

<p style="text-align: center;"><b>Form 5500</b></p> <p style="font-size: small;">Department of the Treasury Internal Revenue Service</p> <hr/> <p style="font-size: small;">Department of Labor Employee Benefits Security Administration</p> <hr/> <p style="font-size: x-small;">Pension Benefit Guaranty Corporation</p>	<p><b>Annual Return/Report of Employee Benefit Plan</b></p> <p style="font-size: x-small;">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).</p> <p style="text-align: center;"><b>▶ Complete all entries in accordance with the instructions to the Form 5500.</b></p>	<p style="font-size: x-small;">OMB Nos. 1210-0110 1210-0089</p> <hr/> <p style="font-size: large; text-align: center;"><b>2024</b></p> <hr/> <p style="text-align: center;"><b>This Form is Open to Public Inspection</b></p>
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**Part I Annual Report Identification Information**  
 For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

**A** This return/report is for:  a multiemployer plan  a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.)

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. . . . .

**D** Check box if filing under:  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**

<p><b>1a</b> Name of plan <u>BARCLAYS PENSION PLAN</u></p>	<p><b>1b</b> Three-digit plan number (PN) ▶ <u>001</u></p>
<p><b>2a</b> 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) <u>BARCLAYS SERVICES CORPORATION</u></p> <p><u>745 SEVENTH AVENUE, 18TH FLOOR</u> <u>NEW YORK, NY 10019</u></p>	<p><b>1c</b> Effective date of plan <u>10/01/1967</u></p> <p><b>2b</b> Employer Identification Number (EIN) <u>13-3714398</u></p> <p><b>2c</b> Plan Sponsor's telephone number <u>212-412-4000</u></p> <p><b>2d</b> Business code (see instructions) <u>523110</u></p>

**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.

<b>SIGN HERE</b>	Filed with authorized/valid electronic signature.	10/14/2025	PAUL IMBIMBO
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
<b>SIGN HERE</b>			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
<b>SIGN HERE</b>			
	Signature of DFE	Date	Enter name of individual signing as DFE

<b>3a</b> Plan administrator's name and address <input type="checkbox"/> Same as Plan Sponsor  BARCLAYS PENSION PLAN COMMITTEE  745 SEVENTH AVENUE, 18TH FLOOR NEW YORK, NY 10019-0000		<b>3b</b> Administrator's EIN 13-3714398	
		<b>3c</b> Administrator's telephone number 212-412-4000	
<b>4</b> 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: <b>a</b> Sponsor's name <b>c</b> Plan Name		<b>4b</b> EIN	
		<b>4d</b> PN	
<b>5</b> Total number of participants at the beginning of the plan year	<b>5</b>	3104	
<b>6</b> Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines <b>6a(1)</b> , <b>6a(2)</b> , <b>6b</b> , <b>6c</b> , and <b>6d</b> ).			
<b>6a(1)</b> Total number of active participants at the beginning of the plan year .....	<b>6a(1)</b>	370	
<b>6a(2)</b> Total number of active participants at the end of the plan year .....	<b>6a(2)</b>	339	
<b>b</b> Retired or separated participants receiving benefits.....	<b>6b</b>	1254	
<b>c</b> Other retired or separated participants entitled to future benefits .....	<b>6c</b>	1291	
<b>d</b> Subtotal. Add lines <b>6a(2)</b> , <b>6b</b> , and <b>6c</b> .....	<b>6d</b>	2884	
<b>e</b> Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. ....	<b>6e</b>	173	
<b>f</b> Total. Add lines <b>6d</b> and <b>6e</b> .....	<b>6f</b>	3057	
<b>g(1)</b> Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) .....	<b>6g(1)</b>		
<b>g(2)</b> Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) .....	<b>6g(2)</b>		
<b>h</b> Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	<b>6h</b>	0	
<b>7</b> Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item) .....	<b>7</b>		

**8a** If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:  
1A 3H 1I

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

<b>9a</b> Plan funding arrangement (check all that apply)		<b>9b</b> Plan benefit arrangement (check all that apply)	
(1) <input type="checkbox"/> Insurance	(1) <input type="checkbox"/> Insurance	(2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts	(2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts
(2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts	(3) <input checked="" type="checkbox"/> Trust	(3) <input checked="" type="checkbox"/> Trust	(4) <input type="checkbox"/> General assets of the sponsor
(3) <input checked="" type="checkbox"/> Trust	(4) <input type="checkbox"/> General assets of the sponsor	(4) <input type="checkbox"/> 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)

<b>a Pension Schedules</b>		<b>b General Schedules</b>	
(1) <input checked="" type="checkbox"/> <b>R</b> (Retirement Plan Information)	(1) <input checked="" type="checkbox"/> <b>H</b> (Financial Information)	(2) <input type="checkbox"/> <b>I</b> (Financial Information – Small Plan)	(3) <input type="checkbox"/> <b>A</b> (Insurance Information) – Number Attached <u>0</u>
(2) <input type="checkbox"/> <b>MB</b> (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary	(4) <input checked="" type="checkbox"/> <b>C</b> (Service Provider Information)	(5) <input checked="" type="checkbox"/> <b>D</b> (DFE/Participating Plan Information)	(6) <input type="checkbox"/> <b>G</b> (Financial Transaction Schedules)
(3) <input checked="" type="checkbox"/> <b>SB</b> (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary			
(4) <input type="checkbox"/> <b>DCG</b> (Individual Plan Information) – Number Attached _____			
(5) <input type="checkbox"/> <b>MEP</b> (Multiple-Employer Retirement Plan Information)			

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

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**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.

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**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 2024 Form M-1 annual report. If the plan was not required to file the 2024 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 \_\_\_\_\_

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<b>SCHEDULE SB</b> <b>(Form 5500)</b>  <small>Department of the Treasury Internal Revenue Service</small>  <small>Department of Labor Employee Benefits Security Administration</small>  <small>Pension Benefit Guaranty Corporation</small>	<b>Single-Employer Defined Benefit Plan</b> <b>Actuarial Information</b>  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).  <b>▶ File as an attachment to Form 5500 or 5500-SF.</b>	<small>OMB No. 1210-0110</small>  <b>2024</b>  <b>This Form is Open to Public Inspection</b>
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

▶ **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.

<b>A</b> Name of plan <u>BARCLAYS PENSION PLAN</u>	<b>B</b> Three-digit plan number (PN) ▶	<u>001</u>
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF <u>BARCLAYS SERVICES CORPORATION</u>	<b>D</b> Employer Identification Number (EIN) <u>13-3714398</u>	
<b>E</b> Type of plan: <input checked="" type="checkbox"/> Single <input type="checkbox"/> Multiple-A <input type="checkbox"/> Multiple-B	<b>F</b> Prior year plan size: <input type="checkbox"/> 100 or fewer <input type="checkbox"/> 101-500 <input checked="" type="checkbox"/> More than 500	

**Part I Basic Information**

<b>1</b>	Enter the valuation date: Month <u>01</u> Day <u>01</u> Year <u>2024</u>		
<b>2</b>	Assets:		
	<b>a</b> Market value .....	<b>2a</b>	<u>535989386</u>
	<b>b</b> Actuarial value .....	<b>2b</b>	<u>587711207</u>
<b>3</b>	Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target
	<b>a</b> For retired participants and beneficiaries receiving payment .....	<u>1321</u>	<u>292592695</u>
	<b>b</b> For terminated vested participants .....	<u>1413</u>	<u>129399554</u>
	<b>c</b> For active participants .....	<u>370</u>	<u>44903922</u>
	<b>d</b> Total .....	<u>3104</u>	<u>466896171</u>
<b>4</b>	If the plan is in at-risk status, check the box and complete lines (a) and (b)..... <input type="checkbox"/>		
	<b>a</b> Funding target disregarding prescribed at-risk assumptions .....	<b>4a</b>	
	<b>b</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 .....	<b>4b</b>	
<b>5</b>	Effective interest rate .....	<b>5</b>	<u>5.16 %</u>
<b>6</b>	Target normal cost		
	<b>a</b> Present value of current plan year accruals .....	<b>6a</b>	<u>0</u>
	<b>b</b> Expected plan-related expenses .....	<b>6b</b>	<u>1200000</u>
	<b>c</b> Target normal cost .....	<b>6c</b>	<u>1200000</u>

**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.

<b>SIGN HERE</b>			
	Signature of actuary	<u>06/20/2025</u>	Date
	<u>JOSEPH GAMZON</u>	<u>23-06924</u>	Most recent enrollment number
	<u>WILLIS TOWERS WATSON US LLC</u>	<u>212-915-8888</u>	Telephone number (including area code)
	<u>200 LIBERTY STREET FLOOR 6 NEW YORK, NY 10281</u>		
	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

<b>Part II Beginning of Year Carryover and Prefunding Balances</b>		(a) Carryover balance	(b) Prefunding balance
<b>7</b>	Balance at beginning of prior year after applicable adjustments (line 13 from prior year) .....	0	190586892
<b>8</b>	Portion elected for use to offset prior year's funding requirement (line 35 from prior year) .....	0	9179130
<b>9</b>	Amount remaining (line 7 minus line 8) .....	0	181407762
<b>10</b>	Interest on line 9 using prior year's actual return of <u>9.17</u> % .....	0	16635092
<b>11</b>	Prior year's excess contributions to be added to prefunding balance:		
	<b>a</b> Present value of excess contributions (line 38a from prior year) .....		0
	<b>b(1)</b> 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 <u>5.30</u> % .....		0
	<b>b(2)</b> Interest on line 38b from prior year Schedule SB, using prior year's actual return .....		0
	<b>c</b> Total available at beginning of current plan year to add to prefunding balance .....		0
	<b>d</b> Portion of (c) to be added to prefunding balance .....		0
<b>12</b>	Other reductions in balances due to elections or deemed elections .....	0	0
<b>13</b>	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12) .....	0	198042854

<b>Part III Funding Percentages</b>			
<b>14</b>	Funding target attainment percentage .....	<b>14</b>	83.45 %
<b>15</b>	Adjusted funding target attainment percentage .....	<b>15</b>	125.87 %
<b>16</b>	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement .....	<b>16</b>	81.78 %
<b>17</b>	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage .....	<b>17</b>	%

<b>Part IV Contributions and Liquidity Shortfalls</b>		<b>18 Contributions made to the plan for the plan year by employer(s) and employees:</b>				
(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	
<b>Totals ▶</b>			<b>18(b)</b>	0	<b>18(c)</b>	0

**19** Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:

<b>a</b> Contributions allocated toward unpaid minimum required contributions from prior years .....	<b>19a</b>	0
<b>b</b> Contributions made to avoid restrictions adjusted to valuation date .....	<b>19b</b>	0
<b>c</b> Contributions allocated toward minimum required contribution for current year adjusted to valuation date .....	<b>19c</b>	0

**20** Quarterly contributions and liquidity shortfalls:

**a** Did the plan have a "funding shortfall" for the prior year? .....  Yes  No

**b** If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? .....  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

<b>Part V Assumptions Used to Determine Funding Target and Target Normal Cost</b>			
<b>21</b> Discount rate:			
<b>a</b> Segment rates:	1st segment: 4.75 %	2nd segment: 4.87 %	<input type="checkbox"/> N/A, full yield curve used
<b>b</b> Applicable month (enter code) .....			<b>21b</b> 4
<b>22</b> Weighted average retirement age .....			<b>22</b> 61
<b>23</b> Mortality table(s) (see instructions) <input type="checkbox"/> Prescribed - combined <input checked="" type="checkbox"/> Prescribed - separate <input type="checkbox"/> Substitute			

<b>Part VI Miscellaneous Items</b>			
<b>24</b> Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment..... <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
<b>25</b> Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment..... <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>26</b> Demographic and benefit information			
<b>a</b> Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment. .... <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
<b>b</b> Is the plan required to provide a projection of expected benefit payments? If "Yes," see instructions regarding required attachment ... <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
<b>27</b> If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment.....			<b>27</b>

<b>Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years</b>			
<b>28</b> Unpaid minimum required contributions for all prior years .....			<b>28</b> 0
<b>29</b> Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a).....			<b>29</b> 0
<b>30</b> Remaining amount of unpaid minimum required contributions (line 28 minus line 29).....			<b>30</b> 0

