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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person [*] <u>Rymer Adam</u> | | | | | 2. Issuer Name and Ticker or Trading Symbol Adeia Inc. [ADEA] | | | | | | | | | (Ch | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | |
|--|---|--|-----------------|---|---|--|---|--|---------|---|--------------------------------------|--|-------------|---|--|--|-----------------------------------|--|--|
| (Last) (First) (Middle) | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 08/09/2023 | | | | | | | | | | Office below | er (give title v) | | Other (below) | specify |
| 3025 ORCHARD PARKWAY | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | |
| (Street) SAN JO | SE CA | CA 95134 | | | | | | | | | | | Form | Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (City) (State) (Zip) | | | | | Rule 10b5-1(c) Transaction Indication | | | | | | | | | | | | | | |
| | | | | | | Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. | | | | | | | | | | | | | |
| | | Table | l - No | on-Deriva | tive S | ecui | rities | Acc | luired, | Dis | posed of | f, or | Ben | eficia | ally Owr | ned | | | |
| 1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day | | | | | y/Year) Execu | | eemed ution Date, ' th/Day/Year) | | | | es Acquired (A) Of (D) (Instr. 3, | | | | cially 1 | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | | Code | v | Amount | (A (D | A) or D) | Price | Repor Transa | | | | |
| Common Stock 08/09/20 | | | | | | 023 08/09/202 | |)23 | A | | 15,010(1 | L) | A | \$ <mark>0.0</mark> | 00 15,010 | | 1 | D | |
| | | Tab | le II · | · Derivati (e.g., pu | | | | | | | osed of, convertib | | | | | d | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | Execu if any | 3A. Deemed Execution Date, if any (Month/Day/Year) | | 4. Transaction Code (Instr. 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisa Expiration Date (Month/Day/Yea | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and | | ; ; (| 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | Ow For Dir or I (1) (| 0. Dwnership Sorm: Direct (D) or Indirect I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Code | v | (A) | (D) | Date Expiratio Exercisable Date | | Expiration Date | Title | or Nun of | | | | | | | |

Explanation of Responses:

1. Includes a grant of 15,010 restricted stock units that vest on the earlier of one year or the date of the Issuer's 2024 annual meeting of stockholders.

<u>/s/ Kevin Tanji, Attorney-in</u> Fact

<u>08/10/2023</u>

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

 * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.