

**SUMMARY ANNUAL REPORT FOR
THE MOSAIC COMPANY COMPREHENSIVE WELFARE BENEFIT PLAN**

This is a summary of the annual report of The Mosaic Company Comprehensive Welfare Benefit Plan (Employer Identification Number 20-1026454, Plan Number 501) for the plan year 01/01/2022 through 12/31/2022. The annual report has been filed with the Employee Benefits Security Administration, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

The Mosaic Company has committed itself to pay certain health, prescription drug, flexible spending account, temporary disability, and dental claims incurred under the terms of the plan.

Insurance Information

The plan has insurance contracts with Cigna Health And Life Insurance Company And Affiliates, Prudential Insurance Company Of America, Life Insurance Company Of North America, Fidelity Security Life Insurance Company And Cigna Health And Life Insurance Company to pay certain vision, life insurance, long-term disability, accidental death and dismemberment, business travel accident, health, dental, employee assistance program, evacuation, medical benefits abroad claims incurred under the terms of the plan. The total premiums paid for the plan year ending 12/31/2022 were \$4,786,146.

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:

1. 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 Mosaic Company, the plan administrator, at 13830 Circa Crossing Drive, Lithia, FL 33547 and phone number, 800-918-8270.

You also have the legally protected right to examine the annual report at the main office of the plan: 13830 Circa Crossing Drive, Lithia, FL 33547, 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.