<b>Part VIII Minimum Required Contribution For Current Year</b>			
<b>31</b> Target normal cost and excess assets (see instructions):			
<b>a</b> Target normal cost (line 6c) .....			<b>31a</b> 1200000
<b>b</b> Excess assets, if applicable, but not greater than line 31a .....			<b>31b</b> 0
<b>32</b> Amortization installments:		Outstanding Balance	Installment
<b>a</b> Net shortfall amortization installment .....		77227818	7613302
<b>b</b> Waiver amortization installment.....		0	0
<b>33</b> 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 .....			<b>33</b>
<b>34</b> Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33).....			<b>34</b> 8813302
		Carryover balance	Prefunding balance
<b>35</b> Balances elected for use to offset funding requirement .....		0	8813302
<b>36</b> Additional cash requirement (line 34 minus line 35) .....			<b>36</b> 0
<b>37</b> Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c) .....			<b>37</b> 0
<b>38</b> Present value of excess contributions for current year (see instructions)			
<b>a</b> Total (excess, if any, of line 37 over line 36)			<b>38a</b> 0
<b>b</b> Portion included in line 38a attributable to use of prefunding and funding standard carryover balances .....			<b>38b</b> 0
<b>39</b> Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37) .....			<b>39</b> 0
<b>40</b> Unpaid minimum required contributions for all years .....			<b>40</b> 0

<b>Part IX Pension Funding Relief Under the American Rescue Plan Act of 2021 (See Instructions)</b>			
<b>41</b> If an election was made to use the extended amortization rule for a plan year beginning on or before December 31, 2021, check the box to indicate the first plan year for which the rule applies. <input type="checkbox"/> 2019 <input type="checkbox"/> 2020 <input checked="" type="checkbox"/> 2021			

<b>SCHEDULE C (Form 5500)</b>  <small>Department of the Treasury Internal Revenue Service</small>  <small>Department of Labor Employee Benefits Security Administration</small>  <small>Pension Benefit Guaranty Corporation</small>	<b>Service Provider Information</b>  This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).  <b>▶ File as an attachment to Form 5500.</b>	<small>OMB No. 1210-0110</small>  <b>2024</b>  <b>This Form is Open to Public Inspection.</b>
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For calendar plan year 2024 or fiscal plan year beginning **01/01/2024** and ending **12/31/2024**

<b>A</b> Name of plan <b>BARCLAYS PENSION PLAN</b>	<b>B</b> Three-digit plan number (PN) ▶	<b>001</b>
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 <b>BARCLAYS SERVICES CORPORATION</b>	<b>D</b> Employer Identification Number (EIN) <b>13-3714398</b>	

**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)...  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

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**(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)

WILLIS TOWERS WATSON US LLC

53-0181291

(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 51 50 15	NONE	630129	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

WILLIS TOWERS WATSON INVESTMENT SER

82-6695738

(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 51	NONE	238797	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

BLACKROCK INSTITUTIONAL TRUST CO

94-3112180

(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 24 28 50 51	NONE	186120	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	0	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

**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)

ORICK, HERRINGTON, & SUTCLIFFE LLP

94-2952627

(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	NONE	128401	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

KPMG

13-5565207

(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	78750	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

STATE STREET BANK AND TRUST CO

04-1867445

(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?
19 99 25 62 63	CUSTODIAN	42032	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

**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.

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

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

**Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)**  
(complete as many entries as needed)

<b>a</b> Name:	<b>b</b> EIN:
<b>c</b> Position:	
<b>d</b> Address:	<b>e</b> Telephone:

Explanation:

<b>a</b> Name:	<b>b</b> EIN:
<b>c</b> Position:	
<b>d</b> Address:	<b>e</b> Telephone:

Explanation:

<b>a</b> Name:	<b>b</b> EIN:
<b>c</b> Position:	
<b>d</b> Address:	<b>e</b> Telephone:

Explanation:

<b>a</b> Name:	<b>b</b> EIN:
<b>c</b> Position:	
<b>d</b> Address:	<b>e</b> Telephone:

Explanation:

<b>a</b> Name:	<b>b</b> EIN:
<b>c</b> Position:	
<b>d</b> Address:	<b>e</b> Telephone:

Explanation:

<b>SCHEDULE D</b> <b>(Form 5500)</b>  Department of the Treasury Internal Revenue Service  Department of Labor Employee Benefits Security Administration	<b>DFE/Participating Plan Information</b>  This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).  <b>▶ File as an attachment to Form 5500.</b>	OMB No. 1210-0110  <hr/> <b>2024</b>  <hr/> <b>This Form is Open to Public Inspection.</b>
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

<b>A</b> Name of plan <u>BARCLAYS PENSION PLAN</u>	<b>B</b> Three-digit plan number (PN) ▶	<u>001</u>
<b>C</b> Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>BARCLAYS SERVICES CORPORATION</u>	<b>D</b> Employer Identification Number (EIN) <u>13-3714398</u>	

<b>Part I</b>	<b>Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)</b> (Complete as many entries as needed to report all interests in DFEs)
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<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: <u>BLACKROCK LONG TERM GOV BD INDEX</u>		
<b>b</b> Name of sponsor of entity listed in (a): <u>BLACKROCK, INC.</u>		
<b>c</b> EIN-PN <u>94-3118547-001</u>	<b>d</b> Entity code <u>C</u>	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>121528924</u>
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: <u>EMERGING MARKETS INDEX N L FUND</u>		
<b>b</b> Name of sponsor of entity listed in (a): <u>BLACKROCK, INC.</u>		
<b>c</b> EIN-PN <u>20-5780391-001</u>	<b>d</b> Entity code <u>C</u>	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>5487945</u>
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: <u>LONG TERM CREDIT BOND INDEX FUND</u>		
<b>b</b> Name of sponsor of entity listed in (a): <u>BLACKROCK, INC.</u>		
<b>c</b> EIN-PN <u>94-3118550-001</u>	<b>d</b> Entity code <u>C</u>	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>199983568</u>
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: <u>MSCI EAFE INDEX FUND</u>		
<b>b</b> Name of sponsor of entity listed in (a): <u>BLACKROCK, INC.</u>		
<b>c</b> EIN-PN <u>94-6596958-001</u>	<b>d</b> Entity code <u>C</u>	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>10496819</u>
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: <u>BLACKROCK RUSSELL 3000 ALPHA TILTS</u>		
<b>b</b> Name of sponsor of entity listed in (a): <u>BLACKROCK, INC.</u>		
<b>c</b> EIN-PN <u>94-3302956-001</u>	<b>d</b> Entity code <u>C</u>	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>35666582</u>
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: <u>INTERMEDIATE GOVT BOND INDEX FUND</u>		
<b>b</b> Name of sponsor of entity listed in (a): <u>BLACKROCK, INC.</u>		
<b>c</b> EIN-PN <u>94-3118548-001</u>	<b>d</b> Entity code <u>C</u>	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>129816306</u>
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE:		
<b>b</b> Name of sponsor of entity listed in (a):		
<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> 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):

<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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**a** Name of MTIA, CCT, PSA, or 103-12 IE:

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

<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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**a** Name of MTIA, CCT, PSA, or 103-12 IE:

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

<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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**a** Name of MTIA, CCT, PSA, or 103-12 IE:

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

<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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**a** Name of MTIA, CCT, PSA, or 103-12 IE:

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

<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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**a** Name of MTIA, CCT, PSA, or 103-12 IE:

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

<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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**a** Name of MTIA, CCT, PSA, or 103-12 IE:

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

<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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**a** Name of MTIA, CCT, PSA, or 103-12 IE:

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

<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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**a** Name of MTIA, CCT, PSA, or 103-12 IE:

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

<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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**a** Name of MTIA, CCT, PSA, or 103-12 IE:

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

<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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<b>SCHEDULE H</b> <b>(Form 5500)</b>  <small>Department of the Treasury Internal Revenue Service</small>  <small>Department of Labor Employee Benefits Security Administration</small>  <small>Pension Benefit Guaranty Corporation</small>	<b>Financial Information</b>  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).  <b>► File as an attachment to Form 5500.</b>	<small>OMB No. 1210-0110</small>  <b>2024</b>  <b>This Form is Open to Public Inspection</b>
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For calendar plan year 2024 or fiscal plan year beginning <b>01/01/2024</b> and ending <b>12/31/2024</b>	
<b>A</b> Name of plan <b>BARCLAYS PENSION PLAN</b>	<b>B</b> Three-digit plan number (PN) <b>001</b>
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 <b>BARCLAYS SERVICES CORPORATION</b>	<b>D</b> Employer Identification Number (EIN) <b>13-3714398</b>

<b>Part I</b>	<b>Asset and Liability Statement</b>
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**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.

	(a) Beginning of Year	(b) End of Year
<b>Assets</b>		
<b>a</b> Total noninterest-bearing cash .....	<b>1a</b>	
<b>b</b> Receivables (less allowance for doubtful accounts):		
<b>(1)</b> Employer contributions .....	<b>1b(1)</b>	
<b>(2)</b> Participant contributions .....	<b>1b(2)</b>	
<b>(3)</b> Other .....	<b>1b(3)</b>	4982
<b>c</b> General investments:		
<b>(1)</b> Interest-bearing cash (include money market accounts & certificates of deposit) .....	<b>1c(1)</b>	2612153
<b>(2)</b> U.S. Government securities .....	<b>1c(2)</b>	
<b>(3)</b> Corporate debt instruments (other than employer securities):		
<b>(A)</b> Preferred .....	<b>1c(3)(A)</b>	
<b>(B)</b> All other .....	<b>1c(3)(B)</b>	
<b>(4)</b> Corporate stocks (other than employer securities):		
<b>(A)</b> Preferred .....	<b>1c(4)(A)</b>	
<b>(B)</b> Common .....	<b>1c(4)(B)</b>	
<b>(5)</b> Partnership/joint venture interests .....	<b>1c(5)</b>	
<b>(6)</b> Real estate (other than employer real property) .....	<b>1c(6)</b>	
<b>(7)</b> Loans (other than to participants) .....	<b>1c(7)</b>	
<b>(8)</b> Participant loans .....	<b>1c(8)</b>	
<b>(9)</b> Value of interest in common/collective trusts .....	<b>1c(9)</b>	502980144
<b>(10)</b> Value of interest in pooled separate accounts .....	<b>1c(10)</b>	
<b>(11)</b> Value of interest in master trust investment accounts .....	<b>1c(11)</b>	
<b>(12)</b> Value of interest in 103-12 investment entities .....	<b>1c(12)</b>	
<b>(13)</b> Value of interest in registered investment companies (e.g., mutual funds) .....	<b>1c(13)</b>	
<b>(14)</b> Value of funds held in insurance company general account (unallocated contracts) .....	<b>1c(14)</b>	
<b>(15)</b> Other .....	<b>1c(15)</b>	

<b>1d</b> Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities.....	<b>1d(1)</b>		
(2) Employer real property.....	<b>1d(2)</b>		
<b>e</b> Buildings and other property used in plan operation.....	<b>1e</b>		
<b>f</b> Total assets (add all amounts in lines 1a through 1e).....	<b>1f</b>	536023896	505597279
<b>Liabilities</b>			
<b>g</b> Benefit claims payable.....	<b>1g</b>		
<b>h</b> Operating payables.....	<b>1h</b>		
<b>i</b> Acquisition indebtedness.....	<b>1i</b>		
<b>j</b> Other liabilities.....	<b>1j</b>	181743	160358
<b>k</b> Total liabilities (add all amounts in lines 1g through 1j).....	<b>1k</b>	181743	160358
<b>Net Assets</b>			
<b>l</b> Net assets (subtract line 1k from line 1f).....	<b>1l</b>	535842153	505436921

**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.

<b>Income</b>		(a) Amount	(b) Total
<b>a Contributions:</b>			
(1) Received or receivable in cash from: <b>(A)</b> Employers.....	<b>2a(1)(A)</b>		
<b>(B)</b> Participants.....	<b>2a(1)(B)</b>		
<b>(C)</b> Others (including rollovers).....	<b>2a(1)(C)</b>		
(2) Noncash contributions.....	<b>2a(2)</b>		
(3) Total contributions. Add lines <b>2a(1)(A)</b> , <b>(B)</b> , <b>(C)</b> , and line <b>2a(2)</b> .....	<b>2a(3)</b>		0
<b>b Earnings on investments:</b>			
<b>(1) Interest:</b>			
<b>(A)</b> Interest-bearing cash (including money market accounts and certificates of deposit).....	<b>2b(1)(A)</b>	68145	
<b>(B)</b> U.S. Government securities.....	<b>2b(1)(B)</b>		
<b>(C)</b> Corporate debt instruments.....	<b>2b(1)(C)</b>		
<b>(D)</b> Loans (other than to participants).....	<b>2b(1)(D)</b>		
<b>(E)</b> Participant loans.....	<b>2b(1)(E)</b>		
<b>(F)</b> Other.....	<b>2b(1)(F)</b>		
<b>(G)</b> Total interest. Add lines <b>2b(1)(A)</b> through <b>(F)</b> .....	<b>2b(1)(G)</b>		68145
<b>(2) Dividends:</b>			
<b>(A)</b> Preferred stock.....	<b>2b(2)(A)</b>		
<b>(B)</b> Common stock.....	<b>2b(2)(B)</b>		
<b>(C)</b> Registered investment company shares (e.g. mutual funds).....	<b>2b(2)(C)</b>		
<b>(D)</b> Total dividends. Add lines <b>2b(2)(A)</b> , <b>(B)</b> , and <b>(C)</b> .....	<b>2b(2)(D)</b>		0
<b>(3)</b> Rents.....	<b>2b(3)</b>		
<b>(4) Net gain (loss) on sale of assets:</b>			
<b>(A)</b> Aggregate proceeds.....	<b>2b(4)(A)</b>		
<b>(B)</b> Aggregate carrying amount (see instructions).....	<b>2b(4)(B)</b>		
<b>(C)</b> Subtract line <b>2b(4)(B)</b> from line <b>2b(4)(A)</b> and enter result.....	<b>2b(4)(C)</b>		0
<b>(5) Unrealized appreciation (depreciation) of assets:</b>			
<b>(A)</b> Real estate.....	<b>2b(5)(A)</b>		
<b>(B)</b> Other.....	<b>2b(5)(B)</b>		
<b>(C)</b> Total unrealized appreciation of assets. Add lines <b>2b(5)(A)</b> and <b>(B)</b> .....	<b>2b(5)(C)</b>		0

