# Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

# Annual Return/Report of Employee Benefit Plan

This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code).

▶ **Complete all entries in accordance with the instructions to the Form 5500.**

OMB Nos. 1210-0110
1210-0089

**2021**

**This Form is Open to Public Inspection**

## Part I Annual Report Identification Information

For calendar plan year 2021 or fiscal plan year beginning 12/31/2021 and ending 12/30/2022

**A** This return/report is for:
- [ ] a multiemployer plan
- [ ] a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.)
- [X] a single-employer plan
- [ ] a DFE (specify) ____

**B** This return/report is:
- [ ] the first return/report
- [ ] the final return/report
- [ ] an amended return/report
- [ ] a short plan year return/report (less than 12 months)

**C** If the plan is a collectively-bargained plan, check here. . . . . ▶ [X]

**D** Check box if filing under:
- [X] Form 5558
- [ ] automatic extension
- [ ] the DFVC program
- [ ] special extension (enter description)

**E** If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. . . . . ▶ [ ]

## Part II Basic Plan Information—enter all requested information

**1a** Name of plan
EMPLOYEE RETIREMENT PLAN OF SAFEWAY INC. AND ITS DOMESTIC SUBSIDIARIES

**1b** Three-digit plan number (PN) ▶ 001

**1c** Effective date of plan 12/01/1946

**2a** Plan sponsor's name (employer, if for a single-employer plan)
Mailing address (include room, apt., suite no. and street, or P.O. Box)
City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions)
SAFEWAY INC.

5918 STONERIDGE MALL ROAD
PLEASANTON, CA 94588

**2b** Employer Identification Number (EIN) 94-3019135

**2c** Plan Sponsor's telephone number 925-467-3000

**2d** Business code (see instructions) 445110

**Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.**

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

| | | | |
|---|---|---|---|
| **SIGN HERE** | Filed with authorized/valid electronic signature. | 10/09/2023 | BRIAN DOOLEY |
| | **Signature of plan administrator** | Date | Enter name of individual signing as plan administrator |
| **SIGN HERE** | | | |
| | **Signature of employer/plan sponsor** | Date | Enter name of individual signing as employer or plan sponsor |
| **SIGN HERE** | | | |
| | **Signature of DFE** | Date | Enter name of individual signing as DFE |

**3a** Plan administrator's name and address ☐ Same as Plan Sponsor

ALBERTSONS COMPANIES RETIREMENT BENEFIT PLANS COMMITTEE

250 E. PARKCENTER BLVD
BOISE, ID 83706

**3b** Administrator's EIN
81-3832793

**3c** Administrator's telephone number
925-467-3000

**4** If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report:
**a** Sponsor's name
**c** Plan Name

**4b** EIN

**4d** PN

| | | |
|---|---|---|
| **5** Total number of participants at the beginning of the plan year | **5** | 24361 |
| **6** Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines **6a(1), 6a(2), 6b, 6c,** and **6d**). | | |
| **a(1)** Total number of active participants at the beginning of the plan year | **6a(1)** | 12029 |
| **a(2)** Total number of active participants at the end of the plan year | **6a(2)** | 9235 |
| **b** Retired or separated participants receiving benefits | **6b** | 1898 |
| **c** Other retired or separated participants entitled to future benefits | **6c** | 9540 |
| **d** Subtotal. Add lines **6a(2)**, **6b**, and **6c** | **6d** | 20673 |
| **e** Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. | **6e** | 342 |
| **f** Total. Add lines **6d** and **6e** | **6f** | 21015 |
| **g** Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) | **6g** | |
| **h** Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested | **6h** | 46 |
| **7** Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item) | **7** | |

**8a** If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:

1A 1C 3H

**b** If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:

**9a** Plan funding arrangement (check all that apply)

| | | |
|---|---|---|
| **(1)** | ☐ | Insurance |
| **(2)** | ☐ | Code section 412(e)(3) insurance contracts |
| **(3)** | ☒ | Trust |
| **(4)** | ☐ | General assets of the sponsor |

**9b** Plan benefit arrangement (check all that apply)

| | | |
|---|---|---|
| **(1)** | ☐ | Insurance |
| **(2)** | ☐ | Code section 412(e)(3) insurance contracts |
| **(3)** | ☒ | Trust |
| **(4)** | ☐ | General assets of the sponsor |

**10** Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

**a Pension Schedules**

| | | |
|---|---|---|
| **(1)** | ☒ | **R** (Retirement Plan Information) |
| **(2)** | ☐ | **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary |
| **(3)** | ☒ | **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary |

**b General Schedules**

| | | | |
|---|---|---|---|
| **(1)** | ☒ | | **H** (Financial Information) |
| **(2)** | ☐ | | **I** (Financial Information – Small Plan) |
| **(3)** | ☐ | 0 | **A** (Insurance Information) |
| **(4)** | ☒ | | **C** (Service Provider Information) |
| **(5)** | ☒ | | **D** (DFE/Participating Plan Information) |
| **(6)** | ☐ | | **G** (Financial Transaction Schedules) |

## Part III Form M-1 Compliance Information (to be completed by welfare benefit plans)

**11a** If the plan provides welfare benefits, was the plan subject to the Form M-1 filing requirements during the plan year? (See instructions and 29 CFR 2520.101-2.) ..... ☐ Yes ☐ No

If "Yes" is checked, complete lines 11b and 11c.

**11b** Is the plan currently in compliance with the Form M-1 filing requirements? (See instructions and 29 CFR 2520.101-2.) ..... ☐ Yes ☐ No

**11c** Enter the Receipt Confirmation Code for the 2021 Form M-1 annual report. If the plan was not required to file the 2021 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code_____

# SCHEDULE SB (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

# Single-Employer Defined Benefit Plan Actuarial Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500 or 5500-SF.**

OMB No. 1210-0110

**2021**

**This Form is Open to Public Inspection**

For calendar plan year 2021 or fiscal plan year beginning 12/31/2021 and ending 12/30/2022

▶ **Round off amounts to nearest dollar.**

▶ **Caution:** A penalty of $1,000 will be assessed for late filing of this report unless reasonable cause is established.

**A** Name of plan
EMPLOYEE RETIREMENT PLAN OF SAFEWAY INC. AND ITS DOMESTIC SUBSIDIARIES

**B** Three-digit plan number (PN) ▶ 001

**C** Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
SAFEWAY INC.

**D** Employer Identification Number (EIN)
94-3019135

**E** Type of plan: [X] Single [ ] Multiple-A [ ] Multiple-B

**F** Prior year plan size: [ ] 100 or fewer [ ] 101-500 [X] More than 500

## Part I Basic Information

**1** Enter the valuation date: Month 12 Day 31 Year 2021

**2** Assets:

| | | |
|---|---|---|
| **a** Market value | **2a** | 1471988754 |
| **b** Actuarial value | **2b** | 1373267473 |

**3** Funding target/participant count breakdown

| | (1) Number of participants | (2) Vested Funding Target | (3) Total Funding Target |
|---|---|---|---|
| **a** For retired participants and beneficiaries receiving payment | 2005 | 506508520 | 506508520 |
| **b** For terminated vested participants | 10327 | 314896789 | 314896789 |
| **c** For active participants | 12029 | 500514998 | 501052866 |
| **d** Total | 24361 | 1321920307 | 1322458175 |

**4** If the plan is in at-risk status, check the box and complete lines (a) and (b) [ ]

| | | |
|---|---|---|
| **a** Funding target disregarding prescribed at-risk assumptions | **4a** | |
| **b** Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor | **4b** | |

| | | |
|---|---|---|
| **5** Effective interest rate | **5** | 5.41 % |
| **6** Target normal cost | | |
| **a** Present value of current plan year accruals | **6a** | 2679189 |
| **b** Expected plan-related expenses | **6b** | 14300000 |
| **c** Total (line 6a + line 6b) | **6c** | 16979189 |

**Statement by Enrolled Actuary**

To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.

**SIGN HERE**

Signature of actuary

08/31/2023
Date

GRACE LATTYAK
Type or print name of actuary

23-07120
Most recent enrollment number

AON CONSULTING, INC.
Firm name

415-486-7000
Telephone number (including area code)

MSC# 17805
PO BOX 19640
IRVINE, CA 92623

Address of the firm

If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions [ ]

## Part II Beginning of Year Carryover and Prefunding Balances

| | | (a) Carryover balance | (b) Prefunding balance |
|---|---|---|---|
| 7 | Balance at beginning of prior year after applicable adjustments (line 13 from prior year) | 0 | 36342784 |
| 8 | Portion elected for use to offset prior year's funding requirement (line 35 from prior year) | | 24366785 |
| 9 | Amount remaining (line 7 minus line 8) | 0 | 11975999 |
| 10 | Interest on line 9 using prior year's actual return of 12.10 % | 0 | 1449096 |
| 11 | Prior year's excess contributions to be added to prefunding balance: | | |
| | **a** Present value of excess contributions (line 38a from prior year) | | 0 |
| | **b(1)** Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of 5.54 % | | 0 |
| | **b(2)** Interest on line 38b from prior year Schedule SB, using prior year's actual return | | 0 |
| | **c** Total available at beginning of current plan year to add to prefunding balance | | 0 |
| | **d** Portion of (c) to be added to prefunding balance | | 0 |
| 12 | Other reductions in balances due to elections or deemed elections | 0 | 0 |
| 13 | Balance at beginning of current year (line 9 + line 10 + line 11d – line 12) | 0 | 13425095 |

## Part III Funding Percentages

| | | | |
|---|---|---|---|
| 14 | Funding target attainment percentage | 14 | 102.82 % |
| 15 | Adjusted funding target attainment percentage | 15 | 103.43 % |
| 16 | Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement | 16 | 94.78 % |
| 17 | If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage | 17 | % |

## Part IV Contributions and Liquidity Shortfalls

18 Contributions made to the plan for the plan year by employer(s) and employees:

| (a) Date (MM-DD-YYYY) | (b) Amount paid by employer(s) | (c) Amount paid by employees | (a) Date (MM-DD-YYYY) | (b) Amount paid by employer(s) | (c) Amount paid by employees |
|---|---|---|---|---|---|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | Totals ► 18(b) | 0 | 18(c) 0 |

| | | | |
|---|---|---|---|
| 19 | Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year: | | |
| | **a** Contributions allocated toward unpaid minimum required contributions from prior years | 19a | 0 |
| | **b** Contributions made to avoid restrictions adjusted to valuation date | 19b | 0 |
| | **c** Contributions allocated toward minimum required contribution for current year adjusted to valuation date | 19c | 0 |

20 Quarterly contributions and liquidity shortfalls:

**a** Did the plan have a "funding shortfall" for the prior year? [X] Yes [ ] No

**b** If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? [X] Yes [ ] No

**c** If line 20a is "Yes," see instructions and complete the following table as applicable:

Liquidity shortfall as of end of quarter of this plan year

| (1) 1st | (2) 2nd | (3) 3rd | (4) 4th |
|---|---|---|---|
| 0 | 0 | 0 | 0 |

## Part V Assumptions Used to Determine Funding Target and Target Normal Cost

**21** Discount rate:

**a** Segment rates:

| 1st segment: | 2nd segment: | 3rd segment: | |
|---|---|---|---|
| 4.75 % | 5.36 % | 6.11 % | ☐ N/A, full yield curve used |

| | | |
|---|---|---|
| **b** Applicable month (enter code) | **21b** | 4 |
| **22** Weighted average retirement age | **22** | 62 |

**23** Mortality table(s) (see instructions) ☐ Prescribed - combined ☒ Prescribed - separate ☐ Substitute

## Part VI Miscellaneous Items

| | | |
|---|---|---|
| **24** Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment | ☒ Yes | ☐ No |
| **25** Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment | ☐ Yes | ☒ No |
| **26** Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment | ☒ Yes | ☐ No |

| | | |
|---|---|---|
| **27** If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment | **27** | |

## Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

| | | |
|---|---|---|
| **28** Unpaid minimum required contributions for all prior years | **28** | 0 |
| **29** Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a) | **29** | 0 |
| **30** Remaining amount of unpaid minimum required contributions (line 28 minus line 29) | **30** | 0 |

## Part VIII Minimum Required Contribution For Current Year

**31** Target normal cost and excess assets (see instructions):

| | | |
|---|---|---|
| **a** Target normal cost (line 6c) | **31a** | 16979189 |
| **b** Excess assets, if applicable, but not greater than line 31a | **31b** | 16979189 |

| **32** Amortization installments: | Outstanding Balance | Installment |
|---|---|---|
| **a** Net shortfall amortization installment | 0 | 0 |
| **b** Waiver amortization installment | | |

| | | |
|---|---|---|
| **33** If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____ ) and the waived amount | **33** | |
| **34** Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33) | **34** | 0 |

| | Carryover balance | Prefunding balance | Total balance |
|---|---|---|---|
| **35** Balances elected for use to offset funding requirement | | | 0 |

| | | |
|---|---|---|
| **36** Additional cash requirement (line 34 minus line 35) | **36** | 0 |
| **37** Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c) | **37** | 0 |

**38** Present value of excess contributions for current year (see instructions)

| | | |
|---|---|---|
| **a** Total (excess, if any, of line 37 over line 36) | **38a** | 0 |
| **b** Portion included in line 38a attributable to use of prefunding and funding standard carryover balances | **38b** | 0 |
| **39** Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37) | **39** | 0 |
| **40** Unpaid minimum required contributions for all years | **40** | 0 |

## Part IX Pension Funding Relief Under Pension Relief Act of 2010 (See Instructions)

**41** If an election was made to use PRA 2010 funding relief for this plan:

**a** Schedule elected ☐ 2 plus 7 years ☐ 15 years

**b** Eligible plan year(s) for which the election in line 41a was made ☐ 2008 ☐ 2009 ☐ 2010 ☐ 2011

| SCHEDULE C (Form 5500) | Service Provider Information | OMB No. 1210-0110 |
|---|---|---|
| Department of the Treasury<br>Internal Revenue Service<br>Department of Labor<br>Employee Benefits Security Administration<br>Pension Benefit Guaranty Corporation | This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).<br>▶ **File as an attachment to Form 5500.** | **2021**<br>**This Form is Open to Public Inspection.** |

For calendar plan year 2021 or fiscal plan year beginning 12/31/2021 and ending 12/30/2022

| **A** Name of plan | **B** Three-digit plan number (PN) ▶ |
|---|---|
| EMPLOYEE RETIREMENT PLAN OF SAFEWAY INC. AND ITS DOMESTIC SUBSIDIARIES | 001 |
| **C** Plan sponsor's name as shown on line 2a of Form 5500 | **D** Employer Identification Number (EIN) |
| SAFEWAY INC. | 94-3019135 |

## Part I Service Provider Information (see instructions)

You must complete this Part, in accordance with the instructions, to report the information required for **each person** who received, directly or indirectly, $5,000 or more in total compensation (i.e., money or anything else of monetary value) in connection with services rendered to the plan or the person's position with the plan during the plan year. If a person received **only** eligible indirect compensation for which the plan received the required disclosures, you are required to answer line 1 but are not required to include that person when completing the remainder of this Part.

### 1 Information on Persons Receiving Only Eligible Indirect Compensation

**a** Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions).. . . . . [X] Yes [ ] No

**b** If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

**(b)** Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

DODGE & COX

94-1441976

**(b)** Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

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**2. Information on Other Service Providers Receiving Direct or Indirect Compensation.** Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, $5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

**(a)** Enter name and EIN or address (see instructions)

CONDUENT HR SERVICES, LLC

04-3609848

| (b) Service Code(s) | (c) Relationship to employer, employee organization, or person known to be a party-in-interest | (d) Enter direct compensation paid by the plan. If none, enter -0-. | (e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-. | (h) Did the service provider give you a formula instead of an amount or estimated amount? |
|---|---|---|---|---|---|---|
| 15 50 | RECORDKEEPER | 1300671 | Yes ☐ No ☒ | Yes ☐ No ☐ | | Yes ☐ No ☐ |

**(a)** Enter name and EIN or address (see instructions)

MFS

04-3247425

| (b) Service Code(s) | (c) Relationship to employer, employee organization, or person known to be a party-in-interest | (d) Enter direct compensation paid by the plan. If none, enter -0-. | (e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-. | (h) Did the service provider give you a formula instead of an amount or estimated amount? |
|---|---|---|---|---|---|---|
| 28 50 | NONE | 791340 | Yes ☐ No ☒ | Yes ☐ No ☐ | | Yes ☐ No ☐ |

**(a)** Enter name and EIN or address (see instructions)

AON HEWITT INVESTMENT CONSULTING

36-3109431

| (b) Service Code(s) | (c) Relationship to employer, employee organization, or person known to be a party-in-interest | (d) Enter direct compensation paid by the plan. If none, enter -0-. | (e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-. | (h) Did the service provider give you a formula instead of an amount or estimated amount? |
|---|---|---|---|---|---|---|
| 28 50 | NONE | 760076 | Yes ☐ No ☒ | Yes ☐ No ☐ | | Yes ☐ No ☐ |

**2. Information on Other Service Providers Receiving Direct or Indirect Compensation.** Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, $5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

**(a)** Enter name and EIN or address (see instructions)

MORGAN STANLEY INVESTMENT MGMT INC

13-3040307

| (b) Service Code(s) | (c) Relationship to employer, employee organization, or person known to be a party-in-interest | (d) Enter direct compensation paid by the plan. If none, enter -0-. | (e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-. | (h) Did the service provider give you a formula instead of an amount or estimated amount? |
|---|---|---|---|---|---|---|
| 11 50 | NONE | 624285 | Yes ☐ No ☒ | Yes ☐ No ☐ | | Yes ☐ No ☐ |

**(a)** Enter name and EIN or address (see instructions)

SNYDER CAPITAL MANAGEMENT LP

04-3370184

| (b) Service Code(s) | (c) Relationship to employer, employee organization, or person known to be a party-in-interest | (d) Enter direct compensation paid by the plan. If none, enter -0-. | (e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-. | (h) Did the service provider give you a formula instead of an amount or estimated amount? |
|---|---|---|---|---|---|---|
| 28 50 | NONE | 607637 | Yes ☐ No ☒ | Yes ☐ No ☐ | | Yes ☐ No ☐ |

**(a)** Enter name and EIN or address (see instructions)

THE NORTHERN TRUST COMPANY

36-1561860

| (b) Service Code(s) | (c) Relationship to employer, employee organization, or person known to be a party-in-interest | (d) Enter direct compensation paid by the plan. If none, enter -0-. | (e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-. | (h) Did the service provider give you a formula instead of an amount or estimated amount? |
|---|---|---|---|---|---|---|
| 21 50 | NONE | 523853 | Yes ☐ No ☒ | Yes ☐ No ☐ | | Yes ☐ No ☐ |

**2. Information on Other Service Providers Receiving Direct or Indirect Compensation.** Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, $5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

**(a)** Enter name and EIN or address (see instructions)

WELLS CAPITAL MANAGEMENT

95-3692822

| (b) Service Code(s) | (c) Relationship to employer, employee organization, or person known to be a party-in-interest | (d) Enter direct compensation paid by the plan. If none, enter -0-. | (e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-. | (h) Did the service provider give you a formula instead of an amount or estimated amount? |
|---|---|---|---|---|---|---|
| 28 50 | NONE | 505634 | Yes ☐ No ☒ | Yes ☐ No ☐ | | Yes ☐ No ☐ |

**(a)** Enter name and EIN or address (see instructions)

PACIFIC INVSTMNT MANAGEMENT CO LLC

33-0629048

| (b) Service Code(s) | (c) Relationship to employer, employee organization, or person known to be a party-in-interest | (d) Enter direct compensation paid by the plan. If none, enter -0-. | (e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-. | (h) Did the service provider give you a formula instead of an amount or estimated amount? |
|---|---|---|---|---|---|---|
| 28 50 | NONE | 474337 | Yes ☐ No ☒ | Yes ☐ No ☐ | | Yes ☐ No ☐ |

**(a)** Enter name and EIN or address (see instructions)

CAPITAL GUARDIAN TRUST COMPANY

95-2553868

| (b) Service Code(s) | (c) Relationship to employer, employee organization, or person known to be a party-in-interest | (d) Enter direct compensation paid by the plan. If none, enter -0-. | (e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-. | (h) Did the service provider give you a formula instead of an amount or estimated amount? |
|---|---|---|---|---|---|---|
| 28 50 | NONE | 341896 | Yes ☐ No ☒ | Yes ☐ No ☐ | | Yes ☐ No ☐ |

**2. Information on Other Service Providers Receiving Direct or Indirect Compensation.** Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, $5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

**(a)** Enter name and EIN or address (see instructions)

DELOITTE & TOUCHE LLP

13-3891517

| (b) Service Code(s) | (c) Relationship to employer, employee organization, or person known to be a party-in-interest | (d) Enter direct compensation paid by the plan. If none, enter -0-. | (e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-. | (h) Did the service provider give you a formula instead of an amount or estimated amount? |
|---|---|---|---|---|---|---|
| 10 50 | NONE | 79000 | Yes ☐ No ☒ | Yes ☐ No ☐ | | Yes ☐ No ☐ |

**(a)** Enter name and EIN or address (see instructions)

TRUCKER HUSS

135 MAIN STREET, 9TH FLOOR
SAN FRANCISCO, CA 94105

| (b) Service Code(s) | (c) Relationship to employer, employee organization, or person known to be a party-in-interest | (d) Enter direct compensation paid by the plan. If none, enter -0-. | (e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-. | (h) Did the service provider give you a formula instead of an amount or estimated amount? |
|---|---|---|---|---|---|---|
| 29 50 99 | NONE | 27326 | Yes ☐ No ☒ | Yes ☐ No ☐ | | Yes ☐ No ☐ |

**(a)** Enter name and EIN or address (see instructions)

PENSION BENEFIT INFORMATION, LLC

82-2042737

| (b) Service Code(s) | (c) Relationship to employer, employee organization, or person known to be a party-in-interest | (d) Enter direct compensation paid by the plan. If none, enter -0-. | (e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-. | (h) Did the service provider give you a formula instead of an amount or estimated amount? |
|---|---|---|---|---|---|---|
| 16 50 99 | NONE | 15667 | Yes ☐ No ☒ | Yes ☐ No ☐ | | Yes ☐ No ☐ |

**2. Information on Other Service Providers Receiving Direct or Indirect Compensation.** Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, $5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

**(a)** Enter name and EIN or address (see instructions)

BMI IMAGING SYSTEMS, INC.

