



## **SUMMARY ANNUAL REPORT FOR ALBERTSONS COMPANIES, INC. HEALTH AND WELFARE PLAN**

This is a summary of the annual report of the Albertsons Companies, Inc. Health And Welfare Plan (Employer Identification Number 82-0184434, Plan Number 501) for the plan year 01/01/2023 through 12/31/2023. The annual report has been filed with the Employee Benefits Security Administration, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

Albertsons LLC has committed itself to pay certain medical, prescription drug, dental, employee assistance and temporary disability claims incurred under the terms of the plan.

### **Insurance Information**

The plan has insurance contracts with Kaiser Foundation Health Plan Inc, Zurich American Insurance Company, Hartford Life and Accident, Kaiser Foundation Health Plan of the Northwest, Kaiser Foundation Health Plan of Colorado, Continental American Insurance Company, Hawaii Medical Service Association, Kaiser Foundation Health Plan of Washington and Vision Service Plan to pay certain life, accidental death and dismemberment, medical, vision, long-term disability, critical illness, accident, hospital indemnity and business travel accident claims incurred under the terms of the plan. The total premiums paid for the plan year ending 12/31/2023 were \$49,609,845.

### **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 plan administrator, at P.O. Box 6890 250 E. Parkcenter Blvd, Boise, ID 83726 and phone number, 208-395-6200.

You also have the legally protected right to examine the annual report at the main office of the plan: P.O. Box 6890 250 E. Parkcenter Blvd, Boise, ID 83726, 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 N-1513, Employee Benefits Security Administration, U.S. Department of Labor, 200 Constitution Avenue, N.W., Washington, D.C. 20210. The annual report is also available online at the Department of Labor website [www.efast.dol.gov](http://www.efast.dol.gov).