SUMMARY ANNUAL REPORT

For Rakuten Usa, Inc. Welfare Benefits Plan

This is a summary of the annual report of the Rakuten Usa, Inc. Welfare Benefits Plan, EIN 94-3377047, Plan No. 501, for period 01/01/2025 through 12/31/2025. 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).

Rakuten Usa, Inc. - Rakuten Americas Regional Headquarters, Inc. has committed itself to pay certain self-insured Medical, Dental, and Vision claims incurred under the terms of the plan.

Insurance Information

The plan has contracts with Hartford Life And Accident, UnitedHealthcare Insurance Company, Pre-paid Legal Services Inc dba LegalShield, Modern Health Arizona P.l.l.c., Cigna Health And Life Insurance Company, Hmsa Blue Cross Blue Shield of Hawai, and Kaiser Foundation Health Plan, Inc. to pay Medical, Dental, Vision, Life Insurance, Long-term Disability, Accidental Death and Dismemberment, Employee Assistance Program, Legal, Critical Illness, Accident, and INTERNATIONAL BUSINESS TRAVEL claims incurred under the terms of the plan. The total premiums paid for the plan year ending 12/31/2025 were $3,103,716.

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 Rakuten Usa, Inc. - Rakuten Americas Regional Headquarters, Inc. at 800 Concar Drive, Suite 175, San Mateo, CA, 94402 or by telephone at 888-808-0765.

You also have the legally protected right to examine the annual report at the main office of the plan (Rakuten Usa, Inc. - Rakuten Americas Regional Headquarters, Inc., 800 Concar Drive, Suite 175, San Mateo, CA, 94402) 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. Or you may access a copy on the DOL's web site www.efast.dol.gov.

Paperwork Reduction Act Statement

According to the Paperwork Reduction Act of 1995 (Pub. L. 104-13) (PRA), no persons are required to respond to a collection of information unless such collection displays a valid Office of Management and Budget (OMB) control number. The Department notes that a Federal agency cannot conduct or sponsor a collection of information unless it is approved by OMB under the PRA, and displays a currently valid OMB control number, and the public is not required to respond to a collection of information unless it displays a currently valid OMB control number. See 44 U.S.C. 3507. Also, notwithstanding any other provisions of law, no person shall be subject to penalty for failing to comply with a collection of information if the collection of information does not display a currently valid OMB control number. See 44 U.S.C. 3512.

The public reporting burden for this collection of information is estimated to average less than one minute per notice (approximately 3 hours and 11 minutes per plan). Interested parties are encouraged to send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the U.S. Department of Labor, Office of the Chief Information Officer, Attention: Departmental Clearance Officer, 200 Constitution Avenue, N.W., Room N-1301, Washington, DC 20210 or email DOL_PRA_PUBLIC@dol.gov and reference the OMB Control Number 1210-0040.

OMB Control Number 1210-0040 (expires 07/31/2029)