94-1612389

| (b) Service Code(s) | (c) Relationship to employer, employee organization, or person known to be a party-in-interest | (d) Enter direct compensation paid by the plan. If none, enter -0-. | (e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-. | (h) Did the service provider give you a formula instead of an amount or estimated amount? |
|---|---|---|---|---|---|---|
| 15 50 99 | NONE | 11860 | Yes [ ] No [X] | Yes [ ] No [ ] | | Yes [ ] No [ ] |

**(a)** Enter name and EIN or address (see instructions)

| (b) Service Code(s) | (c) Relationship to employer, employee organization, or person known to be a party-in-interest | (d) Enter direct compensation paid by the plan. If none, enter -0-. | (e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-. | (h) Did the service provider give you a formula instead of an amount or estimated amount? |
|---|---|---|---|---|---|---|
| | | | Yes [ ] No [ ] | Yes [ ] No [ ] | | Yes [ ] No [ ] |

**(a)** Enter name and EIN or address (see instructions)

| (b) Service Code(s) | (c) Relationship to employer, employee organization, or person known to be a party-in-interest | (d) Enter direct compensation paid by the plan. If none, enter -0-. | (e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-. | (h) Did the service provider give you a formula instead of an amount or estimated amount? |
|---|---|---|---|---|---|---|
| | | | Yes [ ] No [ ] | Yes [ ] No [ ] | | Yes [ ] No [ ] |

## Part I Service Provider Information (continued)

**3.** If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received $1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| | | |
| **(d)** Enter name and EIN (address) of source of indirect compensation | **(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation. | |
| | | |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| | | |
| **(d)** Enter name and EIN (address) of source of indirect compensation | **(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation. | |
| | | |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| | | |
| **(d)** Enter name and EIN (address) of source of indirect compensation | **(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation. | |
| | | |

## Part II Service Providers Who Fail or Refuse to Provide Information

**4** Provide, to the extent possible, the following information for each service provider who failed or refused to provide the information necessary to complete this Schedule.

| **(a)** Enter name and EIN or address of service provider (see instructions) | **(b)** Nature of Service Code(s) | **(c)** Describe the information that the service provider failed or refused to provide |
|---|---|---|
| | | |

| **(a)** Enter name and EIN or address of service provider (see instructions) | **(b)** Nature of Service Code(s) | **(c)** Describe the information that the service provider failed or refused to provide |
|---|---|---|
| | | |

| **(a)** Enter name and EIN or address of service provider (see instructions) | **(b)** Nature of Service Code(s) | **(c)** Describe the information that the service provider failed or refused to provide |
|---|---|---|
| | | |

| **(a)** Enter name and EIN or address of service provider (see instructions) | **(b)** Nature of Service Code(s) | **(c)** Describe the information that the service provider failed or refused to provide |
|---|---|---|
| | | |

| **(a)** Enter name and EIN or address of service provider (see instructions) | **(b)** Nature of Service Code(s) | **(c)** Describe the information that the service provider failed or refused to provide |
|---|---|---|
| | | |

| **(a)** Enter name and EIN or address of service provider (see instructions) | **(b)** Nature of Service Code(s) | **(c)** Describe the information that the service provider failed or refused to provide |
|---|---|---|
| | | |

| **Part III** | **Termination Information on Accountants and Enrolled Actuaries (see instructions)**<br>(complete as many entries as needed) |
|---|---|

**a** Name:

**b** EIN:

**c** Position:

**d** Address:

**e** Telephone:

Explanation:

**a** Name:

**b** EIN:

**c** Position:

**d** Address:

**e** Telephone:

Explanation:

**a** Name:

**b** EIN:

**c** Position:

**d** Address:

**e** Telephone:

Explanation:

**a** Name:

**b** EIN:

**c** Position:

**d** Address:

**e** Telephone:

Explanation:

**a** Name:

**b** EIN:

**c** Position:

**d** Address:

**e** Telephone:

Explanation:

# SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

## DFE/Participating Plan Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

**2021**

**This Form is Open to Public Inspection.**

For calendar plan year 2021 or fiscal plan year beginning 12/31/2021 and ending 12/30/2022

**A** Name of plan
EMPLOYEE RETIREMENT PLAN OF SAFEWAY INC. AND ITS DOMESTIC SUBSIDIARIES

**B** Three-digit plan number (PN) ▶ 001

**C** Plan or DFE sponsor's name as shown on line 2a of Form 5500
SAFEWAY INC.

**D** Employer Identification Number (EIN)
94-3019135

**Part I** **Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)**
(Complete as many entries as needed to report all interests in DFEs)

**a** Name of MTIA, CCT, PSA, or 103-12 IE: SAFEWAY INC MASTER RETIREMENT TRUST

**b** Name of sponsor of entity listed in (a): SAFEWAY INC.

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|
| 36-7394926-001 | M | 1158492326 |

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

**b** Name of sponsor of entity listed in (a):

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|
| | | |

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

**b** Name of sponsor of entity listed in (a):

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|
| | | |

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

**b** Name of sponsor of entity listed in (a):

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|
| | | |

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

**b** Name of sponsor of entity listed in (a):

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|
| | | |

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

**b** Name of sponsor of entity listed in (a):

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|
| | | |

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

**b** Name of sponsor of entity listed in (a):

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

**b** Name of sponsor of entity listed in (a):

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

**b** Name of sponsor of entity listed in (a):

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

**b** Name of sponsor of entity listed in (a):

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

**b** Name of sponsor of entity listed in (a):

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

**b** Name of sponsor of entity listed in (a):

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

**b** Name of sponsor of entity listed in (a):

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

**b** Name of sponsor of entity listed in (a):

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

**b** Name of sponsor of entity listed in (a):

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

**b** Name of sponsor of entity listed in (a):

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

**b** Name of sponsor of entity listed in (a):

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|

**Part II** **Information on Participating Plans (to be completed by DFEs)**
(Complete as many entries as needed to report all participating plans)

| | |
|---|---|
| **a** Plan name | |
| **b** Name of plan sponsor | **c** EIN-PN |
| **a** Plan name | |
| **b** Name of plan sponsor | **c** EIN-PN |
| **a** Plan name | |
| **b** Name of plan sponsor | **c** EIN-PN |
| **a** Plan name | |
| **b** Name of plan sponsor | **c** EIN-PN |
| **a** Plan name | |
| **b** Name of plan sponsor | **c** EIN-PN |
| **a** Plan name | |
| **b** Name of plan sponsor | **c** EIN-PN |
| **a** Plan name | |
| **b** Name of plan sponsor | **c** EIN-PN |
| **a** Plan name | |
| **b** Name of plan sponsor | **c** EIN-PN |
| **a** Plan name | |
| **b** Name of plan sponsor | **c** EIN-PN |
| **a** Plan name | |
| **b** Name of plan sponsor | **c** EIN-PN |
| **a** Plan name | |
| **b** Name of plan sponsor | **c** EIN-PN |
| **a** Plan name | |
| **b** Name of plan sponsor | **c** EIN-PN |
| **a** Plan name | |
| **b** Name of plan sponsor | **c** EIN-PN |

# SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

## Financial Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

**2021**

**This Form is Open to Public Inspection**

For calendar plan year 2021 or fiscal plan year beginning 12/31/2021 and ending 12/30/2022

**A** Name of plan
EMPLOYEE RETIREMENT PLAN OF SAFEWAY INC. AND ITS DOMESTIC SUBSIDIARIES

**B** Three-digit plan number (PN) ▶ 001

**C** Plan sponsor's name as shown on line 2a of Form 5500
SAFEWAY INC.

**D** Employer Identification Number (EIN)
94-3019135

## Part I Asset and Liability Statement

**1** Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. **Round off amounts to the nearest dollar.** MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.

| Assets | | (a) Beginning of Year | (b) End of Year |
|---|---|---|---|
| **a** Total noninterest-bearing cash | 1a | | |
| **b** Receivables (less allowance for doubtful accounts): | | | |
| **(1)** Employer contributions | 1b(1) | | |
| **(2)** Participant contributions | 1b(2) | | |
| **(3)** Other | 1b(3) | 64410766 | 57676650 |
| **c** General investments: | | | |
| **(1)** Interest-bearing cash (include money market accounts & certificates of deposit) | 1c(1) | | |
| **(2)** U.S. Government securities | 1c(2) | | |
| **(3)** Corporate debt instruments (other than employer securities): | | | |
| **(A)** Preferred | 1c(3)(A) | | |
| **(B)** All other | 1c(3)(B) | | |
| **(4)** Corporate stocks (other than employer securities): | | | |
| **(A)** Preferred | 1c(4)(A) | | |
| **(B)** Common | 1c(4)(B) | | |
| **(5)** Partnership/joint venture interests | 1c(5) | | |
| **(6)** Real estate (other than employer real property) | 1c(6) | | |
| **(7)** Loans (other than to participants) | 1c(7) | | |
| **(8)** Participant loans | 1c(8) | | |
| **(9)** Value of interest in common/collective trusts | 1c(9) | | |
| **(10)** Value of interest in pooled separate accounts | 1c(10) | | |
| **(11)** Value of interest in master trust investment accounts | 1c(11) | 1548326120 | 1158492326 |
| **(12)** Value of interest in 103-12 investment entities | 1c(12) | | |
| **(13)** Value of interest in registered investment companies (e.g., mutual funds) | 1c(13) | | |
| **(14)** Value of funds held in insurance company general account (unallocated contracts) | 1c(14) | | |
| **(15)** Other | 1c(15) | | |

| | | | **(a)** Beginning of Year | **(b)** End of Year |
|---|---|---|---|---|
| **1d** | Employer-related investments: | | | |
| | **(1)** Employer securities | 1d(1) | | |
| | **(2)** Employer real property | 1d(2) | | |
| **e** | Buildings and other property used in plan operation | 1e | | |
| **f** | Total assets (add all amounts in lines 1a through 1e) | 1f | 1612736886 | 1216168976 |
| | **Liabilities** | | | |
| **g** | Benefit claims payable | 1g | | |
| **h** | Operating payables | 1h | 1345162 | 916626 |
| **i** | Acquisition indebtedness | 1i | | |
| **j** | Other liabilities | 1j | 139402970 | 89671249 |
| **k** | Total liabilities (add all amounts in lines 1g through1j) | 1k | 140748132 | 90587875 |
| | **Net Assets** | | | |
| **l** | Net assets (subtract line 1k from line 1f) | 1l | 1471988754 | 1125581101 |

## Part II Income and Expense Statement

**2** Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

| | **Income** | | **(a)** Amount | **(b)** Total |
|---|---|---|---|---|
| **a** | **Contributions:** | | | |
| | **(1)** Received or receivable in cash from: **(A)** Employers | 2a(1)(A) | | |
| | **(B)** Participants | 2a(1)(B) | | |
| | **(C)** Others (including rollovers) | 2a(1)(C) | | |
| | **(2)** Noncash contributions | 2a(2) | | |
| | **(3)** Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)** | 2a(3) | | 0 |
| **b** | **Earnings on investments:** | | | |
| | **(1)** Interest: | | | |
| | **(A)** Interest-bearing cash (including money market accounts and certificates of deposit) | 2b(1)(A) | | |
| | **(B)** U.S. Government securities | 2b(1)(B) | | |
| | **(C)** Corporate debt instruments | 2b(1)(C) | | |
| | **(D)** Loans (other than to participants) | 2b(1)(D) | | |
| | **(E)** Participant loans | 2b(1)(E) | | |
| | **(F)** Other | 2b(1)(F) | | |
| | **(G)** Total interest. Add lines **2b(1)(A)** through **(F)** | 2b(1)(G) | | 0 |
| | **(2)** Dividends: **(A)** Preferred stock | 2b(2)(A) | | |
| | **(B)** Common stock | 2b(2)(B) | | |
| | **(C)** Registered investment company shares (e.g. mutual funds) | 2b(2)(C) | | |
| | **(D)** Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)** | 2b(2)(D) | | 0 |
| | **(3)** Rents | 2b(3) | | |
| | **(4)** Net gain (loss) on sale of assets: **(A)** Aggregate proceeds | 2b(4)(A) | | |
| | **(B)** Aggregate carrying amount (see instructions) | 2b(4)(B) | | |
| | **(C)** Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result | 2b(4)(C) | | 0 |
| | **(5)** Unrealized appreciation (depreciation) of assets: **(A)** Real estate | 2b(5)(A) | | |
| | **(B)** Other | 2b(5)(B) | | |
| | **(C)** Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)** | 2b(5)(C) | | 0 |

| | | (a) Amount | (b) Total |
|---|---|---|---|
| **(6)** Net investment gain (loss) from common/collective trusts | 2b(6) | | |
| **(7)** Net investment gain (loss) from pooled separate accounts | 2b(7) | | |
| **(8)** Net investment gain (loss) from master trust investment accounts | 2b(8) | | -219314441 |
| **(9)** Net investment gain (loss) from 103-12 investment entities | 2b(9) | | |
| **(10)** Net investment gain (loss) from registered investment companies (e.g., mutual funds) | 2b(10) | | |
| **c** Other income | 2c | | |
| **d** Total income. Add all **income** amounts in column (b) and enter total | 2d | | -219314441 |
| **Expenses** | | | |
| **e** Benefit payment and payments to provide benefits: | | | |
| **(1)** Directly to participants or beneficiaries, including direct rollovers | 2e(1) | 110263438 | |
| **(2)** To insurance carriers for the provision of benefits | 2e(2) | | |
| **(3)** Other | 2e(3) | | |
| **(4)** Total benefit payments. Add lines **2e(1)** through **(3)** | 2e(4) | | 110263438 |
| **f** Corrective distributions (see instructions) | 2f | | |
| **g** Certain deemed distributions of participant loans (see instructions) | 2g | | |
| **h** Interest expense | 2h | | |
| **i** Administrative expenses: **(1)** Professional fees | 2i(1) | 1405922 | |
| **(2)** Contract administrator fees | 2i(2) | 1312531 | |
| **(3)** Investment advisory and management fees | 2i(3) | 3345130 | |
| **(4)** Other | 2i(4) | 10766191 | |
| **(5)** Total administrative expenses. Add lines **2i(1)** through **(4)** | 2i(5) | | 16829774 |
| **j** Total expenses. Add all **expense** amounts in column (b) and enter total | 2j | | 127093212 |
| **Net Income and Reconciliation** | | | |
| **k** Net income (loss). Subtract line **2j** from line **2d** | 2k | | -346407653 |
| **l** Transfers of assets: | | | |
| **(1)** To this plan | 2l(1) | | |
| **(2)** From this plan | 2l(2) | | |

## Part III Accountant's Opinion

**3** Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

**a** The attached opinion of an independent qualified public accountant for this plan is (see instructions):

**(1)** [X] Unmodified **(2)** [ ] Qualified **(3)** [ ] Disclaimer **(4)** [ ] Adverse

**b** Check the appropriate box(es) to indicate whether the IQPA performed an ERISA section 103(a)(3)(C) audit. Check both boxes (1) and (2) if the audit was performed pursuant to both 29 CFR 2520.103-8 and 29 CFR 2520.103-12(d). Check box (3) if pursuant to neither.

**(1)** [X] DOL Regulation 2520.103-8 **(2)** [ ] DOL Regulation 2520.103-12(d) **(3)** [ ] neither DOL Regulation 2520.103-8 nor DOL Regulation 2520.103-12(d).

**c** Enter the name and EIN of the accountant (or accounting firm) below:

**(1)** Name: DELOITTE & TOUCHE, LLP **(2)** EIN: 13-3891517

**d** The opinion of an independent qualified public accountant is **not attached** because:

**(1)** [ ] This form is filed for a CCT, PSA, or MTIA. **(2)** [ ] It will be attached to the next Form 5500 pursuant to 29 CFR 2520.104-50.

## Part IV Compliance Questions

**4** CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete lines 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete lines 4j and 4l. MTIAs also do not complete line 4l.

During the plan year:

| | | Yes | No | Amount |
|---|---|---|---|---|
| **a** Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.) | 4a | | X | |

| | | | Yes | No | Amount |
|---|---|---|---|---|---|
| **b** | Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.) | **4b** | | X | |
| **c** | Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.) | **4c** | | X | |
| **d** | Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.) | **4d** | | X | |
| **e** | Was this plan covered by a fidelity bond? | **4e** | X | | 10000000 |
| **f** | Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty? | **4f** | | X | |
| **g** | Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser? | **4g** | | X | |
| **h** | Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser? | **4h** | | X | |
| **i** | Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.) | **4i** | X | | |
| **j** | Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.) | **4j** | | X | |
| **k** | Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC? | **4k** | | X | |
| **l** | Has the plan failed to provide any benefit when due under the plan? | **4l** | | X | |
| **m** | If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.) | **4m** | | | |
| **n** | If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3 | **4n** | | | |

**5a** Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? ☐ Yes ☒ No

If "Yes," enter the amount of any plan assets that reverted to the employer this year _____.

**5b** If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)

| **5b(1)** Name of plan(s) | **5b(2)** EIN(s) | **5b(3)** PN(s) |
|---|---|---|
| | | |
| | | |
| | | |
| | | |

**5c** Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) ☒ Yes ☐ No ☐ Not determined

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year 478809.

# SCHEDULE R (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

## Retirement Plan Information

This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

**2021**

**This Form is Open to Public Inspection.**

For calendar plan year 2021 or fiscal plan year beginning 12/31/2021 and ending 12/30/2022

**A** Name of plan
EMPLOYEE RETIREMENT PLAN OF SAFEWAY INC. AND ITS DOMESTIC SUBSIDIARIES

**B** Three-digit plan number (PN) ▶ 001

**C** Plan sponsor's name as shown on line 2a of Form 5500
SAFEWAY INC.

**D** Employer Identification Number (EIN)
94-3019135

## Part I Distributions

**All references to distributions relate only to payments of benefits during the plan year.**

**1** Total value of distributions paid in property other than in cash or the forms of property specified in the instructions ..... **1** 0

**2** Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):

EIN(s): 36-3046063

**Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.**

**3** Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year ..... **3** 996

## Part II Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part.)

**4** Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ..... ☐ **Yes** ☒ **No** ☐ **N/A**

**If the plan is a defined benefit plan, go to line 8.**

**5** If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. **Date:** Month _____ Day _____ Year _____

**If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.**

**6 a** Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived) ..... **6a**

**b** Enter the amount contributed by the employer to the plan for this plan year ..... **6b**

**c** Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount) ..... **6c**

**If you completed line 6c, skip lines 8 and 9.**

**7** Will the minimum funding amount reported on line 6c be met by the funding deadline? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

**8** If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ..... ☐ **Yes** ☐ **No** ☒ **N/A**

## Part III Amendments

**9** If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box. ..... ☐ **Increase** ☐ **Decrease** ☐ **Both** ☒ **No**

## Part IV ESOPs (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.

**10** Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? ..... ☐ **Yes** ☐ **No**

**11 a** Does the ESOP hold any preferred stock? ..... ☐ **Yes** ☐ **No**

**b** If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.) ..... ☐ **Yes** ☐ **No**

**12** Does the ESOP hold any stock that is not readily tradable on an established securities market? ..... ☐ **Yes** ☐ **No**

## Part V Additional Information for Multiemployer Defined Benefit Pension Plans

**13** Enter the following information for each employer that contributed more than 5% of total contributions to the plan during the plan year (measured in dollars). See instructions. *Complete as many entries as needed to report all applicable employers.*

**a** Name of contributing employer

**b** EIN **c** Dollar amount contributed by employer

**d** Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

**e** Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

**a** Name of contributing employer

**b** EIN **c** Dollar amount contributed by employer

**d** Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

**e** Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

**a** Name of contributing employer

**b** EIN **c** Dollar amount contributed by employer

**d** Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

**e** Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

**a** Name of contributing employer

**b** EIN **c** Dollar amount contributed by employer

**d** Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

**e** Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

**a** Name of contributing employer

**b** EIN **c** Dollar amount contributed by employer

**d** Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

**e** Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

**a** Name of contributing employer

**b** EIN **c** Dollar amount contributed by employer

**d** Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

**e** Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

**14** Enter the number of deferred vested and retired participants (inactive participants), as of the beginning of the plan year, whose contributing employer is no longer making contributions to the plan for:

| | | |
|---|---|---|
| **a** The current plan year. Check the box to indicate the counting method used to determine the number of inactive participants: ☐ last contributing employer ☐ alternative ☐ reasonable approximation (see instructions for required attachment) | **14a** | |
| **b** The plan year immediately preceding the current plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment) | **14b** | |
| **c** The second preceding plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment) | **14c** | |

**15** Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:

| | | |
|---|---|---|
| **a** The corresponding number for the plan year immediately preceding the current plan year | **15a** | |
| **b** The corresponding number for the second preceding plan year | **15b** | |

**16** Information with respect to any employers who withdrew from the plan during the preceding plan year:

| | | |
|---|---|---|
| **a** Enter the number of employers who withdrew during the preceding plan year | **16a** | |
| **b** If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers | **16b** | |

**17** If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment ☐

## Part VI Additional Information for Single-Employer and Multiemployer Defined Benefit Pension Plans

**18** If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment ☐

**19** If the total number of participants is 1,000 or more, complete lines (a) through (c)

**a** Enter the percentage of plan assets held as:
Stock: 68.5 % Investment-Grade Debt: 27.6 % High-Yield Debt: 0.1 % Real Estate: 0.0 % Other: 3.8 %

**b** Provide the average duration of the combined investment-grade and high-yield debt:
☐ 0-3 years ☒ 3-6 years ☐ 6-9 years ☐ 9-12 years ☐ 12-15 years ☐ 15-18 years ☐ 18-21 years ☐ 21 years or more

**c** What duration measure was used to calculate line 19(b)?
☐ Effective duration ☐ Macaulay duration ☒ Modified duration ☐ Other (specify):

**20** **PBGC missed contribution reporting requirements.** If this is a multiemployer plan or a single-employer plan that is not covered by PBGC, skip line 20.

**a** Is the amount of unpaid minimum required contributions for all years from Schedule SB (Form 5500) line 40 greater than zero? ☐ Yes ☒ No

**b** If line 20a is "Yes," has PBGC been notified as required by ERISA sections 4043(c)(5) and/or 303(k)(4)? Check the applicable box:

☐ Yes.

☐ No. Reporting was waived under 29 CFR 4043.25(c)(2) because contributions equal to or exceeding the unpaid minimum required contribution were made by the 30th day after the due date.

☐ No. The 30-day period referenced in 29 CFR 4043.25(c)(2) has not yet ended, and the sponsor intends to make a contribution equal to or exceeding the unpaid minimum required contribution by the 30th day after the due date.

☐ No. Other. Provide explanation _____

# Employee Retirement Plan of Safeway Inc. and Its Domestic Subsidiaries

Employer ID No: 94-3019135
Plan Number: 001

Financial Statements as of and for the Years Ended December 30, 2022 and 2021,
Supplemental Schedule as of December 30, 2022,
and Independent Auditor's Report

# EMPLOYEE RETIREMENT PLAN OF SAFEWAY INC. AND ITS DOMESTIC SUBSIDIARIES

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NOTE: All schedules required by Section 2520.103-10 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 have been omitted because they are not applicable.

Deloitte.

**Deloitte & Touche LLP**
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USA

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## INDEPENDENT AUDITOR'S REPORT

To the Participants of the Employee Retirement Plan of
Safeway Inc. and its Domestic Subsidiaries:

**Scope and Nature of the ERISA Section 103(a)(3)(C) Audit**

We have performed audits of the financial statements of the Employee Retirement Plan of Safeway Inc. and its Domestic Subsidiaries (the "Plan"), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the statements of net assets available for benefits as of December 30, 2022 and 2021, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audits of the Plan's financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audits need not extend to any statements or information related to assets held for investment of the Plan (investment information) by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA (qualified institution).

Management has obtained certifications from a qualified institution as of December 30, 2022 and 2021, and for the years then ended, stating that the certified investment information, as described in Note 3 to the financial statements, is complete and accurate.

