one of the following states, you may be eligible for assistance paying your employer health plan premiums. The following list of states is current as of July 31, 2025. Contact your state for more information on eligibility.

ALABAMA – Medicaid

Website: <http://myalhhipp.com/>
Phone: 1-855-692-5447

ALASKA – Medicaid

The AK Health Insurance Premium Payment Program
Website: <http://myakhhipp.com/>
Phone: 1-866-251-4861
Email: CustomerService@MyAKHIPP.com
Medicaid Eligibility: <https://health.alaska.gov/dpa/pages/default.aspx>

ARKANSAS – Medicaid

Website: <http://myarhhipp.com/>
Phone: 1-855-MyARHIPP (1-855-692-7447)

CALIFORNIA – Medicaid

Health Insurance Premium Payment (HIPP) Program
Website: <http://dhcs.ca.gov/hipp>
Phone: 1-916-445-8322; Fax: 1-916-440-5676
Email: hipp@dhcs.ca.gov

COLORADO – Health First Colorado (Colorado's Medicaid Program) & Child Health Plan Plus (CHP+)

Health First Colorado Website: <https://www.healthfirstcolorado.com/>
Health First Colorado Member Contact Center: 1-800-221-3943/ State Relay 711
CHP+ Website: <https://hcpf.colorado.gov/child-health-plan-plus>
CHP+ Customer Service: 1-800-359-1991/ State Relay 711
Health Insurance Buy-In Program (HIBI): <https://www.mycohibi.com>
HIBI Customer Service: 1-855-692-6442

FLORIDA – Medicaid

Website: <https://www.flmedicaidtprecovery.com/flmedicaidtprecovery.com/hipp/index.html>
Phone: 1-877-357-3268

GEORGIA – Medicaid

GA HIPP Website: <https://medicaid.georgia.gov/health-insurance-premium-payment-program-hipp>
Phone: 1-678-564-1162, Press 1
GA CHIPRA Website: <https://medicaid.georgia.gov/programs/third-party-liability/childrens-health-insurance-program-reauthorization-act-2009-chipra>
Phone: 1-678-564-1162, Press 2

INDIANA – Medicaid

Health Insurance Premium Payment Program
All other Medicaid
Websites: <https://www.in.gov/medicaid/>
<http://www.in.gov/fssa/dfr/>

Family and Social Services Administration
Phone: 1-800-403-0864
Member Services Phone: 1-800-457-4584

IOWA – Medicaid and CHIP (Hawki)

Medicaid Website: <https://hhs.iowa.gov/programs/welcome-iowa-medicaid>
Medicaid Phone: 1-800-338-8366
Hawki Website: <https://hhs.iowa.gov/programs/welcome-iowa-medicaid/iowa-health-link/hawki>
Hawki Phone: 1-800-257-8563
HIPP Website: <https://hhs.iowa.gov/programs/welcome-iowa-medicaid/iowa-health-link/hawki> (iowa.gov)
HIPP Phone: 1-888-346-9562

KANSAS – Medicaid

Website: <https://www.kancare.ks.gov/>
Phone: 1-800-792-4884
HIPP Phone: 1-800-967-4660

KENTUCKY – Medicaid

Kentucky Integrated Health Insurance Premium Payment Program (KI-HIPP) Website: <https://chfs.ky.gov/agencies/dms/member/Pages/kihhipp.aspx>
Phone: 1-855-459-6328
Email: KI-HIPP.PROGRAM@ky.gov
KCHIP Website: <https://kynect.ky.gov>
Phone: 1-877-524-4718

Kentucky Medicaid Website: <https://chfs.ky.gov/agencies/>

LOUISIANA – Medicaid

Websites: www.medicaid.la.gov or www.ldh.la.gov/lahipp

Phone: 1-888-342-6207 (Medicaid hotline) or 1-855-618-5488 (LaHIPP)

MAINE – Medicaid

Enrollment Website: https://www.mymaineconnection.gov/benefits/s/?language=en_US
Phone: 1-800-442-6003

TTY: Maine relay 711

Private Health Insurance Premium Webpage:

<https://www.maine.gov/dhhs/ofi/applications-forms>
Phone: 1-800-977-6740

TTY: Maine relay 711

MASSACHUSETTS – Medicaid and CHIP

Website: <https://www.mass.gov/masshealth/pa>
Phone: 1-800-862-4840
TTY: 711
Email: masspremassistance@accenture.com

