

EXHIBIT A



P.O. Box 989728

West Sacramento, CA 95798-9728

<<FirstName>> <<LastName>>
<<Address 1>>
<<Address 2>>
<<City>>, <<State>> <<Zip>>

Enrollment Code: <<XXXXXXXX>>

Enrollment Deadline: January 15, 2026

To Enroll, Scan the QR Code Below:



SCAN ME

Or Visit:

<https://app.idx.us/account-creation/protect>

October 15, 2025

NOTICE OF <<VARIABLE DATA 1>>

Dear <<FirstName>> <<LastName>>:

Ajinomoto Health & Nutrition, Inc. (“AHN”) is writing to notify you of an event that affected some of your personal information. Although at this time there is no indication that your information has been used to commit identity theft or fraud in relation to this event, we are providing you with measures you can take to help protect your information, should you feel it appropriate to do so. Due to requirements imposed by Massachusetts law, we are unable to provide further detail about the nature of this event, but you may obtain additional information by calling our dedicated assistance line provided at the end of this letter.

The confidentiality, privacy, and security of personal information within our care are among AHN’s highest priorities. Upon learning of the event, we promptly commenced an investigation and response that included confirming the security of our systems, investigating to determine the information that was impacted, and reviewing the contents of relevant data for sensitive information. As part of our ongoing commitment to the privacy of information in our care, we are implementing additional security measures to further protect against similar incidents occurring in the future.

As an added precaution, AHN is offering you immediate access to twenty-four (24) months of complimentary credit monitoring and identity theft protection services through IDX. You can find information on how to enroll in these services below. We encourage you to enroll yourself in these services as we are not able to do so on your behalf.

Enroll in Monitoring Services

1. Website and Enrollment. Scan the QR image or go to <https://app.idx.us/account-creation/protect> and follow the instructions for enrollment using your Enrollment Code provided at the top of the letter. Please note the deadline to enroll is January 15, 2026.

2. Activate the credit monitoring provided as part of your IDX identity protection membership. The monitoring included in the membership must be activated to be effective. Note: You must have established credit and access to a computer and the internet to use this service. If you need assistance, IDX will be able to assist you.

3. Telephone. Contact IDX at 1-833-788-9712 to gain additional information about this event and speak with knowledgeable representatives about the appropriate steps to take to protect your credit identity.

4. Review your credit reports. We recommend that you remain vigilant by reviewing account statements and monitoring credit reports. Under federal law, you also are entitled every 12 months to one free copy of your credit report from each of the three major credit reporting companies. To obtain a free annual credit report, go to www.annualcreditreport.com or call 1-877-322-8228. You may wish to stagger your requests so that you receive a free report by one of the three credit bureaus every four months.

If you discover any suspicious items and have enrolled in IDX identity protection, notify them immediately by calling or by logging into the IDX website and filing a request for help.

If you file a request for help or report suspicious activity, you will be contacted by a member of our ID Care team who will help you determine the cause of the suspicious items. In the unlikely event that you fall victim to identity theft as a consequence of this incident, you will be assigned an ID Care Specialist who will work on your behalf to identify, stop and reverse the damage quickly.

Under U.S. law, a consumer is entitled to one free credit report annually from each of the three major credit reporting bureaus, Equifax, Experian, and TransUnion. To order your free credit report, visit www.annualcreditreport.com or call, toll-free, 1-877-322-8228. You may also directly contact the three major credit reporting bureaus listed below to request a free copy of your credit report.

Consumers have the right to place an initial or extended “fraud alert” on a credit file at no cost. An initial fraud alert is a 1-year alert that is placed on a consumer’s credit file. Upon seeing a fraud alert display on a consumer’s credit file, a business is required to take steps to verify the consumer’s identity before extending new credit. If you are a victim of identity theft, you are entitled to an extended fraud alert, which is a fraud alert lasting seven years. Should you wish to place a fraud alert, please contact any one of the three major credit reporting bureaus listed below.

As an alternative to a fraud alert, consumers have the right to place a “credit freeze” on a credit report, which will prohibit a credit bureau from releasing information in the credit report without the consumer’s express authorization. The credit freeze is designed to prevent credit, loans, and services from being approved in your name without your consent. However, you should be aware that using a credit freeze to take control over who gets access to the personal and financial information in your credit report may delay, interfere with, or prohibit the timely approval of any subsequent request or application you make regarding a new loan, credit, mortgage, or any other account involving the extension of credit. Pursuant to federal law, you cannot be charged to place or lift a credit freeze on your credit report. To request a security freeze, you may need to provide the following information, depending on whether you make the request online, by phone, or by mail:

1. Full name (including middle initial as well as Jr., Sr., II, III, etc.);
2. Social Security number;
3. Date of birth;
4. Addresses for the prior two to five years;
5. Proof of current address, such as a current utility bill or telephone bill;
6. A legible photocopy of a government-issued identification card (state driver’s license or ID card, etc.);
7. Social Security Card, pay stub, or W2;
8. If you are a victim of identity theft, include a copy of either the police report, investigative report, or complaint to a law enforcement agency concerning identity theft.

Should you wish to place a credit freeze or fraud alert, please contact the three major credit reporting bureaus listed below:

Equifax	Experian	TransUnion
https://www.equifax.com/personal/credit-report-services/	https://www.experian.com/help/	https://www.transunion.com/data-breach-help
1-888-298-0045	1-888-397-3742	1-833-799-5355
Equifax Fraud Alert, P.O. Box 105069 Atlanta, GA 30348-5069	Experian Fraud Alert, P.O. Box 9554, Allen, TX 75013	TransUnion, P.O. Box 2000, Chester, PA 19016
Equifax Credit Freeze, P.O. Box 105788 Atlanta, GA 30348-5788	Experian Credit Freeze, P.O. Box 9554, Allen, TX 75013	TransUnion, P.O. Box 160, Woodlyn, PA 19094

Under Massachusetts law, you have the right to obtain any police report filed in regard to this incident. If you are the victim of identity theft, you also have the right to file a police report and obtain a copy of it.

You may further educate yourself regarding identity theft, fraud alerts, credit freezes, and the steps you can take to protect your personal information by contacting the consumer reporting bureaus, the Federal Trade Commission, or your state Attorney General. The Federal Trade Commission may be reached at: 600 Pennsylvania Avenue NW, Washington, DC 20580; www.identitytheft.gov; 1-877-ID-THEFT (1-877-438-4338); and TTY: 1-866-653-4261. The Federal Trade Commission also encourages those who discover that their information has been misused to file a complaint with them. You can obtain further information on how to file such a complaint by way of the contact information listed above. You have the right to file a police report if you ever experience identity theft or fraud. Please note that in order to file a report with law enforcement for identity theft, you will likely need to provide some proof that you have been a victim. Instances of known or suspected identity theft should also be reported to law enforcement and your state Attorney General. This notice has not been delayed by law enforcement.

We understand that you may have questions about this event that are not addressed in this letter. If you have additional questions, please call 1-833-788-9712 from 9:00 A.M – 9:00 P.M. ET, Monday through Friday, excluding major U.S. holidays. You may also write to AHN at 250 East Devon Avenue, Itasca, IL 60143.

We sincerely regret any inconvenience or concern this event may cause you. Protecting your information is very important to us, and we remain committed to safeguarding the information in our care.

Sincerely,

Ajinomoto Health & Nutrition, Inc.