**Opinion**

In our opinion, based on our audits and on the procedures performed as described in the Auditor's Responsibilities for the Audit of the Financial Statements section

- The amounts and disclosures in the accompanying financial statements, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.
- The information in the accompanying financial statements related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

**Basis for Opinion**

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the Plan and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

**Responsibilities of Management for the Financial Statements**

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error. Management's election of the ERISA Section 103(a)(3)(C) audit does not affect management's responsibility for the financial statements.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for one year after the date that the financial statements are available to be issued.

Management is also responsible for maintaining a current plan instrument, including all plan amendments, administering the Plan, and determining that the Plan's transactions that are presented and disclosed in the financial statements are in conformity with the Plan's provisions, including maintaining sufficient records with respect to each of the participants, to determine the benefits due or which may become due to such participants.

**Auditor's Responsibilities for the Audit of the Financial Statements**

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.

- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, no such opinion is expressed.

- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.

- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for a reasonable period of time.

Our audits did not extend to the certified investment information, except for obtaining and reading the certification, comparing the certified investment information with the related information presented and disclosed in the financial statements, and reading the disclosures relating to the certified investment information to assess whether they are in accordance with the presentation and disclosure requirements of accounting principles generally accepted in the United States of America.

Accordingly, the objective of an ERISA Section 103(a)(3)(C) audit is not to express an opinion about whether the financial statements as a whole are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

**Other Matter—Supplemental Schedule Required by ERISA**

The supplemental schedule of assets (held at end of year) is presented for purposes of additional analysis and is not a required part of the financial statements but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedule, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. For information included in the supplemental schedule that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

In forming our opinion on the supplemental schedule, we evaluated whether the supplemental schedule, other than the information agreed to or derived from the certified investment information, including its form and content, is presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion:

- The form and content of the supplemental schedule, other than the information in the supplemental schedule that agreed to or is derived from the certified investment information, are presented, in all material respects, in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.
- The information in the supplemental schedule related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

Deloitte & Touche LLP

October 6, 2023

**EMPLOYEE RETIREMENT PLAN OF SAFEWAY INC.**
**AND ITS DOMESTIC SUBSIDIARIES**

**STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS**
**AS OF DECEMBER 30, 2022 AND 2021**
**(In thousands)**

| | 2022 | 2021 |
|---|---|---|
| ASSETS: | | |
| Plan's interest in investments of the Safeway Inc. Master Retirement Trust (Note 5) | $ 1,158,492 | $ 1,548,326 |
| Receivables: | | |
| Accrued investment income | 2,432 | 2,210 |
| Due from broker for securities sold | 55,244 | 62,201 |
| Total receivables | 57,676 | 64,411 |
| Total assets | 1,216,168 | 1,612,737 |
| LIABILITIES: | | |
| Due to broker for securities purchased | 89,671 | 139,403 |
| Accrued expenses | 916 | 1,345 |
| Total liabilities | 90,587 | 140,748 |
| NET ASSETS AVAILABLE FOR BENEFITS | $ 1,125,581 | $ 1,471,989 |

See notes to financial statements.

**EMPLOYEE RETIREMENT PLAN OF SAFEWAY INC.**
**AND ITS DOMESTIC SUBSIDIARIES**

**STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS**
**FOR THE YEARS ENDED DECEMBER 30, 2022 AND 2021**
**(In thousands)**

| | 2022 | 2021 |
|---|---|---|
| ADDITIONS: | | |
| Investment (loss) income, net — Plan's interest in the Safeway Inc. Master Retirement Trust (Note 5) | $ (219,314) | $ 182,991 |
| DEDUCTIONS: | | |
| Benefits paid directly to participants | (111,922) | (149,512) |
| Refunds (purchases) of annuity contracts | 1,658 | (156,102) |
| Administrative expenses | (16,830) | (18,260) |
| Total deductions | (127,094) | (323,874) |
| DECREASE IN NET ASSETS | (346,408) | (140,883) |
| NET ASSETS AVAILABLE FOR BENEFITS: | | |
| Beginning of year | 1,471,989 | 1,612,872 |
| End of year | $ 1,125,581 | $ 1,471,989 |

See notes to financial statements.

**EMPLOYEE RETIREMENT PLAN OF SAFEWAY INC.**
**AND ITS DOMESTIC SUBSIDIARIES**

**NOTES TO FINANCIAL STATEMENTS**
**AS OF AND FOR THE YEARS ENDED DECEMBER 30, 2022 AND 2021**

## 1. DESCRIPTION OF THE PLAN

The following description of the Employee Retirement Plan of Safeway Inc. and Its Domestic Subsidiaries (the "Plan") is provided for general information purposes only. Participants should refer to the Plan document for more complete information.

**General -** The Plan is a defined benefit plan that provides retirement benefits for all employees of Safeway Inc. ("Safeway"), NAI Saturn Eastern LLC (effective January 30, 2015), or Collington Services LLC (effective December 30, 2016) (collectively, the "Company") who have reached the age of 21, have completed one year of service, are not eligible for retirement benefits under another plan to which the Company contributes, and whose principal place of employment is within the United States. The Albertsons Companies Retirement Benefit Plans Committee (the "Plan Administrator") controls and manages the operation and administration of the Plan. The assets of the Plan are maintained in a trust established pursuant to a trust agreement between Safeway and Northern Trust Corporation ("Northern Trust"). The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended ("ERISA").

Effective April 1, 2015 (the "Freeze Date"), the Plan was frozen to new non-union participants who had not satisfied the Plan's eligibility requirements on the Freeze Date or who were hired (or rehired in the case of a former or inactive participant) after the Freeze Date. All other eligible employees shall continue to participate in the Plan in accordance with the Plan's terms.

Effective October 1, 2021, the assets of the Shaw's Supermarkets, Inc. Pension Plan for Union Employees (the "Shaw's Plan") and the Retirement Plan for Employees of United Supermarkets, LLC (the "United Plan") were transferred to the Master Trust with the Plan. After the asset transfer, the Plan, the Shaw's Plan and the United Plan each hold a proportionate share of the Master Trust's assets.

**Trustee and Custodian -** The trustee and custodian of the Plan is Northern Trust ("Trustee").

**Pension Benefits -** Prior to July 1, 1999, benefits were determined by one of two basic formulas based upon years of service, annual compensation, and retirement age. The participant's benefit was calculated based on the formula that provided the larger amount. Effective July 1, 1999, the Plan was amended whereby participants will accrue benefits based on pay-based credits and interest credits. Pay-based credits are defined as an amount equal to a percent of eligible pay for each month the employee participates in the Plan. This percent will be based on the number of years of participation. Interest credits are based on the average rate of return for 30-year Treasury securities that are set in November of each year. The Plan has a "transition retirement benefit" provision. Under this provision, benefits are calculated under the prior plan formula. The participant receives the better of the prior plan formula and the new plan formula through June 30, 2006.

The Plan defines normal retirement as beginning at age 65; however, certain benefits under the prior plan formula are available unreduced at age 62. The cash balance account for each participant is credited monthly with a compensation credit based on rates varying by the employee classification in which the participant works and completed years of participation. The Plan permits early retirement with reduced benefits. Upon retirement or termination, participants may elect to receive their pension benefits as a lump-sum payment, a monthly annuity payment, or a combination of a partial lump-sum payment and a partial monthly annuity payment. Effective September 1, 2020, the Plan was amended to permit inactive participants to elect an in-service distribution of their vested accrued benefit if they have attained age 59 ½ at time of their election.

Benefits become 100% vested for noncash balance participants after completing five years of service after the age of 18, upon death, or upon reaching the age of 55 regardless of the length of service. Effective December 31, 2008, the Plan was amended to change vesting for cash balance participants from five years to three years, in accordance with changes in the applicable law.

Under the transition retirement benefit provision, certain participants accrued an account balance benefit at the minimum rate of 4% of the participant's covered compensation. Accruals under this provision ended on June 30, 2006. The account balance earns an annual return based on 12-month average rates on one-year U.S. Treasury Bills, as determined in November of each applicable year. Participants can elect to receive benefits as a lump-sum distribution, as monthly payments or as a combination of both. Participants who choose to receive monthly payments at age 55 or older receive a monthly benefit of 1% of the total balance in the account. Participants who retire prior to age 55 receive a reduced percentage.

Certain participants covered by collective bargained agreements accrue benefits based on such agreements.

Effective December 31, 2008, the Plan was amended to reduce future pay-based credits by 50% for non-union cash balance participants. Effective December 30, 2018, the Plan was further amended to provide that non-union cash balance participants would no longer receive any future pay-based credits to their cash balance accounts under the Plan.

Effective August 31, 2021, the Plan was amended to allow for the purchase of a group annuity contract to cover benefit payments for certain retirees in pay status under the Plan. The group annuity contract provides for continued payment of the individuals pension benefit, in the same amount that was in effect under the Plan immediately before the purchase of the group annuity contract. As a result, the Plan has no liability for the payment of such benefits. The annuity contracts issued for the year ended December 31, 2021 was $155,931,122, and for the year ended December 31, 2022 there was a related refund of $1,658,439. This activity has been included in Refunds (purchases) of annuity contracts in the Statements of changes in net assets available for benefits.

## 2. SIGNIFICANT ACCOUNTING POLICIES

**Basis of Accounting**—The accompanying financial statements have been prepared in accordance with accounting principles generally accepted in the United States of America ("GAAP").

**Use of Estimates**—The preparation of financial statements in conformity with GAAP requires Plan management to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, disclosure of contingent assets and liabilities, and the actuarial present value of accumulated Plan benefits and changes therein at the date of the financial statements. Actual results could differ from those estimates.

**Risks and Uncertainties**—The Plan utilizes various investment securities, including common collective trust funds, mutual funds, U.S. government securities, corporate bonds, mortgage- and other asset-backed securities, common and preferred stocks, derivative financial instruments, and other securities. Investment securities, in general, are exposed to various risks, such as interest rate, credit risk, and overall market volatility. Due to the level of risk associated with certain investment securities, it is reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect the amounts reported in the financial statements.

Plan contributions are made and the actuarial present value of accumulated Plan benefits are reported based on certain assumptions pertaining to interest rates, inflation rates, and employee demographics, all of which are subject to change. Due to uncertainties inherent in the estimations and assumptions process, it is at least reasonably possible that changes in these estimates and assumptions in the near term would be material to the financial statements.

**Investment Valuation and Income Recognition**—Investments are stated at fair value. Fair value of a financial instrument is the amount that would be received to sell an asset or paid to transfer a liability in an orderly

transaction between market participants at the measurement date. See Note 5 for a description of the valuation methods.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation includes the Plan's gains and losses on investments bought and sold as well as held during the year.

**Payment of Benefits**—Benefit payments to participants are recorded upon distribution.

**Administrative Expenses**—Administrative expenses are principally paid by the Plan, as provided in the Plan document.

**Subsequent Events**—Subsequent events were evaluated through October 6, 2023, the date the financial statements were available to be issued. Effective December 31, 2022, the Spin-Off Employee Retirement Plan of Safeway Inc. (the "Safeway Spin-Off Plan") was adopted and certain Plan participants with an accrued benefit of less than $6,600 as of December 30, 2022 ceased to be a participant in the Plan and became a participant in the Safeway Spin-Off Plan on December 31, 2022, and the participant's accrued benefit was transferred to the Safeway Spin-Off Plan. On or subsequent to December 31, 2022, $7.8 million in assets were transferred from the Plan to the Safeway Spin-Off Plan to fund the liabilities associated with the transferred liabilities. No other events occurred that require additional disclosure or adjustments to the Plan's financial statements.

## 3. CERTIFIED INVESTMENT INFORMATION

The following is a summary of the certified investment information regarding the Plan as of and for the years ended December 30, 2022 and December 30, 2021, included in the Plan's financial statements and supplemental schedule, that was prepared by or derived from information prepared by the Trustee, and furnished to the Plan administrator (in thousands). The Plan administrator has obtained certifications from the Trustee that such information is complete and accurate.

| | 2022 | 2021 |
|---|---|---|
| Statements of net assets available for benefits: | | |
| Plan's interest in investments of the Safeway Inc. Master Retirement Trust | $ 1,158,492 | $ 1,548,326 |
| Due from broker for securities sold | 55,244 | 62,201 |
| Due to broker for securities purchased | (89,671) | (139,403) |
| | | |
| Statements of changes in net assets available for benefits: | | |
| Investment (loss) income, net - Plan's interest in the Safeway Inc. Master Retirement Trust | (219,314) | 182,991 |
| | | |
| Notes 5 and 6: All investment balances and investment information excluding the classification and level of investments in Note 5 | | |
| | | |
| Supplemental schedules: All investment balances and information included in the supplemental schedule of assets (held at end of year). | | |

## 4. FUNDING POLICY

Contributions to the Plan are made solely by the Company, and are based on actuarial determinations of funding requirements, which include assumptions regarding rates of return on investments, salary and benefit increases, mortality rates, and other factors, as well as consideration of ERISA funding requirements. The employers in the Plan had no contributions in 2022 and 2021. The Company met the minimum funding requirements of ERISA for the years ended December 30, 2022 and 2021.

In 1987, the Plan was amended to not require or permit employee contributions. Prior to this amendment, participants were required to contribute a specified percentage of their annual compensation. Participants have a nonforfeitable right to their employee contributions plus interest compounded annually and may withdraw their employee contributions and interest at any time without terminating employment. Accumulated employee contributions and interest thereon, net of applicable benefit payments, at December 30, 2022 and 2021, were $830,080 and $880,782, respectively. Interest is currently credited to the employee accounts at a minimum rate of 5% compounded annually.

## 5. MASTER TRUST

Beginning on December 6, 2012 (the "2012 Commingle Date") and until the Vons Plan and Genuardi's Plan's net assets available for benefits and accumulated benefit obligation were transferred to the Plan on December 30, 2012, the Plan participated in a master trust arrangement with the Safeway Inc. Master Retirement Trust (the "Master Trust"). The Trustee holds the Master Trust's investment assets and provides administrative functions for each of the plans participating in the Master Trust.

Between December 31, 2012 and June 30, 2013, no other plans participated in the Master Trust. As a result there was no commingling of investments during that period.

On July 1, 2013 (the "2013 Commingle Date"), the Safeway Multiple Employer Retirement Plan (the "SMERP") also began participating in the Master Trust, at which time commingling resumed until the SMERP's net assets available for benefits and accumulated benefit obligation was transferred to the Plan on December 30, 2016.

Use of the Master Trust permitted the commingling of the Plan's assets with the assets of the Vons Plan, Genuardi's Plan and SMERP until those plans merged into the Plan. Between December 31, 2016 and October 1, 2021, no other plans participated in the Master Trust. As a result there was no commingling of investments during that period.

Effective October 1, 2021, the assets of the Shaw's Plan and the United Plan were transferred to the Master Trust with the Plan. After the asset transfer, the Plan, the Shaw's Plan and the United Plan each hold a proportionate share of the Master Trust's assets. Although assets of the plans are commingled in the Master Trust, the Trustee maintains supporting records for the purposes of allocating the net gain or loss of the investment account to the participating plans. The net investment income and administrative expenses are allocated by the Trustee to each participating plan based on the relationship of the interest of each plan of the total of the interests of the participating plans.

The following presents the investment securities of the Master Trust, and the Plan's share of investment securities, as of December 30, 2022 and 2021 (in thousands):

| | 2022 | | 2021 | |
|---|---|---|---|---|
| | Master Trust | Plan's Proportionate Share | Master Trust | Plan's Proportionate Share |
| Investments at fair value: | | | | |
| Cash and cash equivalents | $ (185) | $ (127) | $ 4,833 | $ 3,994 |
| Short-term investment collective trust fund | 54,461 | 48,910 | 110,722 | 74,118 |
| Common stock | 202,419 | 168,383 | 235,945 | 196,315 |
| Collective trust funds | 547,417 | 455,191 | 713,797 | 600,183 |
| Corporate bonds | 75,099 | 60,213 | 133,060 | 109,697 |
| Mortgage- and other asset-backed securities | 38,510 | 31,055 | 36,993 | 30,532 |
| Mutual funds | 188,610 | 156,441 | 250,252 | 207,074 |
| U.S. government securities | 235,340 | 188,010 | 330,947 | 272,645 |
| Other securities | 59,099 | 47,842 | 64,195 | 53,253 |
| Derivative assets | 4,356 | 3,434 | 879 | 723 |
| Derivative liabilities | (1,091) | (860) | (254) | (208) |
| Total Net Assets of Master Trust | $ 1,404,035 | | $ 1,881,369 | |
| Plan's interest in net assets of Master Trust | | $ 1,158,492 | | $ 1,548,326 |
| Plan's interest in the Master Trust as a percentage of the total | | 82.5 % | | 82.3 % |

The following presents the (decrease) increase in the Master Trust's assets, and the Plan's share of the (decrease) increase in the Master Trust's assets for 2022 and 2021:

| | 2022 | 2021 |
|---|---|---|
| Total net (loss) gain in the fair value of trust assets | $ (283,628) | $ 202,752 |
| Interest and dividends | 19,053 | 18,316 |
| Total (decrease) increase | (264,575) | 221,068 |
| Administrative expenses | (22,231) | (21,951) |
| Total (decrease) increase in trust assets | $ (286,806) | $ 199,117 |
| Plan's interest in Trust investment activities | $ (219,314) | $ 182,991 |

The accounting guidance for fair value measurements defines fair value, establishes a framework for measuring fair value in accordance with GAAP, and requires disclosures about fair value measurements. The guidance prioritizes the inputs for measuring fair value into the following hierarchy:

*Level 1*—Quoted prices (unadjusted) in active markets for identical assets or liabilities.

*Level 2*—Securities not traded on an active market but for which observable market inputs are readily available.

*Level 3*—Unobservable inputs in which little or no market activity exists, therefore requiring an entity to develop its own assumptions about the assumptions that market participants would use in pricing.

The level within the fair value hierarchy is based on the lowest level of any input which is deemed significant to the fair value measurement.

The Plan's policy is to recognize significant transfers between levels at the beginning of the reporting period.

Assets measured at fair value on a recurring basis consisted of the following as of December 30, 2022 (in thousands):

| | Master Trust Fair Value Measurements | | | | |
|---|---|---|---|---|---|
| **Asset Category** | **Total** | **Quoted Prices in Active Markets for Identical Assets (Level 1)** | **Significant Observable Inputs (Level 2)** | **Significant Unobservable Inputs (Level 3)** | **Assets Measured at NAV** |
| Investments at fair value: | | | | | |
| Cash and cash equivalents | $ (185) | $ (1,083) | $ 898 | $ — | $ — |
| Short-term investment collective trust fund | 54,461 | — | — | — | 54,461 |
| Common stock: | | | | | |
| Domestic common stock | 148,097 | 148,097 | — | — | — |
| International common stock | 54,322 | 54,322 | — | — | — |
| Collective trust funds | 547,417 | — | — | — | 547,417 |
| Corporate bonds | 75,099 | — | 75,099 | — | — |
| Mortgage- and other asset-backed securities | 38,510 | — | 38,510 | — | — |
| Mutual funds | 188,610 | 146,255 | 42,355 | — | — |
| U.S. government securities | 235,340 | — | 235,340 | — | — |
| Other securities | 59,099 | — | 20,418 | — | 38,681 |
| Derivative assets | 4,356 | 121 | 4,235 | — | — |
| Derivative liabilities | (1,091) | (19) | (1,072) | — | — |
| Total Investment Securities in Master Trust | $1,404,035 | $ 347,693 | $ 415,783 | $ — | $ 640,559 |

For the year ended December 30, 2022, there were no significant transfers in or out of Levels 1, 2 or 3.

Assets measured at fair value on a recurring basis consisted of the following as of December 30, 2021 (in thousands):

| | Master Trust Fair Value Measurements | | | | |
|---|---|---|---|---|---|
| **Asset Category** | **Total** | **Quoted Prices in Active Markets for Identical Assets (Level 1)** | **Significant Observable Inputs (Level 2)** | **Significant Unobservable Inputs (Level 3)** | **Assets Measured at NAV** |
| Investments at fair value: | | | | | |
| Cash and cash equivalents | $ 4,833 | $ 4,833 | $ — | $ — | $ — |
| Short-term investment collective trust fund | 110,722 | — | 110,722 | — | — |
| Common stock: | | | | | |
| Domestic common stock | 170,985 | 170,985 | — | — | — |
| International common stock | 64,960 | 64,960 | — | — | — |
| Collective trust funds | 713,797 | — | — | — | 713,797 |
| Corporate bonds | 133,060 | — | 133,060 | — | — |
| Mortgage- and other asset-backed securities | 36,993 | — | 36,993 | — | — |
| Mutual funds | 250,252 | 250,252 | — | — | — |
| U.S. government securities | 330,947 | — | 330,947 | — | — |
| Other securities | 64,195 | — | 17,252 | — | 46,943 |
| Derivative assets | 879 | 149 | 730 | — | — |
| Derivative liabilities | (254) | (43) | (211) | — | — |
| Total Investment Securities in Master Trust | $1,881,369 | $ 491,136 | $ 629,493 | $ — | $ 760,740 |

Effective October 1, 2021, the assets of the Shaw's Plan and the United Plan were transferred to the Master Trust with the Plan. For the year ended December 30, 2021, there were no other significant transfers in or out of Levels 1, 2 or 3.

Below is a description of the valuation methodologies used for the fair value measurements.

*Cash and Cash Equivalents*—The carrying value of these items approximates fair value.

*Common Collective Trust Funds and Short-Term Investment Collective Trust Fund*—These investments are valued based on the Net Asset Value ("NAV") of the underlying investments and are provided by the fund issuers. There are no unfunded commitments or redemption restrictions for these funds.

*Common and Preferred Stock*—The fair value of common and preferred stock is generally based on the exchange quoted market prices. When quoted prices are not available for identical stock, an industry standard valuation model is used which maximizes observable inputs.

*Corporate Bonds*—The fair value of corporate bonds is generally based on yields currently available on comparable securities of the same or similar issuers with similar credit ratings and maturities. When quoted prices are not available for identical or similar bonds, the fair value is based upon an industry valuation model, which maximizes observable inputs.

*Mortgage- and Other Asset-Backed Securities*—The fair value of mortgage- and other asset-backed securities is generally based on yields currently available on comparable securities of the same or similar issuers with similar

credit ratings and maturities. When quoted prices are not available for comparable securities, the fair value is based upon an industry model which maximizes observable inputs.

*Mutual Funds*—Valued at the daily closing price as reported by the fund. Mutual funds held by the Plan are open-ended mutual funds that are registered with the Securities and Exchange Commission. These funds are required to publish their daily net asset value and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded.

*U.S. Government Securities*—The fair value of U.S. government securities is based on quoted market prices when available. When quoted prices are not available, the fair value of U.S. government securities is based on yields currently available on comparable securities or on an industry valuation model which maximizes observable inputs.

*Other Securities*—Other securities, which consist primarily of U.S. municipal bonds, foreign government bonds and foreign agency securities are valued based on yields currently available on comparable securities of issuers with similar credit ratings. Also included in Other securities is a commingled fund valued based on the NAV of the underlying investments and is provided by the issuer and exchange-traded derivatives that are valued based on quoted prices in an active market for identical derivatives, assets and liabilities.

