Edwards Lifesciences

2025 Corporate Impact Report

Edwards

Contents

Edwards Lifesciences is the global leader in patient-focused medical innovations for structural heart disease. **Driven by a passion to help patients**, we collaborate with the world's leading clinicians and researchers to address unmet healthcare needs, working to improve patient outcomes and enhance lives.

Letter from our CEO

At Edwards, improving lives is our purpose and guides every decision we make. It shapes how we create lasting value for patients, communities, society and all those who depend on us today and for generations to come. This includes the ways in which we continue to advance sustainability, or what we call our Corporate Impact, in everything we do.

We invest in programs that reduce our environmental footprint, foster diverse perspectives and uphold the highest ethical standards. We do this because sustainable performance and responsible leadership are extensions of our purpose.

We are proud to lead with the most comprehensive structural heart portfolio, because breadth of proven options matters when patients need lifetime care. But it's not just about technology. It's about the lives we impact. Our therapies have restored quality of life for millions, demonstrating the value our innovations create for patients, health systems and society.

Behind every innovation and every patient story are our employees. Their sense of purpose, shared accountability and commitment to belonging ensure they understand how their work improves patient outcomes and strengthens the communities where we live and work.

Our responsibility extends beyond innovation. Through Every Heartbeat Matters, we have reached more than 4 million underserved structural heart patients, and building on this momentum, we have committed to help 2 million more by the end of 2030. Nearly all of our employees participate in charitable activities worldwide, reflecting our shared belief that improving lives also means supporting the communities we serve.

Looking ahead, we will continue expanding our structural heart portfolio and advancing emerging therapeutic areas, focused on innovations that give patients more life and more purpose within it. I am inspired by our global team's passion and integrity as we build a future defined by shared purpose, transparency and innovation that improves patient lives and supports a more sustainable world.

Bernard Zovighian | *Chief Executive Officer*

Introduction

Our Credo

At Edwards Lifesciences, we are dedicated to providing innovative solutions for people fighting cardiovascular disease.

Through our actions, we will become trusted partners with customers, colleagues, and patients — creating a community unified in its mission to improve the quality of life around the world. Our results will benefit customers, patients, employees, and shareholders.

We will celebrate our successes, thrive on discovery, and continually expand our boundaries. We will act boldly, decisively, and with determination on behalf of people fighting cardiovascular disease.

Helping patients is our life's work, and *life is now*

Edwards at a Glance

Leading with strength, scale, and reach

to fund innovation globally

5 Plants
across the globe

for a resilient supply chain

INNOVATION

1,600+
engineers

SCALE

100+
countries

As Edwards leads, everyone benefits

Innovation brings clinical and economic value to the healthcare ecosystem

16,000+
employees dedicated to patients and community impact

Every Heartbeat Matters to help

2 million
more underserved structural heart patients by the end of 2030

A culture built on transforming care for millions of Structural Heart patients

2025 Corporate Impact Highlights

We are proud to focus on creating positive impacts that benefit our patients throughout everything we do. In addition to the accomplishments listed below, please see our 2025 Annual Report and 2026 Proxy Statement for more information about progress in 2025.

Key Accomplishments in 2025

1 Million+ patients treated

Achieved treating more than 1 million patients with Edwards' transcatheter technologies

3.5 Million lives improved

Edwards and Edwards Foundation's Every Heartbeat Matters community of partners surpassed its 2.5 million 2025 milestone goal by improving the lives of 3.5 million underserved patients since 2020

1 Billion+ invested in R&D

(17.8% of sales)

10,000+ patents

Included corporate impact focus areas in the CEO's performance goals annually

Annual top talent retention resulted in voluntary turnover less than high-performing benchmarks

100% complete

All new employees completed Code of Conduct training within 60 days of start date

100% complete

All global employees completed unconscious bias training, and new hires completed the training within six months of employment

Achieved a 20% absolute reduction in Scope 1 and 2 greenhouse gas (GHG) emissions over the prior year

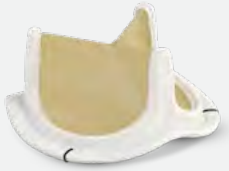
Highly engaged workforce that exceeded industry, region and high-performing benchmarks for employee engagement

American Heart Association.

Founding sponsorship of the American Heart Association's Heart Valve Initiative, a national effort to improve care and outcomes for more than 28 million people living with heart valve disease worldwide

Received FDA and CE Mark approval for the SAPIEN M3 mitral valve replacement system, the first transseptal transcatheter therapy for patients with symptomatic mitral regurgitation who are not candidates for surgery or edge to edge repair

Announced new eight-year data showing patients receiving aortic surgical valves made from RESILIA tissue technology showed significantly improved long term outcomes compared to those receiving non-RESILIA bioprosthetic valves



THE PARTNER 3 TRIAL

Announced seven-year data from the PARTNER 3 trial, reaffirming the early and sustained patient benefits of Edwards TAVR

2025 Corporate Impact Highlights

In Progress

Remove Barriers

along the patient journey to continuously increase treatment rates for all indicated severe aortic stenosis (AS) patients

Raise

awareness and launch new therapies

treating the "forgotten" tricuspid valve, enabling access to life changing treatment option for patients with severe tricuspid regurgitation (TR)

Collaborative patient engagement

Ensure that our therapies are addressing the needs of patients through an increasingly collaborative patient engagement process

Empower

and activate patients

by meaningfully increasing awareness of structural heart disease globally

42% *Reduction*

Reduce absolute Scope 1 and 2 greenhouse gas emissions 42% from a 2021 base year and achieve carbon neutrality by 2030

51.6% *Reduction*

Reduce Scope 3 greenhouse gas emissions 51.6% per USD of value added from a 2021 base year by 2030

Continuous improvement efforts to zero

patient safety-related Class I product removals

No

significant disruption of product availability

Patients First

At Edwards Lifesciences, our unwavering commitment to putting patients first drives everything we do. We are dedicated to transforming patient lives with breakthrough medical technologies and passionate engagement that strengthens our communities. By prioritizing patient needs, we strive to break down barriers to treatment, ensure access to high-quality care and support the well-being of communities worldwide. Our mission is to make a meaningful difference in the lives of patients and their families, every day.

Access to Healthcare

We believe all patients deserve access to innovative, valuable and high-quality care. At Edwards, expanding access begins with our development of breakthrough innovations that elevate cardiovascular care for patients around the world.

Our approach also includes addressing systemic, regulatory, geographic and economic barriers that limit care for underserved patients. We advance public policies that improve access, donate technologies for humanitarian use, support charitable organizations working to strengthen clinical expertise, build patient-care capacity, and improve treatment pathways. Through these combined efforts, we work toward a vision in which all patients can access the healthcare they need to thrive.

Improving Access to Care

To help improve access to care, we design programs focused on addressing the structural heart disease burdens, disparities and obstacles keeping patients from reaching appropriate treatment.

Developing a data-backed understanding of which population segments are at the greatest risk for developing aortic stenosis (AS) and which groups are historically underserved regarding treatment provides us with the opportunity to develop more impactful, targeted outreach efforts.

The following metrics specific to AS patients illustrate several treatment burdens and patient access gaps:

- 1.3 to 1.6 million Americans aged 65 and older have AS.[1]
- Up to 50% of patients with AS will die within two years after the onset of symptoms if they do not receive an aortic valve replacement (AVR).[2]
- Less than 50% of patients with an indication or potential indication for AVR received AVR.[3]
- Black patients with symptomatic severe aortic stenosis (SSAS) have been historically less likely to receive AVR than white patients.[4]
- Women are 9% less likely to receive AVR than men.[5]
- Patients experience significant delays in care, with time from diagnosis to transcatheter aortic valve replacement (TAVR) spanning 157 days and time from diagnosis to surgical AVR (SAVR) spanning 98 days.[6]

1 Owens, et al. (2021). Cumulative burden of clinically significant aortic stenosis in community-dwelling older adults. Heart, 107(18), 1493-1502.
2 Leon, et al. (2010). Transcatheter aortic-valve implantation for aortic stenosis in patients who cannot undergo surgery. N Engl J Med, 363(17), 1597-1607.
3 Li et al. (2022). Trends in Utilization of Aortic Valve Replacement for Severe Aortic Stenosis. J Am Coll Cardiol, 79(9), 864-877.
4 Brennan et al. (2020). Racial Differences in the Use of Aortic Valve Replacement for Treatment of Symptomatic Severe Aortic Valve Stenosis in the Transcatheter Aortic Valve Replacement Era. J Am Heart Assoc, 9(16), e015879.
5 Lowensternet et al. (2021). Sex disparities in patients with symptomatic severe aortic stenosis. Am Heart J, 237, 116-126.
6 Stinis et al. (2026). Real-World Outcomes for the Fifth-Generation Balloon Expandable Transcatheter Heart Valve in the United States. JACC Cardiovasc Interv, 17(8), 1032-1044.

We have developed several patient awareness initiatives to increase knowledge of heart valve disease and treatment options. This year, through the Off the Sidelines program, we created community health and education programs, including public service announcements, with American football teams Rams and Eagles to raise awareness of heart valve disease and supported community screening events. Our external campaigns encourage viewers to access educational resources on AS, information on TAVR as a treatment option for severe symptomatic AS, videos of patients sharing their experiences with TAVR, a discussion guide for talking with a doctor and a list of hospitals that perform TAVR. For more information on these initiatives, please visit screenheartvalvedisease.com and treatheartvalvefailure.com.

We have also developed educational materials for patients, policymakers and healthcare professionals to raise awareness of the patient burden of tricuspid regurgitation (TR). The following TR metrics illustrate the burden and impact of TR on patients and society at large:

- 1.5M+ people in the U.S. are estimated to have moderate or greater TR.[7, 8]
- TR may be missed, delaying critical time to diagnosis and treatment.[9, 10]
- TR patients often have multiple comorbidities, including hypertension, atrial fibrillation (AF), hyperlipidemia, ischemic heart disease, diabetes, obesity, lung disease and renal dysfunction.[11]
- Among patients with severe TR, the risk of readmission for heart failure is 2.3 times higher than patients with no TR.[10]
- Severe TR is estimated to have a >20% mortality rate within 1 year of diagnosis.[10, 12]
- <1% of patients with at least moderate TR are treated with surgery.[6, 13]

6 Stinis et al. (2026). Real-World Outcomes for the Fifth-Generation Balloon Expandable Transcatheter Heart Valve in the United States. JACC Cardiovasc Interv, 17(8), 1032-1044.
7 Cahill et al. (2021). Community prevalence, mechanisms and outcome of mitral or tricuspid regurgitation. Heart, 26(107), 1003-1009.
8 U.S. Census Bureau, 2021
9 Antunes, M. (2017). EurJ Cardiothoracic Surg, 52, 1022-1030.
10 Hahn, R. (2023). Tricuspid Regurgitation. N EngJ Med, 388, 1876-1891.
11 Chorin, et al. (2020). Tricuspid regurgitation and long-term clinical outcomes. Eur Heart J Cardiovasc Imaging, 21(2),157-165.12 Messika Zeitoun et al., 2020 Eur J of HF22 1803-1813
12 Messika-Zeitoun et al. (2020). Impact of tricuspid regurgitation on survival in patients with heart failure: a large electronic health record patient-level database analysis. Eur J of Heart Fail, 22(110), 1803-1813.
13 Fender et al. (2018). Isolated tricuspid regurgitation: outcomes and therapeutic interventions. Heart, 104(10), 798-806.

Improving Quality of Care

Heart Valve Initiative
Edwards is the founding sponsor of the American Heart Association's (AHA's) Heart Valve Initiative, which establishes valve disease as a critical focus area for the organization and aligns patient education, clinician training, systems of care and quality improvement to drive measurable impact. The Heart Valve Initiative will expand the reach of Target: Aortic Stenosis, an AHA program also founded through Edwards' sponsorship. Over the next five years, the Heart Valve Initiative, announced in November 2025, will improve adherence to guideline-based care, beginning with AS, expand data collection to include asymptomatic and moderate AS cases, establish a heart valve certification program for hospitals, advance public reporting and hospital recognition, provide multimedia education for clinicians and patients and launch a national awareness campaign to support informed care decisions.

Target: Aortic Stenosis
The goal of the AHA Target: Aortic Stenosis quality initiative is to enhance the structural heart disease patient experience from symptom onset to appropriate diagnosis and follow-through, to timely treatment and disease management. This initiative focuses on better identification and treatment of patients and provides them with the necessary educational resources. Prior to establishing this program, there were no systematic attempts to measure the quality of care for patients with AS from diagnosis to treatment. Participating hospital sites have access to a learning collaborative for discussing data collection, observations, challenges and best practices. They also regularly interact with a scientific advisory group of experts who provide strategic direction, characterize the quality of management of AS patients and respond to input and feedback from the learning collaborative.[14] Edwards is the founding sponsor of Target: Aortic Stenosis.