MINNESOTA – Medicaid

Website: <https://mn.gov/dhs/health-care-coverage/>
Phone: 1-800-657-3672

MISSOURI – Medicaid

Website: <http://www.dss.mo.gov/mhd/participants/pages/hipp.htm>
Phone: 1-573-751-2005

MONTANA – Medicaid

Website: <http://dphhs.mt.gov/MontanaHealthcarePrograms/HIPP>
Phone: 1-800-694-3084
Email: HHSHIPProgram@mt.gov

NEBRASKA – Medicaid

Website: <http://www.ACCESSNebraska.ne.gov>
Phone: 1-855-632-7633
Lincoln: 1-402-473-7000
Omaha: 1-402-595-1178

NEVADA – Medicaid

Website: <http://dhcfp.nv.gov>
Phone: 1-800-992-0900

NEW HAMPSHIRE – Medicaid

Website: <https://www.dhhs.nh.gov/programs-services/medicaid/health-insurance-premium-program>
Phone: 1-603-271-5218
HIPP program: 1-800-852-3345, ext 15218
Email: DHHS.ThirdPartyLiab@dhhs.nh.gov

NEW JERSEY – Medicaid and CHIP

Medicaid Website: <http://www.state.nj.us/humanservices/dmahs/clients/medicaid/>
Phone: 1-800-356-1561
CHIP Premium Assistance Phone: 1-609-631-2392
CHIP Website: <http://www.njfamilycare.org/index.html>
CHIP Phone: 1-800-701-0710 (TTY: 711)

NEW YORK – Medicaid

Website: https://www.health.ny.gov/health_care/medicaid/
Phone: 1-800-541-2831

NORTH CAROLINA – Medicaid

Website: <https://medicaid.ncdhhs.gov/>
Phone: 1-919-855-4100

NORTH DAKOTA – Medicaid

Website: <https://www.hhs.nd.gov/healthcare>
Phone: 1-844-854-4825

OKLAHOMA – Medicaid and CHIP

Website: <http://www.insureoklahoma.org>
Phone: 1-888-365-3742

OREGON – Medicaid and CHIP

Website: <http://healthcare.oregon.gov/Pages/index.aspx>
Phone: 1-800-699-9075

PENNSYLVANIA – Medicaid and CHIP

Website: <https://www.pa.gov/en/services/dhs/apply-for-medicaid-health-insurance-premium-payment-program-hipp.html>
Phone: 1-800-692-7462

CHIP website: <https://www.dhs.pa.gov/CHIP/Pages/CHIP.aspx> (pa.gov)

CHIP phone: 1-800-986-KIDS (5437)

RHODE ISLAND – Medicaid and CHIP

Website: <http://www.eohhs.ri.gov/>
Phone: 1-855-697-4347, or 1-401-462-0311 (Direct RlItte Share Line)

SOUTH CAROLINA – Medicaid

Website: <https://www.scdhhs.gov>
Phone: 1-888-549-0820

SOUTH DAKOTA - Medicaid

Website: <http://dss.sd.gov>
Phone: 1-888-828-0059

TEXAS – Medicaid

Website: <https://www.hhs.texas.gov/services/financial/health-insurance-premium-payment-hipp-program>
Phone: 1-800-440-0493

UTAH – Medicaid and CHIP

Utah's Premium Partnership for Health Insurance (UPP)
Website: <https://medicaid.utah.gov/upp/>
Email: upp@utah.gov
Phone: 1-888-222-2542
Adult Expansion Website: <https://medicaid.utah.gov/expansion/>
Utah Medicaid Buyout Program Website: <https://medicaid.utah.gov/buyout-program/>
CHIP Website: <https://chip.utah.gov/>

VERMONT – Medicaid

Website: <https://dvha.vermont.gov/members/medicaid/hipp-program>
Phone: 1-800-250-8427

VIRGINIA – Medicaid and CHIP

Websites: <https://coverva.dmas.virginia.gov/learn/premium-assistance/famis-select>
<https://coverva.dmas.virginia.gov/learn/premium-assistance/health-insurance-premium-payment-hipp-programs>
Medicaid/CHIP Phone: 1-800-432-5924

WASHINGTON – Medicaid

Website: <https://www.hca.wa.gov/>
Phone: 1-800-562-3022

WEST VIRGINIA – Medicaid

Website: <https://dhhr.wv.gov/bms/http://mywvhipp.com/>
Medicaid Phone: 1-304-558-1700
CHIP: 1-855-MyWVHIPP (1-855-699-8447)

WISCONSIN – Medicaid and CHIP

Website: <https://www.dhs.wisconsin.gov/badgercareplus/p-10095.htm>
Phone: 1-800-362-3002

WYOMING – Medicaid

Website: <https://health.wyo.gov/healthcarefin/medicaid/programs-and-eligibility/>
Phone: 1-800-251-1269

NOTICE OF PRIVACY PRACTICES

for Sony Pictures Entertainment Inc.