*Derivative Financial Instruments*—Exchange-traded derivatives are valued based on quoted prices in an active market for identical derivatives assets and liabilities. Non-exchange-traded derivatives are valued using industry valuation models, which maximize observable inputs, such as interest-rate yield curve data, foreign exchange rates, and applicable spot and forward rates.

## 6. DERIVATIVE FINANCIAL INSTRUMENTS

The Master Trust's investment policy allows use of derivatives by investment managers for investment portfolio strategies. Accordingly, Plan investments may include the use of the following commonly structured derivative financial instruments.

**Foreign Currency Exchange Contracts**—The Plan enters into forward contracts to purchase and sell foreign currencies in the normal course of its investing activities to manage the currency exposure associated with the Plan's foreign investments. The terms of these contracts generally do not exceed one year. The credit risk associated with these contracts is minimal, as they are entered into with a limited number of highly rated counterparties.

The Plan reflects the fair value of all forward contracts as an asset or liability in the Plan's financial statements. The fair values associated with the foreign currency contracts have been estimated by valuing the net position of the contracts using the applicable spot rates and forward rates as of the reporting date. In the statements of net assets available for benefits, forward contracts to purchase foreign currency are reported as part of derivative liabilities and forward contracts to sell foreign currency are shown as derivative assets. Changes in fair value are accounted for as net gain (loss) in fair value of investments.

**Futures Contracts**—The Plan enters into futures contracts in the normal course of its investing activities to manage market risk associated with the Plan's cash and cash equivalent investments and fixed-income investments to achieve overall investment portfolio objectives. These contracts involve elements of market risk in excess of amounts recognized in the statements of net assets available for benefits. The credit risk associated with these contracts is minimal, as they are traded on organized exchanges and settled daily.

During Plan years 2022 and 2021, the Plan was a party to futures contracts held for trading purposes. Upon entering into a futures contract, the Plan is required to deposit either in cash or securities an amount ("initial margin") equal to a certain percentage of the nominal value of the contract. Subsequent payments are then made or received by the Plan, depending on the daily fluctuation in the value of the underlying contracts. There were no cash and cash equivalents included in the investments of the Plan at December 30, 2022 and 2021 held as performance security on futures contracts.

The fair value of futures contracts in the statements of net assets available for benefits is zero at December 30, 2022 and 2021, as settlements are made by cash daily. Changes in fair value are accounted for as net gain (loss) in fair value of investments.

## 7. ACCUMULATED PLAN BENEFITS

Accumulated plan benefits are those future periodic payments, including lump-sum distributions, that are attributable under the Plan's provisions to service rendered by employees as of the valuation date. Accumulated plan benefits include benefits expected to be paid to (1) retired or terminated employees or their beneficiaries, (2) beneficiaries of employees who have died, and (3) present employees or their beneficiaries. The actuarial present value of accumulated plan benefits is determined by an independent actuary and is the amount that results from applying actuarial assumptions to adjust the accumulated plan benefits to reflect the time value of money (through discounts for interest) and the probability of payment (by means of decrements, such as for death, disability, withdrawal, or retirement) between the valuation date and the expected date of payment.

As permitted by GAAP, the Plan uses beginning of the year accumulated plan benefit data, therefore the table below includes balances in the Plan on December 30, 2022. The actuarial present value of accumulated plan benefits as of December 30, 2021 is as follows (in thousands):

| | | 2021 |
|---|---|---|
| Vested benefits: | | |
| Participants and/or beneficiaries currently receiving benefits | $ | 482,756 |
| Other participants | | 826,907 |
| Total vested benefits | | 1,309,663 |
| Nonvested benefits | | 297 |
| Total actuarial present value of accumulated plan benefits | $ | 1,309,960 |

The changes in the actuarial present value of the Plan's accumulated plan benefits for the year ended December 30, 2021, are as follows (in thousands):

| | | |
|---|---|---|
| Actuarial present value of accumulated plan benefits, December 30, 2020 | $ | 1,528,759 |
| Increase (decrease) during the year attributable to: | | |
| Interest accumulation | | 79,240 |
| Change in actuarial assumptions | | (28,068) |
| Benefits accumulated and other | | 35,644 |
| Benefits paid | | (305,615) |
| Total actuarial present value of accumulated plan benefits | $ | 1,309,960 |

The significant actuarial assumptions used to determine the actuarial present value of accumulated plan benefits in the December 31, 2021 valuation were: (a) mortality rates based upon the PRI-2012 mortality table with projection scale MP-2021, (b) average active retirement age of 62, (c) average TV retirement age of 59 (based on the average TV current age of 52), (d) a discount rate assumption of 6.00%, (e) 80% of active retirements will take a lump-sum distribution and 90% of terminated vested participants will take a lump-sum distribution, (f) cash balance to annuity conversion rates and interest crediting rates derived using 30-year treasury rates, and (g) lump sum payments are determined using 417(e) interest rates.

The foregoing actuarial assumptions are based on the presumption that the Plan will continue. If the Plan were to terminate, different actuarial assumptions and other factors might be applicable in determining the actuarial present value of accumulated plan benefits. Due to uncertainties inherent in the estimations and assumptions process, it is at least reasonably possible that changes in these estimates and assumptions in the near term would be material to the financial statements.

## 8. EXEMPT PARTY-IN-INTEREST TRANSACTIONS

Certain Plan investments are shares of collective trust funds managed by Northern Trust. Northern Trust is the Trustee as defined by the Plan and, therefore, these transactions qualify as party-in-interest transactions. Fees paid by the Plan for the investment management services for the years ended December 30, 2022 and 2021, were approximately $90,626 and $102,547, respectively, and are included in administrative expenses.

## 9. FEDERAL INCOME TAX STATUS

The Internal Revenue Service ("IRS") has determined and informed Safeway by a letter dated March 2, 2021, that the Plan and related trust were designed in accordance with the applicable regulations of the Internal Revenue Code ("IRC"). The Plan has been amended since receiving the determination letter. However, the Plan Administrator and the Plan's ERISA Plan Administrator believes that the Plan is currently designed and operated in compliance with the applicable requirements of the IRC, and the Plan and related trust continue to be tax exempt. Therefore, no provision for income taxes has been included in the Plan's financial statements.

GAAP requires Plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan Administrator believes it is no longer subject to income tax examinations for years prior to 2019.

## 10. PLAN TERMINATION

Although it has not expressed any intention to do so, Safeway has the right under the Plan, in certain circumstances, to discontinue its contributions at any time and to terminate the Plan subject to the provisions set forth in ERISA. In the event that the Plan is terminated, the net assets of the Plan will be allocated for payment of Plan benefits to the participants in an order of priority determined in accordance with ERISA, applicable regulations thereunder, and the Plan document.

Certain benefits under the Plan are insured by the Pension Benefit Guaranty Corporation ("PBGC") if the Plan terminates. Generally, the PBGC guarantees most vested normal age retirement benefits, early retirement benefits, and certain disability and survivor's pensions. However, the PBGC does not guarantee all types of benefits under the Plan, and the amount of benefit protection is subject to certain limitations. Vested benefits under the Plan are guaranteed at the level in effect on the date of the Plan's termination, subject to a statutory ceiling on the amount of an individual's monthly benefit.

Whether all participants receive their benefits should the Plan be terminated at some future time will depend on the sufficiency, at that time, of the Plan's net assets to provide those benefits, the priority of those benefits to be paid, and the level and type of benefits guaranteed by the PBGC at that time. Some benefits may be fully or partially provided for by the then-existing assets and the PBGC guaranty, while other benefits may not be provided for at all.

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# SUPPLEMENTAL SCHEDULE

# Schedule SB Attachment (Form 5500)—December 31, 2021 Plan Year
# Employee Retirement Plan of Safeway Inc. and Its Domestic Subsidiaries
# EIN: 943019135 PN: 001

## Schedule SB, line 26—Schedule of Active Participant Data as of December 31, 2021

Number of Participants, Average Compensation and Average Cash Balance Account

| Attained Age | Years of Credited Service | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|
| | <1 | 1-4 | 5-9 | 10-14 | 15-19 | 20-24 | 25-29 | 30-34 | 35-39 | 40+ |
| | 32 | 27 | | | | | | | | |
| | $19,033 | $27,891 | | | | | | | | |
| <25 | $164 | $863 | | | | | | | | |
| | 39 | 142 | 40 | | | | | | | |
| | $42,447 | $41,896 | $38,847 | | | | | | | |
| 25-29 | $547 | $2,770 | $3,632 | | | | | | | |
| | 109 | 238 | 455 | 31 | | | | | | |
| | $44,323 | $58,198 | $65,913 | $60,220 | | | | | | |
| 30-34 | $2,591 | $4,902 | $10,002 | $13,998 | | | | | | |
| | 138 | 264 | 479 | 332 | 27 | | | | | |
| | $44,555 | $62,379 | $81,227 | $82,416 | $61,320 | | | | | |
| 35-39 | $5,700 | $6,496 | $16,283 | $27,650 | $34,967 | | | | | |
| | 137 | 268 | 415 | 434 | 186 | 28 | | | | |
| | $53,023 | $56,227 | $81,408 | $93,404 | $79,274 | $52,256 | | | | |
| 40-44 | $10,578 | $6,223 | $18,355 | $41,726 | $60,008 | $48,876 | | | | |
| | 138 | 241 | 346 | 393 | 320 | 114 | 21 | | | |
| | $47,587 | $57,410 | $78,547 | $86,870 | $100,182 | $88,266 | $58,902 | | | |
| 45-49 | $12,010 | $8,359 | $18,281 | $40,483 | $87,507 | $98,915 | $91,211 | | | |
| | 181 | 288 | 398 | 400 | 410 | 234 | 99 | 16 | | |
| | $44,751 | $50,340 | $70,158 | $83,192 | $95,358 | $103,126 | $81,036 | | | |
| 50-54 | $10,725 | $7,350 | $18,524 | $41,218 | $88,659 | $147,317 | $132,376 | | | |
| | 219 | 298 | 396 | 416 | 351 | 248 | 180 | 54 | 9 | |
| | $49,355 | $46,910 | $64,575 | $76,356 | $80,291 | $86,968 | $92,286 | $66,531 | | |
| 55-59 | $17,125 | $8,444 | $19,930 | $41,191 | $77,769 | $138,169 | $191,970 | $150,791 | | |
| | 125 | 195 | 320 | 305 | 299 | 199 | 131 | 71 | 17 | 2 |
| | $46,650 | $47,841 | $57,255 | $65,450 | $73,178 | $88,458 | $66,095 | $90,298 | | |
| 60-64 | $14,364 | $9,369 | $16,245 | $38,137 | $80,729 | $156,912 | $157,559 | $259,989 | | |
| | 46 | 65 | 128 | 104 | 100 | 67 | 40 | 15 | 11 | 1 |
| | $40,658 | $44,440 | $49,959 | $56,479 | $68,329 | $78,860 | $59,227 | | | |
| 65-69 | $20,773 | $8,208 | $16,933 | $36,083 | $88,024 | $145,522 | $155,473 | | | |
| | 14 | 39 | 44 | 32 | 36 | 17 | 12 | 2 | | 1 |
| | | $30,557 | $33,855 | $37,861 | $60,841 | | | | | |
| 70+ | | $6,125 | $11,051 | $18,706 | $82,979 | | | | | |

N-12,029

# Schedule SB Attachment (Form 5500)—December 31, 2021 Plan Year
# Employee Retirement Plan of Safeway Inc. and Its Domestic Subsidiaries
# EIN: 943019135 PN: 001

## Schedule SB, Part V—Statement of Actuarial Assumptions/Methods

| | |
|---|---|
| Interest Rates for Minimum Funding Purposes | Based on segment rates with a four-month lookback (as of August 2021), each adjusted as needed to fall within the 25-year average interest rate stabilization corridor under ARPA. |
| 1st Segment Rate | 4.75%. |
| 2nd Segment Rate | 5.36%. |
| 3rd Segment Rate | 6.11%. |

Cash Balance Interest Crediting Rate

| Crediting Rate Type | Actual 2021[1] | Assumed 2022+[2] |
|---|---|---|
| Cash Balance Benefits | 1.94% | 2.35%[3] |
| Account Balance Benefits | 0.18% | 1.10%[4] |
| Employee Contributions | 1.52% | 1.85%[5] |

| | |
|---|---|
| Salary Increases | 2.80%. |
| Optional Payment Form Election Percentage | |
| Actives Terminations | 65% Immediate Lump Sum.<br>35% Lump Sum at age 55. |
| Actives Retirements | 80% Immediate Lump Sum.<br>11% 100% Joint & Survivor Annuity.<br>9% Single Life Annuity. |
| Current Terminated Vested Commencing Within One Year After Termination | 100% Lump Sum. |
| Current Terminated Vested Commencing After One Year of Termination | 90% Lump Sum.<br>5.5% 100% Joint & Survivor Annuity.<br>4.5% Single Life Annuity. |
| Optional Payment Form Conversion Interest Rate | |
| Annuity to Lump Sum Conversion | Same as funding interest rates. |
| Cash Balance to Annuity Conversion | 2.10%[6]. |
| Late Retirement Factor Interest Rates | 2.10%[1]. |

[1] Based on latest November 30-year Treasury rates, latest November 1-year Treasury rates, and 120% of latest December Federal Midterm rate, respectively. Although unlimited crediting rates are shown here, interest crediting rate floors are applied, if applicable, as defined by the plan document.
[2] Assumed rates include applicable floors as defined by the plan document.
[3] Calculated using latest January 30-year Treasury rates, limited to an 85% to 110% corridor of the average yields on 30-year Treasury bonds over the 5-year period, rounded to the nearest 0.05%.
[4] Calculated as the assumed Cash Balance Interest Crediting Rate minus 125 basis points.
[5] Calculated as the assumed Cash Balance Interest Crediting Rate minus 50 basis points.
[6] Calculated using latest January 30-year Treasury rates, limited to an 85% to 110% corridor of the average yields on 30-year Treasury bonds over the 5-year period, rounded to the nearest 0.05%.

| | |
|---|---|
| Optional Payment Form Conversion Mortality for Lump Sums | Current IRC section 417(e) table for lump sums. |
| Retirement Age | |
| Active Participants | See Table 1. |
| Current Terminated Vested Participants Within One Year of Termination | 35% Commencing One Year after Termination.<br>65% See Table 2. |
| Current Terminated Vested Participants More Than One Year From Termination | See Table 2. |
| Mortality Rates | |
| Healthy and Disabled | 2021 static mortality table for annuitants and non-annuitants per §1.430(h)(3)-1(a)(3) and IRS Notice 2019-67. |
| Beneficiary Death Assumption | A certain probability of death is assumed for the surviving spouses of retirees with Joint and Survivor options such that the liability is reduced by 2% for which spouse data is unknown. |
| Withdrawal Rates | See Table 3. |
| Disability Rates | Disability rates are included in the withdrawal rates assumption. The benefits payable upon disability are the same for actives and terminated vested participants. |
| Decrement Timing | Middle of year decrements (except that retirement is assumed to occur at the beginning of the year for ages where the assumed retirement rate is 100%). |
| Surviving Spouse Benefit | It is assumed that 70% of males and 30% of females have an eligible spouse, and that males are three years older than their spouses. |

| | |
|---|---|
| Benefit and Compensation Limits | Projected benefits and compensation are limited by the current IRC section 415 maximum benefit of $230,000 and the IRC section 401(a)(17) compensation limit of $290,000. |
| Valuation of Plan Assets | Smoothed fair market value of assets over the current and prior two years, adjusted for contributions, benefit payments, administrative expenses, and expected earnings. The average value of assets calculated in this manner is further limited to not less than 90% nor more than 110% of fair market value.<br><br>A characteristic of this method is that the expected distribution of the value of plan assets is skewed toward understatement relative to the corresponding market values for expected long-term rates of return in excess of the third segment rate under IRC section 430(h)(2)(C)(iii). |
| Expected Return on Assets | |
| 2019 Plan Year | 6.75%, before limited by 3rd segment rate of 6.11%. |
| 2020 Plan Year | 6.25%, before limited by 3rd segment rate of 6.27%. |
| 2021 Plan Year | 6.50%, before limited by 3rd segment rate of 6.11%. |
| Trust Expenses Included in Target Normal Cost | Average administrative expenses over the prior three years (excluding PBGC premiums), plus estimated PBGC premiums for the current year, rounded to the nearest 100,000 ($14,300,000 for 2021 Plan Year). |
| Actuarial Method | Standard unit credit cost method. |
| Valuation Date | December 31, 2021. |

# Actuarial Assumptions and Methods

Table 1

**Active Retirement Rates**

| Age | Non-Union Rates | Union Rates |
|---|---|---|
| 55 | 10.0% | 15.0% |
| 56 | 8.0% | 10.0% |
| 57 | 8.0% | 10.0% |
| 58 | 8.0% | 15.0% |
| 59 | 11.0% | 15.0% |
| 60 | 14.0% | 10.0% |
| 61 | 16.0% | 25.0% |
| 62 | 16.0% | 25.0% |
| 63 | 16.0% | 20.0% |
| 64 | 23.0% | 20.0% |
| 65 | 30.0% | 35.0% |
| 66 | 30.0% | 40.0% |
| 67 | 25.0% | 40.0% |
| 68 | 20.0% | 30.0% |
| 69 | 30.0% | 50.0% |
| 70+ | 100.0% | 100.0% |

Table 2

**Terminated Vested Retirement Rates**

| Age | Rate |
|---|---|
| 30–34 | 10.0% |
| 35–44 | 11.0% |
| 45–54 | 11.5% |
| 55 | 11.5% |
| 56 | 11.5% |
| 57 | 11.5% |
| 58 | 11.5% |
| 59 | 13.5% |
| 60 | 13.5% |
| 61 | 13.5% |
| 62 | 15.0% |
| 63 | 15.0% |
| 64 | 27.0% |
| 65 | 37.0% |
| 66 | 15.0% |
| 67 | 15.0% |
| 68 | 15.0% |
| 69 | 15.0% |
| 70+ | 100.0% |

Table 3

**Withdrawal Rates**

| Age | Non-Union Rates | Union Rates |
|---|---|---|
| 20–24 | 28.0% | 40.0% |
| 25–29 | 18.5% | 25.0% |
| 30–34 | 14.0% | 17.5% |
| 35–39 | 11.0% | 16.0% |
| 40–44 | 10.0% | 15.0% |
| 45–49 | 9.0% | 11.0% |
| 50–54 | 8.5% | 11.0% |
| 55+ | 0.0% | 0.0% |

# SCHEDULE SB (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

## Single-Employer Defined Benefit Plan Actuarial Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500 or 5500-SF.**

OMB No. 1210-0110

**2021**

**This Form is Open to Public Inspection**

For calendar plan year 2021 or fiscal plan year beginning 12/31/2021 and ending 12/30/2022

▶ **Round off amounts to nearest dollar.**

▶ **Caution:** A penalty of $1,000 will be assessed for late filing of this report unless reasonable cause is established.

**A** Name of plan
Employee Retirement Plan of Safeway Inc. and Its Domestic Subsidaries

**B** Three-digit plan number (PN) ▶ 001

**C** Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
Safeway Inc.

**D** Employer Identification Number (EIN)
94-3019135

**E** Type of plan: [X] Single [ ] Multiple-A [ ] Multiple-B

**F** Prior year plan size: [ ] 100 or fewer [ ] 101-500 [X] More than 500

## Part I Basic Information

**1** Enter the valuation date: Month 12 Day 31 Year 2021

**2** Assets:

| | | |
|---|---|---|
| **a** Market value | **2a** | 1,471,988,754 |
| **b** Actuarial value | **2b** | 1,373,267,473 |

**3** Funding target/participant count breakdown

| | (1) Number of participants | (2) Vested Funding Target | (3) Total Funding Target |
|---|---|---|---|
| **a** For retired participants and beneficiaries receiving payment | 2,005 | 506,508,520 | 506,508,520 |
| **b** For terminated vested participants | 10,327 | 314,896,789 | 314,896,789 |
| **c** For active participants | 12,029 | 500,514,998 | 501,052,866 |
| **d** Total | 24,361 | 1,321,920,307 | 1,322,458,175 |

**4** If the plan is in at-risk status, check the box and complete lines (a) and (b) [ ]

| | | |
|---|---|---|
| **a** Funding target disregarding prescribed at-risk assumptions | **4a** | |
| **b** Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor | **4b** | |
| **5** Effective interest rate | **5** | 5.41% |
| **6** Target normal cost | | |
| **a** Present value of current plan year accruals | **6a** | 2,679,189 |
| **b** Expected plan-related expenses | **6b** | 14,300,000 |
| **c** Total (line 6a + line 6b) | **6c** | 16,979,189 |

**Statement by Enrolled Actuary**

To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.