	(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts .....	2b(6)	-72293
(7) Net investment gain (loss) from pooled separate accounts .....	2b(7)	
(8) Net investment gain (loss) from master trust investment accounts .....	2b(8)	
(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)	
<b>c</b> Other income .....	2c	3221
<b>d</b> Total income. Add all <b>income</b> amounts in column (b) and enter total .....	2d	-927

**Expenses**

<b>e</b> Benefit payment and payments to provide benefits:		
(1) Directly to participants or beneficiaries, including direct rollovers .....	2e(1)	28775507
(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)	28775507
<b>f</b> Corrective distributions (see instructions) .....	2f	
<b>g</b> Certain deemed distributions of participant loans (see instructions) .....	2g	
<b>h</b> Interest expense .....	2h	
<b>i</b> Administrative expenses:		
(1) Salaries and allowances .....	2i(1)	
(2) Contract administrator fees .....	2i(2)	
(3) Recordkeeping fees .....	2i(3)	455057
(4) IQPA audit fees .....	2i(4)	78750
(5) Investment advisory and investment management fees .....	2i(5)	491754
(6) Bank or trust company trustee/custodial fees .....	2i(6)	76124
(7) Actuarial fees .....	2i(7)	87000
(8) Legal fees .....	2i(8)	126927
(9) Valuation/appraisal fees .....	2i(9)	
(10) Other trustee fees and expenses .....	2i(10)	311585
(11) Other expenses .....	2i(11)	1601
(12) Total administrative expenses. Add lines 2i(1) through (11) .....	2i(12)	1628798
<b>j</b> Total expenses. Add all <b>expense</b> amounts in column (b) and enter total .....	2j	30404305

**Net Income and Reconciliation**

<b>k</b> Net income (loss). Subtract line 2j from line 2d .....	2k	-30405232
<b>l</b> 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)  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)  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: **KPMG LLP**

(2) EIN: **13-5565207**

**d** The opinion of an independent qualified public accountant is **not attached** as part of Schedule H because:

(1)  This form is filed for a CCT, PSA, DCG 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. DCGs do not complete lines 4e, 4f, 4k, 4l, and 5, and DCGs generally complete the rest of Part IV collectively for all plans in the DCG, except as otherwise provided (see instructions).

During the plan year:

	Yes	No	Amount
<b>a</b> 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.)		X	
<b>b</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.)		X	
<b>c</b> 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.)		X	
<b>d</b> 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.)		X	
<b>e</b> Was this plan covered by a fidelity bond?	X		50000000
<b>f</b> Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
<b>g</b> 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?		X	
<b>h</b> 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?		X	
<b>i</b> Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
<b>j</b> 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.)	X		
<b>k</b> Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
<b>l</b> Has the plan failed to provide any benefit when due under the plan?		X	
<b>m</b> If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)			
<b>n</b> 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.			

**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.)

<b>5b(1)</b> Name of plan(s)	<b>5b(2)</b> EIN(s)	<b>5b(3)</b> 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 546412.

<b>SCHEDULE R</b> <b>(Form 5500)</b>  <small>Department of the Treasury Internal Revenue Service</small>  <small>Department of Labor Employee Benefits Security Administration</small>  <small>Pension Benefit Guaranty Corporation</small>	<b>Retirement Plan Information</b>  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).  <b>▶ File as an attachment to Form 5500.</b>	<small>OMB No. 1210-0110</small>  <b>2024</b>  <b>This Form is Open to Public Inspection.</b>
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

<b>A</b> Name of plan <u>BARCLAYS PENSION PLAN</u>	<b>B</b> Three-digit plan number (PN) ▶	<u>001</u>
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 <u>BARCLAYS SERVICES CORPORATION</u>	<b>D</b> Employer Identification Number (EIN) <u>13-3714398</u>	

<b>Part I</b>	<b>Distributions</b>
---------------	----------------------

**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): 04-1867445

**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		14
---	--	----

<b>Part II</b>	<b>Funding Information</b> (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.**

<b>6 a</b> Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived) .....	<b>6a</b>	
<b>b</b> Enter the amount contributed by the employer to the plan for this plan year .....	<b>6b</b>	
<b>c</b> 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).....	<b>6c</b>	

**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

<b>Part III</b>	<b>Amendments</b>
-----------------	-------------------

**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

<b>Part IV</b>	<b>ESOPs</b> (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 (1) contributed more than 5% of total contributions to the plan during the plan year or (2) was one of the top-ten highest contributors (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:

<b>a</b> The current plan year. Check the box to indicate the counting method used to determine the number of inactive participants: <input type="checkbox"/> last contributing employer <input type="checkbox"/> alternative <input type="checkbox"/> reasonable approximation (see instructions for required attachment).....	<b>14a</b>	
<b>b</b> The plan year immediately preceding the current plan year. <input type="checkbox"/> Check the box if the number reported is a change from what was previously reported (see instructions for required attachment).....	<b>14b</b>	
<b>c</b> The second preceding plan year. <input type="checkbox"/> Check the box if the number reported is a change from what was previously reported (see instructions for required attachment).....	<b>14c</b>	

**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:

<b>a</b> The corresponding number for the plan year immediately preceding the current plan year .....	<b>15a</b>	
<b>b</b> The corresponding number for the second preceding plan year .....	<b>15b</b>	

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

<b>a</b> Enter the number of employers who withdrew during the preceding plan year .....	<b>16a</b>	
<b>b</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.....	<b>16b</b>	

**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) and (b):

**a** Enter the percentage of plan assets held as:  
 Public Equity: 10.0 % Private Equity: 0.0 % Investment-Grade Debt and Interest Rate Hedging Assets: 89.0 %  
 High-Yield Debt: 0.0 % Real Assets: 0.0 % Cash or Cash Equivalents: 1.0 % Other: 0.0 %

**b** Provide the average duration of the Investment-Grade Debt and Interest Rate Hedging Assets:  
 0-5 years  5-10 years  10-15 years  15 years or more

**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: \_\_\_\_\_

**Part VII IRS Compliance Questions**

**21a** Does the plan satisfy the coverage and nondiscrimination tests of Code sections 410(b) and 401(a)(4) by combining this plan with any other plans under the permissive aggregation rules?  Yes  No

**21b** If this is a Code section 401(k) plan, check all boxes that apply to indicate how the plan is intended to satisfy the nondiscrimination requirements for employee deferrals and employer matching contributions (as applicable) under Code sections 401(k)(3) and 401(m)(2).  
 Design-based safe harbor method  
 "Prior year" ADP test  
 "Current year" ADP test  
 N/A

**22** If the plan sponsor is an adopter of a pre-approved plan that received a favorable IRS Opinion Letter, enter the date of the Opinion Letter \_\_\_/\_\_\_/\_\_\_\_ (MM/DD/YYYY) and the Opinion Letter serial number \_\_\_\_\_.



# Barclays Pension Plan

Financial Statements

(With Supplementary Schedules)  
and Independent Auditors' Report

December 31, 2024 and 2023



# Barclays Pension Plan Index

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Note: All other schedules required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, as amended, have been omitted because they are not applicable



KPMG LLP  
345 Park Avenue  
New York, NY 10154-0102

## Independent Auditors' Report

To the Plan Participants and Plan Administrator  
Barclays Pension Plan:

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

We have performed audits of the financial statements of Barclays Pension Plan (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 31, 2024 and 2023, the related statements of changes in net assets available for benefits for the years then ended, the statement of accumulated plan benefits as of December 31, 2023, and the related statement of changes in accumulated plan benefits for the year 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 and for the years ended December 31, 2024 and 2023, stating that the certified investment information, as described in Note 11 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 Auditors' 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 U.S. generally accepted accounting principles.
- 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 Auditors' 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 U.S. generally accepted accounting principles, 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.

#### *Auditors' 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 auditors' 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 U.S. generally accepted accounting principles.

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 U.S. generally accepted accounting principles.

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.

*Supplemental Schedules Required by ERISA*

The supplemental schedules of Schedule H, line 4i - Schedule of Assets (Held at End of Year) as of December 31, 2024 and Schedule H, line 4j - Schedule of Reportable Transactions for the year ended December 31, 2024 are presented for purposes of additional analysis and are not a required part of the financial statements but are 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 schedules, other than that agreed to or derived from the certified investment information, has been subjected to the 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 schedules 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 schedules, we evaluated whether the supplemental schedules, other than the information agreed to or derived from the certified investment information, including their form and content, are 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 schedules, other than the information in the supplemental schedules 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 schedules 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).

*KPMG LLP*

New York, New York  
October 13, 2025

## Barclays Pension Plan Statements of Net Assets Available for Benefits as of December 31, 2024 and 2023

	2024	2023
<b>Assets:</b>		
Investments, at fair value:	\$505,592,297	\$536,018,435
Cash	100	111
Interest and dividends receivable	4,882	5,350
<b>Total assets</b>	<b>505,597,279</b>	<b>536,023,896</b>
Liabilities: Accrued expenses	160,358	181,743
<b>Total liabilities</b>	<b>160,358</b>	<b>181,743</b>
<b>Net assets available for benefits</b>	<b>\$505,436,921</b>	<b>\$535,842,153</b>

See accompanying notes to financial statements.

## Barclays Pension Plan

### Statements of Changes in Net Assets Available for Benefits for the Years Ended December 31, 2024 and 2023

	2024	2023
Investment income (loss):		
Net appreciation (depreciation) in fair value of investments	(\$72,293)	\$46,619,693
Interest and dividends	68,145	79,325
<b>Total investment income (loss)</b>	<b>(4,148)</b>	<b>46,699,018</b>
Other Income	3,221	2,846
Benefits paid to participants	(28,775,507)	(29,330,678)
Administrative expenses	(1,628,798)	(1,377,462)
Net increase (decrease)	(30,405,232)	15,993,724
Net assets available for benefits:		
Beginning of year	535,842,153	519,848,429
<b>End of year</b>	<b>505,436,921</b>	<b>535,842,153</b>

See accompanying notes to financial statements.

## Barclays Pension Plan Statement of Accumulated Plan Benefits as of December 31, 2023

Actuarial present value of accumulated plan benefits	
Vested benefits:	
Active employees	\$46,792,761
Participants with deferred benefits	139,210,167
Participants currently receiving benefits	297,941,268
<b>Total vested benefits</b>	<b>483,944,196</b>
Nonvested benefits	1,720,943
<b>Total actuarial present value of accumulated plan benefits</b>	<b>\$485,665,139</b>

See accompanying notes to financial statements.

## Barclays Pension Plan Statement of Changes in Accumulated Plan Benefits for the year ended December 31, 2023

Actuarial present value of accumulated plan benefits	
Increase (decrease) during the year attributable to	
Benefits accumulated and actuarial losses	\$6,220,486
Benefits paid	(29,330,678)
Increase for interest due to the decrease in the discount period	23,148,537
Change in actuarial assumptions	(1,457,669)
Net decrease	(1,419,324)
<b>Beginning of year</b>	<b>\$487,084,463</b>
<b>End of year</b>	<b>\$485,665,139</b>

See accompanying notes to financial statements.

# Barclays Pension Plan

## Notes to Financial Statements

### December 31, 2024 and 2023

#### **Note 1 - Plan description and related matters:**

The following description of the Barclays Pension Plan (the "Plan") is intended to give a general summary of the Plan's principal provisions. Participants should refer to their summary plan description for a more complete description of the Plan's provisions. The Plan is sponsored by Barclays Services Corporation (the "Bank").