Global Health Economics and Reimbursement

The mission of the Global Health Economics and Reimbursement (GHER) team is to increase patient access to structural heart technologies by supporting customers' and healthcare systems' efforts in improving patient outcomes and generating real-world evidence to identify and address gaps in patient access to care. This collection of evidence guides policy and reimbursement choices that accelerate patient access to innovative therapies. We strive to demonstrate that our therapies are not only clinically impactful for patients but also deliver value to healthcare systems and society. It can be a challenge when healthcare systems are unequipped to quickly adopt new technologies that improve patient care. We seek to bridge this gap by providing robust health economic evidence, real world insights, and practical tools to hospitals and healthcare systems adopting our therapies.

We pursue research on the cost-effectiveness of our technologies and the value they provide to patients. For example, Edwards supported research published in 2022 in the Journal of Medical Economics, which provides a cost-benefit analysis of TAVR availability for U.S. SSAS patients. The study shows that the availability of TAVR leads to net monetary benefits of $212,199 per patient and $43.4 billion for the entire population. Most of these monetary gains are attributed to the increased adoption of treatment.[15]

14 Lindman et al. (2023). Target Aortic Stenosis: A National Initiative to Improve Quality of Care and Outcomes for Patients With Aortic Stenosis. Circ Cardiovasc Qual Outcomes, 16(6), 432-436.
15 Sevilla et al. (2022). Cost-utility and cost-benefit analysis of TAVR availability in the US severe symptomatic aortic stenosis patient population. J Med Econ, 25(1), 1051-1060..

Building on this evidence, we continue to demonstrate the value of proactive disease management in the management of aortic stenosis, where the timing of intervention is critical. Early intervention before symptom onset is associated with improved clinical outcomes and lower healthcare utilization. A 2025 publication in the Journal of the American Heart Association reported that delaying AVR until patients become symptomatic or clinically unstable was associated with poorer outcomes.[16] Patients experienced approximately 2.2 additional days in the hospital during the initial stay, fivefold higher rates of heart failure-related hospitalization, and about $36,000 more in total healthcare costs per patient within the year following AVR, underscoring the clinical and economic value of timely intervention.

Consistent findings have been observed among symptomatic patients undergoing TAVR. In a 2025 publication in Structural Heart, patients undergoing delayed TAVR, defined as treatment occurring more than 90 days after diagnosis or requiring urgent or emergent intervention, had 50% higher relative risk of mortality, a 59% higher relative risk of heart failure hospitalization.[17]

The economic value of early TAVR in patients with asymptomatic severe aortic stenosis on a global scale was further reinforced by cost-effectiveness analyses based on early findings from the Early TAVR Trial.[18] From a U.S. healthcare system perspective, these analyses demonstrate that early TAVR represents a high-value, cost-saving strategy. Although associated with higher upfront procedural costs, early TAVR among asymptomatic severe AS patients reduces downstream clinical events and related expenditures, resulting in lower cumulative healthcare costs over time.[19] Consistent results, as presented at the

16 Généreux et al. (2025). Acute Valve Syndrome Before Aortic Valve Replacement: Impact on Clinical Outcomes, Health Care Costs, and Resource Use. J Am Heart Assoc, 14(19), e043486.
17 Vemulapalli et al. (2025). The Clinical and Economic Consequences of Delayed Transcatheter Aortic Valve Replacement. Structural Heart, 100742.
18 Généreux et al. (2024). Transcatheter Aortic-Valve Replacement for Asymptomatic Severe Aortic Stenosis, N Engl J Med, 392(3).
19 Genereux et al. (in press). Early TAVR cost-effectiveness compared to clinical surveillance in patients with asymptomatic severe aortic stenosis in the US. Value in Health.

2025 London Valves Meeting, demonstrated the economic dominance of early TAVR in nine leading European healthcare systems, further underscoring the robustness and generalizability of those findings.[20]

In addition to establishing the economic value of our innovative therapies, we also focus on generating evidence to uncover and understand the barriers within health systems that impede patient access to care. Patient access to TAVR treatment remains a significant challenge. A 2025 publication in Advances in Therapy found that Medicare beneficiaries residing in rural areas without TAVR hospitals faced longer travel distances and significantly lower TAVR utilization, in contrast to patterns observed for more established cardiac procedures, revealing geographical disparities in access to TAVR.[21]

Furthermore, sociodemographic disparities also contribute to delays in care. An analysis published in the Journal of the American Heart Association examining access to aortic valve procedures found that patients living in highly socioeconomically disadvantaged areas underwent approximately 9% fewer TAVR procedures overall, with nearly 12% lower utilization among guideline supported patients aged 80 years and older.[22] More recent Medicare analyses further demonstrate that geographic and socioeconomic gaps in TAVR access contribute to substantial unmet treatment needs and are associated with higher mortality among patients with aortic stenosis.[23]

Together, this body of evidence demonstrates that limited access to TAVR is directly associated with poorer patient outcomes, particularly in semiurban and underserved regions, underscoring the urgent need to expand TAVR capacity and access to advance higher quality, more equitable care.

20 Genereux et al. (2025, October). Cost-Effectiveness of TAVI for Asymptomatic SAS across 9 EU countries [Presentation at the 2025 London Valves Meeting].
21 David et al. (2025). No-Transcatheter Aortic Valve Replacement (TAVR) Zones and Their Effect on Access to Care for Medicare Beneficiaries with Aortic Stenosis. Adv Ther, 42(4), 1716-1728.
22 David, et al. (2024). Limited Access to Aortic Valve Procedures in Socioeconomically Disadvantaged Areas, JAHA, 13(2).
23 David et al. (in press). Determinants of Unmet Demand for Surgery: the Case of Transcatheter Aortic Valve Replacement. Value in Health.

Patient Experience and Voice

Our global Patient Engagement team aims to improve patient experience through advocacy and outreach, better incorporate the patient perspective into our business strategy and enable meaningful patient-driven innovation. To align the whole organization with the goals of this function, our CEO has a performance management objective to facilitate employee exposure and interaction with patients, which contributes to our focus on patient experience.

Amplifying the Patient Voice Through Partnerships
We proudly support patient advocacy groups through grants, sponsorships and charitable contributions, because we believe that these stakeholders are critical in understanding and improving the care cycle. Edwards currently partners with organizations that aim to improve the diagnosis, treatment and physical and emotional management of heart valve and cardiovascular disease.

Edwards Foundation also supports charitable organizations dedicated to humanitarian treatment of structural heart patients facing barriers. To learn more about the Every Heartbeat Matters initiative and the organizations with which we partner, please refer to the "Every Heartbeat Matters" section of this report.

The Patient Experience Events
Our annual Patient Experience events are important components of Edwards' patient-focused culture. In 2025, we hosted these events at 20 locations around the globe and included virtual engagement with five manufacturing facilities. During the events, we welcomed patients and their care partners to our sites to strengthen impactful connections among patients, employees and external partners. These engagements provide our teams with important insights into the patient journey, from symptoms and diagnosis, through treatment and recovery, to help us better understand what patients are experiencing and inform future patient engagements. These events remind our team of the importance of our work, giving patients the opportunity to meet the individuals behind their life-saving devices and forge connections with other patients and patient advocacy groups.

Patient and Customer Support
The Edwards Patient Support Center (PSC), established in 2020, provides information on heart valve disease, treatment options and post-procedure care. The PSC allows patients and caregivers to ask questions to trained Edwards employees throughout their entire treatment journey, including inquiries about new products, clinical trials, medication compatibility, magnetic resonance imaging (MRI) safety and a wide range of specific medical care questions. If a patient or caregiver reaches out to the PSC seeking medical advice, our team directs them to follow up with their physicians or offers to connect them with a physician in their area. The PSC has proven to be an important tool for monitoring emerging trends in patient needs.

Since launch, we have seen increasing engagement with the PSC every year, and in 2025, inquiries increased by 15% compared to 2024. In 2025, we also launched a new survey program to measure how well the PSC team engages with those who contact the PSC. Of those who completed the satisfaction survey, 93% responded they were very satisfied or satisfied with the level of service they received, and 92% are very likely or likely to utilize PSC again if they have another question. In addition, we proactively conduct biennial customer satisfaction surveys through engagement with the hospitals where Edwards' products are used.

Patient Engagement
Another way we gather feedback from patients is by conducting patient preference research. Through this scientific approach, we aim to understand the patient experience at

each step of the treatment journey and quantify what matters most to patients. We take the feedback gathered and use it as an input to our Product Development Process (PDP) and to help inform decision-making. Many times, this patient-based data is also published in peer-reviewed journals.

We aspire to elevate clinical understanding among patient advocacy groups, patients and other key stakeholders by delivering peer-reviewed plain language summary publications (PLSP) of scientific manuscripts, which communicate significances of scientific information to lay audiences in an accessible, non-technical language. In 2025, a study assessing the performance, safety, and durability of a new bioprosthetic aortic valve after up to seven years in the heart: a plain language summary, which is a lay summary of the COMMENCE 7-year data, was published by Future Cardiology.[24]

We seek diverse patient perspectives through listening sessions with patients and their care partners throughout the year. The patient listening sessions are learning opportunities for our employees and help drive innovation, inform business decisions and increase employee-patient connectivity.

In 2025, thousands of employees globally connected with patients through listening sessions during live meetings, such as quarterly business reviews, sales meetings, employee forums and external stakeholder events. They also heard patient stories through videos and presentations at various events. These sessions help us learn directly from patients about their journeys with structural heart disease, guiding our efforts to improve patient access to treatment and health outcomes.

In May 2025, we hosted our 9th annual flagship Patient Experience event in person at our global headquarters in Irvine, California. We welcomed 100 patients and care partners, with in-person participation from thousands of employees over two days. During the event, we hosted 27 patient listening sessions, with 3,000 employees attending one or more sessions, including for the first time, virtual attendance by field-based employees.

24 Beaver et al. (2025). A study assessing the performance, safety, and durability of a new bioprosthetic aortic valve after up to seven years in the heart: a plain language summary. Future Cardiology, 21(10), 739-751.

Global Corporate Giving

At Edwards, supporting structural heart patients who face barriers and improving the health of our local communities are woven into our culture. We create meaningful opportunities for employees around the world to engage in charitable giving and community volunteerism, and their passion strengthens both our company and local communities.

Edwards and Edwards Foundation support charitable organizations in many ways, including through contributions, donated technologies for humanitarian care, employee volunteerism and our matching of employee gifts to charities. Together, these efforts help expand access to care for structural heart patients and uplift global communities.

Edwards Foundation has two focus areas:

- Every Heartbeat Matters (EHM) focuses on impacting the lives of underserved structural heart patients.
- Strengthen Our Community (SOC) aims to improve social determinants of health for underserved people in the global communities where our employees live and work, focusing on community health, access to high quality education and economic opportunities.

Every Heartbeat Matters

Our global health initiative, EHM, is grounded by our belief that everyone deserves access to structural heart care. EHM, led by Edwards and Edwards Lifesciences Foundation, is committed to improving access to treatment for structural heart patients facing barriers. Edwards' expertise, employees and technology can make the greatest impact by enabling underserved patients to receive treatment that they otherwise would not receive. We prioritize clinical education on structural heart treatment, where clinician resources and training are limited, which exponentially impacts patients and drives sustainability. With over $100 million in financial, technology and talent donations since 2014, EHM has built a community of global health and charitable partners that has improved the lives of over 4 million structural heart patients.

Through the dedication of our EHM partners, the Foundation has improved the lives of 3.5 million underserved structural heart patients in the past five years alone — and we're just getting started. We're now launching a bold new EHM 2030 strategy, focused on increasing patient treatment and strengthening clinical capabilities to care for an additional 2 million cardiovascular patients who need it most.

EHM Pro Bono Corps

Together, Edwards Foundation and the EHM community will remain committed to underserved and high-risk patients around the world. The EHM Pro Bono Corps, funded by Edwards Foundation, is a talent-driven, skills-based volunteer program that deploys Edwards employees to strengthen the capacity of our EHM partners who impact underserved structural heart patients. Through immersive, on-the-ground consulting engagements, employees apply their expertise in clinical education, quality improvement, health systems, data analysis and strategic planning to help partners expand access to and elevate standards of care.

In 2025, this commitment came to life in Vellore, India, where a diverse global team partnered with the American College of Cardiology and CMC Vellore to improve patient pathways for structural heart disease. What began as a project focused on enhancing clinical education and quality quickly grew into a broader plan to reduce costs and reinvest savings so more charitable patients could receive free treatment. Employees gained a profound appreciation for the patient journey along the way as they witnessed firsthand the realities of poverty, listened to patient stories and observed life-changing structural heart procedures. The impact was immediate exemplified by a patient whose in-hospital recovery time was shortened by multiple days. These experiences illustrate how the EHM Pro Bono Corps amplifies Edwards' and Edwards Foundation's mission by pairing our people, expertise and compassion to expand access for those who need it most.

Strengthen Our Community

At Edwards, a genuine passion for and commitment to helping people runs through our global workforce. Every action, including our volunteering and monetary and in-kind donations, leads to a world-class level of engagement in charitable activity.

We nurture this culture by offering meaningful ways for employees to contribute, including our Global Month of Giving, which is a month of opportunities to volunteer, donate and engage with local charities. During the month of October 2025, approximately 6,000 employees took action to support more than 70 charitable organizations at 25 Edwards locations around the world.