Para recibir esta notificación en español por favor llamar al número provisto en este documento.

This notice describes how medical information about you may be used and disclosed and how you can get access to this information. Please review it carefully. The privacy of your medical information is important to us.

Under the Health Insurance Portability and Accountability Act of 1996 ("HIPAA"), Sony Pictures Entertainment Inc.'s self-insured group health plans (the "HIPAA Plans") are required by law to maintain the privacy of protected health information maintained by the HIPAA Plans. The term "Plan Sponsor" refers to Sony Pictures Entertainment Inc. The term "PHI" refers to "protected health information" and means the information created or received by the HIPAA Plans that identifies you and relates to your past, present or future mental or physical health, condition, treatment or created in connection with the payment for health care services. The HIPAA Plans must provide participants with notice of its legal duties and privacy practices with respect to PHI.

This Notice describes the HIPAA Plans' privacy practices regarding PHI. If you participate in any full-insured group health plan sponsored by Sony Pictures Entertainment Inc., the insurer or HMO for that plan will provide you with a separate description of its own privacy practices. Similarly, your personal doctor or any other health care provider may have different policies or notices regarding the use and disclosure of the PHI they create or receive.

This Notice also describes how the HIPAA Plans may use and disclose PHI about you in administering your benefits. This Notice explains your legal rights regarding the information and the person to contact for further information about the HIPAA Plans' privacy practices.

This Notice is effective as of the revised effective date indicated in the footer below or such later date as indicated herein or as otherwise permitted under the Standards for Privacy of Individually Identifiable Health Information (the "HIPAA Privacy Rule"). The HIPAA Plans are required to abide by the terms of this Notice, as currently in effect.

PURPOSE OF THIS NOTICE

The HIPAA Plans must provide participants with notice of its legal duties and privacy practices with respect to PHI. This Notice describes the HIPAA Plans' privacy practices regarding PHI. The insurers or HMOs that provide or fund your benefits under any of the HIPAA Plans will provide you with a separate description of their own privacy practices. Similarly, your personal doctor or any other health care provider may have different policies or notices regarding the use and disclosure of the PHI they create or receive.

This Notice also describes how the HIPAA Plans may use and disclose PHI about you in administering your benefits. This Notice explains your legal rights regarding the information and the person to contact for further information about the HIPAA Plans' privacy practices.

This Notice is effective as of July 1, 2019.

HOW THE HIPAA PLANS MAY USE AND DISCLOSE PHI

In order to provide you with health coverage, the HIPAA Plans need PHI about you, and the HIPAA Plans obtain that information from many different sources – including your employer or benefits plan sponsor, insurers, HMOs or third party administrators (TPAs) and health care providers. In administering your health benefits, by law, the HIPAA Plans may use and disclose this information in various ways, without your consent, including:

Health Care Operations: The HIPAA Plans may use and disclose protected health information during the course of plan administration – that is, during operational activities such as quality assessment and improvement; performance measurement and outcomes assessment; and preventive health, disease management, case management and care coordination. For example, the HIPAA Plans may use the information in the administration of reinsurance and stop loss; enrollment and dis-enrollment; underwriting and rating; detection and investigation of fraud; administration of pharmaceutical programs and payments; and other general administrative activities, including data and information systems management and customer service. The HIPAA Plans are prohibited from using or disclosing genetic information of an individual for underwriting purposes.

Payment: To help pay for your covered services, the HIPAA Plans may use and disclose PHI in a number of ways – including conducting utilization and medical necessity reviews; coordinating care and responsibility for plan coverage and benefits; determining eligibility; collecting premiums; calculating cost sharing amounts; and responding to complaints, appeals and requests for external review. For example, the HIPAA Plans may use your medical history and other health information about you to decide whether a particular treatment is medically necessary and what the payment should be – and during the process, the HIPAA Plans may disclose PHI to your provider. The HIPAA Plans also may mail Explanation of Benefits forms and other information to the address it has on record for the subscriber (i.e., the primary insured).

