

## **SUMMARY ANNUAL REPORT**

### **For ADOBE INCORPORATED GROUP WELFARE PLAN**

This is a summary of the annual report of the ADOBE INCORPORATED GROUP WELFARE PLAN, EIN 77-0019522, Plan No. 501, for period 01/01/2023 through 12/31/2023. The annual report has been filed with the Employee Benefits Security Administration, U.S. Department of Labor, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

ADOBE INCORPORATED has committed itself to pay certain self-insured Medical, Prescription Drug, Flexible Spending Account, Dental, Vision, and Short-term Disability claims incurred under the terms of the plan.

### **Insurance Information**

The plan has contracts with ACE AMERICAN INSURANCE COMPANY, SPRING CARE, INC., HAWAII MEDICAL SERVICE ASSOCIATION, METLIFE LEGAL PLANS, KAISER FOUNDATION HEALTH PLAN INC, LINCOLN NATIONAL LIFE INSURANCE COMPANY, TRANSAMERICA LIFE INSURANCE COMPANY, AETNA LIFE INSURANCE COMPANY, KAISER FOUNDATION HEALTH PLAN OF WASHINGTON, and AETNA INTERNATIONAL to pay Medical, Dental, Vision, Life Insurance, Long-term Disability, Accidental Death and Dismemberment, Employee Assistance Program, Business Travel Accident, and Legal claims incurred under the terms of the plan. The total premiums paid for the plan year ending 12/31/2023 were \$49,609,315.

### **Your Rights To Additional Information**

You have the right to receive a copy of the full annual report, or any part thereof, on request. The items listed below are included in that report:

- insurance information, including sales commissions paid by insurance carriers;

To obtain a copy of the full annual report, or any part thereof, write or call the office of ADOBE INCORPORATED at 345 PARK AVENUE, SAN JOSE, CA, 95110 or by telephone at 408-536-6000.

You also have the legally protected right to examine the annual report at the main office of the plan (ADOBE INCORPORATED, 345 PARK AVENUE, SAN JOSE, CA, 95110) and at the U.S. Department of Labor in Washington, D.C., or to 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, Room N1513, Employee Benefits Security Administration, U.S. Department of Labor, 200 Constitution Avenue, N.W., Washington, D.C. 20210.