**SIGN HERE** Grace Lattyak GKL

Signature of actuary — Date: 08/31/2023

Grace Lattyak
Type or print name of actuary

2307120
Most recent enrollment number

Aon Consulting, Inc.
Firm name

415-486-7000
Telephone number (including area code)

MSC# 17805
PO Box 19640
Irvine CA 92623
Address of the firm

If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions [ ]

## Part II Beginning of Year Carryover and Prefunding Balances

| | | (a) Carryover balance | (b) Prefunding balance |
|---|---|---|---|
| 7 | Balance at beginning of prior year after applicable adjustments (line 13 from prior year) | 0 | 36,342,784 |
| 8 | Portion elected for use to offset prior year's funding requirement (line 35 from prior year) | | 24,366,785 |
| 9 | Amount remaining (line 7 minus line 8) | 0 | 11,975,999 |
| 10 | Interest on line 9 using prior year's actual return of 12.10% | 0 | 1,449,096 |
| 11 | Prior year's excess contributions to be added to prefunding balance: | | |
| | a Present value of excess contributions (line 38a from prior year) | | 0 |
| | b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of 5.54% | | 0 |
| | b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return | | 0 |
| | c Total available at beginning of current plan year to add to prefunding balance | | 0 |
| | d Portion of (c) to be added to prefunding balance | | 0 |
| 12 | Other reductions in balances due to elections or deemed elections | 0 | 0 |
| 13 | Balance at beginning of current year (line 9 + line 10 + line 11d – line 12) | 0 | 13,425,095 |

## Part III Funding Percentages

| | | | |
|---|---|---|---|
| 14 | Funding target attainment percentage | 14 | 102.82% |
| 15 | Adjusted funding target attainment percentage | 15 | 103.43% |
| 16 | Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement | 16 | 94.78% |
| 17 | If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage | 17 | % |

## Part IV Contributions and Liquidity Shortfalls

18 Contributions made to the plan for the plan year by employer(s) and employees:

| (a) Date (MM-DD-YYYY) | (b) Amount paid by employer(s) | (c) Amount paid by employees | (a) Date (MM-DD-YYYY) | (b) Amount paid by employer(s) | (c) Amount paid by employees |
|---|---|---|---|---|---|
| | | | | | |
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| | | | | | |
| | | | Totals ► 18(b) | 0 | 18(c) 0 |

| | | | |
|---|---|---|---|
| 19 | Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year: | | |
| | a Contributions allocated toward unpaid minimum required contributions from prior years | 19a | 0 |
| | b Contributions made to avoid restrictions adjusted to valuation date | 19b | 0 |
| | c Contributions allocated toward minimum required contribution for current year adjusted to valuation date | 19c | 0 |

20 Quarterly contributions and liquidity shortfalls:

a Did the plan have a "funding shortfall" for the prior year? [X] Yes [ ] No

b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? [X] Yes [ ] No

c If line 20a is "Yes," see instructions and complete the following table as applicable:

| Liquidity shortfall as of end of quarter of this plan year | | | |
|---|---|---|---|
| (1) 1st | (2) 2nd | (3) 3rd | (4) 4th |
| 0 | 0 | 0 | 0 |

## Part V Assumptions Used to Determine Funding Target and Target Normal Cost

**21** Discount rate:

**a** Segment rates:

| 1st segment: | 2nd segment: | 3rd segment: | ☐ N/A, full yield curve used |
|---|---|---|---|
| 4.75 % | 5.36 % | 6.11% | |

| | | |
|---|---|---|
| **b** Applicable month (enter code) | **21b** | 4 |
| **22** Weighted average retirement age | **22** | 62 |

**23** Mortality table(s) (see instructions) ☐ Prescribed - combined ☒ Prescribed - separate ☐ Substitute

## Part VI Miscellaneous Items

| | | |
|---|---|---|
| **24** Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment | ☒ Yes | ☐ No |
| **25** Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment | ☐ Yes | ☒ No |
| **26** Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment | ☒ Yes | ☐ No |

| | | |
|---|---|---|
| **27** If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment | **27** | |

## Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

| | | |
|---|---|---|
| **28** Unpaid minimum required contributions for all prior years | **28** | 0 |
| **29** Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a) | **29** | 0 |
| **30** Remaining amount of unpaid minimum required contributions (line 28 minus line 29) | **30** | 0 |

## Part VIII Minimum Required Contribution For Current Year

**31** Target normal cost and excess assets (see instructions):

| | | |
|---|---|---|
| **a** Target normal cost (line 6c) | **31a** | 16,979,189 |
| **b** Excess assets, if applicable, but not greater than line 31a | **31b** | 16,979,189 |

**32** Amortization installments:

| | Outstanding Balance | Installment |
|---|---|---|
| **a** Net shortfall amortization installment | 0 | 0 |
| **b** Waiver amortization installment | | |

| | | |
|---|---|---|
| **33** If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount | **33** | |
| **34** Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33) | **34** | 0 |

| | Carryover balance | Prefunding balance | Total balance |
|---|---|---|---|
| **35** Balances elected for use to offset funding requirement | | | 0 |

| | | |
|---|---|---|
| **36** Additional cash requirement (line 34 minus line 35) | **36** | 0 |
| **37** Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c) | **37** | 0 |

**38** Present value of excess contributions for current year (see instructions)

| | | |
|---|---|---|
| **a** Total (excess, if any, of line 37 over line 36) | **38a** | 0 |
| **b** Portion included in line 38a attributable to use of prefunding and funding standard carryover balances | **38b** | 0 |
| **39** Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37) | **39** | 0 |
| **40** Unpaid minimum required contributions for all years | **40** | 0 |

## Part IX Pension Funding Relief Under Pension Relief Act of 2010 (See Instructions)

**41** If an election was made to use PRA 2010 funding relief for this plan:

**a** Schedule elected ☐ 2 plus 7 years ☐ 15 years

**b** Eligible plan year(s) for which the election in line 41a was made ☐ 2008 ☐ 2009 ☐ 2010 ☐ 2011

# Schedule SB Attachment (Form 5500)—December 31, 2021 Plan Year
# Employee Retirement Plan of Safeway Inc. and Its Domestic Subsidiaries
# EIN: 943019135 PN: 001

## Schedule SB, line 22—Description of Weighted Average Retirement Age

The average retirement age shown in line 22 has been calculated by assuming the following retirement rates and no decrements other than retirement for this calculation. All retirements are assumed to occur at mid-year, except for the 100% retirement age. The rates below are a blend of Union and Non-Union retirement rates, weighted by actual participant counts.

| (a) Age | (b) Rate | (c) Weight | (d) Product (a) × (b) × (c) |
|---|---|---|---|
| 55.5 | 10.38% | 1.0000 | 5.76 |
| 56.5 | 8.15% | 0.8962 | 4.13 |
| 57.5 | 8.15% | 0.8232 | 3.86 |
| 58.5 | 8.53% | 0.7561 | 3.77 |
| 59.5 | 11.30% | 0.6916 | 4.65 |
| 60.5 | 13.70% | 0.6134 | 5.08 |
| 61.5 | 16.68% | 0.5294 | 5.43 |
| 62.5 | 16.68% | 0.4411 | 4.60 |
| 63.5 | 16.30% | 0.3675 | 3.80 |
| 64.5 | 22.77% | 0.3076 | 4.52 |
| 65.5 | 30.38% | 0.2376 | 4.73 |
| 66.5 | 30.76% | 0.1654 | 3.38 |
| 67.5 | 26.13% | 0.1145 | 2.02 |
| 68.5 | 20.76% | 0.0846 | 1.20 |
| 69.5 | 31.51% | 0.0670 | 1.47 |
| 70 | 100.00% | 0.0459 | 3.21 |
| | | Weighted Average | 61.61 |

# Schedule SB Attachment (Form 5500)—December 31, 2021 Plan Year
# Employee Retirement Plan of Safeway Inc. and Its Domestic Subsidiaries
# EIN: 943019135 PN: 001

## Schedule SB, Part V—Statement of Actuarial Assumptions/Methods

| | |
|---|---|
| Interest Rates for Minimum Funding Purposes | Based on segment rates with a four-month lookback (as of August 2021), each adjusted as needed to fall within the 25-year average interest rate stabilization corridor under ARPA. |
| 1st Segment Rate | 4.75%. |
| 2nd Segment Rate | 5.36%. |
| 3rd Segment Rate | 6.11%. |

Cash Balance Interest Crediting Rate

| Crediting Rate Type | Actual 2021[1] | Assumed 2022+[2] |
|---|---|---|
| Cash Balance Benefits | 1.94% | 2.35%[3] |
| Account Balance Benefits | 0.18% | 1.10%[4] |
| Employee Contributions | 1.52% | 1.85%[5] |

| | |
|---|---|
| Salary Increases | 2.80%. |
| Optional Payment Form Election Percentage | |
| Actives Terminations | 65% Immediate Lump Sum.<br>35% Lump Sum at age 55. |
| Actives Retirements | 80% Immediate Lump Sum.<br>11% 100% Joint & Survivor Annuity.<br>9% Single Life Annuity. |
| Current Terminated Vested Commencing Within One Year After Termination | 100% Lump Sum. |
| Current Terminated Vested Commencing After One Year of Termination | 90% Lump Sum.<br>5.5% 100% Joint & Survivor Annuity.<br>4.5% Single Life Annuity. |
| Optional Payment Form Conversion Interest Rate | |
| Annuity to Lump Sum Conversion | Same as funding interest rates. |
| Cash Balance to Annuity Conversion | 2.10%[6]. |
| Late Retirement Factor Interest Rates | 2.10%[1]. |

[1] Based on latest November 30-year Treasury rates, latest November 1-year Treasury rates, and 120% of latest December Federal Midterm rate, respectively. Although unlimited crediting rates are shown here, interest crediting rate floors are applied, if applicable, as defined by the plan document.
[2] Assumed rates include applicable floors as defined by the plan document.
[3] Calculated using latest January 30-year Treasury rates, limited to an 85% to 110% corridor of the average yields on 30-year Treasury bonds over the 5-year period, rounded to the nearest 0.05%.
[4] Calculated as the assumed Cash Balance Interest Crediting Rate minus 125 basis points.
[5] Calculated as the assumed Cash Balance Interest Crediting Rate minus 50 basis points.
[6] Calculated using latest January 30-year Treasury rates, limited to an 85% to 110% corridor of the average yields on 30-year Treasury bonds over the 5-year period, rounded to the nearest 0.05%.

| | |
|---|---|
| Optional Payment Form Conversion Mortality for Lump Sums | Current IRC section 417(e) table for lump sums. |
| Retirement Age | |
| Active Participants | See Table 1. |
| Current Terminated Vested Participants Within One Year of Termination | 35% Commencing One Year after Termination.<br>65% See Table 2. |
| Current Terminated Vested Participants More Than One Year From Termination | See Table 2. |
| Mortality Rates | |
| Healthy and Disabled | 2021 static mortality table for annuitants and non-annuitants per §1.430(h)(3)-1(a)(3) and IRS Notice 2019-67. |
| Beneficiary Death Assumption | A certain probability of death is assumed for the surviving spouses of retirees with Joint and Survivor options such that the liability is reduced by 2% for which spouse data is unknown. |
| Withdrawal Rates | See Table 3. |
| Disability Rates | Disability rates are included in the withdrawal rates assumption. The benefits payable upon disability are the same for actives and terminated vested participants. |
| Decrement Timing | Middle of year decrements (except that retirement is assumed to occur at the beginning of the year for ages where the assumed retirement rate is 100%). |
| Surviving Spouse Benefit | It is assumed that 70% of males and 30% of females have an eligible spouse, and that males are three years older than their spouses. |

| | |
|---|---|
| Benefit and Compensation Limits | Projected benefits and compensation are limited by the current IRC section 415 maximum benefit of $230,000 and the IRC section 401(a)(17) compensation limit of $290,000. |
| Valuation of Plan Assets | Smoothed fair market value of assets over the current and prior two years, adjusted for contributions, benefit payments, administrative expenses, and expected earnings. The average value of assets calculated in this manner is further limited to not less than 90% nor more than 110% of fair market value.<br><br>A characteristic of this method is that the expected distribution of the value of plan assets is skewed toward understatement relative to the corresponding market values for expected long-term rates of return in excess of the third segment rate under IRC section 430(h)(2)(C)(iii). |
| Expected Return on Assets | |
| 2019 Plan Year | 6.75%, before limited by 3rd segment rate of 6.11%. |
| 2020 Plan Year | 6.25%, before limited by 3rd segment rate of 6.27%. |
| 2021 Plan Year | 6.50%, before limited by 3rd segment rate of 6.11%. |
| Trust Expenses Included in Target Normal Cost | Average administrative expenses over the prior three years (excluding PBGC premiums), plus estimated PBGC premiums for the current year, rounded to the nearest 100,000 ($14,300,000 for 2021 Plan Year). |
| Actuarial Method | Standard unit credit cost method. |
| Valuation Date | December 31, 2021. |

# Actuarial Assumptions and Methods

Table 1

**Active Retirement Rates**

| Age | Non-Union Rates | Union Rates |
|---|---|---|
| 55 | 10.0% | 15.0% |
| 56 | 8.0% | 10.0% |
| 57 | 8.0% | 10.0% |
| 58 | 8.0% | 15.0% |
| 59 | 11.0% | 15.0% |
| 60 | 14.0% | 10.0% |
| 61 | 16.0% | 25.0% |
| 62 | 16.0% | 25.0% |
| 63 | 16.0% | 20.0% |
| 64 | 23.0% | 20.0% |
| 65 | 30.0% | 35.0% |
| 66 | 30.0% | 40.0% |
| 67 | 25.0% | 40.0% |
| 68 | 20.0% | 30.0% |
| 69 | 30.0% | 50.0% |
| 70+ | 100.0% | 100.0% |

Table 2

**Terminated Vested Retirement Rates**

| Age | Rate |
|---|---|
| 30–34 | 10.0% |
| 35–44 | 11.0% |
| 45–54 | 11.5% |
| 55 | 11.5% |
| 56 | 11.5% |
| 57 | 11.5% |
| 58 | 11.5% |
| 59 | 13.5% |
| 60 | 13.5% |
| 61 | 13.5% |
| 62 | 15.0% |
| 63 | 15.0% |
| 64 | 27.0% |
| 65 | 37.0% |
| 66 | 15.0% |
| 67 | 15.0% |
| 68 | 15.0% |
| 69 | 15.0% |
| 70+ | 100.0% |

Table 3

**Withdrawal Rates**

| Age | Non-Union Rates | Union Rates |
|---|---|---|
| 20–24 | 28.0% | 40.0% |
| 25–29 | 18.5% | 25.0% |
| 30–34 | 14.0% | 17.5% |
| 35–39 | 11.0% | 16.0% |
| 40–44 | 10.0% | 15.0% |
| 45–49 | 9.0% | 11.0% |
| 50–54 | 8.5% | 11.0% |
| 55+ | 0.0% | 0.0% |

# Schedule SB Attachment (Form 5500)—December 31, 2021 Plan Year
# Employee Retirement Plan of Safeway Inc. and Its Domestic Subsidiaries
# EIN: 943019135 PN: 001

## Schedule SB, Part V—Summary of Plan Provisions

## Employee Retirement Plan of Safeway Inc. and Its Domestic Subsidiaries ('ERP')

| | |
|---|---|
| Effective Date | December 1, 1946 |
| Latest Amendment Date | August 31, 2021 |
| Eligibility for Coverage | Full-time employees who:<br>▪ Have completed one year of service;<br>▪ Have reached age 21;<br>▪ Are not participating or eligible for coverage under another retirement plan to which the company contributes;<br>▪ Are not project employees;<br>▪ Are not eligible for the SRG 401(k) Plan; and<br>▪ Are not eligible for the Groceryworks.com LLC 401(k) and Profit Sharing Plan;<br>▪ Are not SRG orGroceryworks.com employees who are eligible for a match in the Safeway 401(k) Plan.<br>Become eligible for coverage on the first day of the month after fulfilling these requirements. Non-union employees may not enter the plan after April 1, 2015. |
| Normal Retirement Date | First day of the month after reaching age 65. |
| Optional Retirement Date | First day of any month after the earlier of 1) completing five years of service (three years for participants with cash balance benefits) after age 18; or 2) reaching age 55. |
| In-Service Distributions | Effective September 1, 2020, participants who are classified as non-union employees on the date of distribution election are allowed to receive an in-service distribution upon attainment of 59½. |
| Normal Form of Retirement Benefit | Monthly income payable for life. |
| Optional Forms of Payment | ▪ 5, 10 or 15 years certain and life thereafter;<br>▪ Joint and 50% to survivor or joint and 100% to survivor;<br>▪ Single sum payment of 25%, 50%, 75%, or 100%, with remainder as annuity;<br>▪ A combination of the forms above; and |

| | |
|---|---|
| | ▪ Any other form approved by the Benefit Plans Committee.<br><br>Factors to convert annuities to certain and life are 0.994, 0.971 and 0.939 for the different periods. Factors to convert annuities to joint and survivor forms of payments are 0.94 and 0.89 with further adjustments based on age of contingent annuitant. |
| Compensation | Compensation includes all amounts paid to the participant including deferred compensation and overtime, contingent and part-time earnings. Compensation also includes salary deferrals to company 401(k) and 125 plans. Compensation does not include discretionary bonuses or any amounts paid after termination. |
| Annual Benefit at Normal Retirement Date | The benefit formula for most plan participants, which was amended effective July 1, 1999, is the greatest of:<br><br>(a) Cash balance benefit;<br><br>(b) Frozen accrued benefit as of June 30, 1999; or<br><br>(c) Grandfather benefit.<br><br>Certain union employees have separate benefit structures that are described below.<br><br>Certain participants have frozen benefits under plans which have been merged into this one. These plans include those previously sponsored by Vons, Genuardi's and Randalls.<br><br>The annual retirement benefit attributable to company contributions cannot exceed the maximum level permitted by Section 415 of the Internal Revenue Code. This limit is defined in the assumptions section of this report. |
| Cash Balance Benefit | The actuarial equivalent of the participant's total cash balance account. |
| Total Cash Balance Account | The sum of the participant's cash balance account and his employee contribution account. |
| Cash Balance Account | The sum of the participant's opening balance, pay-based credits, year-end credits, interest credits, and special credit at June 30, 2006. |

Opening Balance

The single sum value of the participant's employer-provided accrued benefit as of June 30, 1999. The actuarial basis used to determine the participant's opening balance is the plan's lump sum basis in effect on June 30, 1999.

Special Credit at June 30, 2006

The excess, if any, of the single sum value of the participant's employer-provided benefit over the participant's cash balance account, as of June 30, 2006. The actuarial basis used to determine the single sum value is the plan's lump sum basis in effect on June 30, 2006.

Pay-Based Credits

For each month in which the participant is an active participant on the first day of the month, he receives a pay-based credit on the last day of the month determined as a percentage of that month's compensation, based on his category and years of plan participation, according to the following table which was effective December 31, 2008):

Effective December 30, 2018, non-union participants no longer accrue pay-based credits.

| Years of Participation | Union | Market Place | Local 114 | All Other |
|---|---|---|---|---|
| 0–4 | 3.0% | 2.0% | 4.0% | 3.0% |
| 5–9 | 4.0% | 2.0% | 4.5% | 3.5% |
| 10–14 | 5.0% | 2.0% | 5.5% | 4.0% |
| 15–19 | 6.0% | 2.0% | 6.0% | 4.5% |
| 20–24 | 7.5% | 2.0% | 7.0% | 5.5% |
| 25+ | 9.0% | 2.0% | 7.5% | 6.5% |

Year-End Credits

As of December 30 of each of the years listed below, active non-union participants received a year-end credit equal to a percentage of the entire year's compensation:

| Year | Dominick EEs[1] | Market Place | All Others |
|---|---|---|---|
| 1999 | 1.00% | N/A | 3.25% |
| 2000 | 2.00% | N/A | 3.00% |
| 2001 | 2.00% | N/A | 3.00% |
| 2002 | 1.00% | 1.00% | 2.00% |
| 2003 | 1.00% | 1.00% | 1.00% |
| 2004 | 1.00% | 1.00% | 1.00% |
| 2005 | 1.00% | 1.00% | 1.00% |
| 2006 | 2.00% | 2.00% | 2.00% |

[1] Excludes Dominick's Commissionary.

Interest Credits

| | | | | | |
|---|---|---|---|---|---|
| 2007 | 1.00% | | 1.00% | 1.00% | |
| **Year** | **November 30-Year Treasury Rate** | | **Year** | **November 30-Year Treasury Rate** | |
| 2005 | 4.73% | | 2014 | 3.04% | |
| 2006 | 4.69% | | 2015 | 3.03% | |
| 2007 | 4.52% | | 2016 | 2.86% | |
| 2008 | 4.00% | | 2017 | 2.80% | |
| 2009 | 4.31% | | 2018 | 3.36% | |
| 2010 | 4.19% | | 2019 | 2.28% | |
| 2011 | 3.02% | | 2020 | 1.62% | |
| 2012 | 2.80% | | 2021 | 1.94% | |
| 2013 | 3.80% | | | | |

For subsequent plan years, the annual interest credit rate is the annual rate of return on 30-year Treasury bonds during November preceding the plan year. Note that those participants accruing benefits under the "Union Participant" schedule have a minimum interest crediting rate of 4.01%. For Local 114 sanitation workers, the minimum interest crediting rate is 1.72%. For all other participants the minimum interest crediting rate is 2.34%.

Employee Contribution Account

A participant's employee contribution account is equal to the value of all employee contributions made prior to July 1987, accumulated with interest.

Frozen Accrued Benefit as of June 30, 1999

Frozen accrued benefits as of June 30, 1999 are determined under the benefit provisions of the plan in effect on that date, except that for purposes of determining the final average benefit, the percentage applied to final average compensation in excess of covered compensation is 0.5% at all ages.

Grandfather Benefit

Each participant shall continue to accrue benefits under the benefit formulas of the plan in effect as of June 30, 1999, until June 30, 2006. The grandfather benefit is equal to the sum of the basic benefit plus the account balance benefit. The benefit formulas under the grandfather benefit differ from the June 30, 1999 plan in the following manner:

- The percentage applied to final average compensation in excess of covered compensation is 0.5% at all ages.

- The lump sum value of the account balance benefit is in all cases exactly equal to the account balance.

Basic Benefit

The basic benefit formula, which was amended effective December 30, 1989 (and adjusted as above), is the greater of:

(a) Career average formula: 1½% of annual compensation for each plan year; or

(b) Final average formula: The annual retirement benefit for participants whose full-time employment terminates on or after December 30, 1989.

(i) 0.95% of the participant's "final average compensation" multiplied by his years of participating; plus

(ii) 0.50% of the participant's "final average compensation" in excess of his covered compensation multiplied by his years of participation up to a maximum of 35 years.

"Final average compensation" means the average compensation over the 60 consecutive complete calendar months of highest compensation, out of the last 10 years of service. "Covered compensation" means the average amount of compensation with respect to which Old Age and Survivors Insurance benefits would be provided under the Social Security Act, assuming earnings were equal to the Social Security wage base each year through Social Security retirement age.

Account Balance Benefit

In addition to the benefits described in the preceding paragraphs, each eligible participant active on December 31, 1987 or later who is an eligible account balance participant is entitled to an account balance benefit. The benefit is normally a single sum value called the account balance.

Account Balance

The account balance is the sum of the contribution credits accumulated with the annual interest index.

Contribution Credit

The contribution credit for a plan year is the percentage from the table below times the participant's account balance earnings:

| Year | Contribution Credit | Year | Contribution Credit |
|---|---|---|---|
| 1987 | 7.75% | 1997 | 7.50% |
| 1988 | 7.75% | 1998 | 7.75% |
| 1989 | 8.00% | 1999 | 7.25% |
| 1990 | 8.00% | 2000 | 7.00% |
| 1991 | 6.00% | 2001 | 7.00% |
| 1992 | 4.00% | 2002 | 6.00% |
| 1993 | 6.00% | 2003 | 5.00% |
| 1994 | 7.00% | 2004 | 5.00% |
| 1995 | 7.50% | 2005 | 5.00% |
| 1996 | 8.00% | 2006 | 4.00% |

Account Balance Earnings

Account balance earnings include basic and regular pay earned while an eligible account balance participant, including overtime pay but excluding contingent (bonus) pay.

Annual Interest Index

| Year | Applicable November 1-Year Treasury Rate | Year | Applicable November 1-Year Treasury Rate |
|---|---|---|---|
| 1994 | 2.44% | 2008 | 4.66% |
| 1995 | 5.02% | 2009 | 0.48% |
| 1996 | 6.10% | 2010 | 0.33% |
| 1997 | 5.50% | 2011 | 0.20% |
| 1998 | 5.63% | 2012 | 0.17% |
| 1999 | 5.14% | 2013 | 0.13% |
| 2000 | 4.97% | 2014 | 0.11% |
| 2001 | 6.13% | 2015 | 0.29% |
| 2002 | 3.76% | 2016 | 0.60% |
| 2003 | 2.07% | 2017 | 1.56% |
| 2004 | 1.26% | 2018 | 2.70% |
| 2005 | 1.77% | 2019 | 1.57% |
| 2006 | 3.48% | 2020 | 0.12% |
| 2007 | 4.88% | 2021 | 0.18% |

Effective December 31, 2017, the annual interest credit rate is the annual rate of return on one-year Treasury rates during November preceding the plan year. Prior to that, the annual interest credit rate was the average yield on one-year Treasury rates for the 12-month period ending the November preceding the plan year.

Annuity Benefit

If the participant elects to receive an annuity benefit, the account balance will be paid as a monthly benefit in the same form as the regular plan benefits. For a life annuity commencing at age 55 or older, the monthly benefit is 1% of the account balance on the date benefits commence.