#### **General:**

The Plan was established on October 1, 1967 and is a defined benefit plan which provides benefits to eligible employees of the Bank and affiliated companies which have been designated as participating companies. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

The Pension Executive Board is responsible for oversight of the Plan. The Barclays Pension Plan Committee (the "Committee") selects the Plan's investment funds, managers and advisors, monitors the investment performance of the funds and their investment managers throughout the year and delegates the administration and legal compliance for the Plan to a subcommittee (the "Subcommittee"). Willis Towers Watson is the recordkeeper for the Plan. Willis Towers Watson provides investment advisory services to the Committee.

#### **Plan amendments:**

The Plan has been amended to close the Plan to new hires employed on or after September 22, 2008, including former Lehman Brothers' employees hired on September 22, 2008.

Effective January 1, 2011, the Plan was amended to exclude any individual who is or has been an Executive Director of the Board of Directors of the Bank from accruing a pension benefit under the Plan.

Effective September 30, 2012, the Plan was amended to freeze benefit accruals and closed to all new entrants. As of September 30, 2012, no additional benefits accrued on behalf of employee participants for future years of service. This cessation of benefit accruals does not impact a participant's ability to continue to earn service credit for purposes of determining his or her vested status or eligibility for early retirement under the Plan. The Plan will continue to hold the assets, pay benefits already accrued and receive periodic contributions from the Bank for any unfunded benefits.

#### **Pension benefits, vesting and forms of benefit:**

Prior to the Plan freeze, employees were eligible to participate in the Plan upon attainment of age 21 and completion of 1,000 hours of service during a twelve-month period. Generally, employees with five or more years of service are entitled to pension benefits beginning at normal retirement age, the later of age 65 or completion of five years of service, equal to 1.67% of the participant's average compensation for the five highest consecutive calendar years within the last ten-year period of service ("final average pay") plus .30% of the participant's final average pay in excess of Social Security covered compensation, multiplied by the number of years of credited service (not to exceed 30 years). Annual compensation for the purpose of determining final average pay is limited to the lesser of 125% of base pay and the maximum amount permitted by the Internal Revenue Code (the "Code").

Early retirement is allowed from age 55 until age 65 with a period of service of ten or more years. Pension benefits for early retirement are reduced as described in the Plan based upon the age and service at retirement.

A vested disabled participant's retirement benefit is deferred until normal retirement date provided, they remain disabled.

A participant is fully vested in his/her pension benefits upon completion of a period of service of five years (as defined in the Plan document). Participants may elect to receive their pension benefits in the form of a 50%, 75% or 100% joint and survivor annuity or a life annuity. A lump-sum form of payment option is available for active participants who terminate on or after April 1, 2012. The lump sum is the actuarial equivalent of the accrued benefit as of the participant's normal retirement date. Retirement eligible participants who terminate on or after April 1, 2012 may elect a lump sum upon termination or any subsequent date on or after age 55 and prior to age 65. Nonretirement eligible participants who terminate on or after April 1, 2012 may elect an immediate lump sum upon termination of employment.

#### **Death benefits:**

If the joint and survivor election is made, upon the death of a Plan participant who is fully vested, a death benefit is generally payable to the participant's spouse in the form of a qualified preretirement survivor annuity.

# Barclays Pension Plan

## Notes to Financial Statements

### December 31, 2024 and 2023

#### Note 2 - Summary of accounting policies:

##### Basis of preparation:

The Plan's financial statements are prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America ("GAAP").

##### Use of estimates:

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

##### Investment valuation and income recognition:

Investments are reported at fair value. Fair value is the price 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 discussion of fair value measurements.

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 principally comprise legal, actuarial, investment management fees, audit, custodial and pension administration expenses of the Plan. Investment management services for the Plan year were provided by BlackRock Inc. ("BlackRock"), with oversight by Willis Towers Watson ("Willis"). Willis also serves as the Plan's actuary and provides actuarial and administration functions. Administrative expenses have been paid by the Plan and the Bank. Expenses of the Plan paid directly by the Bank are excluded from these financial statements. Investment management related expenses are included in net appreciation of fair value of investments in the statement of changes in net assets available for benefits.

#### Note 3 - Funding policy:

The Bank and participating companies make contributions to the Plan sufficient to provide the Plan with assets sufficient to pay retirement benefits to Plan participants. Under the Plan, participants do not make contributions to the Plan. There were no contributions made to the Plan for the 2024 and 2023 Plan years. The Plan is in compliance with the minimum funding requirements of ERISA for the years ended December 31, 2024 and 2023.

#### Note 4 - Plan termination:

Although the Bank has not expressed any intent to do so, the Bank has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions set forth in ERISA.

Upon complete or partial termination of the Plan, the right of each participant to benefits accrued to the date of such termination shall become nonforfeitable. All funds of the Plan shall be used to provide retirement benefits, to the extent sufficient, in order of termination priorities by categories, in accordance with Section 404 of ERISA as follows:

- (a) Vested benefits insured by the Pension Benefit Guaranty Corporation ("PBGC") up to the applicable limitations;
- (b) All other (meaning uninsured) vested benefits; and
- (c) All nonvested benefits.

Certain benefits under the Plan are insured by the PBGC if the Plan is terminated. However, the PBGC does not guarantee all types of benefits under the Plan, and the amount of benefits protected are subject to certain limitations.

Vested benefits under the Plan are guaranteed at the level in effect on the date of the Plan's termination. However, there is a statutory ceiling, which is adjusted periodically, on the amount of an individual's monthly benefit that the PBGC guarantees.

That ceiling applies to those pensioners who elect to receive their benefits in the form of a single life annuity and are at least 65 years old at the time of retirement or Plan termination (whichever comes later). For younger annuitants or for those who elect to receive their benefits in some form more valuable than a single life annuity, the corresponding ceilings are actuarially adjusted downward.

Whether all participants receive their benefits should the Plan terminate at some future time will depend on the sufficiency, at that time, of the Plan's net assets to provide those benefits and may also depend on the financial condition of the Bank and the level of benefits guaranteed by the PBGC.

# Barclays Pension Plan

## Notes to Financial Statements

### December 31, 2024 and 2023

**Note 5 - Fair value measurements:**

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities ("Level 1") and the lowest priority to unobservable inputs ("Level 3"). The three levels of the fair value hierarchy under FASB ASC 820 are described as follows:

Level 1: Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

Level 2: Inputs to the valuation methodology include:

- quoted prices for similar assets or liabilities in active markets;
- quoted prices for identical or similar assets or liabilities in inactive markets;
- inputs other than quoted prices that are observable for the asset or liability;
- inputs that are derived principally from or corroborated by observable market data by correlation or other means.

If the asset or liability has a specified (contractual) term, the level 2 input must be observable for substantially the full term of the asset or liability.

Level 3: Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

The asset or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques maximize the use of relevant observable inputs and minimize the use of unobservable inputs.

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2024 and 2023.

During 2024, the Plan management re-evaluated the fair value measurement inputs for investments in common/collective investment funds and the short-term investment fund. The Plan management determined the measurement inputs for this category of investments qualify as Level 1 inputs.

Common/collective investment funds and the short-term investment fund are valued at the daily net asset value ("NAV") of units of a bank collective trust. The NAV is based on the fair value of the underlying investments held by the fund less its liabilities. Were the Plan to initiate a full redemption of the investments, the Committee adviser reserves the right to temporarily delay withdrawal from the trust in order to ensure that securities liquidations will be carried out in an orderly business manner.

The following tables set forth by level, within the fair value hierarchy, the Plan's financial assets at fair value as of December 31, 2024 and 2023. Classification within the fair value hierarchy table is based on the lowest level of any input that is significant to the fair value measurement.

2024				
	Level 1	Level 2	Level 3	Total
Short-term investment fund	\$2,612,152	\$ -	\$ -	\$2,612,152
Common collective trusts	502,980,145	-	-	502,980,145
Total Investments at fair value	\$505,592,297	\$ -	\$ -	\$505,592,297

2023				
	Level 1	Level 2	Level 3	Total
Short-term investment fund	\$2,769,324	\$ -	\$ -	\$2,769,324
Common collective trusts	533,249,111	-	-	533,249,111
Total Investments at fair value	\$536,018,435	\$ -	\$ -	\$536,018,435

For the years ended December 31, 2024 and 2023, there were no transfers between Levels 1, 2 and 3.

# Barclays Pension Plan

## Notes to Financial Statements

### December 31, 2024 and 2023

#### **Fair value of investments in entities that use NAV:**

The Plan's investments in common/collective investment funds are managed by BlackRock with various investment objectives, and are measured at NAV per share as of December 31, 2024 and 2023. These funds provide for daily redemption by the Plan with no advance notice requirement. There are no unfunded commitments in these investments.

The Plan's investment in the State Street short-term investment fund, managed by State Street, seeks to provide safety of principal, a high level of liquidity and a competitive yield. This fund provides for daily redemption by the Plan with no advance notice requirement. There are no unfunded commitments in these investments.

#### **Note 6 - Financial instruments with a concentration risk:**

The Plan's investments are held by a single trust in accordance with the Plan document and the Plan's trust agreement (the "Agreement"). The Plan's exposure to credit risk is associated with the Trustee's nonperformance of its fiduciary responsibilities relating to these amounts as specified in the Agreement.

#### **Note 7 - Actuarial present value of accumulated plan benefit:**

Accumulated plan benefits are those future periodic payments, including lump-sum distributions that are attributable under the Plan's provisions for the service rendered by participants. Accumulated plan benefits include benefits expected to be paid to a) retired or terminated employees or b) beneficiaries of terminated employees or retirees who have died, and c) active employees or their beneficiaries. An independent actuary calculates the actuarial present value of accumulated benefits under the Plan by applying actuarial assumptions that 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.

Significant assumptions underlying the actuarial computations of the actuarial present value of accumulated benefits as of December 31, 2023 include the following:

- (a) Pri-2012 Mortality Tables for males and females with separate rates for employees, disabled annuitants, and nondisabled annuitants, with no collar or amount adjustment, projected generationally from 2012 using Scale MP-2021.
- (b) assumed rate of terminations vary by age ranging from 20% at age 30 to 15% at age 55 and older
- (c) assumed rate of return on investments of 4.90% (4.90% used in the prior valuation)
- (d) assumed probabilities of retirement between the ages of 55 (12.5%) and 70 years or greater (100%).

The foregoing actuarial assumptions are based on the assumption that the Plan will continue. Were the Plan to terminate, different actuarial assumptions and other factors might be applicable in determining the actuarial present value of accumulated Plan benefits. The computations of the actuarial present value of accumulated Plan benefits were made as of January 1, 2024. Had the valuation been performed as of December 31, 2023, there would be no material differences.

#### **Note 8 - Related party transactions:**

Personnel and facilities of the Bank are utilized by the Plan at no charge.

#### **Note 9 - Party-in-interest transactions:**

State Street acts as Custodian for the Plan. Certain Plan investments are shares of short-term investment funds managed by the Custodian. For the years ended December 31, 2024 and 2023, fees incurred for these services were \$76,124 and \$54,861 respectively. Certain Plan investments are investment funds managed by BlackRock. Investment management fees incurred for BlackRock for the years ended December 31, 2024 and 2023 amounted to \$252,958 and \$110,190 respectively. These investments and transactions qualify as party-in-interest transactions which are exempt from the prohibited transactions rules of ERISA. There have been no known prohibited transactions with a party-in-interest.

#### **Note 10 - Tax status:**

The Internal Revenue Service ("IRS") has determined and informed the Bank by letter dated March 8, 2017 that the Plan and related Trust meet the applicable sections of the Code. Although the Plan has been amended since receiving the determination letter, the Plan administrator and the Plan's counsel believe that the Plan is drafted, and is currently being operated, in compliance with the applicable requirements of the Code and, therefore, believe that the Plan is qualified, and the related trust is tax exempt.

GAAP requires Plan management to evaluate tax positions taken by the Plan and recognize a tax liability 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 has concluded that as of December 31, 2024 and 2023, there are no uncertain tax positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

# Barclays Pension Plan

## Notes to Financial Statements December 31, 2024 and 2023

### **Note 11 - Information Certified by the Plan Trustee:**

The Plan Administrator has elected the method of compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Investments held at December 31, 2024 and 2023, and investment income (loss) and other income for the years ended December 31, 2024 and 2023 that are disclosed in the accompanying financial statements and supplemental schedules were obtained or derived from information supplied to the Plan Administrator and certified as complete and accurate by the Trustee and Custodian of the Plan.

### **Note 12 - Risks and uncertainties:**

The Plan invests in various investment securities. Investment securities are exposed to various risks such as interest rate, credit, and overall market volatility. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of the investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the statements of net assets available for benefits.

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.

### **Note 13 - Subsequent events:**

The Plan Administrator has evaluated subsequent events through October 13, 2025 which is the date the financial statements were available to be issued and concluded that there are no subsequent events to disclose.

