

SUMMARY ANNUAL REPORT for Hertz Custom Benefit Program

This is a summary of the annual report of the Hertz Custom Benefit Program, Employer Identification Number 13-1938568, Plan Number 505, for the plan year July 1, 2019 through June 30, 2020. The annual report has been filed with the Department of Labor, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

The Hertz Corporation has committed itself to pay certain medical and dental claims incurred under the terms of the plan.

Insurance Information

The plan has contracts with Arch Insurance Company to pay accidental death and dismemberment claims, Cigna Health and Life Insurance Company and Affiliates and Hawaii Dental Service to pay dental claims, EyeMed Vision Care o/b/o the Combined Insurance Company of America to pay vision claims, Hartford Life and Accident to pay life insurance claims, Kaiser Foundation Health Plan of Hawaii and UnitedHealthcare Insurance Company to pay certain medical claims and Metropolitan Life Insurance Company to pay long-term disability claims incurred under the terms of the plan. The total amount of premium paid for the plan year ending June 30, 2020 was \$9,175,989.

Your Rights to Additional Information

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

To obtain a copy of the full annual report, or any part thereof, write or call the office of Vicki L. Boyd, Manager, Health & Welfare Programs at Hertz Corporation, 8501 Williams Road, Estero, FL 33298, (239) 301-7000. The charge to cover copying costs will be \$8.40 for the full annual report, or 20 cents per page for any part thereof.

You also have the legally protected right to examine the annual report at the main office of the plan (Hertz Corporation, 8501 Williams Road, Estero, FL 33298), at the U.S. Department of Labor in Washington, D.C. or you may obtain a copy from the U.S. Department of Labor upon payment of copying costs. Requests to the Department should be addressed to: Public Disclosure Room, N-1513, Employee Benefits Security Administration, U.S. Department of Labor, 200 Constitution Avenue, N.W., Washington, D.C. 20210