Edwards' SOC committee, representing leaders from more than 25 Edwards sites, plays a key role in connecting employees with organizations addressing local needs. These cross-functional teams identify opportunities for employees to share their time and talents, aligning community needs with local skillsets. Committees meet quarterly to exchange insights and strengthen charitable efforts across regions. We also equip employees with resources to engage in ways that matter most to them through toolkits and resources like our new Volunteer Portal, making it easy to create, manage and sign up for global volunteer opportunities. Through the enthusiasm and generosity of our employees, we continue to create meaningful, positive impacts in the communities where we live and work around the world.

19 million
in charitable giving globally

In 2025, Edwards and Edwards Foundation provided a total of $19 million in charitable giving globally. Highlights include:

- Approximately $12 million in Foundation giving
- Approximately $5 million in donations of Edwards technologies for humanitarian care
- Almost all of our giving focused on underserved patients and people
- Employees supporting the needs of our EHM partners in India via our EHM Pro Bono Corps
- Amplified employee giving through more than $1 million in Employee Matching Gifts
- Other corporate giving and in-kind donations of approximately $300,000 supporting schools, charities and shelters

Products

Product Safety and Quality

Our Quality Strategy

Our commitment to Edwards' patient-focused innovation strategy remains our focus as we continue to transform our quality system for the future. In 2025, we made significant progress by updating our long-term strategic direction in support of Edwards' business goals. We also reinforced our manufacturing processes and innovation procedures to maintain our commitment to quality and compliance, while also supporting scientific discovery and increasing the pace of innovation. We worked closely with applicable regulatory bodies to develop new methods for testing product quality that comply with the changing regulatory environment, and we continue to adopt and develop digital solutions to support the growth of our business. While designing these improvements, we considered how to enable employee engagement, creativity and focus to encourage the continued development of industry-leading solutions.

Delivery of high-quality products is key to our culture, reputation, business and our role as a trusted partner, and we believe that quality is the responsibility of all Edwards employees. During onboarding, we train all employees on the components of our Quality

Management System (QMS) through a combination of in-person and online courses. The depth and breadth of the assigned training varies based on each individual role and its associated impact on product and patient safety. Similarly, we require employees to complete annual training and recertifications on the QMS commensurate with the potential impact of their role on product or patient safety. We maintain a steadfast focus on providing high-quality products that meet our rigorous standards for safety and efficacy. We utilize our robust QMS and manufacturing processes to minimize risk of patient disruption. In 2025, we had one Class I recall associated with a product that is included in the EnableCV divestiture. Complete information on medical device recalls in the U.S. is available through the Food and Drug Administration (FDA)'s publicly available database.

With input and guidance from the Board of Directors (Board) who review and approve Edwards' corporate strategy, the CEO and the Senior Vice President (SVP), Quality and Regulatory Compliance (Chief Quality Officer (CQO)) set Edwards' Product Quality and Safety strategy, policies and targets. The CQO is responsible for evaluating company performance, aligning our strategy to relevant product safety regulations, assessing product quality and safety data through a company-wide dashboard and providing updates to the Executive Leadership Team (ELT) and the Board. The Heads of Quality for the Business Units, SVP Quality, International and Strategic Sourcing and SVP, Corporate Quality, Regulatory and Clinical, report directly to the CQO and support the strategy development process. The Heads of Quality for the Business Units are responsible for product-level specifications to comply with applicable regulations. All members of the Quality and Global Supply Chain teams are evaluated based on the quality performance dashboard.

Regulatory Compliance for Quality

Edwards must comply with strict regulatory requirements regarding the design, development, manufacture and distribution of our products and services. The regulations impacting Edwards' activities are set by governing bodies such as the U.S. FDA, European competent authorities, the International Organization for Standardization and other similar organizations in countries where we manufacture and distribute our products. Regulators, notified bodies and independent outside auditors regularly audit and verify our quality standards and provide regulatory approvals and applicable certifications.

We designed the Edwards company-wide Quality System, managed by our Corporate Quality Team and defined in our Quality Manual, to ensure our products and services satisfy customer requirements while complying with regulatory requirements in every country where we do business.

The regulatory requirements we adhere to include, but are not limited to, the following:

- ISO 13485:2016 Medical Devices – Quality Management Systems – Requirements for Regulatory Purposes
- ISO 14971:2019 Medical Devices – Application of Risk Management to Medical Devices[24]
- U.S. Federal Food, Drug, and Cosmetic Act
- 21 CFR Part 11 – Electronic Records; Electronic Signatures
- 21 CFR Part 58 – Good Laboratory Practice for Nonclinical Laboratory Studies
- 21 CFR Part 820 – Quality System Regulation
- (EU) 2017/745 – European Medical Device Regulations
- Canadian Medical Device Regulations (CMDR)
- Medical Device Single Audit Program (MDSAP)
- Japan Pharmaceutical and Medical Device Act (PMD Act)
- Australian Therapeutic Goods Act 1989 and associated regulations
- Brazilian Good Manufacturing Practices (RDC ANVISA 665/2022)
- China Regulations on Supervision and Administration of Medical Devices (Decree No.739)
- Medical Devices Act (MDA) – Korea

24 For manufacturers of medical devices, ISO 13485:2016 is a widely accepted standard for demonstrating compliance to certain worldwide laws and regulations. The ISO standard defines the comprehensive requirements for a Quality Management System and enables a consistent output. The Edwards Lifesciences LLC ISO 13485:2016 Certification includes the design, development, production and distribution of:

- Biological Surgical Heart Valves and Accessories (Delivery System and Inflation Device, Handles, Sizers, Trays, Suture Fastener, Heart Support Device)
- Transcatheter Heart Valve Systems (Biological Heart Valves, Delivery Systems, Balloon Catheters) and Accessories (Access Devices, Inflation Devices, Crimpers)
- Transcatheter Valve Repairs and Replacement Systems (Implants, Delivery System) and Accessories (Insertion Accessories, Loading System, Dilator Kit, Stabilizer, incl. Base and Plate)
- Annuloplasty Rings and Accessories (Handles, Sizers, Trays)
- Biological Pericardial Patches for the Area of Heart Valve Replacement, Repair and Reconstruction
- Catheters, Cannula and Occlusion Devices and Accessories (Introducers Sheaths, Percutaneous Insertion Kits)
- Hemodynamic Monitoring Equipment and Disposables; Medical Devices used for the Diagnosis of Coronary Artery Disease; Medical Devices used in the Diagnosis and Treatment of Peripheral Vascular Disease; and Medical Devices for the Treatment of Diseases of the Heart and the Central Circulatory System

If a product fails to meet safety or regulatory requirements, a cross-functional team performs an in-depth assessment to determine whether a field corrective action is needed. This team includes the CQO, SVP of Product Safety, SVP Corporate Quality, Regulatory and Clinical and the Quality Management Representative of the relevant business unit.

Internal Quality Controls

We use a Global Product Complaint Handling System to collect, analyze and manage customer feedback regarding Edwards' products. We provide appropriate training to employees, and we require them to report customer complaints no more than 48 hours after receipt. We assess all feedback to continually improve our products to meet customer and patient needs.

The Edwards Production System

To complement our overarching Quality System, we have initiatives to streamline and improve our product manufacturing processes. Through the Edwards Production System, we aim to reduce waste, use inventory more efficiently and reduce cycle times, all while improving the quality and performance of our products. We plan to create our Smart Factories based on Lean and Six Sigma principles, with focused investments in digital solutions, strategically sequenced to advance the way we manufacture our products and enable growth. We will also incorporate the automation of critical inspections, manufacturing execution systems (MES) and Supervisory Control and Data Acquisition (SCADA). Each manufacturing process has robust testing, inspection and built-in quality measures to ensure we prevent or identify product non-conformances before products are released to customers.

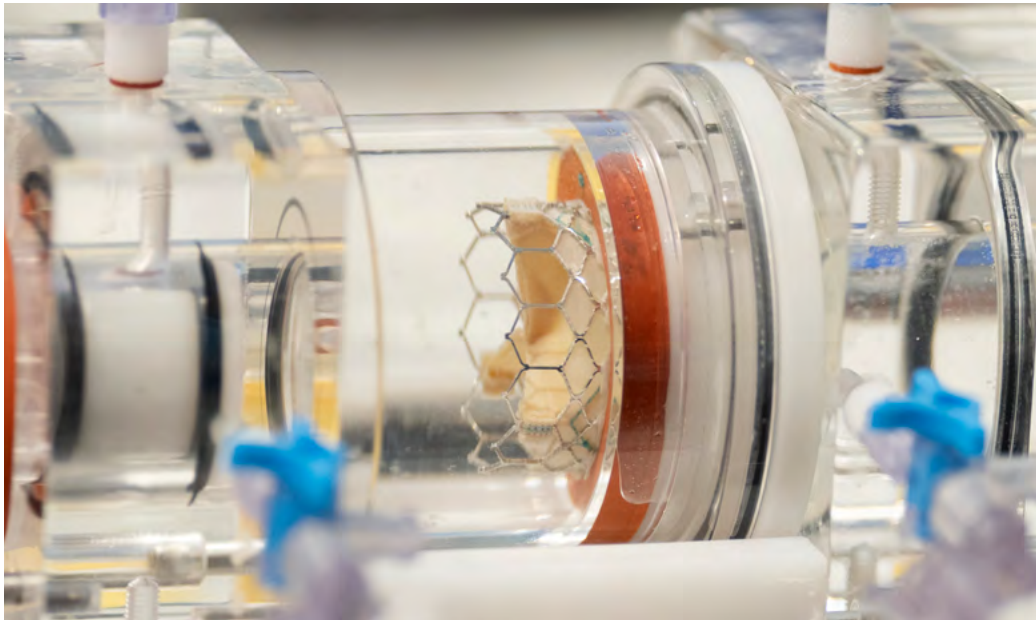
Managing Clinical Research

Clinical research is a critical component of our ability to create products that address the unmet needs of patients. We follow all applicable regulatory requirements and are committed to the highest ethical standards in our clinical research. We follow all applicable federal, state and local laws, rules and regulations pertaining to the conduct of the study, including standards for good clinical practice to protect patient safety.

For all our clinical studies, patients complete the informed consent form and, if in the U.S., Health Insurance Portability and Accountability Act (HIPAA) Authorization processes prior to the initiation of research activities. Applicable clinical studies are conducted with the initial and continuing approval of an independent Ethics Committee or Institutional Review Board, and we routinely use independent Data Safety Monitoring Boards and/or Clinical Event Committees in accordance with FDA Guidance for clinical trial sponsors.

FDA Case for Quality Program

Edwards is actively engaged in the FDA's Case for Quality program, which is intended to promote quality excellence beyond compliance, encourage continuous improvement and develop trusted relationships with a partnership with the FDA to ensure innovation doesn't create regulatory risk.



Product Design and Innovation

At Edwards, we consider the topic of Product Design and Innovation to include our efforts to incorporate a needs-driven approach to designing products to better meet the needs of patients, physicians and health care systems, as well as our efforts to invest in research and development and employ innovative methods to improve design and performance of products.

We focus on understanding the unmet needs of our stakeholders — patients, providers and healthcare systems, as well as payors and regulators — all of which help us drive a path for development of products for patients. Some of that development is through external partnerships on early-stage technologies. But more often, it is through our own organically grown ideas, which we drive through a process of testing, clinical use and development of evidence for a PDP. We deploy this process as we look to expand our footprint into new areas of structural heart disease, as well as with our teams focused on evolving our existing technology platforms to help even more patients.

Our rigorous PDP incorporates multiple rounds of review from specialty teams as stage gates at critical points in the development lifecycle. We also use our QMS to establish requirements that we must consider to manage risk. To learn more about our QMS, please visit the "Product Safety and Quality" section of this report.

We regularly evaluate the need for new policies, procedures and programs to improve our product design and innovation approach. We remain competitive as a company primarily because our products and services help deliver excellent clinical outcomes. We generate extensive data to support our products and services, and we continue to develop innovative features that enhance patient benefit, product performance and reliability. For more information about our use of raw materials and manufacturing process, please visit our 2025 Annual Report.

In 2025, we made significant investments in research and development as we worked to develop therapies that we believe have the potential to change the practice of medicine. Research and development expenses represented 17.8% of 2025 sales. This increase was primarily the result of continued investments, both internal and through acquisitions, in our transcatheter innovations, including increased clinical trial activity. We are engaged in ongoing research and development to deliver clinically advanced new products, to enhance the effectiveness, ease of use, safety and reliability of our current leading products and to expand the applications of our products as appropriate. We focus on opportunities within specific areas of structural heart disease.

A considerable portion of our research and development investment includes clinical trials and the collection of evidence that provides data for use in regulatory submissions and required post-market approval studies involving applications of our products. Our investment in clinical studies also includes outcomes and cost-effectiveness data for payers, clinicians and healthcare systems. Our experienced research and development staff are focused on product design and development, quality, clinical research and regulatory compliance. To pursue primary research efforts, we have developed alliances with several leading research institutions and universities and work with leading clinicians around the world in conducting scientific studies on our existing and developing products. For more details on our product innovations, please see our 2025 Annual Report.

Strategy and Execution

The ELT has several opportunities throughout the year to review and analyze our product portfolio and development strategy, including during the enterprise-wide Strategic Planning process, the Annual Operating Plan (AOP) process and other ELT meetings. For more information about our strategic approach and how we set objectives, please see our 2026 Proxy Statement.