# Barclays Pension Plan

EIN: 13-4942190

PN: 001

## Schedule of Assets (Held at End of Year) (Schedule H, Line 4i) Year Ended December 31, 2024

(a)	(b) Identity of Issue, Borrower, Lessor or Similar Party	(c) Description	(d) Cost	(e) Current Value
<sup>1</sup>	State Street Short Term Investment Fund	Short Term Investment Fund	\$2,612,153	\$2,612,153
<sup>1</sup>	US Long Credit Bond Fund	Common/Collective Investment Fund	204,366,355	199,983,569
	Emerging Markets Index N L Fund	Common/Collective Investment Fund	3,794,008	5,487,945
<sup>1</sup>	BlackRock Long Term Gov BD Index	Common/Collective Investment Fund	138,682,781	121,528,924
<sup>1</sup>	MSCI EAFE Equity Index Fund	Common/Collective Investment Fund	6,218,985	10,496,819
	Russell 3000 Index Fund	Common/Collective Investment Fund	11,719,069	35,666,582
	Intermediate Govt Bond Index Fund	Common/Collective Investment Fund	127,161,643	129,816,306
			<b>\$494,554,994</b>	<b>\$505,592,298</b>

Note: The data included in this schedule is certified as complete and accurate by State Street.

See accompanying Independent Auditors' Report.

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<sup>1</sup> Party-in-interest.

# Barclays Pension Plan

EIN: 13-4942190

PN: 001

## Schedule of Reportable Transactions (Schedule H, Line 4j) Year Ended December 31, 2024

(a) Identity of Party Involved	(b) Description of Asset	(c) Purchase Price	(d) Selling Price	(g) Cost of Asset	(h) Current Value of Asset on Transaction Date	(i) Gain / (Loss)
Category (i) - A series of transactions that amount to more than 5 percent of the beginning value of the total Fund assets:						
State Street Short Term Investment Fund	Interest Bearing Cash	\$30,192,573	\$30,349,745	\$30,349,745	\$60,542,318	\$ -
BGI Long Term Credit BD Index	Common/Collective Trusts	\$ -	\$218,481,480	\$166,615,903	\$218,481,480	\$51,865,577
Short Term Investment Fund	Common/Collective Trusts	\$16,944,099	\$16,944,099	\$16,944,099	\$33,888,197	\$ -
US Long Credit Bond Fund	Common/Collective Trusts	\$210,278,696	\$6,057,362	\$5,912,341	\$216,336,059	\$145,022
Category (ii) - A single transaction that amounts to more than 5 percent of the beginning value of the total Fund assets:						
BGI Long Term Credit BD Index	Common/Collective Trusts	\$ -	\$210,278,696	\$160,214,487	\$210,278,696	\$50,064,209
US Long Credit Bond Fund	Common/Collective Trusts	\$210,278,696	\$ -	\$ -	\$210,278,696	\$ -

There are no Category (iii) or (iv) reportable transactions during the year.

Note: The data included in this schedule is certified as complete and accurate by State Street

See accompanying Independent Auditors' Report.

# SCHEDULE SB ATTACHMENTS

## Schedule SB, Line 26a Schedule of Active Participant Data as of January 1, 2024

Attained Age	Attained Years of Credited Service <sup>1</sup>										Total	
	Under 1	1-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40 & Over		
Under 25	0	0	0	0	0	0	0	0	0	0	0	0
25-29	0	0	0	0	0	0	0	0	0	0	0	0
30-34	0	0	0	0	0	0	0	0	0	0	0	0
35-39	0	1	17	0	0	0	0	0	0	0	0	18
40-44	1	15	63	4	0	0	0	0	0	0	0	83
45-49	0	14	65	16	0	0	0	0	0	0	0	95
50-54	0	7	57	13	2	1	2	0	0	0	0	82
55-59	0	7	37	5	4	2	0	0	0	0	0	55
60-64	0	1	12	4	4	1	3	3	1	0	0	29
65-69	0	0	6	0	0	0	0	0	0	0	0	6
70 & over	0	0	2	0	0	0	0	0	0	0	0	2
Total	1	45	259	42	10	4	5	3	1	0	0	370
	0	0	0	0	0	0	0	0	0	0	0	0

<sup>1</sup> Age and service for purposes of determining category are based on exact (not rounded) values.

Plan Name: Barclays Pension Plan  
 EIN / PN: 13-3714398 / 001  
 Plan Sponsor: Barclays Services Corporation  
 Valuation Date: January 1, 2024

# SCHEDULE SB ATTACHMENTS

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

### Economic Assumptions

#### Interest rate basis

- Applicable month September
- Interest rate basis 3-Segment Rates

Interest rates	Reflecting Corridors	Not Reflecting Corridors
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#### Annual rates of increase

- Consumer Price Index 2.70%
- Assumed cost of living increase 1.35%

### Demographic Assumptions

**New or rehired employees** It was assumed there will be no new or rehired employees.

**Mortality** Separate rates for non-annuitants (based on Pri-2012 "Employees" table without collar or amount adjustments and then projected forward with generational projection using adjusted Scale MP-2021) and annuitants (based on Pri-2012 "Healthy Annuitants" table (participants and beneficiaries combined) without collar or amount adjustments, projected forward with generational projection using adjusted Scale MP-2021. The rate of future mortality improvement at any age for any year beginning on or after the valuation date is capped at 0.78%.

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Valuation Date: January 1, 2024

# SCHEDULE SB ATTACHMENTS

## Termination

Representative Rates varying by age

Age	Percentage Terminating during the year*
30	20%
35	18%
40	18%
45	17%
50	16%
55	15%

\*Additional 5% is applied for participants who have met age and service requirements for "Rule of 70" retirement.

## Disability

Rates varying by age and gender

Age	Percentage disabled during the year	
	Males	Females
25	0.022%	0.029%
30	0.026	0.039
35	0.034	0.058
40	0.051	0.076
45	0.089	0.116
50	0.166	0.182
55	0.297	0.267
60	0.418	0.313

## Retirement

For purposes of determining the Funding Target and Target Normal Cost (both disregarding at-risk assumptions), the rates at which participants are assumed to retire by age are shown below:

Age	Percentage Retiring During the Year*
55-58	12.5%
59-61	8.5
62	20.0
63	25.0
64-67	30.0
68	50.0
69	75.0
70+	100.0

\*Additional 5% is applied for participants who have met age and service requirements for "Rule of 70" retirement.

Plan Name: Barclays Pension Plan  
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 Valuation Date: January 1, 2024

# SCHEDULE SB ATTACHMENTS

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<b>Form of payment Active participants</b>	<p>30% of retirement eligible active participants are assumed to elect a lump sum form of payment under the plan when eligible. 70% of retirement eligible active participants are assumed to elect an annuity.</p> <p>60% of non-retirement eligible active participants are assumed to elect a lump sum form of payment under the plan when eligible. 40% of non-retirement eligible active participants are assumed to elect an annuity.</p> <p>For those participants who are assumed to elect an annuity, married participants are assumed to elect 50% Joint and Survivor annuity and single participants are assumed to elect life annuity. Lump sums were valued using the substitution of annuity form under IRS Regulation 1.430(d)-1(f)(4).</p>
<b>Percent married</b>	80% of male and 65% of female eligible participants are assumed to be married.
<b>Spouse age</b>	Wife three years younger than husband.
<b>Plan compensation</b>	Not applicable
<b>Administrative expenses</b>	The amount included this year in the target normal cost for plan-related expenses is \$1,200,000.
<b>Timing of benefit payments</b>	Annuity payments are payable monthly at the beginning of the month and lump sum payments are payable on date of decrement.

## Methods

<b>Valuation date</b>	First day of plan year
<b>Funding target</b>	Present value of accrued benefits as required by regulations under IRC §430.
<b>Target normal cost</b>	Present value of benefits expected to accrue during the plan year plus plan-related expenses expected to be paid from plan assets during the plan year as required by regulations under IRC §430.

Plan Name: Barclays Pension Plan  
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Plan Sponsor: Barclays Services Corporation  
Valuation Date: January 1, 2024

# SCHEDULE SB ATTACHMENTS

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## **Actuarial value of assets for determining minimum required contributions**

Average of the fair market value of assets on the valuation date and the two immediately preceding valuation dates, adjusted for contributions, benefits, administrative expenses and expected earnings (with such expected earnings limited as described in IRS Notice 2009-22). The average asset value must be within 10% of market value, including discounted contributions receivable (discounted using the effective interest rate for the prior plan year).

The method of computing the actuarial value of assets complies with rules governing the calculation of such values under the Pension Protection Act of 2006 (PPA). These rules produce smoothed values that reflect the underlying market value of plan assets but fluctuate less than the market value. As a result, the actuarial value of assets will be lower than the market value in some years and greater in other years. However, over the long term under PPA's smoothing rules, the method has a significant bias to produce an actuarial value of assets that is below the market value of assets.

## **Benefits not valued**

All benefits described in the Plan Provisions section of this report were valued. WTW has reviewed the plan provisions with Barclays Services Corporation and, based on that review, is not aware of any significant benefits required to be valued that were not.

## **Sources of Data and Other Information**

Employee data was supplied by the Plan Administrator electronically as of the census date.

Data were reviewed for reasonableness and consistency, but no audit was performed. Assumptions or estimates were made when data were not available. We are not aware of any errors or omissions in the data that would have a significant effect on the results of our calculations.

## **Assumptions Rationale – Significant Economic Assumptions**

### **Discount rate**

The basis chosen was selected by the plan sponsor from among choices prescribed by law, all of which are based on observed market data over certain periods of time.

### **Lump sum conversion rate**

As required by IRC 430, lump sum benefits are valued using “annuity substitution”, so that the interest rates assumed are effectively the same as described above for the discount rate.

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Plan Sponsor: Barclays Services Corporation  
Valuation Date: January 1, 2024

# SCHEDULE SB ATTACHMENTS

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**Inflation** The inflation assumption is the central assumption for price inflation over the next ten years. In determining this result, the annual increase is considered in seasonally adjusted consumer price index over the past 1, 2 and 5 years, along with the Philadelphia Federal Reserve's Survey of Professional Forecasters. A market estimate of future inflation expectations is based on the difference between yields on government fixed interest and index linked bonds of appropriate term ('breakeven inflation').

**Plan-related expenses** As required by regulations, plan-related expenses are calculated by estimating the expenses to be paid from the trust during the coming year (including, for example, expected PBGC premiums and actuarial, accounting, legal, administration and trustee fees to be paid from the trust).

## Assumptions Rationale – Significant Demographic Assumptions

**Healthy and Disabled Mortality** Assumptions used for funding purposes are as prescribed by IRC §430(h).

**Termination** Assumptions were selected by the plan sponsor and represent a best estimate of future experience with periodic monitoring of observed gains and losses caused by termination patterns different from assumed. Termination rates were based on an experience study conducted in 2019.

**Retirement** Assumptions were selected by the plan sponsor and represent a best estimate of future experience with periodic monitoring of observed gains and losses caused by retirement patterns different from assumed. Retirement rates were based on an experience study conducted in 2019. Assumed retirement rates reflect the availability of different retirement benefits are expected to have on retirement behavior. Because materially more valuable benefits are available to participants who retire after reaching 70 points, the assumed rates of retirement have been increased to produce the best estimate of expected plan benefits.

Plan Name: Barclays Pension Plan  
EIN / PN: 13-3714398 / 001  
Plan Sponsor: Barclays Services Corporation  
Valuation Date: January 1, 2024

# SCHEDULE SB ATTACHMENTS

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<b>Benefit commencement date for deferred benefits</b>	Deferred vested participants are assumed to begin benefits at age 65 (or current age if later). Assumptions were selected by the plan sponsor and represent a best estimate of future experience with periodic monitoring of observed gains and losses caused by timing of payments elected.
<b>Form of payment</b>	<p>Assumptions were selected by the plan sponsor and represent a best estimate of future experience with periodic monitoring of observed gains and losses caused by form of payment elected. Lump sum election rates were based on an experience study conducted in 2019.</p> <p>Terminated vested participants are expected to elect an annuity (no lump sum option is available on an on-going basis).</p> <p>A lump sum option was introduced in 2012 for active employees terminating/retiring. It is assumed that a lower percent of retirement eligible employees will elect a lump sum as a result of subsidized early retirement factors.</p>
<b>Percent married</b>	The assumed percentage married is based on general population statistics on the marital status of individuals of retirement age.
<b>Spouse age</b>	The assumed age difference for spouses is based on general population statistics of the age difference for married individuals of retirement age.