Treatment: The HIPAA Plans may disclose PHI to doctors, dentists, pharmacies, hospitals and other health care providers who take care of you. For example, doctors may request medical information from the HIPAA Plans to supplement their own records. Additionally, so that your treatment and care are appropriate, your doctor may use your PHI to consult with a specialist regarding your condition. The HIPAA Plans also may send certain information to health care providers for patient safety or other treatment-related reasons.

ADDITIONAL REASONS FOR DISCLOSURE

The HIPAA Plans may use or disclose PHI in providing you with treatment alternatives, treatment reminders, or other health-related benefits and services. The HIPAA Plans also may disclose such information for several additional purposes, in accordance with law without your authorization, including:

- **Plan Administration** – to the Plan Sponsor as specified in the applicable plan documents.
- **Research** – to researchers, provided measures are taken to protect your privacy.
- **Business Associates** – to persons who provide services to the HIPAA Plans which have agreed to maintain the privacy of your PHI under, and in accordance with, HIPAA and the HIPAA Plans' privacy practices (they are referred to as "Business Associates"). Business Associates are subject to the HIPAA Privacy and Security rules.

- **Industry Regulation** – to state insurance departments, U.S. Department of Labor and other government agencies.
- **Law Enforcement** – to federal, state and local law enforcement officials.
- **Coroner or Medical Examiner** – for purposes of identification or determining cause of death.
- **Legal Proceedings** – in response to a court order, subpoena or other lawful process.
- **Public Welfare** – to address matters of public interest as required or permitted by law (e.g., child abuse and neglect, threats to public health and safety, and national security).
- **Workers' Compensation** – To the extent required or permitted by law, the HIPAA Plans may release PHI about you for workers' compensation or similar programs.
- **As otherwise required or permitted by applicable law.**

DISCLOSURES TO THE PLAN SPONSOR

Plan Sponsor. The HIPAA Plans may share PHI about you with the Plan Sponsor. In the vast majority of circumstances, the HIPAA Plans share only summary information with the Plan Sponsor about the types and frequency of claims, the total cost for those claims, and other related information that does not identify any particular beneficiary. The HIPAA Plans do not need your permission to share this information with the Plan Sponsor.

The HIPAA Plans may retain an administrator to assist them in administering the claims processing, claim review, and claim payment functions conducted by the HIPAA Plans. As a result, the administrator will receive the majority of health information involving you and your health benefit claims and it has agreed to be bound by the same restrictions as the HIPAA Plans in its use and disclosure of your PHI.

In some cases, however, the Plan Sponsor may receive specific information about particular participants in the HIPAA Plans. For example, reinsurers and other benefit providers may need information on certain chronic or catastrophic illnesses and injuries in order to quote premiums or to continue coverage under some or all of the Plan Sponsor's insurance policies, including those that insure a portion of the Plan. The Plan Sponsor will not use this information in a way that violates the Privacy Rule. The Plan Sponsor will not use or disclose this

information for employment related actions against you or for decisions regarding your eligibility for or participation in any other benefit or benefit plan of the Plan Sponsor.

You may also request that Plan Sponsor employees intervene on your behalf in addressing claims payment issues or to resolve coverage questions under the Plan (such as, for example, whether a particular requested service is experimental or medically necessary). Should you make such a request, you will be deemed to have consented to the HIPAA Plans sharing all of the information about your medical condition or your claim with the Plan Sponsor. The Plan Sponsor will use and disclose this PHI only in accordance with the applicable law.

DISCLOSURE TO OTHERS INVOLVED IN YOUR HEALTH CARE

The HIPAA Plans may disclose PHI about you to a relative, a friend, the subscriber to the HIPAA Plans or any person you identify, provided the information is directly relevant to that person's involvement with your health care. For example, if a family member or a caregiver calls the HIPAA Plans with prior knowledge of a claim, the HIPAA Plans may confirm whether or not the claim has been received and paid. You have the right to stop or limit this kind of disclosure by contacting the HIPAA Plans' Privacy Officer.

If you are a minor, you also may have the right to block parental access to your PHI in certain circumstances, if permitted by state law. You can make such a request by contacting (or having your provider contact) the HIPAA Plans' Privacy Officer.