We establish product design and innovation goals that contribute to our efforts to deliver on our strategy. The leadership team of each business unit is deeply involved in the realization of our pipeline innovation strategy as well as in detailed design decisions across the PDP. In this way, these leaders provide their input and expertise during the stages of new product conception, prototype, clinical trial, regulatory approval and launch.

Managing Regulatory Changes

The medical technology industry is dynamic and subject to significant change due to cost-of-care considerations, regulatory reform, industry and customer consolidation and evolving patient needs.

To monitor the changing regulatory landscape, functional teams across Edwards partner closely with Edwards' Regulatory Affairs teams across the globe. Through this collaboration, we bring together subject matter experts and our team members with deep experience in tracking, understanding and communicating emerging and existing regulations. If there are changes to existing regulations with which Edwards complies, we have an internal process for reviewing and determining the appropriate response. For more details on regulations in and outside of the U.S., please see our 2025 Annual Report.

Packaging Design and Innovation

An important element of our ability to deliver life-saving technologies is the packaging we use to protect, contain and globally distribute our finished medical products. We follow the International Organization for Standardization (ISO) 11607 standard for packaging terminally sterilized products. We continue to develop our packaging design process to enable safe, efficient and cost-effective product delivery.

Through this innovation process, we also explore environmentally sustainable packaging solutions to decrease the emissions and waste impacts created by the transportation and use of our products. For example, all new product packaging projects will exclude the use of polyvinyl chloride as a packaging material for sterile barrier systems. We will continue monitoring and evaluating the suitability of progressions in primary packaging materials. Additionally, our ongoing packaging research and development initiatives are evaluating ways to simplify material structures, reduce our cold-chain carbon footprint and advance alternative materials that comply with evolving regulatory and sustainability requirements. In addition, we implemented electronic instructions-for-use for all of our applicable business regions, and all new product development launches since 2022 include electronic instructions-for-use.

Because we recognize that collaboration is the key to driving an environmentally sustainable medical packaging ecosystem, Edwards has been a member of the Health Care Packaging Recycling Council (HPRC) since 2022. This strategic partnership helps drive innovation, working with upstream materials suppliers and downstream hospital customers and recyclers to collectively reduce the industry's environmental impact. Close collaboration with other medical technology manufacturers will enhance industry knowledge and further accelerate Edwards' environmental sustainability efforts, resulting in pathways to better recycle medical packaging material waste.

Our People

Human Capital Management

To achieve our patient-focused innovation strategy, we must attract, select, retain, train and engage the best talent available. Consistent with that goal, Edwards broadly recruits candidates and always selects the best candidate available for a role. Our 16,000 employees share a passion for improving the lives of patients, and Edwards strives to equip and support this team and each employee to enable Edwards' success. For more information about our human capital management (HCM) strategy, including our governance structure, performance management goals tied to compensation, our culture, benefits and well-being, employee surveys and talent development, please refer to the "Human Capital Management" section in our 2025 Annual Report.

Talent and Leadership Development

Edwards has established a long-term aspiration to grow and develop talent, centering our efforts around critical leadership and technical skills for the present and future needs of the business. Our learning and development structure and processes strive to meet the internal demand to develop our talent in such a way that demonstrates impact at scale and is delivered to our workforce through optimized learning modalities.

We offer a range of programs to help employees deepen and expand their knowledge, including:

- Technical Centers of Excellence and informal learning communities of practice focused on enhanced technical capability and skills development
- A global leadership development curriculum, Aspire, covering areas such as critical thinking, strategic execution, effective conversations, communicating among different personalities, leveraging diversity and emotional intelligence
- Several nomination-based programs, including the Accelerated Development Program, that are designed to build leaders for the future by offering employees challenging programming, coaching and assessments as well as a charitable leadership element that is focused on linking future leadership behaviors with our patient-focused culture and innovation-focused business strategy
- A career development site that houses our tools regarding future-focused development and a framework for both leadership capabilities and technical skills for the future; this site also houses information about learning opportunities offered through our university partnerships with University of California, Irvine, eCornell and Massachusetts Institute of Technology (MIT)
- Tuition assistance for job-related continuing education and degree programs

Our Accelerated Development Program provides the opportunity for select employees to accelerate their leadership capabilities through targeted development and executive support. The program also includes a charitable leadership element that is focused on linking future leadership behaviors with our patient-focused culture and innovation-focused business strategy.

Mentoring Programs

We offer several mentoring programs across Edwards to help facilitate deeper employee connections, build internal talent, share knowledge and increase workforce engagement and satisfaction. Over the years, we have seen a strong connection between participation in mentorship programs and employee retention.

In 2025, we continued to offer mentoring opportunities (traditional, speed and peer circles) which are also embedded in some of our other development programs. These additional modes of mentoring allow employees to receive guidance and support in a way that better suits their preferences and schedules.

Employee Health and Well-Being

Good health is the foundation for great performance, both at work and at home. That's why we offer a comprehensive benefits and well-being program designed to support the whole person, including health insurance, savings accounts, family support services, which may include paid family leave in select locations as well as other site-specific programs tailored to local needs. We continuously review and enhance our benefits to remain competitive and meet the unique needs of our workforce.

Our approach focuses on five key areas of health: mental well-being, metabolic health, heart health, musculoskeletal health and cancer care and prevention. These programs provide education, resources and tools such as screenings, early detection initiatives and guidance for managing chronic conditions. Mental well-being remains central through our Mind+ program, which offers personalized Well-being Action Plans to help employees set goals and make meaningful behavior changes. Mind+ also includes Employee and People Leader Guides with practical tips for caring for mental health, checking in on colleagues and navigating conversations, as well as leader videos that provide guidance on fostering a supportive environment and normalizing mental health discussions.

Globally, we offer programs like the Headspace mindfulness app, which supports sleep, focus and resilience, and the Global Movement Challenge to encourage physical activity and connection among employees. Many of our sites feature on-site fitness centers, basketball courts, walking paths and open fields for soccer and other outdoor activities. Some locations provide cycle-to-work facilities, locker rooms and showers to make active commuting easier. At our global headquarters in Irvine, California, employees have access to on-site health clinics, preventive care services and wellness programs, which are all designed to make healthy choices convenient and accessible.

We believe that when employees feel their best — physically, mentally, and emotionally — they thrive at home and at work, helping us fulfill our mission to improve lives worldwide.

A Culture of Belonging

Our efforts to attract, select and retain the best talent have enabled Edwards' success and have resulted in a broadly diverse global team. For more information about our culture of belonging, please see our 2025 Annual Report.

It is the policy of Edwards not to discriminate or allow the harassment of employees or applicants on the basis of sex, gender identity, gender expression, sexual orientation, age, race, color, religion and many other characteristics. For more information, please see our Equal Opportunity Policy. We also include a non-discrimination clause in our Supplier Code of Conduct (Supplier Code).

We strive to develop a diverse and engaged workforce across geographic boundaries and leadership levels. For more information about our employee demographics, please see our ESG Metrics and our EEO-1 statement.

Annually, we host a range of events aimed at reaching broad talent pools, educating employees about our initiatives and creating leadership opportunities for employees from different backgrounds and experiences. These events include:

- Providing internships to young adults with intellectual and developmental disabilities so they may gain work experience with a goal of transitioning into regular employment
- Organizing employee experience listening sessions, which allows the opportunity to connect with a variety of different groups within Edwards and gather feedback and ideas for our talent strategies
- Hosting fireside chats designed to promote a culture of inclusion and belonging by spotlighting executive leaders with diverse backgrounds and encouraging them to share their journeys

Engaging Employees

Through our Employee Resource Groups (ERGs), we create a dedicated space for all of our employees to come together, support one another and advance their development and careers. The four pillars of our ERG program are professional development, education and awareness, recruiting and community outreach. Each ERG has a sponsor from the ELT, is led by employees, and is open and inclusive for all employees who are interested.

Our ERGs positively contribute to employee engagement and satisfaction. Past results from our employee engagement survey have shown that employees who participate in our ERGs and mentorship programs are more likely to have a positive perception of Edwards. The ERGs also provide avenues for employees to engage with communities, particularly groups within communities with which we might not have otherwise connected. Overall, our ERG program deepens our understanding of different cultures, people and experiences. They allow us to support and empower employees to expand their networks, foster community and belonging and accelerate their growth and development.

We understand the comfort, education and connection that employees can experience when they are able to process complex topics together in a dedicated space. Our internal platform, Community of Support, allows employees to engage in meaningful discussions and offers tools and resources to foster constructive dialogue.

We are excited to share that in 2025, our ERG network continues to thrive with 13 groups and 52 chapters, all of which support and meet the diverse needs of our employees. Our ERGs lead company-wide educational activities throughout the year, including during Black History Month, Asian American and Pacific Islander Heritage Month, Women's History Month, Pride Month and Autism Acceptance Month. We appreciate these opportunities to celebrate the cultures, identities and backgrounds of our employees and patients.

In 2025, our ERGs held more than 325 events around the world. We also hosted a day dedicated to sharing the mission and progress of our strategy and celebrating the value and impact of our ERGs.

We encourage our ERGs to collaborate and embrace intersectionality, fostering a more inclusive and supportive environment for everyone, which they did in the following ways:

- **Joint Events and Workshops:** The Network of Women, Friends of Veterans and Multicultural ERGs often collaborate to host events and workshops that address common interests or challenges.
- **Professional Development, Mentorship and Networking Programs:** Our Multicultural, NextGen and Network of Women ERGs work together to create a cross-group mentorship and networking program where members from various backgrounds mentor each other.
- **Awareness Campaigns:** Let's Talk Mental Well-being, Friends of Veterans and Enable ERGs join forces to run awareness campaigns on topics like mental health and disability awareness. By pooling their resources and expertise, they can reach a broader audience and have a greater impact.
- **Connection Groups:** These groups aim to provide support tailored to more specific aspects of each community. The Fertility, Adoption and Fostering Hope, Working Parents, Rainbow Alliance, Enable and Let's Talk Mental Well-being ERGs offer regular peer-to-peer support connections to discuss relevant topics and share resources.
- **Community Service:** All ERGs team up for community service projects throughout the year, combining their efforts to make a positive impact both within and outside the organization. During Heart Month and the Global Month of Giving, they expand their reach to promote cardiovascular health in under-resourced communities.

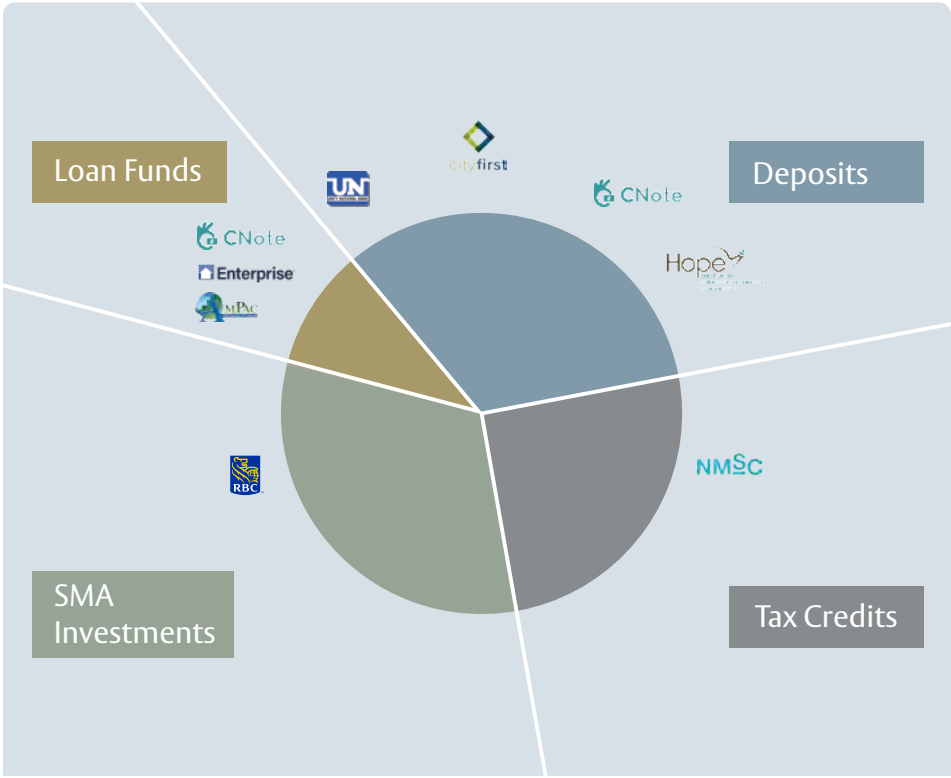
Preventing Unconscious Bias

Achieving Edwards' patient-focused innovation strategy requires effective teamwork, where each of our employees can contribute their talents and experience to advance Edwards' mission. To increase awareness about and help combat unconscious bias, we require all employees to complete an e-learning module on the topic. We designed the course to help employees learn to identify bias and its impacts on decision-making, increase cultural competency skills to work more effectively within a diverse group and develop the skillset of curiosity and empathy to build connections. In 2025, 100% of all employees hired between 2018 and June 2025 completed Unconscious Bias training. As of 2025, we have required all new hires to complete unconscious bias training within 30 days of onboarding.