## Prescribed Methods

<b>Funding methods</b>	The methods used for funding purposes as described in Appendix A, including the method of determining plan assets, are “prescribed methods set by law”, as defined in the actuarial standards of practice (ASOPs). These methods are required by IRC §430, or were selected by the plan sponsor from a range of methods permitted by IRC §430.
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Plan Name: Barclays Pension Plan  
EIN / PN: 13-3714398 / 001  
Plan Sponsor: Barclays Services Corporation  
Valuation Date: January 1, 2024

# SCHEDULE SB ATTACHMENTS

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## Changes in Assumptions and Methods

### Change in assumptions and methods since prior valuation

- The segment rates used to calculate the funding target and target normal cost were updated to the current valuation date as required by IRC §430.
- The mortality table used to calculate the funding target and target normal cost was updated to reflect the latest mortality and improvement scale, as required by guidance issued by IRS and under IRC §430.
- The Consumer Price Index was changed from 3.05% to 2.70%.
- The mortality table used for lump sum determinations was changed from the table prescribed by the IRS for lump sums payable in 2023 to the table prescribed by the IRS for lump sums payable in 2024

Plan Name: Barclays Pension Plan  
EIN / PN: 13-3714398 / 001  
Plan Sponsor: Barclays Services Corporation  
Valuation Date: January 1, 2024

<b>Plan Name</b>	<b>Barclays Pension Plan</b>
<b>Plan Sponsor EIN</b>	<b>13-4942190</b>
<b>ERISA Plan #</b>	<b>001</b>
<b>Plan Year Ending</b>	<b>12/31/2024</b>

**The required attachment marked with an "X" in the Attachment column is included within the Accountant's Opinion attachment to Sch. H, Part III, Line 3, which consists of the entire audit report issued by the plan's Independent Qualified Public Accountant (IQPA).**

<b>Form/Schedule</b>	<b>Line #</b>	<b>Description</b>	<b>Attachment</b>
5500 Sch. H	Line 3	Financial statements used in formulating the IQPA's opinion	X
5500 Sch. H	Line 4a	Schedule of Delinquent Participant Contributions	
5500 Sch. H	Line 4i	Schedule of Assets (Held at End of Year)	X
5500 Sch. H	Line 4i	Schedule of Assets (Acquired and Disposed of Within Year)	X
5500 Sch. H	Line 4j	Schedule of Reportable Transactions	X

**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

**2024**

**This Form is Open to Public Inspection**

For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

▶ **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.


<b>A</b> Name of plan Barclays Pension Plan		<b>B</b> Three-digit plan number (PN) ▶	001
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF Barclays Services Corporation		<b>D</b> Employer Identification Number (EIN) 13-3714398	
<b>E</b> Type of plan: <input checked="" type="checkbox"/> Single <input type="checkbox"/> Multiple-A <input type="checkbox"/> Multiple-B		<b>F</b> Prior year plan size: <input type="checkbox"/> 100 or fewer <input type="checkbox"/> 101-500 <input checked="" type="checkbox"/> More than 500	

**Part I Basic Information**

<b>1</b> Enter the valuation date: Month <u>01</u> Day <u>01</u> Year <u>2024</u>			
<b>2</b> Assets:			
<b>a</b> Market value .....	<b>2a</b>	535,989,386	
<b>b</b> Actuarial value .....	<b>2b</b>	587,711,207	
<b>3</b> Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
<b>a</b> For retired participants and beneficiaries receiving payment .....	1,321	292,592,695	292,592,695
<b>b</b> For terminated vested participants .....	1,413	129,399,554	129,399,554
<b>c</b> For active participants .....	370	43,244,757	44,903,922
<b>d</b> Total .....	3,104	465,237,006	466,896,171
<b>4</b> If the plan is in at-risk status, check the box and complete lines (a) and (b) .....	<input type="checkbox"/>		
<b>a</b> Funding target disregarding prescribed at-risk assumptions .....	<b>4a</b>		
<b>b</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 .....	<b>4b</b>		
<b>5</b> Effective interest rate .....	<b>5</b>	5.16%	
<b>6</b> Target normal cost			
<b>a</b> Present value of current plan year accruals .....	<b>6a</b>	0	
<b>b</b> Expected plan-related expenses .....	<b>6b</b>	1,200,000	
<b>c</b> Target normal cost .....	<b>6c</b>	1,200,000	

**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.

<b>SIGN HERE</b>		June 20, 2025
	Signature of actuary	Date
Joseph Gamzon	Type or print name of actuary	2306924
Willis Towers Watson US LLC	Firm name	Most recent enrollment number
200 Liberty Street Floor 6 New York NY 10281	Address of the firm	212-915-8888
		Telephone number (including area code)

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

**For Paperwork Reduction Act Notice, see the Instructions for Form 5500 or 5500-SF.**

**Schedule SB (Form 5500) 2024  
v. 240311**

<b>Part II</b>		<b>Beginning of Year Carryover and Prefunding Balances</b>	
		(a) Carryover balance	(b) Prefunding balance
<b>7</b>	Balance at beginning of prior year after applicable adjustments (line 13 from prior year) .....	0	190,586,892
<b>8</b>	Portion elected for use to offset prior year's funding requirement (line 35 from prior year) .....	0	9,179,130
<b>9</b>	Amount remaining (line 7 minus line 8) .....	0	181,407,762
<b>10</b>	Interest on line 9 using prior year's actual return of <u>9.17%</u> .....	0	16,635,092
<b>11</b>	Prior year's excess contributions to be added to prefunding balance:		
	<b>a</b> Present value of excess contributions (line 38a from prior year) .....		0
	<b>b(1)</b> 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 <u>5.30%</u> .....		0
	<b>b(2)</b> Interest on line 38b from prior year Schedule SB, using prior year's actual return .....		0
	<b>c</b> Total available at beginning of current plan year to add to prefunding balance .....		0
	<b>d</b> Portion of (c) to be added to prefunding balance .....		0
<b>12</b>	Other reductions in balances due to elections or deemed elections .....	0	0
<b>13</b>	Balance at beginning of current year (line 9 + line 10 + line 11d - line 12) .....	0	198,042,854

<b>Part III</b>		<b>Funding Percentages</b>	
<b>14</b>	Funding target attainment percentage .....	<b>14</b>	83.45 %
<b>15</b>	Adjusted funding target attainment percentage .....	<b>15</b>	125.87 %
<b>16</b>	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement .....	<b>16</b>	81.78 %
<b>17</b>	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage .....	<b>17</b>	%

**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	
<b>Totals ▶</b>			<b>18(b)</b>	0	<b>18(c)</b>	0

**19** Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:

<b>a</b> Contributions allocated toward unpaid minimum required contributions from prior years. ....	<b>19a</b>	0
<b>b</b> Contributions made to avoid restrictions adjusted to valuation date .....	<b>19b</b>	0
<b>c</b> Contributions allocated toward minimum required contribution for current year adjusted to valuation date .....	<b>19c</b>	0

**20** Quarterly contributions and liquidity shortfalls:

**a** Did the plan have a "funding shortfall" for the prior year? .....  Yes  No

**b** If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? .....  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	0

<b>Part V Assumptions Used to Determine Funding Target and Target Normal Cost</b>			
<b>21</b> Discount rate:			
<b>a</b> Segment rates:	1st segment: 4.75 %	2nd segment: 4.87 %	<input type="checkbox"/> N/A, full yield curve used
<b>b</b> Applicable month (enter code).....		<b>21b</b>	4
<b>22</b> Weighted average retirement age .....		<b>22</b>	61
<b>23</b> Mortality table(s) (see instructions)	<input type="checkbox"/> Prescribed - combined	<input checked="" type="checkbox"/> Prescribed - separate	<input type="checkbox"/> Substitute

<b>Part VI Miscellaneous Items</b>	
<b>24</b> Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment. .... <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>25</b> Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment. .... <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>26</b> Demographic and benefit information	
<b>a</b> Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment. .... <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>b</b> Is the plan required to provide a projection of expected benefit payments? If "Yes," see instructions regarding required attachment ... <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>27</b> If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment.....	<b>27</b>

<b>Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years</b>		
<b>28</b> Unpaid minimum required contributions for all prior years .....	<b>28</b>	0
<b>29</b> Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a).....	<b>29</b>	0
<b>30</b> Remaining amount of unpaid minimum required contributions (line 28 minus line 29) .....	<b>30</b>	0

<b>Part VIII Minimum Required Contribution For Current Year</b>			
<b>31</b> Target normal cost and excess assets (see instructions):			
<b>a</b> Target normal cost (line 6c).....	<b>31a</b>	1,200,000	
<b>b</b> Excess assets, if applicable, but not greater than line 31a .....	<b>31b</b>	0	
<b>32</b> Amortization installments:	Outstanding Balance	Installment	
<b>a</b> Net shortfall amortization installment .....	77,227,818	7,613,302	
<b>b</b> Waiver amortization installment .....	0	0	
<b>33</b> 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 .....	<b>33</b>		
<b>34</b> Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)....	<b>34</b>	8,813,302	
	Carryover balance	Prefunding balance	Total balance
<b>35</b> Balances elected for use to offset funding requirement .....	0	8,813,302	8,813,302
<b>36</b> Additional cash requirement (line 34 minus line 35).....	<b>36</b>	0	
<b>37</b> Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c).....	<b>37</b>	0	
<b>38</b> Present value of excess contributions for current year (see instructions)			
<b>a</b> Total (excess, if any, of line 37 over line 36)	<b>38a</b>	0	
<b>b</b> Portion included in line 38a attributable to use of prefunding and funding standard carryover balances .....	<b>38b</b>	0	
<b>39</b> Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37).....	<b>39</b>	0	
<b>40</b> Unpaid minimum required contributions for all years .....	<b>40</b>	0	

<b>Part IX Pension Funding Relief Under the American Rescue Plan Act of 2021 (See Instructions)</b>	
<b>41</b> If an election was made to use the extended amortization rule for a plan year beginning on or before December 31, 2021, check the box to indicate the first plan year for which the rule applies. <input type="checkbox"/> 2019 <input type="checkbox"/> 2020 <input checked="" type="checkbox"/> 2021	

# SCHEDULE SB ATTACHMENTS

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## Schedule SB – Statement by Enrolled Actuary

<b>Plan Sponsor</b>	Barclays Services Corporation
<b>EIN/PN</b>	13-3714398 / 001
<b>Plan Name</b>	Barclays Pension Plan
<b>Valuation Date</b>	January 1, 2024
<b>Enrolled Actuary</b>	Joseph Gamzon
<b>Enrollment Number</b>	23-06924

The actuarial assumptions that are not mandated by IRC § 430 and regulations, represent the enrolled actuary's best estimate of anticipated experience under the plan, subject to the following conditions:

The actuarial valuation, on which the information in this Schedule SB is based, has been prepared in reliance upon the employee and financial data furnished by the plan administrator and the trustee. The enrolled actuary has not made a rigorous check of the accuracy of this information but has accepted it after reviewing it and concluding it is reasonable in relation to similar information furnished in previous years. The amounts of contributions and dates paid shown in Item 18 of Schedule SB were listed in reliance on information provided by the plan administrator and/or trustee.

# SCHEDULE SB ATTACHMENTS

**Schedule SB, Line 22**  
**Description of Weighted Average Retirement Age**  
**as of January 1, 2024**

<u>Age</u>	<u>Rate of Retirement</u>	<u>Population Survivorship</u>	<u>Number Retiring</u>	<u>Weighted Retirement by Age</u>	<u>Average Retirement Age</u>
55	12.5%	100,000	12,500	687,500	
56	12.5%	87,500	10,938	612,500	
57	12.5%	76,563	9,570	545,508	
58	12.5%	66,992	8,374	485,693	
59	8.5%	58,618	4,983	293,970	
60	8.5%	53,636	4,559	273,542	
61	8.5%	49,077	4,172	254,462	
62	20.0%	44,905	8,981	556,823	
63	25.0%	35,924	8,981	565,804	
64	30.0%	26,943	8,083	517,307	
65	30.0%	18,860	5,658	367,773	
66	30.0%	13,202	3,961	261,401	
67	30.0%	9,241	2,772	185,753	
68	50.0%	6,469	3,235	219,947	
69	75.0%	3,235	2,426	167,386	
70	100.0%	809	809	56,604	
Total		651,973	100,000	6,051,973	60.52

Plan Name: Barclays Pension Plan  
 EIN / PN: 13-3714398 / 001  
 Plan Sponsor: Barclays Services Corporation  
 Valuation Date: January 1, 2024

# SCHEDULE SB ATTACHMENTS

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## Schedule SB, Line 24 Change in Actuarial Assumptions

The Consumer Price Index was changed from 3.05% to 2.70%.

