

Genesco, Inc.
Option 4

Health Benefit Plan
Summary of Material
Modification



NOTICE

Please read this Summary of Material Modification (SMM) carefully and keep it in a safe place for future reference. It explains Your benefits as administered by BlueCross BlueShield of Tennessee, Inc. This SMM is effective July 1, 2025.

The EOC You received is hereby modified in the following sections:

- 1. Under the heading, SUMMARY PLAN DESCRIPTION, the following has been modified to read as follows:**

PLAN IDENTIFICATION

Plan Name:	<i>The medical coverage described in this Summary Plan Description is a part of the:</i> Genesco Master Plan , for eligible employees Genesco Employee Benefit Plan , for eligible retired employees
Name and Address of Plan Administrator:	Genesco Inc. Attn: Director of Benefits 535 Marriott Drive Nashville, TN 37214
Telephone Number of Plan Administrator:	615-367-7852
You may also contact the Benefits Team , which acts on behalf of the Plan Administrator with respect to day-to-day matters concerning the Plans. The Benefits Team's contact information is: Telephone: 615-367-7852 Email: totalrewards@genesco.com	
Plan Sponsor:	Genesco Inc. (contact is the same as provided above for Plan Administrator)
In addition to the Plan Sponsor, other employers may from time to time participate in the Plans. Participants and beneficiaries may receive from the Plan Administrator, upon written request (contact information is provided above), information as to whether a particular employer is participating in a Plan.	
Plan Sponsor's/Employer's Tax ID Number:	62-0211340
Plan Number:	For the Genesco Master Plan : 516 For the Genesco Employee Benefit Plan : 515
Group Number:	130436
Agent for Service of Legal Process:	Genesco Inc. Attn: Director of Benefits 535 Marriott Drive Nashville, TN 37214
Claim Administrator:	BlueCross BlueShield of Tennessee, Inc. 1 Cameron Hill Circle Chattanooga, TN 37402
Type of Administration and Funding:	The medical coverage is contract-administered—BlueCross BlueShield of Tennessee, Inc. is a contractual, not a fiduciary, administrator (except as otherwise specifically provided in this

Summary Plan Description). The medical coverage is self-funded in accordance with the provisions in this Summary Plan Description. The **Genesco Master Plan** is funded through the Employer's general assets. The **Genesco Employee Benefit Plan** is funded through the Genesco Employee Benefits Trust. Participants are required to contribute toward the cost of coverage.

Plan Year Ends:

December 31

Type of Plan:

Employee Welfare Benefit Plan

The Plan Sponsor reserves the right to terminate, suspend, withdraw, amend or modify the Plans at any time. Any such change or termination in benefits: (a) will be based solely on the decision of the Plan Sponsor; and (b) may apply, in whole or in part, to active Employees, future retirees, and current retirees, either as separate groups or as one group (or otherwise).

If You have any questions about this SMM or any other matter related to Your membership in the Plan, please write or call Us at:

**CUSTOMER SERVICE DEPARTMENT
BLUECROSS BLUESHIELD OF TENNESSEE, INC.,
ADMINISTRATOR
1 CAMERON HILL CIRCLE
CHATTANOOGA, TENNESSEE 37402
(800) 565-9140**



**BlueCross BlueShield
of Tennessee***

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BENEFIT QUESTIONS?
Call the Customer Service
Number on the membership I.D. Card

SELF-FUNDED EOC

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