Social Impact Investment Fund

In 2025, Edwards' Social Impact Investment Fund continued to allocate resources and expand access to capital in numerous underserved communities. The $100 million fund aims to advance social equity through economic development, particularly in underserved communities in the U.S. The portfolio is diversified across a range of investments, including minority deposit institutions, small business administration (SBA) pool loan funds, tax credits and non-profit managed loan funds. Investments are carefully selected to provide additional capital for targeted programs, economic initiatives and community development projects.

During the year, fund investments have generated a meaningful impact in affordable housing, women- and minority-owned small businesses, community revitalization projects, youth programs and mental health and wellness centers. In early 2024, the entire $25 million Social Impact Investment fund tax credit allocation was deployed across six economic development projects: four healthcare facilities (including a ~$7 million California-based facility), one community revitalization project and one multi-purpose youth facility.



Edwards' $100M Social Impact Investment Fund (SIIF) is focused on creating a community unified in its mission to improve quality of life.

Our Planet

Environment, Health and Safety

Environment, health and safety (EHS) at Edwards includes our efforts to continuously ensure a safe and healthy workplace, exhibit environmental excellence in our operations and conform to regulatory and industry standards in our work to provide life-saving medical technology products to our patients. Our commitments include initiatives in climate risk, energy and emissions, waste, water and workplace health and safety.

Environment, Health and Safety Policy

We recognize that safe and environmentally responsible operations bring shared value to our patients, employees, stakeholders and the communities in which we operate. We are committed to providing a safe and healthy workplace by identifying and controlling hazards and risks, minimizing our impact on the environment through pollution prevention efforts and operating in compliance with legal requirements and applicable standards. Through a culture of engagement and ownership, we will set goals and communicate our progress on a journey of continual improvement.

The EHS Policy applies to all Edwards employees, facilities, activities, products and services as defined within the scope of our EHS management system. Each local EHS team develops additional policies and procedures tailored to its activities and jurisdictional regulations, needs and culture. Site and Region leadership is responsible for ensuring adherence to the EHS Policy at each facility, supported by the local EHS team.

EHS Management System

We have established an EHS Management System in alignment with the ISO 14001:2015 and ISO 45001:2018 management system principles of the Plan-Do-Check-Act cycle and continual improvement. Critical elements of our EHS Management System include:

- Establishing an Edwards EHS Policy rooted in our Credo
- Demonstrating leadership commitment to EHS
- Identifying significant risks, opportunities, environmental impacts and health and safety hazards
- Adopting EHS objectives at the levels of both corporate and manufacturing plant
- Establishing and implementing systems to maintain compliance, prevent injuries and reduce pollution
- Executing EHS programs, processes and operational controls
- Evaluating performance through internal and third-party audits and management reviews
- Identifying and executing continual improvement opportunities

Governance

The Compensation and Governance Committee of our Board of Directors has oversight of Edwards' Corporate Impact efforts, including our environmental strategy and its management, and it periodically reviews programmatic progress. Our ELT is responsible for endorsement and implementation of our EHS Policy. The Worldwide Environmental Health and Safety (WWEHS) team annually refreshes Edwards' EHS strategy by reviewing performance, benchmarking best practices and collaborating with internal stakeholders to identify objectives and priorities for the upcoming year. The strategy is then presented to the Corporate Vice President (CVP) of Global Operations and Quality and key stakeholders from the Senior Leadership Team (SLT). Each of these stakeholders provides feedback, insight and direction, which the WWEHS team incorporates into the strategy. In some cases, components of the proposed EHS strategy are shared with the Board of Directors for review, input and approval. Once the corporate-level EHS strategy is approved, it is rolled out across Edwards globally. Site and regional leaders take the strategy and build it into their operating plans and budgets for the following years.

At Edwards, we annually measure company-wide EHS performance against internal targets and objectives and incorporate these measurements into financial incentive programs for company leadership, including the VP of EHS, plant general managers and the CVP of Global Operations and Quality. Also, we include EHS criteria in performance reviews for relevant employees, based on role, and offer incentives such as recognition, rewards and bonus compensation. In 2025, our CEO had performance management objectives related to improving our Corporate Impact strategy, performance and disclosures, including environmental performance.

We routinely engage with external stakeholders on the topic of Edwards' EHS strategy. Most often, this communication takes place through investor inquiries, customer bids and tenders and the stakeholder engagement stage of our materiality assessments.

ISO Certification

Edward continues to meet the expectation that all manufacturing facilities achieve and maintain certification against the internationally recognized ISO 14001:2015 Environmental Management System and ISO 45001:2018 Occupational Health and Safety Management System standards. As our footprint continues to grow, all new manufacturing plants are allowed three years from date of start-up to achieve these certifications. Additionally, our European regional commercial offices are certified to ISO 14001:2015. Currently, many of our global EHS professionals hold Lead Auditor certifications in one or both of ISO 14001:2015 and ISO 45001:2018, creating a network of internal auditing resources.

Energy and Emissions

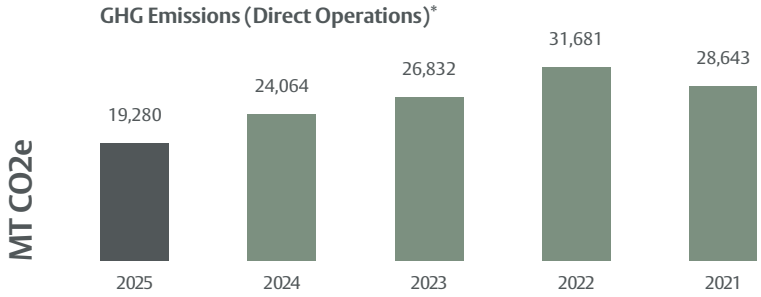
In 2025, Edwards achieved a 20% absolute reduction in Scope 1 and 2 greenhouse gas (GHG) emissions over the prior year and a 33% reduction from our 2021 baseline year. This reduction in GHG emissions across Edwards' existing footprint can be attributed to the diligent efforts of our global team members and a comprehensive approach to carbon emissions that includes:

- Aggressive action to reduce energy demand at existing facilities
- Construction of state-of-the-art, zero footprint, new facilities
- Strategic transition to renewable energy sources across our global sites
- Purchase of high-quality carbon offsets as a last option for unavoidable emissions

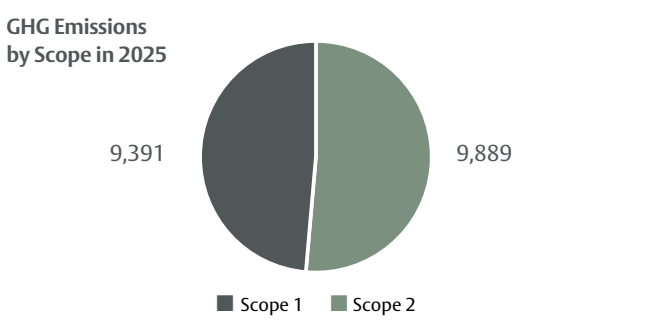
Reducing Energy Demand

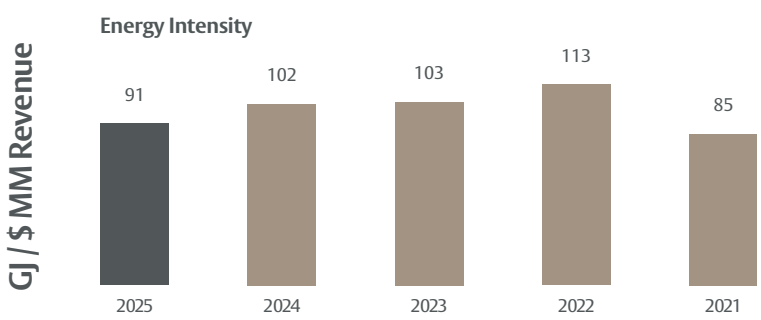
Annually, each manufacturing plant assesses its energy-related aspects and impacts and incorporates appropriate energy conservation and protection objectives into AOPs. In addition, Edwards has conducted third-party energy studies at all of our large sites to identify opportunities to reduce demand. As a result of these studies and other efforts to identify energy savings, more than 14 major facility energy efficiency projects were funded and completed globally in 2025, and additional efficiency improvement projects are planned for future years.

Another key initiative driving improvement in energy efficiency is our approach to facility design and construction. Edwards has implemented a robust, global construction strategy that contributes to all new and renovated buildings being constructed in a manner that minimizes environmental impact, including energy demand and GHG emissions. This approach began in the mid-2010s, with improvements and expansions to our Irvine headquarters, and continues as we advance construction of our next manufacturing plant in Spain.



*The gases included in the calculation all comply with new GRI standards.





Transition to Renewable Energy
We realize the importance of investing in renewable energy. In 2025, Edwards received 51% of our total energy from renewable sources, up from 44% in the prior year.

In Costa Rica, more than 99% of the electricity from the public utility comes from renewable sources, primarily hydroelectric. In Ireland, our local electricity partner is providing us with 100% renewable energy, primarily from wind energy. Additionally, several of our European sales and field offices are powered by 100% renewable electricity.

At our other global locations, we are actively looking for opportunities to invest in onsite generation of renewable energy. In 2024, additional solar photovoltaic systems were installed at our Irvine, California, headquarters. Additionally, in 2023, Edwards entered into a 12 MW virtual power purchase agreement (VPPA) on a newly constructed wind project in Oklahoma. Renewable energy generated from this project will significantly increase our renewable energy contribution and is expected to cover the electricity consumption for our U.S. operations for years to come. As we continue to expand our global footprint, we invest in technologies to increase energy efficiency and use of alternative sources, including the potential electrification of future manufacturing facilities.

As part of our commitment to achieve carbon neutrality by 2030, we plan to continue to transition to renewable energy sources over the course of the next five years through both onsite and offsite generation.

Value Stream (Scope 3) GHG Emissions
In 2021, Edwards completed our first baseline of Scope 3 GHG emissions. We continue to measure, report and receive third-party assurance for our Scope 3 emissions annually. Edwards is currently calculating our Scope 3 emissions for 2025 and this information will be reported publicly in our 2026 CDP (formerly known as the Carbon Disclosure Project) disclosure. Our greatest Scope 3 emissions impact remains purchased goods and services from our supply base. Our strategy to manage Scope 3 emissions focuses on engaging and incentivizing our suppliers to address emissions from their direct operations through several of our existing supplier management processes. In 2025, we further enhanced this strategy by introducing a supplier environmental sustainability scorecard. This scorecard grades key and strategic suppliers based on their level of sustainability performance, including the measurement of GHG emissions, reduction targets and public disclosure of progress against set targets. For more information on our Scope 3 strategy, please reference our 2025 CDP disclosure.

EHS Targets
As we pursue our patient-focused innovation strategy, we understand the importance of addressing climate change. We are committed to reducing our impact on the environment, and, as such, we have an aggressive target to achieve carbon neutrality for our direct operations by 2030 and set and achieve science-based targets. Edwards' EHS targets are closely aligned with our corporate aspirations and are intended to address topics of greatest importance to Edwards and our stakeholders. We annually reevaluate our goals to ensure they remain relevant and ambitious.

In 2023, the Science Based Targets initiative (SBTi) approved Edwards' science-based targets in line with a 1.5°C scenario. Our targets are as follows: Edwards commits to reduce absolute Scope 1 and 2 GHG emissions 42% by 2030 from a 2021 base year. Edwards also commits to reduce Scope 3 GHG emissions 51.6% per USD of value added within the same timeframe.

We have voluntarily reported our energy and GHG emissions management practices and data through CDP since 2014. For more information, please see our CDP response.

Climate Risk
For information about our approach to climate risk, please see the "Corporate Governance: Climate Risk" section of this report.

Water

Water management is part of our EHS management system. Even though Edwards is a relatively low water use manufacturer, we recognize the importance of using this shared resource efficiently. We focus on water use and discharge within our areas of operational control, including all manufacturing locations and non-manufacturing regional offices.

Most of our water use occurs at our manufacturing sites, and these locations annually assess their usage and incorporate appropriate water conservation and protection objectives into annual operating and capital investment plans. Water conservation activities that our teams implement at Edwards' sites include designing water-efficient facilities (including Leadership in Energy and Environmental Design (LEED) certified buildings), installing low-flow equipment and fixtures, integrating recycling or reuse systems, partnering with local utility providers on water recycling programs and utilizing drought tolerant plants and xeriscape design in our landscape and garden areas.

Company-wide, we regularly assess our water-related risks, which include higher water costs, water shortages and rationing, fluctuations in water quality and unreliable water delivery in the case of drought or other climate-related changes such as more frequent or severe wildfires. We continue to identify opportunities to mitigate water-related risks and reduce our overall environmental impact.

We have voluntarily reported our water management practices and data through CDP since 2014. For more information, please see our CDP response.

In 2025, Edwards' water withdrawal was 721,506 cubic meters. This represents a 7% decrease in water withdrawal intensity from 2024. A majority of our water withdrawal is primarily attributed to new products and enhancement of manufacturing equipment and processes, which requires validation of manufacturing processes and significant use of water to meet stringent FDA and global medical device quality assurance regulations. In 2025, Edwards had no serious incidents of non-compliance regarding water withdrawal, use or discharge.