Plan Name: Barclays Pension Plan  
EIN / PN: 13-3714398 / 001  
Plan Sponsor: Barclays Services Corporation  
Valuation Date: January 1, 2024

# SCHEDULE SB ATTACHMENTS

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

### Economic Assumptions

#### Interest rate basis

- Applicable month September
- Interest rate basis 3-Segment Rates

Interest rates	Reflecting Corridors	Not Reflecting Corridors
----------------	----------------------	--------------------------

#### Annual rates of increase

- Consumer Price Index 2.70%
- Assumed cost of living increase 1.35%

### Demographic Assumptions

**New or rehired employees** It was assumed there will be no new or rehired employees.

**Mortality** Separate rates for non-annuitants (based on Pri-2012 "Employees" table without collar or amount adjustments and then projected forward with generational projection using adjusted Scale MP-2021) and annuitants (based on Pri-2012 "Healthy Annuitants" table (participants and beneficiaries combined) without collar or amount adjustments, projected forward with generational projection using adjusted Scale MP-2021. The rate of future mortality improvement at any age for any year beginning on or after the valuation date is capped at 0.78%.

Plan Name: Barclays Pension Plan  
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Plan Sponsor: Barclays Services Corporation  
Valuation Date: January 1, 2024

# SCHEDULE SB ATTACHMENTS

**Termination**

Representative Rates varying by age

Age	Percentage Terminating during the year*
30	20%
35	18%
40	18%
45	17%
50	16%
55	15%

\*Additional 5% is applied for participants who have met age and service requirements for "Rule of 70" retirement.

**Disability**

Rates varying by age and gender

Percentage disabled during the year		
Age	Males	Females
25	0.022%	0.029%
30	0.026	0.039
35	0.034	0.058
40	0.051	0.076
45	0.089	0.116
50	0.166	0.182
55	0.297	0.267
60	0.418	0.313

**Retirement**

For purposes of determining the Funding Target and Target Normal Cost (both disregarding at-risk assumptions), the rates at which participants are assumed to retire by age are shown below:

Age	Percentage Retiring During the Year*
55-58	12.5%
59-61	8.5
62	20.0
63	25.0
64-67	30.0
68	50.0
69	75.0
70+	100.0

\*Additional 5% is applied for participants who have met age and service requirements for "Rule of 70" retirement.

Plan Name: Barclays Pension Plan  
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 Valuation Date: January 1, 2024

# SCHEDULE SB ATTACHMENTS

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<b>Form of payment Active participants</b>	<p>30% of retirement eligible active participants are assumed to elect a lump sum form of payment under the plan when eligible. 70% of retirement eligible active participants are assumed to elect an annuity.</p> <p>60% of non-retirement eligible active participants are assumed to elect a lump sum form of payment under the plan when eligible. 40% of non-retirement eligible active participants are assumed to elect an annuity.</p> <p>For those participants who are assumed to elect an annuity, married participants are assumed to elect 50% Joint and Survivor annuity and single participants are assumed to elect life annuity. Lump sums were valued using the substitution of annuity form under IRS Regulation 1.430(d)-1(f)(4).</p>
<b>Percent married</b>	80% of male and 65% of female eligible participants are assumed to be married.
<b>Spouse age</b>	Wife three years younger than husband.
<b>Plan compensation</b>	Not applicable
<b>Administrative expenses</b>	The amount included this year in the target normal cost for plan-related expenses is \$1,200,000.
<b>Timing of benefit payments</b>	Annuity payments are payable monthly at the beginning of the month and lump sum payments are payable on date of decrement.

## Methods

<b>Valuation date</b>	First day of plan year
<b>Funding target</b>	Present value of accrued benefits as required by regulations under IRC §430.
<b>Target normal cost</b>	Present value of benefits expected to accrue during the plan year plus plan-related expenses expected to be paid from plan assets during the plan year as required by regulations under IRC §430.

Plan Name: Barclays Pension Plan  
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Plan Sponsor: Barclays Services Corporation  
Valuation Date: January 1, 2024

# SCHEDULE SB ATTACHMENTS

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**Actuarial value of assets for determining minimum required contributions**

Average of the fair market value of assets on the valuation date and the two immediately preceding valuation dates, adjusted for contributions, benefits, administrative expenses and expected earnings (with such expected earnings limited as described in IRS Notice 2009-22). The average asset value must be within 10% of market value, including discounted contributions receivable (discounted using the effective interest rate for the prior plan year).

The method of computing the actuarial value of assets complies with rules governing the calculation of such values under the Pension Protection Act of 2006 (PPA). These rules produce smoothed values that reflect the underlying market value of plan assets but fluctuate less than the market value. As a result, the actuarial value of assets will be lower than the market value in some years and greater in other years. However, over the long term under PPA's smoothing rules, the method has a significant bias to produce an actuarial value of assets that is below the market value of assets.

**Benefits not valued**

All benefits described in the Plan Provisions section of this report were valued. WTW has reviewed the plan provisions with Barclays Services Corporation and, based on that review, is not aware of any significant benefits required to be valued that were not.

## Sources of Data and Other Information

Employee data was supplied by the Plan Administrator electronically as of the census date.

Data were reviewed for reasonableness and consistency, but no audit was performed. Assumptions or estimates were made when data were not available. We are not aware of any errors or omissions in the data that would have a significant effect on the results of our calculations.

## Assumptions Rationale – Significant Economic Assumptions

**Discount rate**

The basis chosen was selected by the plan sponsor from among choices prescribed by law, all of which are based on observed market data over certain periods of time.

**Lump sum conversion rate**

As required by IRC 430, lump sum benefits are valued using "annuity substitution", so that the interest rates assumed are effectively the same as described above for the discount rate.

Plan Name: Barclays Pension Plan  
EIN / PN: 13-3714398 / 001  
Plan Sponsor: Barclays Services Corporation  
Valuation Date: January 1, 2024

# SCHEDULE SB ATTACHMENTS

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**Inflation** The inflation assumption is the central assumption for price inflation over the next ten years. In determining this result, the annual increase is considered in seasonally adjusted consumer price index over the past 1, 2 and 5 years, along with the Philadelphia Federal Reserve's Survey of Professional Forecasters. A market estimate of future inflation expectations is based on the difference between yields on government fixed interest and index linked bonds of appropriate term ('breakeven inflation').

**Plan-related expenses** As required by regulations, plan-related expenses are calculated by estimating the expenses to be paid from the trust during the coming year (including, for example, expected PBGC premiums and actuarial, accounting, legal, administration and trustee fees to be paid from the trust).

## Assumptions Rationale – Significant Demographic Assumptions

**Healthy and Disabled Mortality** Assumptions used for funding purposes are as prescribed by IRC §430(h).

**Termination** Assumptions were selected by the plan sponsor and represent a best estimate of future experience with periodic monitoring of observed gains and losses caused by termination patterns different from assumed. Termination rates were based on an experience study conducted in 2019.

**Retirement** Assumptions were selected by the plan sponsor and represent a best estimate of future experience with periodic monitoring of observed gains and losses caused by retirement patterns different from assumed. Retirement rates were based on an experience study conducted in 2019. Assumed retirement rates reflect the availability of different retirement benefits are expected to have on retirement behavior. Because materially more valuable benefits are available to participants who retire after reaching 70 points, the assumed rates of retirement have been increased to produce the best estimate of expected plan benefits.

Plan Name: Barclays Pension Plan  
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<b>Benefit commencement date for deferred benefits</b>	Deferred vested participants are assumed to begin benefits at age 65 (or current age if later). Assumptions were selected by the plan sponsor and represent a best estimate of future experience with periodic monitoring of observed gains and losses caused by timing of payments elected.
<b>Form of payment</b>	<p>Assumptions were selected by the plan sponsor and represent a best estimate of future experience with periodic monitoring of observed gains and losses caused by form of payment elected. Lump sum election rates were based on an experience study conducted in 2019.</p> <p>Terminated vested participants are expected to elect an annuity (no lump sum option is available on an on-going basis).</p> <p>A lump sum option was introduced in 2012 for active employees terminating/retiring. It is assumed that a lower percent of retirement eligible employees will elect a lump sum as a result of subsidized early retirement factors.</p>
<b>Percent married</b>	The assumed percentage married is based on general population statistics on the marital status of individuals of retirement age.
<b>Spouse age</b>	The assumed age difference for spouses is based on general population statistics of the age difference for married individuals of retirement age.

## Prescribed Methods

<b>Funding methods</b>	The methods used for funding purposes as described in Appendix A, including the method of determining plan assets, are "prescribed methods set by law", as defined in the actuarial standards of practice (ASOPs). These methods are required by IRC §430, or were selected by the plan sponsor from a range of methods permitted by IRC §430.
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Plan Name: Barclays Pension Plan  
EIN / PN: 13-3714398 / 001  
Plan Sponsor: Barclays Services Corporation  
Valuation Date: January 1, 2024

# SCHEDULE SB ATTACHMENTS

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## Changes in Assumptions and Methods

### Change in assumptions and methods since prior valuation

- The segment rates used to calculate the funding target and target normal cost were updated to the current valuation date as required by IRC §430.
- The mortality table used to calculate the funding target and target normal cost was updated to reflect the latest mortality and improvement scale, as required by guidance issued by IRS and under IRC §430.
- The Consumer Price Index was changed from 3.05% to 2.70%.
- The mortality table used for lump sum determinations was changed from the table prescribed by the IRS for lump sums payable in 2023 to the table prescribed by the IRS for lump sums payable in 2024

Plan Name: Barclays Pension Plan  
EIN / PN: 13-3714398 / 001  
Plan Sponsor: Barclays Services Corporation  
Valuation Date: January 1, 2024

# SCHEDULE SB ATTACHMENTS

## Schedule SB, Part V Summary of Plan Provisions

**Plan Sponsor**  
Barclays Services Corporation

### Plan Provisions

**Effective Date and Most Recent Amendment** The plan was originally effective October 1, 1967. The Plan was amended and restated generally effective January 1, 1995 and subsequently amended and restated through December 31, 2010. During 2012 the plan was amended to freeze participation and benefit accruals and the maximum permissible dollar limit under Section 415 of the Internal Revenue Code for all participants effective September 30, 2012. The plan was amended to offer a lump sum optional form of payment for active participants who terminate on or after April 1, 2012

**Plan Year** The twelve-month period ending December 31.

**Coverage and Participation** Employees are eligible for Membership upon attainment of age 21 and completion of a Period of Service of one year. Former employees of First Westchester National Bank who were participants under the FWNB plan were eligible under the Barclays Company plan on the merger date of May 31, 1974. Former Bankers Master Trust employees who became Barclays employees in the November 17, 1980 merger are eligible as of the merger date. Former Bankers Trust of Hudson Valley employees who became Barclays employees in the November 1, 1982 merger became members as of that date. Former Chemical Bank employees who became Barclays employees as of April 2, 1984 became members as of that date. Former Barcal employees who were employed by Barcal on May 31, 1988 are entitled to future deferred benefits. Former BAC Plan participants as of December 31, 1995 became members as of that date. Former Wachovia employees who became employees of the HomeEq division of Barclays Capital Real Estate as of April 1, 2007 became members as of that date; prior service is recognized for eligibility and vesting.

Participation is closed to new entrants hired on or after September 22, 2008 and former Lehman employees except for specifically named individuals in Appendix 12 of the amendment.

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Effective January 1, 2011, the benefits for certain top executives are frozen. Effective September 30, 2012, participation and benefit accruals for all participants were frozen.

**Year of Credit** One Year of Credit (or a fraction thereof) is earned for each full year (or fraction thereof) of Period of Service.

**Period of Service** As Employee's total Period of Service measured in years and months commencing when the Employee first performs an Hour of Service and ending on his Severance from Service Date.

**Final Average Pay** Final Average Pay is the highest consecutive five-year average Annual Compensation out of the last 10 years, using completed calendar years. Annual Compensation is generally base pay plus bonus and other specified amounts for services rendered (less certain exclusions) to a maximum of 125% of base pay. For employees of Barclays de Zoete Wedd Incorporated and Barclays de Zoete Wedd Securities Inc., Annual Compensation is base pay prior to January 1, 1992. For former BAC Plan participants Annual Compensation is total W-2 compensation for services rendered (less certain exclusions). Annual Compensation is limited to the Internal Revenue Code maximum amount (effective January 1, 2002, \$200,000 for 2002 and prior plan years) but no greater than \$350,000.

**Covered Compensation** Average of the Social Security Taxable Wage Base in effect for each calendar year during the 35 years ending with the calendar year in which the participant attains Social Security Retirement age.

## Normal Retirement Benefit

- **Normal Retirement Date** The later of the day of the employee's 65th birthday or completion of a Period of Service of 5 years.
- **Monthly Benefit Formula** The Member's Accrued Benefit at Normal Retirement Date.
- **Normal Form of Retirement Income** Retirement Income is payable for the life of the Member unless a Surviving Spouse Annuity, as described below, becomes payable. Benefits are payable at the beginning of the month.

**Late retirement** If employment continues after Normal Retirement, pension payments do not commence until the first day of the month following actual retirement. Years of Credit are accrued until actual retirement date.