USES AND DISCLOSURES REQUIRING YOUR WRITTEN AUTHORIZATION

The HIPAA Plans will ask for your written authorization before using or disclosing your PHI for the following uses or disclosures: (i) psychotherapy notes (if recorded by the HIPAA Plans); (ii) marketing purposes, including subsidized treatment communications; (iii) disclosures that constitute sale of PHI and (iv) all situations other than those described above. If you have given the HIPAA Plans an authorization, you may revoke it at any time. The HIPAA Plans are unable to take back any disclosures already made with your authorization. If you have questions regarding authorizations, please contact the HIPAA Plans' Privacy Officer.

YOUR LEGAL RIGHTS

The Privacy Rule gives you the right to make certain requests regarding your PHI.

- You have the right to request to receive communications from the HIPAA Plans on a confidential basis by using alternative means for receipt of information or by receiving the information at alternative locations. For example, you may ask that the HIPAA Plans only contact you at work or by mail, or at a mailing address other than your home address. If it is reasonable, the HIPAA Plans must accommodate your request. You are not required to provide the HIPAA Plans with an explanation as to the reason for your request.
- You have the right to request a restriction or limitation on the PHI the HIPAA Plans use or disclose about you for purposes of treatment, payment or operations. To request restrictions, you must make your request in writing to the HIPAA Plans' Privacy Officer. In your request, you must tell the HIPAA Plans (1) what information you want to limit; (2) whether you want to limit the HIPAA Plans' use, disclosure, or both; and (3) to whom you want the limits to apply. ***The HIPAA Plans are not required to agree to your request, except that, effective February 17, 2010, requests to a health plan regarding payment or health care operations, or requests for which the applicable PHI has been paid for out-of-pocket in full, will be honored by the HIPAA Plans.***
- You have the right to inspect and obtain a copy of PHI that is contained in a "designated record set" – records used in making enrollment, payment, claims adjudication, medical management and other decisions. The HIPAA Plans may ask you to make your request in writing, may charge a reasonable fee for producing and mailing the copies and, in certain cases, may deny the request.
- You have the right to request the HIPAA Plans to amend PHI that is in a "designated record set." Your request must be in writing and must include the reason for the request. The Plan will respond to the request no later than 60 days after the request, unless it extends this timeframe as permitted under HIPAA. If the HIPAA Plans deny the request, you may file a written statement of disagreement. If the request is denied in whole or part, the Plan must provide you with a written denial that explains the basis for the denial. You or your personal representative may then submit a written statement disagreeing with the denial and have that statement included with any future disclosures of your PHI.

- You have the right to request an “accounting of disclosures.” This is a list of some of the disclosures the HIPAA Plans made of medical information about you that were not specifically authorized by you in advance. Such accounting does not have to include PHI disclosures made to you about your own PHI. Your request must be in writing. If you request such an accounting more than once in a 12-month period, the HIPAA Plans may charge a reasonable fee. Your written request must be for a stated time period not be longer than six years (three years for disclosures for purposes of treatment, payment or health care operations) and may not include dates before April 14, 2003 (or January 1, 2014 for disclosures related to treatment, payment or health care operations; January 1, 2011 if the company does not have an electronic health record system currently in place). If the accounting cannot be provided to you within 60 days, the HIPAA Plans have the right to a 30 day extension provided you are given a written statement of the reasons for the delay and the date by which the accounting is anticipated to be provided.
- You have the right to be notified in the event that the Plan Sponsor or a Business Associate discovers a breach of unsecured PHI.
- You have the right to receive a paper copy of this notice at any time upon written request.

You may make any of the requests described above, by contacting the HIPAA Plans’ Privacy Officer as indicated in the “Complaints” section below. You may also exercise your rights through a personal representative. Your representative will be required to provide evidence of his or her authorization by you to act on your behalf before access will be given to your PHI.

COMPLAINTS

You also have the right to file a complaint if you think your privacy rights have been violated. To do so, please contact the HIPAA Plans’ Privacy Officer, Ms. Gabrielle Ernst, Sony Pictures Entertainment Inc., 10202 W. Washington Blvd., Culver City, CA 90232 or send an e-mail to the secure HIPAA e-mail box at **HIPAA_Privacy@sonyusa.com**. You also may write to the Secretary of the U.S. Department of Health and Human Services at Office of the Secretary, Department of Health and Human Services, 200 Independence Ave., S.W., Washington, D.C., 20201 (telephone number **1-877-696-6775**). You will not be retaliated against for filing a complaint.