Union Benefit

Many union groups have bargained to be participants in this plan but have different benefit formulas. The following groups have separate formulas.

Union Benefit—Teamsters Local 639

Effective December 31, 1990, an alternative benefit structure was adopted for plan participants who were members of Teamsters Local 639. The benefit formula is the sum of (a), (b) and (c):

(a) The accrued benefit under the regular plan formula on December 31, 1990; plus

(b) For each full year of benefit service, the amount from the following table:

| Year | Monthly Benefits |
|---|---|
| 1991 | $110 |
| 1992 | $120 |
| 1993 | $130 |
| 1994 | $133 |
| 1995 | $136 |
| 1996 | $140 |
| 1997 | $143 |
| 1998 | $146 |
| 1999 | $149 |
| 2000 | $152 |
| 2001 | $160 |
| 2002 | $180 |
| 2003 | $190 |
| 2004+ | $200 |

(c) The supplemental benefit is the sum of (1), (2) and (3) below:

(1) $5 payable per month per year of credited service (up to a maximum of 30 years) in the plan;

(2) $30 payable per month per year of credited service accrued as of June 16, 2000;

(3) $5 payable per month per year of service accrued as of June 16, 2000 (up to a maximum of 10 years).

Union Benefit—Operating Engineers Local 99

Effective February 1, 1991, a benefit structure was adopted for plan participants who were members of Operating Engineers Local 99. The benefit formula is the sum of (a), (b), (c), and (d):

(a) The accrued benefit under the regular plan formula on February 1, 1991; plus

(b) For each full year of benefit service, the amount from the following table:

| Year | Monthly Benefits |
|---|---|
| 1991 | $ 90 |
| 1992 | $ 90 |
| 1993 | $ 90 |
| 1994 | $140 |
| 1995 | $140 |
| 1996 | $140 |
| 1997 | $143 |
| 1998 | $146 |
| 1999 | $149 |
| 2000 | $152 |
| 2001 | $160 |
| 2002 | $180 |
| 2003 | $190 |
| 2004+ | $200 |

(c) A supplemental benefit of $30 per month per year of credited service accrued as of June 16, 2000.

(d) A supplemental benefit of $15 per month per year of service (up to a maximum of 10 years).

Union Benefit—Warehouse Union Local 730

Effective January 1, 1993, an alternative benefit structure was adopted for plan participants who were members of Local 730. The benefit formula is the sum of (a) and (b):

(a) The accrued benefit under the regular plan formula on December 31, 1992; plus

(b) For each full year of benefit service, the amount from the following table:

| Year | Monthly Benefits |
|---|---|
| 1993 | $ 90 |
| 1994 | $ 90 |
| 1995 | $ 95 |
| 1996 | $ 95 |
| 1997 | $100 |
| 1998 | $103 |
| 1999 | $106 |
| 2000 | $109 |
| 2001 | $120 |
| 2002 | $140 |
| 2003 | $150 |
| 2004+ | $160 |

Union Benefit—Bakery, Confectionery, Tobacco Workers and Grain Millers Local 218

Effective October 1, 1995, an alternative benefit structure was adopted for plan participants who were members of Local 218. For each full year of benefit service, the amount from the following table:

| Year | Monthly Benefits |
|---|---|
| < 10/1/1995 | $35 |
| 10/1/1995–9/25/2009 | $45 |
| 9/26/2009–12/31/2012 | $50 |
| ≥ 1/1/2013 | $55 |

Union Benefit—Bakery, Confectionery, Tobacco Workers and Grain Millers Local 125 (formerly Local 119)

Effective April 1, 1996, an alternative benefit structure was adopted for plan participants who were members of Local 125. The benefit formula is the sum of (a) and (b).

(a) For each full year of benefit service, the amount from the following table:

| Year | Monthly Benefits |
|---|---|
| < 4/1/1996 | $40 |
| 4/1/1996–12/31/1999 | $60 |
| ≥ 1/1/2000 | $64 |

(b) A supplemental benefit (shown below) is provided per year of credited service (up to a maximum of 25 years) for participants employed as of the following dates:

| Effective Date | Supplemental Benefits |
|---|---|
| 1/1/2003 | $2 |
| 1/1/2004 | $4 |
| 9/1/2005 | $2 |
| 1/1/2007 | $4 |
| 3/1/2008 | $4 |
| 7/1/2010 | $2 |
| 9/1/2011 | $2 |
| 9/1/2012 | $2 |
| 9/1/2014 | $2 |
| 9/1/2016 | $2 |
| 3/1/2021 | $2 |
| 1/1/2023 | $2 |

Union Benefit—Bakery, Confectionery, Tobacco Workers and Grain Millers Local 114

Effective January 1, 1997, an alternative benefit structure was adopted for plan participants who were members of Local 114. The benefit formula is the sum of (a) and (b):

(a) For each full year of benefit service, the amount from the following table:

| Year | Monthly Benefits |
|---|---|
| < 1/1/1997 | $ 60 |
| 1/1/1997–9/30/2001 | $ 90 |
| 10/1/2001–6/30/2019 | $100 |
| 7/1/2019–6/30/2020 | $150 |
| ≥ 7/1/2020 | $200 |

(b) A supplemental benefit (shown below) is provided per year of credited service (up to a maximum of 25 years) for participants employed as of the following dates:

| Effective Date | Supplemental Benefits |
|---|---|
| 8/1/2006 | $2 |
| 1/1/2008 | $4 |
| 2/1/2009 | $4 |
| 7/1/2011 | $2 |
| 8/1/2012 | $2 |
| 8/1/2013 | $2 |
| 7/1/2015 | $2 |
| 7/1/2017 | $2 |
| 7/1/2019 | $2 |
| 7/1/2020 | $2 |

Union Benefit—Bakery, Confectionery, Tobacco Workers and Grain Millers Local 26

Effective August 1, 1997, an alternative benefit structure was adopted for plan participants who were members of Local 26. The benefit formula is the sum of (a) and (b):

(a) For each full year of benefit service, the amount from the following table:

| Year | Monthly Benefits |
|---|---|
| < 8/1/1997 | $45 |
| 8/1/1997–5/12/2001 | $60 |
| 5/13/2001–7/6/2002 | $62 |
| 7/7/2002–7/5/2003 | $64 |
| 7/6/2003–7/3/2004 | $66 |
| ≥ 7/4/2004 | $68 |

(b) A supplemental benefit (shown below) is provided per year of credited service (up to a maximum of 25 years) for participants employed as of the following dates:

| Effective Date | Supplemental Benefits |
|---|---|
| 6/1/2012 | $2 |
| 6/1/2013 | $2 |
| 6/1/2015 | $2 |
| 6/1/2016 | $2 |

Union Benefit—Bakery, Confectionery, Tobacco Workers and Grain Millers Local 118 (In-Store Bakery Employees)

Effective July 1, 1997, an alternative benefit structure was adopted for plan participants who were members of Local 118. The benefit formula is the sum of (a) and (b):

(a) For each full year of benefit service, the amount from the following table:

| Year | Monthly Benefits |
|---|---|
| < 7/1/1997 | $45 |
| 7/1/1997–12/31/2000 | $70 |
| ≥ 1/1/2001 | $75 |

(b) A supplemental benefit of $15 per month per year of past service (service prior to July 1, 1997) up to a maximum of 10 years. Effective January 1, 2017, this benefit will be increased to $20 per month per year of past service (service prior to July 1, 1997) up to a maximum of 10 years, pending amendment.

| | |
|---|---|
| Annual Retirement Benefit at Optional Retirement Date | The annual retirement benefit at an optional retirement date is generally calculated using the normal retirement benefit formula based on compensation and service through the optional retirement date. The basic benefit and the union benefit are reduced if the optional retirement date is prior to age 62. The account balance benefit is reduced if the optional retirement date is prior to age 55.<br><br>Certain union groups are subject to the “25 and out” and “30 and out” early retirement provisions. Whereby the participants with 30 years of service can commence unreduced benefit. Reduction between 25 and 30 years of service is either 4% or 5% depending on the local group. |
| Vesting of Benefits | If a participant terminates employment after completing five years of service (three years for participants with cash balance benefits) after age 18, or upon attainment of age 55, he or she will have a vested right to the pension benefits accrued to date of termination. Benefit payments will commence at age 65 or, if the participant chooses, at any time prior to 65, subject to the early retirement reduction provisions of the plan. |
| Death Benefit | |
| Before Retirement | If a participant dies prior to retirement, his or her beneficiary would receive the actuarial present value of the participant's accrued benefits. |
| After Retirement | If a participant dies after retirement, any death benefit will be paid in accordance with the optional benefit payment in effect. If the benefit to the participant was in the life annuity form, his beneficiary would receive the total of all his contributions with interest to his retirement date less any payments made to him or his beneficiary since retirement. |
| Contributions | The company shall contribute an amount necessary to carry out the purposes of the plan. |
| Administration | The plan is administered by a Benefit Plans Committee appointed by the company, which will have full authority to interpret and administer the plan. |

| | |
|---|---|
| Termination of Plan | Upon termination of the plan, the trust fund shall be distributed to the participants proportionately and equitably in a manner determined by the Committee. In any event, no participant will receive an amount less than the total of all contributions made by that participant to the plan with interest to the date of termination or his or her retirement date (whichever is earlier) less any payments received under the plan.<br><br>No liquidation of assets and payment of benefits shall actually be made by the Trustee until after it is advised by the company that the applicable requirements of ERISA governing plan terminations have been met. |

## Safeway Multiple Employer Retirement Plan ('SMERP')

| | |
|---|---|
| Effective Date | June 16, 2000 |
| Latest Amendment Date | August 31, 2021 |
| Safeway Plan | For ease of reference, the Employee Retirement Plan of Safeway Inc. and Its Domestic Subsidiaries will be referred to in this summary as the Safeway Plan. |
| Eligibility for Coverage | Employees of Safeway Inc. and Collington Services, LLC who:<br>▪ Have completed one year of service;<br>▪ Have reached age 21;<br>▪ Are not participating or eligible for coverage under another retirement plan to which the company contributes;<br>▪ Are not project employees; and<br>▪ If employed by Safeway Inc., are employed in a non-union non-retail position with the Eastern Division of the company.<br>Become eligible for coverage on the first day of the month after fulfilling these requirements. Participants who have met the above requirements and were participants in the Safeway Plan immediately prior to the effective date of this plan became participants on June 16, 2000. Non-union employees of Safeway may not enter the plan after April 1, 2015. |
| Normal Retirement Date | First day of the month after reaching age 65. |
| Optional Retirement Date | First day of any month after the earlier of 1) completing five years of service (three years for participants with cash balance benefits) after age 18; or 2) reaching age 55. |
| Normal Form of Retirement Benefit | Monthly income payable for life. |
| Optional Forms of Settlement | ▪ 5, 10 or 15 years certain and life thereafter;<br>▪ Joint and 50% to survivor or joint and 100% to survivor;<br>▪ Single sum payment of 25%, 50%, 75%, or 100%, with remainder as annuity;<br>▪ A combination of the forms above; and |

| | |
|---|---|
| | ▪ Any other form approved by the Benefit Plans Committee.<br><br>Factors to convert annuities to certain and life are 0.994, 0.971 and 0.939 for the different periods. Factors to convert annuities to joint and survivor forms of payments are 0.94 and 0.89 with further adjustments based on age of contingent annuitant. |
| Compensation | Compensation includes all amounts paid to the participant including deferred compensation and overtime, contingent and part-time earnings. Compensation also includes salary deferrals to company 401(k) and 125 plans. Compensation does not include discretionary bonuses or any amounts paid after termination. |
| Annual Benefit at Normal Retirement Date | The benefit formula for nonunion plan participants is equal to (a) minus (b):<br><br>(a) The greatest of:<br><br>(i) Cash balance benefit;<br><br>(ii) Frozen accrued benefit as of June 30, 1999; or<br><br>(iii) Grandfather benefit.<br><br>(b) The participant's benefit (if any) under the Safeway Plan.<br><br>Union employees have separate benefit structures as described below. The annual benefit attributable to company contributions cannot exceed the maximum level permitted by Section 415 of the Internal Revenue Code. The limit is defined in the assumptions section of this report. |
| Cash Balance Benefit | The actuarial equivalent of the participant's total cash balance account. |
| Total Cash Balance Account | The sum of the participant's cash balance account and his employee contribution account. |
| Cash Balance Account | The sum of the participant's opening balance, pay-based credits, year-end credits, interest credits, and special credit at June 30, 2006. |

Opening Balance

The participant's cash balance account under the Safeway Plan as of the effective date of this plan.

Special Credit at June 30, 2006

The excess, if any, of the single sum value of the participant's employer-provided benefit over the participant's cash balance account, as of June 30, 2006. The actuarial basis used to determine the single sum value is the plan's lump sum basis in effect on June 30, 2006.

Pay-Based Credits

For each month in which the participant is an active participant on the first day of the month, he receives a pay-based credit on the last day of the month determined as a percentage of that month's compensation, based on his years of plan participation, according to the following table:

Effective December 30, 2018, non-union participants no longer accrue pay-based credits.

| | Percent of Compensation | | | |
|---|---|---|---|---|
| **Years of Participation[2]** | **Collington EEs< 6/1/2016** | **Collington EEs> 6/1/2016** | **Safeway EEs< 12/31/2008** | **Safeway EEs> 12/31/2008** |
| 0–4 | 6.0% | 3.0% | 6.0% | 3.0% |
| 5–9 | 7.0% | 3.5% | 7.0% | 3.5% |
| 10–14 | 8.0% | 4.0% | 8.0% | 4.0% |
| 15–19 | 9.0% | 4.5% | 9.0% | 4.5% |
| 20–24 | 11.0% | 5.5% | 11.0% | 5.5% |
| 25+ | 13.0% | 6.5% | 13.0% | 6.5% |

Year-End Credits

As of December 30 of each year listed below, active participants received a year-end credit equal to a percentage of the entire year's compensation:

| **Year** | **Credit Rate** |
|---|---|
| 2000 | 3% |
| 2001 | 3% |
| 2002 | 2% |
| 2003 | 1% |
| 2004 | 1% |
| 2005 | 1% |
| 2006 | 2% |
| 2007 | 1% |

[2] Includes participation in this plan and the Safeway Plan.

Interest Credits

| Year | November 30-Year Treasury Rate |
|---|---|
| 2006 | 4.69% |
| 2007 | 4.52% |
| 2008 | 4.00% |
| 2009 | 4.31% |
| 2010 | 4.19% |
| 2011 | 3.02% |
| 2012 | 2.80% |
| 2013 | 3.80% |
| 2014 | 3.04% |
| 2015 | 3.03% |
| 2016 | 2.86% |
| 2017 | 2.80% |
| 2018 | 3.36% |
| 2019 | 2.28% |
| 2020 | 1.62% |
| 2021 | 1.94% |

For subsequent plan years, the annual interest credit rate is the annual rate of return on 30-year Treasury bonds during November preceding the plan year. The minimum interest crediting rate is 2.34%.

Employee Contribution Account

A participant's employee contribution account is equal to the value of the participant's employee contribution account under the Safeway Plan as of the effective date of this plan, accumulated with interest.

Frozen Accrued Benefit as of June 30, 1999

Frozen accrued benefits as of June 30, 1999 are determined under the benefit provisions of the Safeway Plan in effect on that date, except that for purposes of determining the final average benefit, the percentage applied to final average compensation in excess of covered compensation is 0.5% at all ages.

Grandfather Benefit

Each participant shall continue to accrue benefits under this plan until June 30, 2006, using the benefit formulas of the Safeway Plan in effect as of June 30, 1999. The grandfather benefit is equal to the sum of the basic benefit plus the account balance benefit. The benefit formulas under the grandfather benefit differ from the June 30, 1999 Safeway Plan in the following manner:

- The percentage applied to final average compensation in excess of covered compensation is 0.5% at all ages.
- The lump sum value of the account balance benefit is in all cases exactly equal to the account balance.

Basic Benefit

The basic benefit formula is the greater of (a) or (b):

(a) Career average formula:

(i) The career average benefit under the Safeway Plan as of the effective date of this plan; plus

(ii) 1½% of annual compensation for each plan year thereafter.

(b) Final average formula:

(i) 0.95% of the participant's "final average compensation" multiplied by his years of participating; plus

(ii) 0.50% of the participant's "final average compensation" in excess of his covered compensation multiplied by his years of participation up to a maximum of 35 years.

"Final average compensation" means the average compensation over the 60 consecutive complete calendar months of highest compensation, out of the last 10 years of service. "Covered compensation" means the average amount of compensation with respect to which Old Age and Survivors Insurance benefits would be provided under the Social Security Act, assuming earnings were equal to the Social Security wage base each year through Social Security retirement age.

Account Balance Benefit

In addition to the benefits described in the preceding paragraphs, each eligible participant who is an eligible account balance participant is entitled to an account balance benefit. The benefit is normally a single sum value called the account balance.

Account Balance

The account balance is the sum of the contribution credits accumulated with the annual interest index. As of the effective date of this plan, each participant's account balance is equal to his account balance under the Safeway Plan.

Contribution Credit

The contribution credit for a plan year is the contribution credit percentage from the table below times the participant's account balance earnings:

| Year | Contribution Credit |
|---|---|
| 2000 | 7% |
| 2001 | 7% |
| 2002 | 6% |
| 2003 | 5% |
| 2004 | 5% |
| 2005 | 5% |
| 2006 | 4% |

Account Balance Earnings

Account balance earnings include basic and regular pay earned while an eligible account balance participant, including overtime pay but excluding contingent (bonus) pay.

Annual Interest Index

| Year | Applicable November 1-Year Treasury Rate |
|---|---|
| 2006 | 3.48% |
| 2007 | 4.88% |
| 2008 | 4.66% |
| 2009 | 0.48% |
| 2010 | 0.33% |
| 2011 | 0.20% |
| 2012 | 0.17% |
| 2013 | 0.13% |
| 2014 | 0.11% |
| 2015 | 0.29% |
| 2016 | 0.60% |
| 2017 | 1.56% |
| 2018 | 2.70% |
| 2019 | 1.57% |
| 2020 | 0.12% |
| 2021 | 0.18% |

Effective December 31, 2017, the annual interest credit rate is the annual rate of return on one-year Treasury rates during November preceding the plan year. Prior to that, the annual interest credit rate was the average yield on one-year Treasury rates for the 12-month period ending the November preceding the plan year.

Annuity Benefit

If the participant elects to receive an annuity benefit, the account balance will be paid as a monthly benefit in the same form as the regular plan benefits. For a life annuity commencing at age 55 or older, the monthly benefit is 1% of the account balance on the date benefits commence.

Union Benefit

Several union groups have bargained to be participants in this plan but have different benefit formulas. In all cases, the benefits are offset by any accrued benefits under the Safeway Plan.

Union Benefit—Teamsters Local 639

The benefit formula is the sum of (a), (b) and (c):

(a) The accrued benefit under the Safeway Plan as of the effective date of this plan; plus

(b) For each full year of benefit service, the amount from the following table:

| Year | Monthly Benefit |
|---|---|
| 2000 | $152 |
| 2001 | $160 |
| 2002 | $180 |
| 2003 | $190 |
| 2004–5/31/2016 | $200 |
| ≥ 6/1/2016 | $100 |

Any participant hired or rehired after April 27, 2006 will receive $140 per year for any period of employment below the top scale wage for his position. However, all employees on May 15, 2011 will immediately become eligible to accrue benefits at a rate of $200 per month. Effective June 1, 2016, the $140 benefit was reduced to $70 and the $200 benefit was reduced to $100.

(c) The supplemental benefit is the sum of (1), (2) and (3) below:

(1) $5 payable per month per year of credited service (up to a maximum of 30 years) in the plan.

(2) $30 payable per month per year of credited service accrued as of June 16, 2000.

(3) $5 payable per month per year of service accrued as of June 16, 2000 (up to a maximum of 10 years).

Union Benefit—Operating Engineers Local 99

The benefit formula is the sum of (a), (b), (c), and (d):

(a) The accrued benefit under the regular plan formula on February 1, 1991; plus

(b) For each full year of benefit service, the amount from the following table:

| Year | Monthly Benefit |
|---|---|
| 2000 | $152 |
| 2001 | $160 |
| 2002 | $180 |
| 2003 | $190 |
| 2004–5/31/2016 | $200 |
| ≥ 6/1/2016 | $100 |

Any participant hired after February 13, 2007 will receive $140 per year for the first four years. Effective June 1, 2016, the $140 benefit was reduced to $70.

(c) A supplemental benefit of $30 per month per year of credited service accrued under the Safeway Plan as of June 16, 2000.

(d) A supplemental benefit for each year of service up to a maximum of 10 years.

| Year | Monthly Benefit |
|---|---|
| 2007–2008 | $ 5 |
| 2009–2010 | $10 |
| ≥ 2011 | $15 |

Union Benefit—Local 1486

The benefit formula is the sum of (a) and (b):

(a) The accrued benefit under the Safeway Plan of the effective date of this plan; plus

(b) For each full year of benefit service, the amount from the following table:

| Year | Monthly Benefit |
|---|---|
| 2000 | $155 |
| 2001 | $160 |
| 2002 | $180 |
| 2003 | $190 |
| 2004–5/31/2016 | $200 |
| ≥ 6/1/2016 | $100 |

Any participant hired after September 24, 2006 will receive $140 per year for the first four years. Effective June 1, 2016, the $140 benefit was reduced to $70.

Union Benefit—Warehouse Union Local 730

The benefit formula is the sum of (a), (b), and (c):

a) The accrued benefit under the Safeway Plan of the effective date of this plan; plus

(b) For each full year of benefit service, the amount from the following table:

| Year | Monthly Benefit |
|---|---|
| 2000 | $109 |
| 2001 | $120 |
| 2002 | $140 |
| 2003 | $150 |
| 2004–2011 | $160 |
| 2012–6/1/2016 | $200 |
| ≥ 6/1/2016 | $100 |

Any employee hired after April 26, 2006 will not receive any benefit for any period of employment as a “Selector Helper.”

No employee shall receive any benefit for any period of employment as an “On-Call Driver.”

Effective March 16, 2012, employees in the job classification of ‘Lumper’ shall not be eligible to participate in the plan.

(c) The supplemental benefit is the sum of (1) and (2) below:

(1) $30 payable per month per year of credited service accrued under the Safeway Plan as of June 16, 2000.