We have primarily focused our efforts to reduce water use on incorporating water-efficient equipment and landscaping into our facility design. We also look for opportunities to reuse or recycle water wherever possible to minimize water withdrawal.

LEED Building Certification

Location	Description	Level	Year Certified
Irvine (CA), USA			
"Life is Now" Center	Administrative	Gold	2016
Starr Atrium	Administrative	Platinum	2017
Entry Pavilion	Administrative	Platinum	2021
"Dream Big" Complex, PODs 1-5	Research and Development, administrative	Gold	2021
Café & Conference Center	Administrative	Gold	2021
"Dream Big" Complex, PODS 6 & 7	Research and Development, administrative	Gold	2022
Mussallem Innovation Center	Research and Development	Gold	2024
Limerick, Ireland			
Main plant	Manufacturing	Gold	2021
Cartago, Costa Rica			
Main plant	Manufacturing	Gold	2022

Water Use
Due to the nature of our business, Edwards does not require a significant amount of water in our manufacturing processes, nor do we store a significant amount of water onsite at any of our global locations, except for emergency fire sprinkler water reservoirs and tanks. Most of the water used at our facilities is for manufacturing employee handwashing, personal consumption, cafeteria and restroom use, landscaping and facilities equipment support. We use process water at some manufacturing facilities for production-related equipment and tooling, washing and chemical solutions dilution.

Spill Prevention and Response
We maintain Spill Prevention and Response programs at all Edwards manufacturing locations. These programs focus on risk identification and engineering and administrative and work practice controls, such as secondary containment, double-walled tanks, alarm and notification systems, preventive maintenance, locked valves on fuel-tank containment structures and periodic visual inspections. Our EHS team trains personnel at each site on appropriate spill response and clean-up escalation procedures. We report all spills and releases in accordance with the expectations set by local or country government agencies.

We work to protect surface and storm waters in accordance with Edwards' global EHS Standards as well as with locally issued permits and government regulations. We do not conduct industrial operations in outdoor, storm water-exposed areas. Our U.S. facilities in California and Utah are covered under No Exposure Certificates (NECs) in accordance with the Environmental Protection Agency (EPA) Clean Water Act. In addition, we employ structural and non-structural source control best management practices (BMPs) at each of our facilities to prevent contamination of storm water.

Water-Stressed Regions
According to the World Resources Institute Aqueduct tool (Aqueduct tool), designed to map global water risk, our Irvine, California, global headquarters and Utah manufacturing plant are located in "extremely high" or "high" water stressed regions. In 2025, the total water withdrawal at these sites was 301,538 cubic meters, with 100% of the water sourced from a third-party public utility. We have several water conservation measures in place at our Irvine location to help manage this risk, including drought-tolerant landscaping, water-efficient fixtures and water reuse systems such as an underground rainwater harvesting tank. At our Utah facility, we replaced traditional landscaping practices with xeriscaping and artificial turf, and in 2025 we completed a water balance study to further identify opportunities to reduce water consumption. According to the Aqueduct tool, the remainder of our manufacturing sites are located in "medium/low" and "low" stress regions.

We do not track local water stress levels for our small and regional offices, as water use volumes for each office are less than 10,000 cubic meters annually and not material on an individual basis.

Waste

Edwards produces solid and hazardous waste throughout our product manufacturing processes. As we continue to innovate new and transformational technologies, we work to minimize our waste footprint, contributing to our efforts to manufacture responsibly. As part of our EHS Management System, our teams annually evaluate local waste volumes and downstream management practices to identify opportunities to reduce, reuse and recycle. We also have well-established programs in place to enable proper storage and handling of regulated waste such as chemicals, batteries and electronics.

While we enable responsible waste management at all non-manufacturing regional offices, the majority of waste we generate occurs at our manufacturing locations. At our various facilities, Edwards employees are trained in proper waste management and sorting practices. Thus, the focus of our data collection and reporting efforts is on our manufacturing sites.

In 2025, Edwards generated approximately 5,953 metric tons of total waste. While this represents an absolute increase over our 2020 baseline year, Edwards' growth has significantly outpaced our waste generation rate.

The absolute increase in waste generation in the past year is largely due to our launch of new products and the enhancement of manufacturing equipment and processes, which we initiated in 2018 and continued through 2025. We are required to validate our manufacturing processes to meet stringent FDA and global medical technology quality assurance regulations, and this process involves thorough testing of our equipment, procedures and chemicals to ensure efficacy. While validation activities represent growth and a bright future for our business, validation results in an increase in waste disposal without resulting in financial benefit until the products are brought to market.

We continue to identify waste reduction opportunities. In 2025, our manufacturing facilities completed five waste reduction or waste diversion projects. These projects included the reduction of printed paper/cleanroom clothing, the reuse of plastic bags where possible and improved waste segregation activities. We are proud to note that our manufacturing operations in Ireland maintained zero waste-to-landfill in 2025.

Recycling

We recycle hazardous and non-hazardous waste whenever possible. Our primary focus is to reduce the overall generation of waste from our operations, and our secondary focus is to identify opportunities to redirect waste to be recycled whenever possible. Due to technological complexities in the different countries where we operate, approximately half of our sites pay to recycle, while the other half receives payment.

In 2025, we recycled 3,244 metric tons of waste. This represents a 53% recycling rate for our total company waste, which is a 4% increase from the prior year.

Health and Safety

As we focus on helping patients, we also focus on the safety and well-being of our employees, onsite contractors and guests. Maintaining a strong and healthy workforce enables us to achieve our goals and dedicate energy toward the development of life-saving therapies. To achieve a safe workplace, we maintain robust EHS management systems, strong EHS governance and a culture of ownership and accountability. We recognize building the capabilities of our EHS team is fundamental to the success of our EHS program.

We continue to invest in the development of tools, systems and our team to help achieve our EHS objectives. Our commitment to preventing injury and illness and promoting well-being extends to both manufacturing and non-manufacturing operations and includes all employees, contractors and visitors at our facilities.

In 2025, a cross-functional initiative with representatives from EHS, Manufacturing, Engineering and Business Excellence was launched in order to reduce EHS risk and improve productivity and yield of our Delivery Systems manufacturing lines. Over 150 job safety analyses were conducted with actions identified to reduce risk. We have implemented engineering and administrative controls, and risk reduction activities will continue into 2026. This initiative highlights Edwards' continued commitment to the safety and well-being of our employees.

Additionally, we developed our own in-house Ergonomic Risk Assessment tool, leveraging the power of artificial intelligence (AI). This Vision AI–enabled tool transforms a traditionally manual process into an automated, real-time and highly scalable solution that enhances workplace safety across our manufacturing sites. Trained with expertise from Edwards' own subject matter experts, the system analyzes fine motor movements and full body dynamics. The tool provides immediate insights that have reduced assessment time by 80% so that we may more efficiently address ergonomic risk.

Hazard Identification, Risk Assessment and Incident Investigation

We use a risk-based approach to manage occupational health and safety, consistent with ISO 45001:2018 principles. The EHS teams at our manufacturing plants work with local supervisors and manufacturing associates to quantify risks associated with various job activities. We regularly conduct a range of risk assessments, such as sitewide safety risk registers, job safety analyses, industrial hygiene risk assessments, ergonomic risk assessments and Hazard and Operability Analysis. When we identify risks above a standard threshold, we implement control measures to eliminate or manage the hazards and risk. We follow the National Institute for Occupational Health and Safety's Hierarchy of Controls when identifying and implementing safety hazard control measures.

In addition to our regular risk assessments, we encourage all employees to be proactive in identifying hazards in their work areas. Employees are free to report any hazard or concern without fear of reprisal, and some of our safety reporting programs allow for anonymous reporting. Edwards' sites employ various methods to facilitate hazard identification, including safety suggestion boxes, Facilities Help Tickets, Good Saves programs and other

near miss and safety concern reporting programs. Local teams also check for hazards during facility reviews, product design reviews and routine inspections or safety walks.

When EHS-related incidents occur, we require the completion of a thorough investigation to identify the root cause and ensure corrective actions are taken to remove the immediate hazards and prevent a recurrence. The responsible supervisor and manager at the specific site conduct the incident investigations with support from the local EHS team. The incident investigation process may include interviews, a walkthrough of the incident scene, document review and review of surveillance videotape or photos. We clearly communicate with our employees that the purpose of an incident investigation is to prevent a recurrence, not to find fault or assign blame. Our EHS team tracks the corrective and preventive actions introduced based on the findings of the incident investigation to ensure completion.

Training and Awareness

We provide EHS training to employees to support our efforts to comply with all applicable EHS regulations, and we educate our employees on safe and environmentally responsible work practices. We use a variety of formats to deliver training material, including instructor-led, web-based, read-and-review and on-the-job training.

Ergonomics

Cumulative trauma illnesses represent a majority of Edwards' work-related injuries and illnesses. Most of our cumulative trauma illnesses occur at our valve network manufacturing locations, where manual sewing of tissue valves introduces the ergonomic risk factors of repetition, force and sustained postures. As such, we pursue aggressive strategies in our manufacturing plants and engineering departments that aim to address ergonomic risks with appropriate prevention and control measures throughout the design and manufacturing process, including:

- Quantitative risk assessments through detailed video and in-person analysis, ergonomic measurement equipment (e.g., force testing) and an Edwards-developed ergonomic risk assessment tool (Vision-AI)
- Elimination and substitution of high ergonomic risks through automation or redesign during the PDP, based on risk assessment data
- Ergonomic manufacturing tools, equipment and fixtures, including tissue-holding templates and custom sewing needles
- Engineering improvements at the individual workstation level, including ergonomic worktables, chairs and microscopes
- Stretching and microbreak programs
- Employee ergonomics training and awareness campaigns
- Rotation programs organized by operation risk assessment score to ensure manufacturing lines and rotations are evenly balanced
- Early injury and illness identification and intervention programs, which include individual ergonomic assessments
- Onsite occupational health staff dedicated to providing individual ergonomic support as needed

Occupational Health

We believe the well-being of our employees has a direct impact on the success of our company. At each of our manufacturing locations, we provide benefits associated with occupational health commensurate to the worker population, culture and availability of such programs. For example, while all our locations provide access to off-site medical clinics, our larger locations also employ on-site nurses and medical professionals to assist in both work and non-work-related injury and personal health needs.

Governance and Ethics

Supply Chain Management

At Edwards, supply chain management efforts are focused on monitoring and assessing the quality and safety of products, evaluating the social and environmental performance of suppliers, strengthening supply chain resiliency to ensure the availability of life-saving products and upholding responsible procurement practices. We rely on strong, collaborative partnerships with our suppliers to drive innovation and deliver therapies that improve patient outcomes.

The performance of our suppliers directly impacts both our ability to innovate and the quality of our products; therefore, we maintain a robust supplier engagement program. Our Global Supply Chain (GSC) and Product Quality teams work closely with our key suppliers through a rigorous process designed to effectively manage risk, implement targeted improvement action plans and uphold the highest standards of product quality. The GSC team identified Edwards' top 34 strategic direct materials suppliers with whom we engage on a more regular basis. We host an annual Partner Forum with key suppliers to assess performance from the previous year, identify opportunities for improvement and share updates on our business.

Oversight

Edwards' GSC organization is responsible for the plan, source, make and deliver functions of our business, ensuring that our products effectively reach providers and patients. To execute our GSC and Quality strategies, the teams collaborate to align goals and solicit the input of the Global Supply Chain Leadership Team (GSCLT). During the alignment process, the GSCLT helps identify and secure the resources needed to reach the goals for that year. The members of the GSCLT align their Performance Management Objectives with those of the CEO to ensure their efforts support the broader direction of the business.

Procurement Practices

Maintaining the reliability of our components and the services provided by our suppliers is essential given the nature and application of our products. It is imperative that we closely monitor the quality of the components we receive from our suppliers. We have developed trusted partnerships with our suppliers over many years, and we avoid adding new direct material suppliers unless necessary to limit risk exposure. In the limited cases where we add direct suppliers, we follow a comprehensive onboarding process that includes extensive due diligence. We evaluate new suppliers by collecting information through in-person audits, publicly available information and supplier questionnaires. We use the same approach with our existing suppliers if quality, performance, cost or business risk changes over time, and we need to reassess the business relationship.

We continue to communicate and gather input on our Supplier Code of Conduct and provide feedback through our Quarterly and Semi-Annual Business Reviews to clearly establish expectations for suppliers working with Edwards. We share the Supplier Code with all new direct and indirect suppliers, who must acknowledge its requirements as a prerequisite for establishing a business relationship with Edwards. Existing direct and indirect suppliers receive the Supplier Code during the onboarding due diligence process and as part of the ongoing Quality Agreement engagement.