THE HIPAA PLANS’ LEGAL OBLIGATIONS

The Privacy Rule requires the HIPAA Plans to keep PHI about you private, to give you notice of its legal duties and privacy practices, to notify individuals should any breach of unsecured PHI occur, and to follow the terms of the Notice currently in effect.

The information provided in this Notice is a summary and, therefore, general in nature. The actual the terms of the HIPAA Plans and their HIPAA privacy practices and procedures must be consulted with regard to privacy in any particular circumstance. If you have any questions about HIPAA or the privacy practices maintained by the HIPAA Plans, please contact the Privacy Officer.

The HIPAA Plans are required by law to maintain the privacy of PHI, to provide you with notice of its legal duties and privacy policies with respect to PHI and to notify affected individuals following a breach of unsecured PHI.

THIS NOTICE IS SUBJECT TO CHANGE

The HIPAA Plans reserve the right to change the terms of this Notice and their privacy policies at any time. If the HIPAA Plans do make such changes, the new terms and policies will then apply to all PHI maintained by the HIPAA Plans (including information in the HIPAA Plans’ possession at the time of the change as well as information created or received in the future). If the HIPAA Plans make any material changes regarding their practices, the HIPAA Plans will distribute a new notice to its subscribers.

CONTACT INFORMATION

If you have questions, requests or complaints regarding this Notice, please contact the HIPAA Plans’ Privacy Officer at the address noted above in the “Complaints” section. Include your name, phone and fax number. You may also submit your inquiries by e-mail to **HIPAA_Privacy@sonyusa.com**.

CONTACTS

BENEFIT		PROVIDER	PHONE NUMBER	WEBSITE
Sony Pictures Benefits Center		Sony Pictures	1-833-9-SONY-01	benefitscenter.spe.sony.com
Benefits Information		SPE Benefits	N/A	benefits.sonypictures.com Email: spe_benefits@spe.sony.com
Mental Health and Emotional Wellbeing	Mental Health and Emotional Wellbeing Resources	Spring Health	1-855-629-0554	benefits.springhealth.com/sonypictures
Medical	• Sony Consumer Choice • Sony PPO • Sony EPO • Kaiser HMO	Aetna	1-888-385-1053	www.aetna.com
		Kaiser Permanente	1-800-464-4000	www.kp.org
	Family Planning/Menopause Support	Progyny	1-833-404-2011	progyny.com/smart-benefits/
	Medical Plan Comparison Tools	Sony Pictures	N/A	EMMA: benefitscenter.spe.sony.com
	Medical Benefits Abroad (MBA)	Cigna	1-800-441-2668	cignaenvoy.com
	Business Travel Benefits Information	International SOS	1-800-523-6586 (US) 1-215-942-8226	www.internationalsos.com (Member Number 11BCPA000212)
Prescription Drugs	Prescription Drugs	CVS/Caremark	1-888-385-1053	www.caremark.com/SPE
		Kaiser (Sony Plans)	1-800-464-4000	www.kp.org
Aetna Resources	Telephone Counseling	Teladoc	1-855-835-2362	www.teladoc.com/aetna Mobile: www.teladoc.com/mobile
	24/7 Nurse Line	Aetna	1-800-556-1555	
	Virtual Physical Therapy	Hinge Health	N/A	www.hingehealth.com/sony
	Dedicated Nurse Advocate	Stephanie Vega	1-312-549-3918	Email: vegas@aetna.com
Dental	• Sony Standard Plan • Sony High Plan	Delta Dental	1-800-471-7059	www.deltadentalins.com/sony
Vision	Vision Coverage	Vision Service Plan	1-800-877-7195	www.vsp.com
Flexible Spending Accounts	• Flexible Spending Accounts (FSAs) • Health Savings Account (HSA) • Commuter Benefits	Inspira Financial	1-888-678-8242	inspirafinancial.com
Leave/Disability	Leaves of Absence/Disability	Matrix/Reliance	1-888-256-4094	www.matrixabsence.com
Life/AD&D/LTC	Executive Life Insurance	MetLife	1-800-756-0124	mybenefits.metlife.com
	Life and AD&D	Securian	N/A	lifebenefits.com/insuranceneeds
	Long-Term Care	Trustmark	1-855-549-8911	www.getltci.com/sony
	Accident Plan	Aetna	1-800-607-3366	www.myaetnasupplemental.com
	Hospital Indemnity	Aetna	1-800-607-3366	www.myaetnasupplemental.com
401(k)	Sony USA 401(k) Plan	T. Rowe Price	1-877-766-9728	www.troweprice.com/workplace
Auto/Home	Discounted Insurance	BenefitHub	N/A	spe.benefithub.com/ Access code: JH4D2M
Family Support	Backup Child Care	Bright Horizons	1-877-242-2737	clients.brighthorizons.com/sonypictures First time users' username: SPE Password: Benefits4You
	Behavior Coaching Assistance	RethinkCare	1-800-714-9285	connect.rethinkcare.com/sponsor/spe Enrollment code: spe
	Breast Milk Shipping	Milk Stork	1-510-356-0221	www.milkstork.com/sonypictures
Financial and Legal	Tuition Assistance	EdAssist	1-855-853-5017	spe.edassist.com
	Student Loans	Tuition.IO	1-855-353-9395	sonypictures.tuition.io
	ID Theft Protection	Aura	1-833-552-2123	my.aura.com
	Legal Services	MetLife Legal	1-800-821-6400	members.legalplans.com
	Employee Stock Purchase Plan (ESPP)	EquatePlus	1-800-599-6323	equateplus.com/EquatePlusParticipant/
Pet Protection	Pet Insurance	BenefitHub	N/A	spe.benefithub.com/ Access code: JH4D2M
	Pet Prescriptions	Inside Rx	N/A	insiderxpets.com/pets
	Pet Sitting Services	Sittercity	N/A	www.sittercity.com/sonypictures
On the Lot	On the Lot/Virtual Counselor	Dr. Wendy Talley	N/A	Email: theleseconsultinggroup@gmail.com
	On the Lot/Virtual Nutritionist	Medical Center	1-310-244-5560	Email: medgate_medical@spe.sony.com
	On the Lot Physical Therapy	Medical Center	1-310-244-5560	Email: medgate_medical@spe.sony.com