(2) $5 payable per month per year of credited service accrued under the Safeway Plan as of June 1, 2000 (up to a maximum of 10 years).

| | |
|---|---|
| Annual Retirement Benefit at Optional Retirement Date | The annual retirement benefit at an optional retirement date is generally calculated using the normal retirement benefit formula based on compensation and service through the optional retirement date. The basic benefit and the union benefit are reduced if the optional retirement date is prior to age 62. The account balance benefit is reduced if the optional retirement date is prior to age 55.<br><br>Certain union groups are subject to the “25 and out” and “30 and out” early retirement provisions whereby the participants with 30 years of service can commence unreduced benefit. Reduction between 25 and 30 years of service is either 4% or 5% depending on the local group. |
| Vesting of Benefits | If a participant terminates employment after completing five years of service (three years for participants with cash balance benefits) after age 18, or upon attainment of age 55, he or she will have a vested right to the pension benefits accrued to date of termination. Benefit payments will commence at age 65 or, if the participant chooses, at any time prior to 65, subject to the early retirement reduction provisions of the plan. |
| Death Benefit | |
| Before Retirement | If a participant dies prior to retirement, his or her beneficiary would receive the actuarial present value of the participant's accrued benefits. |
| After Retirement | If a participant dies after retirement, any death benefit will be paid in accordance with the optional benefit payment in effect. If the benefit to the participant was in the life annuity form, his beneficiary would receive the total of all his contributions with interest to his retirement date less any payments made to him or his beneficiary since retirement. |

| | |
|---|---|
| Contributions | The company shall contribute an amount necessary to carry out the purposes of the plan. |
| Administration | The plan is administered by a Benefit Plans Committee appointed by Safeway, which will have full authority to interpret and administer the plan. |
| Termination of Plan | Upon termination of the plan, the trust fund shall be distributed to the participants proportionately and equitably in a manner determined by the Committee. In any event, no participant will receive an amount less than the total of all contributions made by that participant to the plan with interest to the date of termination or his or her retirement date (whichever is earlier) less any payments received under the plan.<br><br>No liquidation of assets and payment of benefits shall actually be made by the Trustee until after it is advised by the company that the applicable requirements of ERISA governing plan terminations have been met. |

## Plan Changes Since the Prior Year

The funding and plan reporting valuations reflect the following changes:

- An update to the mortality table for determining minimum lump sum payments under IRC section 417(e)(3) to the applicable mortality for the current plan year.
- An annuity purchase occurred during 2021 for ERP annuitants with a monthly benefit of $1,200 or less per month, except participants as described in amendment 2021-3 to the ERP plan document.
- An update to supplemental benefits for union participants in Local 125 (formerly Local 119) and Local 114.

## Other Information to Fully and Fairly Disclose the Actuarial Position of the Plan

Due to software limitations with the electronic filing process, information filed electronically cannot be controlled by the Enrolled Actuary. The values on the signed Schedule SB will govern to the extent there are any differences in the entries filed electronically and the actual data contained on the signed Schedule SB.

# Schedule SB Attachment (Form 5500)—December 31, 2021 Plan Year
# Employee Retirement Plan of Safeway Inc. and Its Domestic Subsidiaries
# EIN: 943019135 PN: 001

## Schedule SB, line 24—Change in Actuarial Assumptions

The funding valuation reflects the following assumption changes:

- A change in the cash balance annuity conversion/lump sum determination rate from 2.15% to 2.10%.
- A change in the late retirement factor interest rate from 2.15% to 2.10%.
- A change in the expected return on assets (before being limited by the third segment rate) from 6.25% for 2020 plan year to 6.50% for 2021 plan year.
- A change in the salary increase scale from 3.20% to 2.80%.

These changes were made to better reflect the anticipated plan experience. These assumption changes did not reduce the funding shortfall more than the thresholds stated in Internal Revenue Code Section 430(h)(5); as such, approval of the Commissioner is not required.

# Schedule SB Attachment (Form 5500)—December 31, 2021 Plan Year
# Employee Retirement Plan of Safeway Inc. and Its Domestic Subsidiaries
# EIN: 943019135 PN: 001

## Schedule SB, line 26—Schedule of Active Participant Data as of December 31, 2021

Number of Participants, Average Compensation and Average Cash Balance Account

| Attained Age | Years of Credited Service | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|
| | <1 | 1-4 | 5-9 | 10-14 | 15-19 | 20-24 | 25-29 | 30-34 | 35-39 | 40+ |
| | 32 | 27 | | | | | | | | |
| | $19,033 | $27,891 | | | | | | | | |
| <25 | $164 | $863 | | | | | | | | |
| | 39 | 142 | 40 | | | | | | | |
| | $42,447 | $41,896 | $38,847 | | | | | | | |
| 25-29 | $547 | $2,770 | $3,632 | | | | | | | |
| | 109 | 238 | 455 | 31 | | | | | | |
| | $44,323 | $58,198 | $65,913 | $60,220 | | | | | | |
| 30-34 | $2,591 | $4,902 | $10,002 | $13,998 | | | | | | |
| | 138 | 264 | 479 | 332 | 27 | | | | | |
| | $44,555 | $62,379 | $81,227 | $82,416 | $61,320 | | | | | |
| 35-39 | $5,700 | $6,496 | $16,283 | $27,650 | $34,967 | | | | | |
| | 137 | 268 | 415 | 434 | 186 | 28 | | | | |
| | $53,023 | $56,227 | $81,408 | $93,404 | $79,274 | $52,256 | | | | |
| 40-44 | $10,578 | $6,223 | $18,355 | $41,726 | $60,008 | $48,876 | | | | |
| | 138 | 241 | 346 | 393 | 320 | 114 | 21 | | | |
| | $47,587 | $57,410 | $78,547 | $86,870 | $100,182 | $88,266 | $58,902 | | | |
| 45-49 | $12,010 | $8,359 | $18,281 | $40,483 | $87,507 | $98,915 | $91,211 | | | |
| | 181 | 288 | 398 | 400 | 410 | 234 | 99 | 16 | | |
| | $44,751 | $50,340 | $70,158 | $83,192 | $95,358 | $103,126 | $81,036 | | | |
| 50-54 | $10,725 | $7,350 | $18,524 | $41,218 | $88,659 | $147,317 | $132,376 | | | |
| | 219 | 298 | 396 | 416 | 351 | 248 | 180 | 54 | 9 | |
| | $49,355 | $46,910 | $64,575 | $76,356 | $80,291 | $86,968 | $92,286 | $66,531 | | |
| 55-59 | $17,125 | $8,444 | $19,930 | $41,191 | $77,769 | $138,169 | $191,970 | $150,791 | | |
| | 125 | 195 | 320 | 305 | 299 | 199 | 131 | 71 | 17 | 2 |
| | $46,650 | $47,841 | $57,255 | $65,450 | $73,178 | $88,458 | $66,095 | $90,298 | | |
| 60-64 | $14,364 | $9,369 | $16,245 | $38,137 | $80,729 | $156,912 | $157,559 | $259,989 | | |
| | 46 | 65 | 128 | 104 | 100 | 67 | 40 | 15 | 11 | 1 |
| | $40,658 | $44,440 | $49,959 | $56,479 | $68,329 | $78,860 | $59,227 | | | |
| 65-69 | $20,773 | $8,208 | $16,933 | $36,083 | $88,024 | $145,522 | $155,473 | | | |
| | 14 | 39 | 44 | 32 | 36 | 17 | 12 | 2 | | 1 |
| | | $30,557 | $33,855 | $37,861 | $60,841 | | | | | |
| 70+ | | $6,125 | $11,051 | $18,706 | $82,979 | | | | | |

N-12,029

# Schedule SB Attachment (Form 5500)—December 31, 2021 Plan Year
# Employee Retirement Plan of Safeway Inc. and Its Domestic Subsidiaries
# EIN: 943019135 PN: 001

## Schedule SB, line 22—Description of Weighted Average Retirement Age

The average retirement age shown in line 22 has been calculated by assuming the following retirement rates and no decrements other than retirement for this calculation. All retirements are assumed to occur at mid-year, except for the 100% retirement age. The rates below are a blend of Union and Non-Union retirement rates, weighted by actual participant counts.

| (a) Age | (b) Rate | (c) Weight | (d) Product (a) × (b) × (c) |
|---|---|---|---|
| 55.5 | 10.38% | 1.0000 | 5.76 |
| 56.5 | 8.15% | 0.8962 | 4.13 |
| 57.5 | 8.15% | 0.8232 | 3.86 |
| 58.5 | 8.53% | 0.7561 | 3.77 |
| 59.5 | 11.30% | 0.6916 | 4.65 |
| 60.5 | 13.70% | 0.6134 | 5.08 |
| 61.5 | 16.68% | 0.5294 | 5.43 |
| 62.5 | 16.68% | 0.4411 | 4.60 |
| 63.5 | 16.30% | 0.3675 | 3.80 |
| 64.5 | 22.77% | 0.3076 | 4.52 |
| 65.5 | 30.38% | 0.2376 | 4.73 |
| 66.5 | 30.76% | 0.1654 | 3.38 |
| 67.5 | 26.13% | 0.1145 | 2.02 |
| 68.5 | 20.76% | 0.0846 | 1.20 |
| 69.5 | 31.51% | 0.0670 | 1.47 |
| 70 | 100.00% | 0.0459 | 3.21 |
| | | Weighted Average | 61.61 |

# Schedule SB Attachment (Form 5500)—December 31, 2021 Plan Year
# Employee Retirement Plan of Safeway Inc. and Its Domestic Subsidiaries
# EIN: 943019135 PN: 001

## Schedule SB, Part V—Summary of Plan Provisions

## Employee Retirement Plan of Safeway Inc. and Its Domestic Subsidiaries ('ERP')

| | |
|---|---|
| Effective Date | December 1, 1946 |
| Latest Amendment Date | August 31, 2021 |
| Eligibility for Coverage | Full-time employees who:<br>▪ Have completed one year of service;<br>▪ Have reached age 21;<br>▪ Are not participating or eligible for coverage under another retirement plan to which the company contributes;<br>▪ Are not project employees;<br>▪ Are not eligible for the SRG 401(k) Plan; and<br>▪ Are not eligible for the Groceryworks.com LLC 401(k) and Profit Sharing Plan;<br>▪ Are not SRG orGroceryworks.com employees who are eligible for a match in the Safeway 401(k) Plan.<br>Become eligible for coverage on the first day of the month after fulfilling these requirements. Non-union employees may not enter the plan after April 1, 2015. |
| Normal Retirement Date | First day of the month after reaching age 65. |
| Optional Retirement Date | First day of any month after the earlier of 1) completing five years of service (three years for participants with cash balance benefits) after age 18; or 2) reaching age 55. |
| In-Service Distributions | Effective September 1, 2020, participants who are classified as non-union employees on the date of distribution election are allowed to receive an in-service distribution upon attainment of 59½. |
| Normal Form of Retirement Benefit | Monthly income payable for life. |
| Optional Forms of Payment | ▪ 5, 10 or 15 years certain and life thereafter;<br>▪ Joint and 50% to survivor or joint and 100% to survivor;<br>▪ Single sum payment of 25%, 50%, 75%, or 100%, with remainder as annuity;<br>▪ A combination of the forms above; and |

| | |
|---|---|
| | ▪ Any other form approved by the Benefit Plans Committee.<br><br>Factors to convert annuities to certain and life are 0.994, 0.971 and 0.939 for the different periods. Factors to convert annuities to joint and survivor forms of payments are 0.94 and 0.89 with further adjustments based on age of contingent annuitant. |
| Compensation | Compensation includes all amounts paid to the participant including deferred compensation and overtime, contingent and part-time earnings. Compensation also includes salary deferrals to company 401(k) and 125 plans. Compensation does not include discretionary bonuses or any amounts paid after termination. |
| Annual Benefit at Normal Retirement Date | The benefit formula for most plan participants, which was amended effective July 1, 1999, is the greatest of:<br><br>(a) Cash balance benefit;<br><br>(b) Frozen accrued benefit as of June 30, 1999; or<br><br>(c) Grandfather benefit.<br><br>Certain union employees have separate benefit structures that are described below.<br><br>Certain participants have frozen benefits under plans which have been merged into this one. These plans include those previously sponsored by Vons, Genuardi's and Randalls.<br><br>The annual retirement benefit attributable to company contributions cannot exceed the maximum level permitted by Section 415 of the Internal Revenue Code. This limit is defined in the assumptions section of this report. |
| Cash Balance Benefit | The actuarial equivalent of the participant's total cash balance account. |
| Total Cash Balance Account | The sum of the participant's cash balance account and his employee contribution account. |
| Cash Balance Account | The sum of the participant's opening balance, pay-based credits, year-end credits, interest credits, and special credit at June 30, 2006. |

Opening Balance

The single sum value of the participant's employer-provided accrued benefit as of June 30, 1999. The actuarial basis used to determine the participant's opening balance is the plan's lump sum basis in effect on June 30, 1999.

Special Credit at June 30, 2006

The excess, if any, of the single sum value of the participant's employer-provided benefit over the participant's cash balance account, as of June 30, 2006. The actuarial basis used to determine the single sum value is the plan's lump sum basis in effect on June 30, 2006.

Pay-Based Credits

For each month in which the participant is an active participant on the first day of the month, he receives a pay-based credit on the last day of the month determined as a percentage of that month's compensation, based on his category and years of plan participation, according to the following table which was effective December 31, 2008):

Effective December 30, 2018, non-union participants no longer accrue pay-based credits.

| Years of Participation | Union | Market Place | Local 114 | All Other |
|---|---|---|---|---|
| 0–4 | 3.0% | 2.0% | 4.0% | 3.0% |
| 5–9 | 4.0% | 2.0% | 4.5% | 3.5% |
| 10–14 | 5.0% | 2.0% | 5.5% | 4.0% |
| 15–19 | 6.0% | 2.0% | 6.0% | 4.5% |
| 20–24 | 7.5% | 2.0% | 7.0% | 5.5% |
| 25+ | 9.0% | 2.0% | 7.5% | 6.5% |

Year-End Credits

As of December 30 of each of the years listed below, active non-union participants received a year-end credit equal to a percentage of the entire year's compensation:

| Year | Dominick EEs[1] | Market Place | All Others |
|---|---|---|---|
| 1999 | 1.00% | N/A | 3.25% |
| 2000 | 2.00% | N/A | 3.00% |
| 2001 | 2.00% | N/A | 3.00% |
| 2002 | 1.00% | 1.00% | 2.00% |
| 2003 | 1.00% | 1.00% | 1.00% |
| 2004 | 1.00% | 1.00% | 1.00% |
| 2005 | 1.00% | 1.00% | 1.00% |
| 2006 | 2.00% | 2.00% | 2.00% |

[1] Excludes Dominick's Commissionary.

Interest Credits

| | | | | | |
|---|---|---|---|---|---|
| 2007 | 1.00% | | 1.00% | 1.00% | |
| **Year** | **November 30-Year Treasury Rate** | | **Year** | **November 30-Year Treasury Rate** | |
| 2005 | 4.73% | | 2014 | 3.04% | |
| 2006 | 4.69% | | 2015 | 3.03% | |
| 2007 | 4.52% | | 2016 | 2.86% | |
| 2008 | 4.00% | | 2017 | 2.80% | |
| 2009 | 4.31% | | 2018 | 3.36% | |
| 2010 | 4.19% | | 2019 | 2.28% | |
| 2011 | 3.02% | | 2020 | 1.62% | |
| 2012 | 2.80% | | 2021 | 1.94% | |
| 2013 | 3.80% | | | | |

For subsequent plan years, the annual interest credit rate is the annual rate of return on 30-year Treasury bonds during November preceding the plan year. Note that those participants accruing benefits under the "Union Participant" schedule have a minimum interest crediting rate of 4.01%. For Local 114 sanitation workers, the minimum interest crediting rate is 1.72%. For all other participants the minimum interest crediting rate is 2.34%.

Employee Contribution Account

A participant's employee contribution account is equal to the value of all employee contributions made prior to July 1987, accumulated with interest.

Frozen Accrued Benefit as of June 30, 1999

Frozen accrued benefits as of June 30, 1999 are determined under the benefit provisions of the plan in effect on that date, except that for purposes of determining the final average benefit, the percentage applied to final average compensation in excess of covered compensation is 0.5% at all ages.

Grandfather Benefit

Each participant shall continue to accrue benefits under the benefit formulas of the plan in effect as of June 30, 1999, until June 30, 2006. The grandfather benefit is equal to the sum of the basic benefit plus the account balance benefit. The benefit formulas under the grandfather benefit differ from the June 30, 1999 plan in the following manner:

- The percentage applied to final average compensation in excess of covered compensation is 0.5% at all ages.

- The lump sum value of the account balance benefit is in all cases exactly equal to the account balance.

Basic Benefit

The basic benefit formula, which was amended effective December 30, 1989 (and adjusted as above), is the greater of:

(a) Career average formula: 1½% of annual compensation for each plan year; or

(b) Final average formula: The annual retirement benefit for participants whose full-time employment terminates on or after December 30, 1989.

(i) 0.95% of the participant's "final average compensation" multiplied by his years of participating; plus

(ii) 0.50% of the participant's "final average compensation" in excess of his covered compensation multiplied by his years of participation up to a maximum of 35 years.

"Final average compensation" means the average compensation over the 60 consecutive complete calendar months of highest compensation, out of the last 10 years of service. "Covered compensation" means the average amount of compensation with respect to which Old Age and Survivors Insurance benefits would be provided under the Social Security Act, assuming earnings were equal to the Social Security wage base each year through Social Security retirement age.

Account Balance Benefit

In addition to the benefits described in the preceding paragraphs, each eligible participant active on December 31, 1987 or later who is an eligible account balance participant is entitled to an account balance benefit. The benefit is normally a single sum value called the account balance.

Account Balance

The account balance is the sum of the contribution credits accumulated with the annual interest index.

Contribution Credit

The contribution credit for a plan year is the percentage from the table below times the participant's account balance earnings:

| Year | Contribution Credit | Year | Contribution Credit |
|---|---|---|---|
| 1987 | 7.75% | 1997 | 7.50% |
| 1988 | 7.75% | 1998 | 7.75% |
| 1989 | 8.00% | 1999 | 7.25% |
| 1990 | 8.00% | 2000 | 7.00% |
| 1991 | 6.00% | 2001 | 7.00% |
| 1992 | 4.00% | 2002 | 6.00% |
| 1993 | 6.00% | 2003 | 5.00% |
| 1994 | 7.00% | 2004 | 5.00% |
| 1995 | 7.50% | 2005 | 5.00% |
| 1996 | 8.00% | 2006 | 4.00% |

Account Balance Earnings

Account balance earnings include basic and regular pay earned while an eligible account balance participant, including overtime pay but excluding contingent (bonus) pay.

Annual Interest Index

| Year | Applicable November 1-Year Treasury Rate | Year | Applicable November 1-Year Treasury Rate |
|---|---|---|---|
| 1994 | 2.44% | 2008 | 4.66% |
| 1995 | 5.02% | 2009 | 0.48% |
| 1996 | 6.10% | 2010 | 0.33% |
| 1997 | 5.50% | 2011 | 0.20% |
| 1998 | 5.63% | 2012 | 0.17% |
| 1999 | 5.14% | 2013 | 0.13% |
| 2000 | 4.97% | 2014 | 0.11% |
| 2001 | 6.13% | 2015 | 0.29% |
| 2002 | 3.76% | 2016 | 0.60% |
| 2003 | 2.07% | 2017 | 1.56% |
| 2004 | 1.26% | 2018 | 2.70% |
| 2005 | 1.77% | 2019 | 1.57% |
| 2006 | 3.48% | 2020 | 0.12% |
| 2007 | 4.88% | 2021 | 0.18% |

Effective December 31, 2017, the annual interest credit rate is the annual rate of return on one-year Treasury rates during November preceding the plan year. Prior to that, the annual interest credit rate was the average yield on one-year Treasury rates for the 12-month period ending the November preceding the plan year.

Annuity Benefit

If the participant elects to receive an annuity benefit, the account balance will be paid as a monthly benefit in the same form as the regular plan benefits. For a life annuity commencing at age 55 or older, the monthly benefit is 1% of the account balance on the date benefits commence.

Union Benefit

Many union groups have bargained to be participants in this plan but have different benefit formulas. The following groups have separate formulas.

Union Benefit—Teamsters Local 639

Effective December 31, 1990, an alternative benefit structure was adopted for plan participants who were members of Teamsters Local 639. The benefit formula is the sum of (a), (b) and (c):

(a) The accrued benefit under the regular plan formula on December 31, 1990; plus

(b) For each full year of benefit service, the amount from the following table:

| Year | Monthly Benefits |
|---|---|
| 1991 | $110 |
| 1992 | $120 |
| 1993 | $130 |
| 1994 | $133 |
| 1995 | $136 |
| 1996 | $140 |
| 1997 | $143 |
| 1998 | $146 |
| 1999 | $149 |
| 2000 | $152 |
| 2001 | $160 |
| 2002 | $180 |
| 2003 | $190 |
| 2004+ | $200 |

(c) The supplemental benefit is the sum of (1), (2) and (3) below:

(1) $5 payable per month per year of credited service (up to a maximum of 30 years) in the plan;

(2) $30 payable per month per year of credited service accrued as of June 16, 2000;

(3) $5 payable per month per year of service accrued as of June 16, 2000 (up to a maximum of 10 years).

Union Benefit—Operating Engineers Local 99

Effective February 1, 1991, a benefit structure was adopted for plan participants who were members of Operating Engineers Local 99. The benefit formula is the sum of (a), (b), (c), and (d):

(a) The accrued benefit under the regular plan formula on February 1, 1991; plus

(b) For each full year of benefit service, the amount from the following table:

| Year | Monthly Benefits |
|---|---|
| 1991 | $ 90 |
| 1992 | $ 90 |
| 1993 | $ 90 |
| 1994 | $140 |
| 1995 | $140 |
| 1996 | $140 |
| 1997 | $143 |
| 1998 | $146 |
| 1999 | $149 |
| 2000 | $152 |
| 2001 | $160 |
| 2002 | $180 |
| 2003 | $190 |
| 2004+ | $200 |

(c) A supplemental benefit of $30 per month per year of credited service accrued as of June 16, 2000.

(d) A supplemental benefit of $15 per month per year of service (up to a maximum of 10 years).

Union Benefit—Warehouse Union Local 730

Effective January 1, 1993, an alternative benefit structure was adopted for plan participants who were members of Local 730. The benefit formula is the sum of (a) and (b):

(a) The accrued benefit under the regular plan formula on December 31, 1992; plus

(b) For each full year of benefit service, the amount from the following table:

| Year | Monthly Benefits |
|---|---|
| 1993 | $ 90 |
| 1994 | $ 90 |
| 1995 | $ 95 |
| 1996 | $ 95 |
| 1997 | $100 |
| 1998 | $103 |
| 1999 | $106 |
| 2000 | $109 |
| 2001 | $120 |
| 2002 | $140 |
| 2003 | $150 |
| 2004+ | $160 |

Union Benefit—Bakery, Confectionery, Tobacco Workers and Grain Millers Local 218

Effective October 1, 1995, an alternative benefit structure was adopted for plan participants who were members of Local 218. For each full year of benefit service, the amount from the following table:

| Year | Monthly Benefits |
|---|---|
| < 10/1/1995 | $35 |
| 10/1/1995–9/25/2009 | $45 |
| 9/26/2009–12/31/2012 | $50 |
| ≥ 1/1/2013 | $55 |

Union Benefit—Bakery, Confectionery, Tobacco Workers and Grain Millers Local 125 (formerly Local 119)

Effective April 1, 1996, an alternative benefit structure was adopted for plan participants who were members of Local 125. The benefit formula is the sum of (a) and (b).