The Supplier Code incorporates the components of our Credo, emphasizes our commitment to business integrity and includes the following topics:

- Labor and employment, including working standards and the prohibition of child labor and human trafficking
- Protection of assets, data privacy and confidentiality
- Environment, including energy use, emissions, water and waste
- Ethical conduct

In addition to the Supplier Code, we engage with our suppliers through multiple other channels. For example, through the global Part Qualification Process, we collaborate with suppliers to design for manufacturability, as well as improve product quality and reduce cost. Also, we leverage our global Supplier Capacity Framework to help suppliers plan their capacity for growth. We conduct Business Reviews with our strategic and key suppliers to review performance, work on business continuity planning and align key initiatives. These touchpoints keep our suppliers engaged and informed of our goals and expectations.

Assessing and Monitoring Supply Chain Risk

Edwards conducts a comprehensive supplier selection process, which involves an in-depth evaluation of potential partners and a structured onboarding procedure before establishing any business relationship. The GSC team performs on-site assessments of facilities and quality control systems, including technical, quality and business strategy assessments, prior to suppliers being awarded. Our Quality System audits are designed and administered through our QMS System and management controls to support our ISO certifications and notified body registrations. After approval, suppliers undergo periodic audits and performance reviews to monitor risk and ensure ongoing compliance with our standards.

When onboarding a new supplier, we gather qualitative and quantitative data through our Due Diligence Questionnaire (DDQ). Due to the nature of the relationship, we require all regulated suppliers and high-spend, non-regulated suppliers to complete both the DDQ and an additional evaluation before they can work with Edwards. The DDQ is composed of questions in four main topic areas: environmental considerations, public disclosures, employee health and safety and other areas of interest based on supplier type. We accept or deny suppliers based on their DDQ responses.

There are three topics in the DDQ that must be answered favorably for the respondent to be considered an Edwards supplier. A negative response to these criteria will result in an automatic removal of the company from consideration. These criteria include:

- **Materials compliance:** The supplier must comply with all product-related hazardous substance and trade regulations, such as the Restriction of Hazard Substances (RoHS); Registration, Evaluation, Authorization and Restriction of Chemicals (REACH); Persistent Organic Pollutants (POPs); Toxic Substances Control Act (TSCA); Waste Electrical and Electronic Equipment (WEEE) and others.
- **Employment and safety:** The supplier must comply with all employment laws and regulations and industry employment practices, as applicable to the countries in which they operate.
- **Human rights and child labor:** Per our Supplier Code, Edwards respects the human rights of all workers and does not tolerate any form of human rights or labor abuse in our supply chain. The supplier must comply with modern slavery and forced labor regulations (as applicable to the countries in which they operate) and U.S. human trafficking regulations.

We also have a Global Supply Risk Management and Governance program, led by our SVP of Quality Systems Engineering, which includes a global risk assessment to evaluate potential obstacles we may face in accessing key components for our products. The obstacles we consider include risks due to location, material content, country regulations and sole source risks. We prefer doing business in countries with higher ethical standards and protections for information technology and intellectual property, reducing the likelihood that sustainability violations will impact our business and stakeholders. Approximately 80% of Edwards' annual spending comes from lower-risk locations, which we define based on the supplier improvements implemented, costs, localization and complexity of supply.

The Edwards Quality team assigns a risk level of 1, 2 or 3 to each of our suppliers, both directly and indirectly regulated. Risk level 1 represents the highest risk and is used to flag the type of suppliers providing components that could impact patient safety or product performance. Every risk level 1 supplier must undergo a specific review and receive approval through our Quality System before Edwards conducts any business with them.

We audit our existing suppliers in accordance with the requirements of our internal Quality System. We prioritize the assessment of our highest-risk suppliers to support our focus on patient safety and ensure Edwards' compliance with applicable regulations for medical device production. We use a decision tree to help guide decision-making based on the potential impact of supplied materials on patient safety and product performance, assigning the risk level per part number sourced. We have similar decision trees for determining which service suppliers require qualification and monitoring, based on the requirements of our QMS.

Supplier Sustainability

As we aim to build long-term relationships with our suppliers, we consider the environmental and social impacts of our suppliers. For existing products, we are prioritizing sustainability initiatives in the areas of packaging, labeling and chemicals.

We include the following criteria in our processes for selecting suppliers and managing ongoing relationships:

- **Manufacturing efficiency:** Across all sites, we continue to focus on improved process capability, yield improvement and scrap reduction, allowing for a smaller amount of product disposal on an annualized basis.
- **Patient safety and impact:** We upgraded our PDP and simplified our Quality System, allowing for continued focus on product improvement and building quality at the source during product development and launch.
- **Lean manufacturing efforts:** We identify manufacturing lines each year for reconfiguration to determine where and how we can eliminate waste and increase outputs with the same number of people, reducing environmental impact.
- **Product design and innovation:** We build collaborative, long-term relationships with strategic and key suppliers who support our vision for patient-focused innovation. We engage with these close partners during the early stages of product development.
- **Measuring and managing Scope 3 emissions:** We are continuing to work with our existing and potential suppliers to encourage the collection and active reduction of their own emissions from their operations. For more information, see the "Environment, Health and Safety" section of this report.

We require all suppliers to operate in alignment with ethical and responsible business practices. We adhere to the California Transparency in Supply Chains Act of 2010 by working to prevent human trafficking and slavery in our own operations and throughout our supply chain.

Our Responsible Supply Chain Policy outlines our expectations for suppliers, which span the following topics:

- Fair labor practices, including the U.S. Uyghur Forced Labor Prevention Act (UFLPA)
- Environmental responsibility
- Workplace health and safety
- Ethical practices
- Protection of human rights
- Social responsibility
- Legal compliance

The Global Supply Chain and Quality teams use several standard key performance indicators (KPIs) to measure the performance of each of our preferred suppliers. The KPIs we track include:

- ISO13485 certification (where applicable)
- Completion of comprehensive quality audit with no critical findings
- Lot acceptance rates – the number of products received in a "lot" of material that is considered to meet our incoming quality requirements divided by the total number of lots received over a period of time
- Scar-free rates – the number of "lots" received from a supplier that do not require a direct written follow-up requiring a supplier's response
- Good delivery and service levels

Product Stewardship

The corporate Product Stewardship Group works to achieve and sustain compliance with material requirements so patients may continue to benefit from our products around the world. The Product Stewardship Group is part of the GSC and Quality function and includes representatives dedicated to each part of Edwards' business. During the product development and change control processes, members of the Product Stewardship Group assess the materials used in our products to identify and evaluate compliance with existing regulations. In addition, the group monitors updates related to new or revised material compliance topics relevant to Edwards. We extend this focus on material compliance upstream in our supply chain, where we require supplier compliance with all applicable materials regulations.

Conflict Minerals

Edwards seeks to reduce environmental and human health impacts from our use of materials in products, including in connection with the sourcing of 3TG (tantalum, tin/tungsten and gold). We have a Conflict Minerals Policy Statement and accompanying program to identify the use of 3TGs in our value chain and to obtain information from our direct and indirect suppliers to assess the source of these materials. We publish an annual Conflict Minerals Report to disclose our findings. Each year, we work with a third-party consultant to analyze the data provided by suppliers and identify strategies to improve our conflict minerals program. Please see our Responsible Supply Chain page for Edwards' supply chain policy statements and most recent Conflict Minerals Report.

Please see our Conflict Minerals Report for the 2024 fiscal year. Our 2025 Conflict Minerals Report will be filed with the Securities and Exchange Commission in May of 2026.

Supply Chain Management

We prioritize engagement with our top strategic and key suppliers, who account for a significant percentage of our direct material spend. We complete technical assessments to help identify gaps in the capabilities and maturity of our suppliers. We use the results of these technical assessments to develop improvement plans focused on bolstering supply chain resilience and partnership. In 2025, we continued our supplier management training to include our top 34 suppliers. As a component of our Supplier Excellence Program, the training aims to help improve quality and includes activities such as the development of performance improvement and implementation plans.

We have integrated MedAccred, a medical device industry-managed supply chain oversight program that identifies and verifies compliance to critical manufacturing process requirements, into our Quality System. Through this program, we aim to enhance patient safety, improve device quality and reduce product recalls. Edwards is actively participating in MedAccred industry working groups for Sterilization and Supplier Resilience. In addition, Edwards is a member of the MedAccred Management Council, and we are active in supporting the adoption of this oversight program more broadly in the medical technology industry.

Supplier Diversity
Edwards is committed to incorporating more diversity in our supply chain by actively seeking out and engaging with a broader group of suppliers. We regularly review our supplier list and U.S. spend data to identify opportunities to expand the range of our products and services. Diversifying our supplier base and tracking progress annually allows us to achieve results and discover new collaboration opportunities with a diverse group of businesses.

Distribution Network Optimization
We partner with transportation vendors that have the same focus on carbon reduction as Edwards. Our vendors continuously invest in fuel-efficient equipment and are working to transition to alternate fuels when possible. In addition, we endeavor to move our shipments using modes of transportation (ocean, rail and ground) with the least amount of environmental impact. We continue to engage our internal planning teams to consolidate shipments so we can move products with the utmost efficiency. Edwards is making efforts to locally source from the region that is consuming the finished goods, which is part of the plant strategy and where we intend to add new facilities in the future.

Value Chain
A value chain represents the full process of creating a product from material sourcing to production, and from use to disposal. We consider our full value chain, including our relationships with suppliers and customers, to drive the innovation of new solutions, ensure the quality of our products and increase our reach to help as many patients as possible.

Customers
Our customers include physicians, medical professionals, hospitals and group purchasing organizations.

Direct Suppliers
Our primary direct materials suppliers provide materials and services to support and manufacture the final assemblies of delivery systems, accessories, valves and future technologies.

Edwards values our partners, and as part of our supplier recognition efforts, we host a Partners Forum to honor outstanding suppliers and present awards. In 2025, 40 suppliers participated. Suppliers were evaluated based on their performance, including their contribution to carbon reduction targets. The strong engagement and positive feedback over the years have made the forum a meaningful success.

Corporate Governance

We consider the topic of corporate governance to include a system of rules, procedures, practices, policies and relationships by which Edwards is managed. The Board of Directors (Board) of Edwards oversees the strategy and management of the business. Edwards' Executive Leadership Team (ELT) is responsible for day-to-day management at the direction of the Board. Together, the Board and ELT establish Edwards' strategy and determine the governance structures, policies and procedures to enable Edwards to execute our strategy.

On a regular basis, teams within Edwards review our governance structures to identify opportunities for improvement. We believe that a strong corporate governance program is central to promoting business success and driving a culture of responsibility.

Our Board of Directors
Information about the composition, responsibilities and oversight of Edwards' Board of Directors can be found in the "Corporate Governance Policies and Practices" section of our 2026 Proxy Statement. Our Corporate Governance Guidelines are available on our website.

Governance for Corporate Impact
The Compensation and Governance Committee of our Board maintains formal oversight of our Corporate Impact program, with topic updates provided during full Board meetings. The SVP, Associate General Counsel, Corporate Secretary and Corporate Impact Lead engages regularly throughout the year with the ELT, the Board of Directors and its committees. More details on our Corporate Impact governance framework can be found in the 2026 Proxy Statement.

Engaging with our Shareholders
We communicate Edwards' corporate governance efforts with internal and external stakeholders through our annual proxy statement and other securities filings with the Securities and Exchange Commission. We also engage with stockholders at least twice a year to solicit their views and feedback.

For more information on Edwards' approach to engaging with shareholders and the issues discussed with our stockholders, please see our 2026 Proxy Statement.

Enterprise Risk Management
Through our annual strategic planning process, we consider business risks and opportunities across a seven-year time horizon. We have an Enterprise Risk Council, composed of cross-functional members of management, which is responsible for assessing and prioritizing Edwards' top risks on a quarterly basis. When conducting its risk analysis, the Council considers quantitative and qualitative inputs across multiple key dimensions.

At least annually, in alignment with our strategic planning process, the SVP of Enterprise Risk Management (ERM) reviews top risks and mitigation activities with the full Board to ensure robust risk management. Additionally, as needed, the Audit Committee of the

Board meets with members of management to consider various potential risks to the company, including those related to financial reporting, product development, continuity of operations, regulatory compliance, succession planning, physical facilities and other topics. See the "Risk Factors" section of our securities filings on Form 10-K and Form 10-Q with the Securities and Exchange Commission for a list of our current risks.

An important part of our approach to managing enterprise risk at Edwards is our business continuity program. Through this program, we maintain standardized continuity plans across our global manufacturing sites, and we routinely conduct exercises to test our readiness for various scenarios. We have an agile crisis management process that leverages insight and leadership from an experienced and cohesive management team.

The Edwards Board and ELT continually refine and strengthen our ERM process, aiming to improve identification of emerging risks so we may efficiently mitigate their impacts. In 2024, we incorporated corporate sustainability factors into our ERM process through strategic planning, review of our climate risks and refinement of our business continuity plans. Using the Task Force on Climate-related Financial Disclosures (TCFD)'s risk assessment framework, we continue to assess risks and determine appropriate mitigation approaches. Additionally, Edwards conducted multiple business continuity trainings and exercises in 2025 which focused on natural disaster risk, cyber disruption scenarios and other types of business disruptions.