TWISTED METAL (SEASON 2)

NOW ON PEACOCK

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This is a summary of certain Sony Pictures benefits. Not all employees may be eligible for the benefits described herein. When an employee logs in to Sony Pictures Benefits Center through mySPE or <https://benefitscenter.spe.sony.com> they will only see the benefits available to them. For any questions or to speak to a benefits representative, call 1-833-9-SONY-01.

THIS IS A SUMMARY OF CHANGES TO THE PLAN. This document is intended to serve as a "summary of material modifications" pursuant to the requirements of Section 104 of the Employee Retirement Income Security Act of 1974, as amended ("ERISA"). You should keep this summary, together with the SPD, for future reference. In the event of a discrepancy between this SMM and the SPD, this SMM will govern. In the event of a discrepancy between this SMM and the official Plan document, the official Plan document will govern. As a reminder, the Company reserves the right in its sole and absolute discretion to amend, modify or terminate the Plan at any time, and for any reason, or for no reason, and the Plan's administrator reserves the right in its sole and absolute discretion to interpret and apply the terms of the Plan. Receipt of this document is not intended to waive any applicable eligibility requirement.

This Benefits Guide provides summary information on certain Sony Pictures Entertainment benefits. The benefits are governed by the official plan documents (which may include underlying contracts). This guide is not intended to amend or revise any official plan document or change the terms of any plan in any way. This guide is believed to be accurate as of the print date; however, it is subject to change without notice. In the event of any inconsistency between the plan documents and the information in this guide, the terms of the plan documents, as interpreted by the plan administrator in its sole discretion, control in all cases. Sony Pictures reserves the right to amend, suspend, or terminate these benefits plans or programs at any time for any reason. This guide is intended for distribution only to employees eligible for Sony Pictures benefits plans and programs described herein. If you inadvertently receive this Benefits Guide or information about benefit programs that are inapplicable to you, receipt of this guide or other benefit information shall not be deemed to constitute a waiver of any applicable eligibility requirements. This guide is for information purposes only and is neither an offer of any payment of benefits nor a guarantee of continued employment or payment of any future benefits. Nothing contained in this guide alters the at-will nature of employment of Sony Pictures' at-will employees. To the extent eligible employees are employed by Sony Pictures pursuant to a written employment agreement, nothing in this guide alters any provisions therein, including, but not limited to, the duration, term, or termination provisions of the agreement.