

**SIGN, PICTORIAL AND DISPLAY INDUSTRY BENEFIT PLAN**  
**(As revised January 1, 2025)**

**FIRST AMENDMENT**

Pursuant to the powers conferred upon them by Article VII, Section 7.01 of the Sign, Pictorial and Display Industry Welfare Fund Agreement and Declaration of Trust (as amended and restated July 1, 1998), the Board of Trustees amended the Sign, Pictorial and Display Industry Benefit Plan as revised January 1, 2025, to be effective April 7, 2016, and authorized the Chairman and Secretary to authenticate the same by affixing their signatures hereto:

1. Effective April 7, 2016, amend Part 2, Article 12, Section 12.05 in its entirety to state as follows:

**12.05 STOP-LOSS LIMIT.**

Individual Stop-loss Limit:

When you use PPO Providers: After the out-of-pocket expense for Allowable Charges incurred by each covered person reaches \$1,000, the Plan pays 100% of the Allowable Expense which that covered person incurs for Covered Services of PPO Providers for the rest of the calendar year.

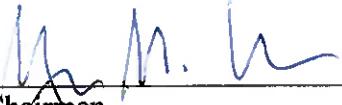
When you use Non-PPO or Other Providers: After the out-of-pocket expense for Allowable Charges incurred by each covered person reaches \$5,000, the Plan pays 100% of the Allowable Expense which that covered person incurs for Covered Services of Other Providers for the rest of the calendar year (excluding services covered by the No Surprises Act, which include: (a) Emergency Services for an Emergency Medical Condition provided by a Non-PPO provider or Non-PPO facility (unless the covered person received proper notice and consented to the out-of-network billing rates for certain post-stabilization services as allowed under the No Surprises Act); (b) non-Emergency Services by a Non-PPO provider at a PPO facility (unless the covered person received proper notice and consented to the out-of-network billing rates as allowed under the No Surprises Act); and (c) Non-PPO air ambulance services).

"Out-of-Pocket Expense" means expense which the covered person incurs for Covered Services during the calendar year and must pay out-of-pocket:

- (a) to satisfy any applicable deductible; and
- (b) as coinsurance (the percentage the covered person must pay in accord with the Covered Percentages provision).

The same out-of-pocket expense may be used to satisfy both the stop-loss limit for PPO Providers and the stop-loss limit for Non-PPO Providers.

IN WITNESS of the adoption of this amendment, the Chairman and Secretary hereby subscribe  
their names, on the dates indicated.

  
Chairman

Date: 10/13/2025

  
Secretary

Date: 10/13/2025