Climate Risk

At Edwards, we are aware that changing weather patterns may cause business interruptions. We have facilities around the world that face different potential climate-related risks such as hurricanes, droughts, floods and wildfires that could possibly impact our ability to manufacture and transport our products to patients worldwide. We incorporate the potential for these climate weather events into our risk assessments. We take additional preventative measures, including maintaining emergency response systems and business recovery processes, which we test regularly. We also collaborate with our insurance provider to ensure our global facilities have appropriate weather damage prevention features and resilient infrastructure. Incorporating Corporate Impact factors, such as environmental risk, into our assessments provides us with a more robust understanding of potential risks to the company.

We continue to review and assess the risk factors outlined in the TCFD framework and, where needed, shape appropriate mitigation strategies. For more information, please see the "Risk Factors" section of our 2025 Annual Report and "Risk Oversight" section of our 2026 Proxy Statement.

Cybersecurity

We take measures to protect the data of our employees, customers and patients and to safeguard the intellectual property of the company. For more information about executive oversight of cybersecurity, our Information Security Policy, employee training, access to the Edwards Integrity Helpline and how we prepare for potential cybersecurity incidents, please see our 2025 Annual Report. We also disclose information about our product security and provide relevant contact information for our stakeholders to report any product vulnerabilities.

The Information Security team manages Edwards' Information Security Program, which is focused on monitoring, mitigating and addressing cyber risk and information security. Our Information Security Program aligns with industry standards such as the National Institute of Standards and Technology Cybersecurity Framework, Center for Internet Security Framework and Open Web Application Security Project Top 10, among others. We leverage these frameworks to build security controls that are both specific to Edwards and aligned with best practices. We also work with trusted third parties to help us assess our cybersecurity program and continually enhance our processes. As part of our efforts to track and shape industry best practices, the Information Security team is an affiliated member and active contributor of the Health Information Sharing and Analysis Center (H-ISAC).

We respect the privacy rights of everyone who interacts with our business, including our employees, customers and patients, and we are committed to complying with all applicable privacy and data protection laws, including the General Data Protection Regulation (GDPR). For more information, please see our Privacy Statement.

Edwards experienced no cyber breaches or incidents that had a material impact in 2025. We did not incur material expenses from information security breaches or security breach penalties or settlements in 2025.

Another key priority for our program is further building cyber resiliency throughout our value chain. We are closely monitoring new and emerging cybersecurity regulations around the world, assessing their potential impacts to our business and responding accordingly. Edwards works to further strengthen our response and recovery mechanisms as a part of our cyber resiliency strategy. The Information Security team actively manages and governs an enhanced recovery system to strengthen the organization's ability to rapidly restore operations in the event of a cyberattack.

Political and Lobbying Expenditures

The public policies of the countries in which we operate impact our ability to help patients. We are active in the policy-making process through regular and constructive engagement with government officials, policymakers and stakeholder groups. The goal of Edwards' policy, advocacy and political process engagement is to advance sound public policy in areas related to patient-focused medical innovations for structural heart disease to improve patient outcomes and enhance lives.

Edwards PAC

In the U.S., the Edwards Lifesciences Political Action Committee (Edwards PAC) operates in alignment with the values expressed in our Credo and strives to drive opportunities for Edwards to be a trusted partner in creating a community unified to help patients in need. The Edwards PAC is a separate legal entity from the company; it is sponsored by Edwards and funded through employee contributions. Contributions to the Edwards PAC are strictly voluntary.

At Edwards, we are committed to transparency in our political activities. We disclose our political activities to the appropriate state and federal government agencies in accordance with applicable laws and regulations. For more information about the Edwards Policy on Political Activities and our contribution/spending criteria, please visit our dedicated webpage.

Approach to Taxation

We are committed to responsible tax management and transparency across our operations. We sell products in approximately 100 countries, and our contributions have a significant impact on communities around the world. For more information, please see our Position Statement on Tax.

Ethics and Compliance

Edwards' Global Compliance Program supports our commitment to transforming patient lives with breakthrough medical technologies, excelling as a trusted partner through distinguished quality and integrity and delivering exceptional value to our stakeholders.

We are driving a culture of integrity that promotes ethical behavior and compliance with our code of conduct, as well as with relevant laws and regulations, including anti-bribery and corruption.

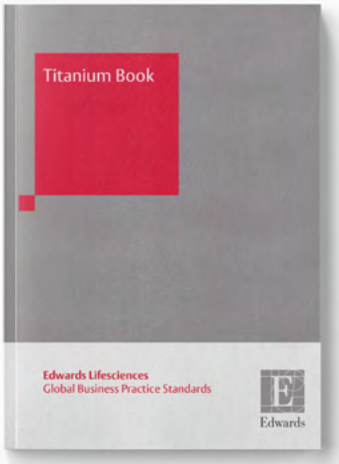
At Edwards, we build our success from a foundation of integrity and dedication to our Credo. Edwards has demonstrated leadership in ethical behavior and compliant business practices, and stakeholders stress the importance of maintaining that culture, reputation and legacy. In our work developing life-saving therapies, our leadership and employees know every decision matters, no matter how small.

Oversight

The Edwards Chief Compliance Officer (CCO) oversees and manages the Global Compliance Program with a direct reporting line to the Audit Committee of the Board and an administrative reporting line to the General Counsel. The CCO provides regular updates on the Global Compliance Program to the Audit Committee. The ELT aligns with the CCO through the ELT Compliance Committee to discuss key compliance topics and program priorities. Regional Compliance Officers chair regional compliance committees and provide input through this forum.

Global Business Practices Standards – Code of Conduct (The Titanium Book)

Edwards' Global Business Practices Standards – Code of Conduct (Standards), also known as the Titanium Book, serve as the foundation for our Global Compliance Program. We consider the Titanium Book to be our Credo in action. It sets forth our values and expectations for all employees and applies globally to all of our operations and to all officers, members of the Board of Directors, employees and third parties doing business with or on behalf of Edwards. Employees required to complete the Code of Conduct certification must annually confirm that they have read and agree to follow the Standards.



Edwards' Speak-Up Program

All employees at Edwards are expected to raise questions and report concerns about potential violations of the law or our policies and standards. We provide employees with several communication channels for raising questions or concerns, which we outline in the Titanium Book and promote across various Edwards Communications channels. Through our Speak Up program, we maintain a secure, third-party reporting channel, the Edwards Integrity Helpline, that is available to both employees and external parties and allows for anonymous reporting. The Helpline can be accessed by telephone or a web portal and is available 24 hours a day, 7 days a week, and all reports are fully investigated and tracked. Where appropriate, corrective action is taken. We strictly prohibit retaliation against any individual who reports a concern in good faith or participates in the company's investigation of such a concern. Helpline engagement metrics and related investigative activity are reported to the Audit Committee as well as executive leadership and are used to assess overall compliance program effectiveness.

Training and Communications
All Edwards employees must complete training relevant to their roles, including training on applicable legal compliance requirements, our Standards and company policies and procedures. We provide appropriate education and training for our employees to help them meet their ethical and compliance obligations. We regularly review and update our training program to ensure our employees remain informed and knowledgeable about evolving compliance requirements. We supplement training with a compliance-specific communications strategy to remind employees of their responsibilities and the resources available to them when they need guidance.

Risk Assessments, Auditing and Monitoring
We conduct comprehensive compliance risk assessments on a periodic basis to identify areas of heightened risk and potential control gaps. We use the results of these risk assessments to help define the priorities and initiatives of our compliance program. We also leverage annual audit and monitoring plans to identify risk areas and to assess overall compliance program effectiveness.

Anti-Bribery and Anti-Corruption
We are committed to observing high standards of ethical business conduct and compliance with applicable anti-bribery and anti-corruption laws, including the U.S. Foreign Corrupt Practices Act, the U.K. Bribery Act and similar laws in other countries where Edwards does business. Our employees are expected to complete annual training on anti-corruption as well as related controls and processes. The Titanium Book outlines our procedures for reporting, reviewing and managing potential violations of our standards, including concerns related to corruption and bribery.

We also expect third parties acting on behalf of Edwards to conduct business according to the same high ethical standards that we follow and to comply with all applicable laws and regulations, as well as with our policies and procedures.

Our Third-Party Management Program requires that we conduct rigorous, risk-based anti-bribery and anti-corruption due diligence prior to the appointment of third parties and train them to ensure they comply with applicable laws. Our Third-Party Management Program also requires ongoing screening and periodic audits of third parties to capture developments that could impact risk.

Interactions with Healthcare Professionals and Responsible Marketing
We are dedicated to improving and enhancing patient lives through trusted partnerships with clinicians and stakeholders around the world. For an overview of our policies related to interactions with healthcare professionals and responsible marketing, please see the Titanium Book.

We comply with all applicable transparency requirements in the U.S. and around the world. In 2008, Edwards was one of the first medical technology companies to begin voluntarily and publicly disclosing payments to physicians in the U.S. Now, in accordance with the U.S. Affordable Care Act, we report all financial relationships with U.S. physicians, teaching hospitals and specified specialty nurses through Open Payments on the Centers for Medicare and Medicaid Services' website. We also comply with all tracking and disclosure requirements that apply to medical technology companies around the world.

Appendix

About this Report

The Edwards 2025 Corporate Impact Report covers Edwards Lifesciences Corporation and all of its direct and indirect subsidiaries. Unless otherwise stated, all qualitative and quantitative information covers our 2025 fiscal year from January 1, 2025, to December 31, 2025. We developed the content of this report with reference to environmental, social and governance (ESG) reporting frameworks and guidelines, including the 2021 Global Reporting Initiative (GRI), the Sustainable Accounting Standards Board (SASB) Medical Equipment and Supplies and the Task Force on Climate-Related Financial Disclosures. Please see our Content Index for more details.

Additional information on Edwards' programs and performance can be found in our annual responses to the CDP Water and Climate questionnaires, through S&P's Corporate Sustainability Assessment, Morgan Stanley Capital International's (MSCI's) ESG Ratings, Sustainalytics' ESG Risk Rating and other sources. We also include Corporate Impact information in our 2025 Annual Report and 2026 Proxy Statement.

Our ESG Metrics include several years of data for KPIs relevant to our most material topics. A third party, Apex Companies LLC, assured our 2023 Scope 1, 2 and 3 GHG emissions data. Some reported data may be estimated or rounded, and all financial information is reported in U.S. dollars.

To provide feedback or request additional information, please contact us at corporate_impact@edwards.com.

ESG Materiality

We periodically conduct materiality assessments to determine the ESG topics most important to our stakeholders and to inform our reporting and initiatives. Our process has included topic benchmarking, impact mapping, stakeholder interviews, review of written sources, analysis and prioritization of topics and validation with leadership. In 2019, we completed a materiality refresh to reassess the ESG topics posing the greatest opportunities for and risks to our business, incorporating stakeholder input and current trends.

In 2025, we developed our double materiality assessment process to prepare for alignment with global reporting requirements, such as the Corporate Sustainability Reporting Directive (CSRD). We plan to leverage this approach to conduct an enterprise-wide double materiality assessment in the near future, which will enable our continued evaluation of the impacts, risks and opportunities across our value chain for Edwards.

Guided by our Credo, we have always been committed to serving patients. We support the vision of peace and prosperity for people and the planet, as laid out by the United Nations' 17 Sustainable Development Goals (SDGs). We believe we are best positioned to significantly and meaningfully impact the following specific SDG goals:

- **SDG 3:** Good Health and Well-Being. Ensure healthy lives and promote well-being for all at all ages.
- **SDG 8:** Decent Work and Economic Growth. Promote inclusive and sustainable economic growth, employment and decent work for all.
- **SDG 12:** Responsible Consumption and Production. Ensure sustainable consumption and production patterns.

SDG 3: Ensure healthy lives and promote well-being for all at all ages.

SDG 8: Promote inclusive and sustainable economic growth, employment and decent work for all.

SDG 12: Ensure sustainable consumption and production patterns.

This Corporate Impact Report (this "Report") includes forward-looking statements within the meaning of Section 27A of the Securities Act of 1933, as amended, and Section 21E of the Securities Exchange Act of 1934, as amended. We intend the forward-looking statements contained in this Report to be covered by the safe harbor provisions of such Acts. These forward-looking statements can sometimes be identified by the use of forward-looking words, such as "may," "might," "believe," "will," "expect," "project," "estimate," "should," "anticipate," "plan," "goal," "continue," "seek," "intend," "optimistic," "aspire," "confident" and other forms of these words and include, but are not limited to, statements regarding expected trial results, patient outcomes, goals, targets, objectives, expectations and other statements that are not historical facts. Forward-looking statements are based on estimates and assumptions made by management of the company and are believed to be reasonable, though they are inherently uncertain and difficult to predict. Our forward-looking statements speak only as of the date on which they are made, and we do not undertake any obligation to update any forward-looking statement to reflect events or circumstances after the date of the statement. Investors are cautioned not to unduly rely on such forward-looking statements.

Forward-looking statements involve risks and uncertainties that could cause results to differ materially from those expressed or implied by the forward-looking statements based on a number of factors as detailed in the company's filings with the Securities and Exchange Commission. These filings, along with important safety information about our products, may be found at Edwards.com. Edwards, Edwards Lifesciences, the stylized E logo, Every Heartbeat Matters and REACH FOR THE HEART are trademarks or service marks of Edwards Lifesciences Corporation or its affiliates. All other trademarks are the property of their respective owners.

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