(a) For each full year of benefit service, the amount from the following table:

| Year | Monthly Benefits |
|---|---|
| < 4/1/1996 | $40 |
| 4/1/1996–12/31/1999 | $60 |
| ≥ 1/1/2000 | $64 |

(b) A supplemental benefit (shown below) is provided per year of credited service (up to a maximum of 25 years) for participants employed as of the following dates:

| Effective Date | Supplemental Benefits |
|---|---|
| 1/1/2003 | $2 |
| 1/1/2004 | $4 |
| 9/1/2005 | $2 |
| 1/1/2007 | $4 |
| 3/1/2008 | $4 |
| 7/1/2010 | $2 |
| 9/1/2011 | $2 |
| 9/1/2012 | $2 |
| 9/1/2014 | $2 |
| 9/1/2016 | $2 |
| 3/1/2021 | $2 |
| 1/1/2023 | $2 |

Union Benefit—Bakery, Confectionery, Tobacco Workers and Grain Millers Local 114

Effective January 1, 1997, an alternative benefit structure was adopted for plan participants who were members of Local 114. The benefit formula is the sum of (a) and (b):

(a) For each full year of benefit service, the amount from the following table:

| Year | Monthly Benefits |
|---|---|
| < 1/1/1997 | $ 60 |
| 1/1/1997–9/30/2001 | $ 90 |
| 10/1/2001–6/30/2019 | $100 |
| 7/1/2019–6/30/2020 | $150 |
| ≥ 7/1/2020 | $200 |

(b) A supplemental benefit (shown below) is provided per year of credited service (up to a maximum of 25 years) for participants employed as of the following dates:

| Effective Date | Supplemental Benefits |
|---|---|
| 8/1/2006 | $2 |
| 1/1/2008 | $4 |
| 2/1/2009 | $4 |
| 7/1/2011 | $2 |
| 8/1/2012 | $2 |
| 8/1/2013 | $2 |
| 7/1/2015 | $2 |
| 7/1/2017 | $2 |
| 7/1/2019 | $2 |
| 7/1/2020 | $2 |

Union Benefit—Bakery, Confectionery, Tobacco Workers and Grain Millers Local 26

Effective August 1, 1997, an alternative benefit structure was adopted for plan participants who were members of Local 26. The benefit formula is the sum of (a) and (b):

(a) For each full year of benefit service, the amount from the following table:

| Year | Monthly Benefits |
|---|---|
| < 8/1/1997 | $45 |
| 8/1/1997–5/12/2001 | $60 |
| 5/13/2001–7/6/2002 | $62 |
| 7/7/2002–7/5/2003 | $64 |
| 7/6/2003–7/3/2004 | $66 |
| ≥ 7/4/2004 | $68 |

(b) A supplemental benefit (shown below) is provided per year of credited service (up to a maximum of 25 years) for participants employed as of the following dates:

| Effective Date | Supplemental Benefits |
|---|---|
| 6/1/2012 | $2 |
| 6/1/2013 | $2 |
| 6/1/2015 | $2 |
| 6/1/2016 | $2 |

Union Benefit—Bakery, Confectionery, Tobacco Workers and Grain Millers Local 118 (In-Store Bakery Employees)

Effective July 1, 1997, an alternative benefit structure was adopted for plan participants who were members of Local 118. The benefit formula is the sum of (a) and (b):

(a) For each full year of benefit service, the amount from the following table:

| Year | Monthly Benefits |
|---|---|
| < 7/1/1997 | $45 |
| 7/1/1997–12/31/2000 | $70 |
| ≥ 1/1/2001 | $75 |

(b) A supplemental benefit of $15 per month per year of past service (service prior to July 1, 1997) up to a maximum of 10 years. Effective January 1, 2017, this benefit will be increased to $20 per month per year of past service (service prior to July 1, 1997) up to a maximum of 10 years, pending amendment.

| | |
|---|---|
| Annual Retirement Benefit at Optional Retirement Date | The annual retirement benefit at an optional retirement date is generally calculated using the normal retirement benefit formula based on compensation and service through the optional retirement date. The basic benefit and the union benefit are reduced if the optional retirement date is prior to age 62. The account balance benefit is reduced if the optional retirement date is prior to age 55.<br><br>Certain union groups are subject to the “25 and out” and “30 and out” early retirement provisions. Whereby the participants with 30 years of service can commence unreduced benefit. Reduction between 25 and 30 years of service is either 4% or 5% depending on the local group. |
| Vesting of Benefits | If a participant terminates employment after completing five years of service (three years for participants with cash balance benefits) after age 18, or upon attainment of age 55, he or she will have a vested right to the pension benefits accrued to date of termination. Benefit payments will commence at age 65 or, if the participant chooses, at any time prior to 65, subject to the early retirement reduction provisions of the plan. |
| Death Benefit | |
| Before Retirement | If a participant dies prior to retirement, his or her beneficiary would receive the actuarial present value of the participant's accrued benefits. |
| After Retirement | If a participant dies after retirement, any death benefit will be paid in accordance with the optional benefit payment in effect. If the benefit to the participant was in the life annuity form, his beneficiary would receive the total of all his contributions with interest to his retirement date less any payments made to him or his beneficiary since retirement. |
| Contributions | The company shall contribute an amount necessary to carry out the purposes of the plan. |
| Administration | The plan is administered by a Benefit Plans Committee appointed by the company, which will have full authority to interpret and administer the plan. |

| | |
|---|---|
| Termination of Plan | Upon termination of the plan, the trust fund shall be distributed to the participants proportionately and equitably in a manner determined by the Committee. In any event, no participant will receive an amount less than the total of all contributions made by that participant to the plan with interest to the date of termination or his or her retirement date (whichever is earlier) less any payments received under the plan.<br><br>No liquidation of assets and payment of benefits shall actually be made by the Trustee until after it is advised by the company that the applicable requirements of ERISA governing plan terminations have been met. |

## Safeway Multiple Employer Retirement Plan ('SMERP')

| | |
|---|---|
| Effective Date | June 16, 2000 |
| Latest Amendment Date | August 31, 2021 |
| Safeway Plan | For ease of reference, the Employee Retirement Plan of Safeway Inc. and Its Domestic Subsidiaries will be referred to in this summary as the Safeway Plan. |
| Eligibility for Coverage | Employees of Safeway Inc. and Collington Services, LLC who:<br>▪ Have completed one year of service;<br>▪ Have reached age 21;<br>▪ Are not participating or eligible for coverage under another retirement plan to which the company contributes;<br>▪ Are not project employees; and<br>▪ If employed by Safeway Inc., are employed in a non-union non-retail position with the Eastern Division of the company.<br>Become eligible for coverage on the first day of the month after fulfilling these requirements. Participants who have met the above requirements and were participants in the Safeway Plan immediately prior to the effective date of this plan became participants on June 16, 2000. Non-union employees of Safeway may not enter the plan after April 1, 2015. |
| Normal Retirement Date | First day of the month after reaching age 65. |
| Optional Retirement Date | First day of any month after the earlier of 1) completing five years of service (three years for participants with cash balance benefits) after age 18; or 2) reaching age 55. |
| Normal Form of Retirement Benefit | Monthly income payable for life. |
| Optional Forms of Settlement | ▪ 5, 10 or 15 years certain and life thereafter;<br>▪ Joint and 50% to survivor or joint and 100% to survivor;<br>▪ Single sum payment of 25%, 50%, 75%, or 100%, with remainder as annuity;<br>▪ A combination of the forms above; and |

| | |
|---|---|
| | ▪ Any other form approved by the Benefit Plans Committee.<br><br>Factors to convert annuities to certain and life are 0.994, 0.971 and 0.939 for the different periods. Factors to convert annuities to joint and survivor forms of payments are 0.94 and 0.89 with further adjustments based on age of contingent annuitant. |
| Compensation | Compensation includes all amounts paid to the participant including deferred compensation and overtime, contingent and part-time earnings. Compensation also includes salary deferrals to company 401(k) and 125 plans. Compensation does not include discretionary bonuses or any amounts paid after termination. |
| Annual Benefit at Normal Retirement Date | The benefit formula for nonunion plan participants is equal to (a) minus (b):<br><br>(a) The greatest of:<br><br>(i) Cash balance benefit;<br><br>(ii) Frozen accrued benefit as of June 30, 1999; or<br><br>(iii) Grandfather benefit.<br><br>(b) The participant's benefit (if any) under the Safeway Plan.<br><br>Union employees have separate benefit structures as described below. The annual benefit attributable to company contributions cannot exceed the maximum level permitted by Section 415 of the Internal Revenue Code. The limit is defined in the assumptions section of this report. |
| Cash Balance Benefit | The actuarial equivalent of the participant's total cash balance account. |
| Total Cash Balance Account | The sum of the participant's cash balance account and his employee contribution account. |
| Cash Balance Account | The sum of the participant's opening balance, pay-based credits, year-end credits, interest credits, and special credit at June 30, 2006. |

Opening Balance

The participant's cash balance account under the Safeway Plan as of the effective date of this plan.

Special Credit at June 30, 2006

The excess, if any, of the single sum value of the participant's employer-provided benefit over the participant's cash balance account, as of June 30, 2006. The actuarial basis used to determine the single sum value is the plan's lump sum basis in effect on June 30, 2006.

Pay-Based Credits

For each month in which the participant is an active participant on the first day of the month, he receives a pay-based credit on the last day of the month determined as a percentage of that month's compensation, based on his years of plan participation, according to the following table:

Effective December 30, 2018, non-union participants no longer accrue pay-based credits.

| | Percent of Compensation | | | |
|---|---|---|---|---|
| **Years of Participation[2]** | **Collington EEs< 6/1/2016** | **Collington EEs> 6/1/2016** | **Safeway EEs< 12/31/2008** | **Safeway EEs> 12/31/2008** |
| 0–4 | 6.0% | 3.0% | 6.0% | 3.0% |
| 5–9 | 7.0% | 3.5% | 7.0% | 3.5% |
| 10–14 | 8.0% | 4.0% | 8.0% | 4.0% |
| 15–19 | 9.0% | 4.5% | 9.0% | 4.5% |
| 20–24 | 11.0% | 5.5% | 11.0% | 5.5% |
| 25+ | 13.0% | 6.5% | 13.0% | 6.5% |

Year-End Credits

As of December 30 of each year listed below, active participants received a year-end credit equal to a percentage of the entire year's compensation:

| **Year** | **Credit Rate** |
|---|---|
| 2000 | 3% |
| 2001 | 3% |
| 2002 | 2% |
| 2003 | 1% |
| 2004 | 1% |
| 2005 | 1% |
| 2006 | 2% |
| 2007 | 1% |

[2] Includes participation in this plan and the Safeway Plan.

Interest Credits

| Year | November 30-Year Treasury Rate |
|---|---|
| 2006 | 4.69% |
| 2007 | 4.52% |
| 2008 | 4.00% |
| 2009 | 4.31% |
| 2010 | 4.19% |
| 2011 | 3.02% |
| 2012 | 2.80% |
| 2013 | 3.80% |
| 2014 | 3.04% |
| 2015 | 3.03% |
| 2016 | 2.86% |
| 2017 | 2.80% |
| 2018 | 3.36% |
| 2019 | 2.28% |
| 2020 | 1.62% |
| 2021 | 1.94% |

For subsequent plan years, the annual interest credit rate is the annual rate of return on 30-year Treasury bonds during November preceding the plan year. The minimum interest crediting rate is 2.34%.

Employee Contribution Account

A participant's employee contribution account is equal to the value of the participant's employee contribution account under the Safeway Plan as of the effective date of this plan, accumulated with interest.

Frozen Accrued Benefit as of June 30, 1999

Frozen accrued benefits as of June 30, 1999 are determined under the benefit provisions of the Safeway Plan in effect on that date, except that for purposes of determining the final average benefit, the percentage applied to final average compensation in excess of covered compensation is 0.5% at all ages.

Grandfather Benefit

Each participant shall continue to accrue benefits under this plan until June 30, 2006, using the benefit formulas of the Safeway Plan in effect as of June 30, 1999. The grandfather benefit is equal to the sum of the basic benefit plus the account balance benefit. The benefit formulas under the grandfather benefit differ from the June 30, 1999 Safeway Plan in the following manner:

- The percentage applied to final average compensation in excess of covered compensation is 0.5% at all ages.
- The lump sum value of the account balance benefit is in all cases exactly equal to the account balance.

Basic Benefit

The basic benefit formula is the greater of (a) or (b):

(a) Career average formula:

(i) The career average benefit under the Safeway Plan as of the effective date of this plan; plus

(ii) 1½% of annual compensation for each plan year thereafter.

(b) Final average formula:

(i) 0.95% of the participant's "final average compensation" multiplied by his years of participating; plus

(ii) 0.50% of the participant's "final average compensation" in excess of his covered compensation multiplied by his years of participation up to a maximum of 35 years.

"Final average compensation" means the average compensation over the 60 consecutive complete calendar months of highest compensation, out of the last 10 years of service. "Covered compensation" means the average amount of compensation with respect to which Old Age and Survivors Insurance benefits would be provided under the Social Security Act, assuming earnings were equal to the Social Security wage base each year through Social Security retirement age.

Account Balance Benefit

In addition to the benefits described in the preceding paragraphs, each eligible participant who is an eligible account balance participant is entitled to an account balance benefit. The benefit is normally a single sum value called the account balance.

Account Balance

The account balance is the sum of the contribution credits accumulated with the annual interest index. As of the effective date of this plan, each participant's account balance is equal to his account balance under the Safeway Plan.

Contribution Credit

The contribution credit for a plan year is the contribution credit percentage from the table below times the participant's account balance earnings:

| Year | Contribution Credit |
|---|---|
| 2000 | 7% |
| 2001 | 7% |
| 2002 | 6% |
| 2003 | 5% |
| 2004 | 5% |
| 2005 | 5% |
| 2006 | 4% |

Account Balance Earnings

Account balance earnings include basic and regular pay earned while an eligible account balance participant, including overtime pay but excluding contingent (bonus) pay.

Annual Interest Index

| Year | Applicable November 1-Year Treasury Rate |
|---|---|
| 2006 | 3.48% |
| 2007 | 4.88% |
| 2008 | 4.66% |
| 2009 | 0.48% |
| 2010 | 0.33% |
| 2011 | 0.20% |
| 2012 | 0.17% |
| 2013 | 0.13% |
| 2014 | 0.11% |
| 2015 | 0.29% |
| 2016 | 0.60% |
| 2017 | 1.56% |
| 2018 | 2.70% |
| 2019 | 1.57% |
| 2020 | 0.12% |
| 2021 | 0.18% |

Effective December 31, 2017, the annual interest credit rate is the annual rate of return on one-year Treasury rates during November preceding the plan year. Prior to that, the annual interest credit rate was the average yield on one-year Treasury rates for the 12-month period ending the November preceding the plan year.

Annuity Benefit

If the participant elects to receive an annuity benefit, the account balance will be paid as a monthly benefit in the same form as the regular plan benefits. For a life annuity commencing at age 55 or older, the monthly benefit is 1% of the account balance on the date benefits commence.

Union Benefit

Several union groups have bargained to be participants in this plan but have different benefit formulas. In all cases, the benefits are offset by any accrued benefits under the Safeway Plan.

Union Benefit—Teamsters Local 639

The benefit formula is the sum of (a), (b) and (c):

(a) The accrued benefit under the Safeway Plan as of the effective date of this plan; plus

(b) For each full year of benefit service, the amount from the following table:

| Year | Monthly Benefit |
|---|---|
| 2000 | $152 |
| 2001 | $160 |
| 2002 | $180 |
| 2003 | $190 |
| 2004–5/31/2016 | $200 |
| ≥ 6/1/2016 | $100 |

Any participant hired or rehired after April 27, 2006 will receive $140 per year for any period of employment below the top scale wage for his position. However, all employees on May 15, 2011 will immediately become eligible to accrue benefits at a rate of $200 per month. Effective June 1, 2016, the $140 benefit was reduced to $70 and the $200 benefit was reduced to $100.

(c) The supplemental benefit is the sum of (1), (2) and (3) below:

(1) $5 payable per month per year of credited service (up to a maximum of 30 years) in the plan.

(2) $30 payable per month per year of credited service accrued as of June 16, 2000.

(3) $5 payable per month per year of service accrued as of June 16, 2000 (up to a maximum of 10 years).

Union Benefit—Operating Engineers Local 99

The benefit formula is the sum of (a), (b), (c), and (d):

(a) The accrued benefit under the regular plan formula on February 1, 1991; plus

(b) For each full year of benefit service, the amount from the following table:

| Year | Monthly Benefit |
|---|---|
| 2000 | $152 |
| 2001 | $160 |
| 2002 | $180 |
| 2003 | $190 |
| 2004–5/31/2016 | $200 |
| ≥ 6/1/2016 | $100 |

Any participant hired after February 13, 2007 will receive $140 per year for the first four years. Effective June 1, 2016, the $140 benefit was reduced to $70.

(c) A supplemental benefit of $30 per month per year of credited service accrued under the Safeway Plan as of June 16, 2000.

(d) A supplemental benefit for each year of service up to a maximum of 10 years.

| Year | Monthly Benefit |
|---|---|
| 2007–2008 | $ 5 |
| 2009–2010 | $10 |
| ≥ 2011 | $15 |

Union Benefit—Local 1486

The benefit formula is the sum of (a) and (b):

(a) The accrued benefit under the Safeway Plan of the effective date of this plan; plus

(b) For each full year of benefit service, the amount from the following table:

| Year | Monthly Benefit |
|---|---|
| 2000 | $155 |
| 2001 | $160 |
| 2002 | $180 |
| 2003 | $190 |
| 2004–5/31/2016 | $200 |
| ≥ 6/1/2016 | $100 |

Any participant hired after September 24, 2006 will receive $140 per year for the first four years. Effective June 1, 2016, the $140 benefit was reduced to $70.

Union Benefit—Warehouse Union Local 730

The benefit formula is the sum of (a), (b), and (c):

a) The accrued benefit under the Safeway Plan of the effective date of this plan; plus

(b) For each full year of benefit service, the amount from the following table:

| Year | Monthly Benefit |
|---|---|
| 2000 | $109 |
| 2001 | $120 |
| 2002 | $140 |
| 2003 | $150 |
| 2004–2011 | $160 |
| 2012–6/1/2016 | $200 |
| ≥ 6/1/2016 | $100 |

Any employee hired after April 26, 2006 will not receive any benefit for any period of employment as a “Selector Helper.”

No employee shall receive any benefit for any period of employment as an “On-Call Driver.”

Effective March 16, 2012, employees in the job classification of ‘Lumper’ shall not be eligible to participate in the plan.

(c) The supplemental benefit is the sum of (1) and (2) below:

(1) $30 payable per month per year of credited service accrued under the Safeway Plan as of June 16, 2000.

(2) $5 payable per month per year of credited service accrued under the Safeway Plan as of June 1, 2000 (up to a maximum of 10 years).

| | |
|---|---|
| Annual Retirement Benefit at Optional Retirement Date | The annual retirement benefit at an optional retirement date is generally calculated using the normal retirement benefit formula based on compensation and service through the optional retirement date. The basic benefit and the union benefit are reduced if the optional retirement date is prior to age 62. The account balance benefit is reduced if the optional retirement date is prior to age 55.<br><br>Certain union groups are subject to the “25 and out” and “30 and out” early retirement provisions whereby the participants with 30 years of service can commence unreduced benefit. Reduction between 25 and 30 years of service is either 4% or 5% depending on the local group. |
| Vesting of Benefits | If a participant terminates employment after completing five years of service (three years for participants with cash balance benefits) after age 18, or upon attainment of age 55, he or she will have a vested right to the pension benefits accrued to date of termination. Benefit payments will commence at age 65 or, if the participant chooses, at any time prior to 65, subject to the early retirement reduction provisions of the plan. |
| Death Benefit | |
| Before Retirement | If a participant dies prior to retirement, his or her beneficiary would receive the actuarial present value of the participant's accrued benefits. |
| After Retirement | If a participant dies after retirement, any death benefit will be paid in accordance with the optional benefit payment in effect. If the benefit to the participant was in the life annuity form, his beneficiary would receive the total of all his contributions with interest to his retirement date less any payments made to him or his beneficiary since retirement. |

| | |
|---|---|
| Contributions | The company shall contribute an amount necessary to carry out the purposes of the plan. |
| Administration | The plan is administered by a Benefit Plans Committee appointed by Safeway, which will have full authority to interpret and administer the plan. |
| Termination of Plan | Upon termination of the plan, the trust fund shall be distributed to the participants proportionately and equitably in a manner determined by the Committee. In any event, no participant will receive an amount less than the total of all contributions made by that participant to the plan with interest to the date of termination or his or her retirement date (whichever is earlier) less any payments received under the plan.<br><br>No liquidation of assets and payment of benefits shall actually be made by the Trustee until after it is advised by the company that the applicable requirements of ERISA governing plan terminations have been met. |

## Plan Changes Since the Prior Year

The funding and plan reporting valuations reflect the following changes:

- An update to the mortality table for determining minimum lump sum payments under IRC section 417(e)(3) to the applicable mortality for the current plan year.
- An annuity purchase occurred during 2021 for ERP annuitants with a monthly benefit of $1,200 or less per month, except participants as described in amendment 2021-3 to the ERP plan document.
- An update to supplemental benefits for union participants in Local 125 (formerly Local 119) and Local 114.

## Other Information to Fully and Fairly Disclose the Actuarial Position of the Plan

Due to software limitations with the electronic filing process, information filed electronically cannot be controlled by the Enrolled Actuary. The values on the signed Schedule SB will govern to the extent there are any differences in the entries filed electronically and the actual data contained on the signed Schedule SB.

**EMPLOYEE RETIREMENT PLAN OF SAFEWAY INC.**
**AND ITS DOMESTIC SUBSIDIARIES**
**Employer ID No: 94-3019135**
**Plan Number: 001**

**FORM 5500, SCHEDULE H, PART IV, LINE 4i — SCHEDULE OF ASSETS (HELD AT END OF YEAR)**
**December 30, 2022**
**(In thousands)**

| (b) Identity of Issue, Borrower, (a) Lessor, or Similar Party | (c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, and Par or Maturity Value | (d) Cost | (e) Current Value |
|---|---|---|---|
| Safeway Inc. Master Retirement Trust | Plan's Interest in investments of the Safeway Inc. Master Retirement Trust | $ 981,593 | $ 1,158,492 |
| TOTAL | | $ 981,593 | $ 1,158,492 |

See accompanying Independent Auditor's Report.

# Schedule SB Attachment (Form 5500)—December 31, 2021 Plan Year
# Employee Retirement Plan of Safeway Inc. and Its Domestic Subsidiaries
# EIN: 943019135 PN: 001

## Schedule SB, line 24—Change in Actuarial Assumptions

The funding valuation reflects the following assumption changes:

- A change in the cash balance annuity conversion/lump sum determination rate from 2.15% to 2.10%.
- A change in the late retirement factor interest rate from 2.15% to 2.10%.
- A change in the expected return on assets (before being limited by the third segment rate) from 6.25% for 2020 plan year to 6.50% for 2021 plan year.
- A change in the salary increase scale from 3.20% to 2.80%.

These changes were made to better reflect the anticipated plan experience. These assumption changes did not reduce the funding shortfall more than the thresholds stated in Internal Revenue Code Section 430(h)(5); as such, approval of the Commissioner is not required.