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## Accrued Benefit

(a) For Members Other Than Former Employees of the First Westchester National Bank, Bankers Trust (Acquired December 17, 1980 and December 1, 1982), Chemical bank or former BAC Plan participants:

- (i) 1.67% times Final Average Pay, plus
  - (ii) 0.30% times Final Average Pay in excess of Covered Compensation
- The total is multiplied by Years of Credit not greater than 30.

(b) Former Westchester National Bank Employees:

For the former FWNB employees who were participants in the New York State Bankers Retirement System, the Actuarial Equivalent of the employee's contribution with interest, payable as a monthly annuity, is added to (a).

(c) Former Bankers Trust and Chemical Bank Employees:

For the former Bankers Trust and Chemical Bank employees who were participants in their respective plans, their benefit is the greater of their accrued benefit under their plan as of the merger dates and (a) above.

(d) Certain Long-Service Employees:

For certain long-service employees hired prior to April 23, 1970, their benefit is the greater of (a) and their Final Base pay, multiplied by their Period of Service/60, less the Primary Social Security Benefit commencing at age 65, multiplied by their Period of Service/80. A Social Security Supplement equal to the Primary Social Security Benefit commencing at age 65, multiplied by their Period of Service/80, is payable up until age 65. Also, certain long-service former employees hired prior to April 23, 1970, were eligible for enhanced retirement benefits.

(e) Former BAC Plan Participants:

- (i) Members Other Than Former Employees of the Northwestern Mortgage Corporation:
  - (a) 1.1% multiplied by Final Average Pay multiplied by Years of Credit, plus
  - (b) 0.65% multiplied by Final Average Pay in excess of covered compensation multiplied by Years of Credit not greater than 35.

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- (ii) Former Northwestern Mortgage Corporation Employees: For the former Northwestern Mortgage Corporation Employees who were participants in the Pension Plan of Northwestern Financial Corporation (NFC Plan), their benefit under the plan is their accrued benefit under the NFC Plan as of December 31, 1985 plus their benefit under (i) based on Years of Credit since December 1, 1985.
- (iii) (iii) Employees of the Data Center or Barclays Group Inc. (USA) (formerly Barclays Capital): Members who are employees of the Data Center or of Barclays Group Inc. (USA) accrue benefits under the formula in the Barclays Pension Plan prospectively from their date of transfer to the Data Center or Barclays Group Inc. (USA), respectively.

Effective September 30, 2012, the plan was amended to cease benefit accruals.

## Early Retirement Benefit

- Eligibility Must have attained age 55 and completed a Period of Service of 10 years (5 years for former Barcal Plan participants).
- Benefit
  - (a) Members other than former BAC or Barcal Plans participants:

The Member's Accrued Benefit. Full retirement pension commences at Normal Retirement Date. Reduced pension may commence on the first day of any month coincident with or next following early retirement.

The reductions are as follows: 4% reduction for each year before age 65 if member retires from active status between ages 55 and 60. 3% reduction for each year before age 65 if member retires from active status between 60 and 65. No reduction if member retires from active status after attainment of age 55 and completion of a Period of Service of 25 years. If member retires from active status after attainment of age 55 and completion of a Period of Service of 20 years, 2% reduction for each year that Period of Service is less than 25 years. If member is subject to a job elimination on or after attainment of age 55 (or his age plus Period of Service is 70 or more) and is credited with a Period of Service of at least fifteen years, 2% reduction for each year that Period of Service is less than 25 years.

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(b) Former BAC Plan participants:

The Member's Accrued Benefit. Full retirement pension commences at Normal Retirement Date. Reduced pension may commence on the first day of any month coincident with or next following early retirement. The reductions are in accordance with a table of factors in the Restated Retirement Plan of BarclaysAmericanCorporation plan document.

(c) Former Barcal Plan participants:

The Member's Accrued Benefit. Full retirement pension commences at Normal Retirement Date. Reduced pension may commence on the first day of any month coincident with or next following early retirement. The reductions are in accordance with a table of factors in the Restated Retirement Plan of Barclays Bank of California plan document.

**Disability benefit**

- Eligibility Must qualify for disability benefits under the Federal Social Security Act and either the Company's Long Term Disability Plan or an applicable state workmen's compensation program.
- Benefit The Member's Benefit based on Final Average Pay and Years of Credit at date of disability, plus number of years to age 65 as if he remained in employment to his Normal Retirement Date. Pension commences on Member's Normal Retirement Date.

**Vested benefits upon termination of service**

- Vesting Must have completed a Period of Service of 5 years to be eligible for a deferred pension. If these conditions are not met, no benefit is payable, except that former participants in the First Westchester National Bank pension plan are entitled to a return of contributions.
- Benefit The Member's Accrued Benefit. Full retirement pension commences at Normal Retirement Date. Reduced pension may commence on the first day of any month after age 55 if 10 (5 for former Barcal Plan participants) Year Period of Service was completed.

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## Surviving spouse annuity

- Pre-retirement
  - (a) Eligibility: at date of death, Member must have been eligible for Deferred Vested, Early or Normal Retirement.
  - (b) Benefit: 50% of the benefit the member would have received if he had retired under Early Retirement on his date of death with a post-retirement spouse's annuity in effect.
  - (c) Payment: Benefit commences on the date the Member could have first been eligible to receive benefits and continues for the lifetime of the Surviving Spouse
  
- Post-retirement
  - (a) Eligibility Requirements – Surviving Spouse must have been married to the Member at the date the Member's payments commenced and the Member did not reject this benefit.
  - (b) Annual Benefit – 50% of the Member's Normal, Late or Early Retirement benefit above, which may have been reduced at the time of this retirement to reflect this benefit.
  - (c) Payment – commences on the regular payment date following the death of the Member and continues for the lifetime of the Surviving Spouse.

## Assumed Cost-of-Living

Annual COL adjustments are provided for retired Members and Beneficiaries after commencement of monthly payments. Benefits are increased as of January 1 of the second calendar year following the calendar year in which retirement or entitlement occurred, and annually each January, thereafter, by the lesser of 3% or one-half the amount of increase in the Consumer Price Index (expressed as a percentage). No COL adjustment is made to terminated vested benefits until benefit payments actually commence. Automatic COL adjustments apply only to benefits accrued through December 31, 1990 and do not apply to former BAC or Barcal Plans participants; however, automatic COL adjustments do apply to additional benefits accrued for certain long-service employees.

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## Optional Forms of Retirement Income in Lieu of Normal Form

- (a) Contingent Annuitant Option – a member may elect to receive a reduced benefit during his lifetime with 100%, 75% or 50% of such benefit payable thereafter to a beneficiary. The 50% Contingent Annuitant Option is unreduced for Early, Normal, and Late Retirement Benefits payable to spouses.
- (b) Commuted Benefit – a member may elect to commute a portion of his pension up to a maximum of 25% for a cash payment based on an actuarial equivalent value. Commutation option is only available for benefits accrued through December 31, 1990 and do not apply to former BAC or Barcal Plan participants; however, commutation option is available for additional benefits accrued for certain long-service employees.
- (c) Other optional forms of payment available on reduced basis for former BAC and BARCAL participants.
- (d) Lump-sum form of payment option available for active participants who terminate on or after April 1, 2012. The lump sum is the actuarial equivalent of the accrued benefit as of normal retirement date. Retirement eligible participants may elect a lump sum upon termination or any subsequent date on or after age 55 and prior to age 65. Non retirement eligible participants at termination of employment may elect a lump sum upon termination.

## Special Rule of 70 Benefit

- Eligibility Member is subject to a job elimination prior to eligibility for early retirement (“retirement eligible”) and age plus Period of Service equals or exceeds 70.
- Benefit The Member is treated as “retirement eligible,” but benefits start no earlier than age 55.

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## Schedule SB, Line 26a Schedule of Active Participant Data as of January 1, 2024

Attained Age	Attained Years of Credited Service <sup>1</sup>									Total	
	Under 1	1-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39		40 & Over
Under 25	0	0	0	0	0	0	0	0	0	0	0
25-29	0	0	0	0	0	0	0	0	0	0	0
30-34	0	0	0	0	0	0	0	0	0	0	0
35-39	0	1	17	0	0	0	0	0	0	0	18
40-44	1	15	63	4	0	0	0	0	0	0	83
45-49	0	14	65	16	0	0	0	0	0	0	95
50-54	0	7	57	13	2	1	2	0	0	0	82
55-59	0	7	37	5	4	2	0	0	0	0	55
60-64	0	1	12	4	4	1	3	3	1	0	29
65-69	0	0	6	0	0	0	0	0	0	0	6
70 & over	0	0	2	0	0	0	0	0	0	0	2
<b>Total</b>	<b>1</b>	<b>45</b>	<b>259</b>	<b>42</b>	<b>10</b>	<b>4</b>	<b>5</b>	<b>3</b>	<b>1</b>	<b>0</b>	<b>370</b>
	0	0	0	0	0	0	0	0	0	0	0

<sup>1</sup> Age and service for purposes of determining category are based on exact (not rounded) values.

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# SCHEDULE SB ATTACHMENTS

## Schedule SB, Line 26b

### Schedule of Projection of Benefit Payments (Annuity Substitution)

Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving Payments	Total
2024	215,661	1,412,319	26,516,098	28,144,078
2025	616,206	2,079,400	26,070,254	28,765,860
2026	974,881	2,655,279	25,536,749	29,166,909
2027	1,296,158	3,319,510	24,960,723	29,576,391
2028	1,588,020	4,129,337	24,343,275	30,060,632
2029	1,836,253	4,969,028	23,684,895	30,490,176
2030	2,029,532	5,750,114	22,986,278	30,765,924
2031	2,214,966	6,433,868	22,247,680	30,896,514
2032	2,382,849	7,113,069	21,470,485	30,966,403
2033	2,516,680	7,759,530	20,657,418	30,933,628
2034	2,657,470	8,398,454	19,810,427	30,866,351
2035	2,790,981	9,063,727	18,931,814	30,786,522
2036	2,956,527	9,696,494	18,024,772	30,677,793
2037	3,150,957	10,437,992	17,093,141	30,682,090
2038	3,328,637	11,083,759	16,141,367	30,553,763
2039	3,459,139	11,445,955	15,174,497	30,079,591
2040	3,557,223	11,738,410	14,198,169	29,493,802
2041	3,750,803	11,982,505	13,218,399	28,951,707
2042	3,975,871	12,155,517	12,241,388	28,372,776
2043	4,158,432	12,294,359	11,273,441	27,726,232
2044	4,299,433	12,406,605	10,320,858	27,026,896
2045	4,387,641	12,387,635	9,389,899	26,165,175
2046	4,454,873	12,198,056	8,486,753	25,139,682
2047	4,489,233	11,962,197	7,617,394	24,068,824
2048	4,456,020	11,722,712	6,787,595	22,966,327
2049	4,377,248	11,394,460	6,002,801	21,774,509
2050	4,284,112	10,983,208	5,267,823	20,535,143
2051	4,162,490	10,552,647	4,586,642	19,301,779
2052	4,013,550	10,072,837	3,962,096	18,048,483
2053	3,851,618	9,542,760	3,395,816	16,790,194
2054	3,682,517	8,996,032	2,888,156	15,566,705
2055	3,507,050	8,442,066	2,438,209	14,387,325
2056	3,326,094	7,884,900	2,044,027	13,255,021
2057	3,140,584	7,328,651	1,702,648	12,171,883
2058	2,951,511	6,777,407	1,410,285	11,139,203
2059	2,759,916	6,235,080	1,162,616	10,157,612
2060	2,566,930	5,705,385	954,975	9,227,290
2061	2,373,785	5,191,742	782,556	8,348,083
2062	2,181,750	4,697,235	640,630	7,519,615
2063	1,992,149	4,224,652	524,691	6,741,492
2064	1,806,339	3,776,336	430,590	6,013,265
2065	1,625,642	3,354,158	354,606	5,334,406
2066	1,451,347	2,959,526	293,494	4,704,367
2067	1,284,683	2,593,344	244,450	4,122,477

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Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving Payments	Total
2068	1,126,790	2,256,097	205,096	3,587,983
2069	978,714	1,947,901	173,451	3,100,066
2070	841,357	1,668,463	147,877	2,657,697
2071	715,438	1,417,181	127,048	2,259,667
2072	601,436	1,193,143	109,916	1,904,495
2073	499,570	995,185	95,674	1,590,429

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## Schedule SB, Line 32 Schedule of Amortization Bases as of January 1, 2024

Type of Base	Date Established	Initial Amount	Remaining Amortization Period (Years)	Outstanding Balance	Amortization Payment
Shortfall	01/01/2024	(4,027,884)	15.00000	(4,027,884)	(366,458)
Shortfall	01/01/2023	76,098,983	14.00000	73,019,643	6,969,199
Shortfall	01/01/2022	(23,690,372)	13.00000	(21,758,090)	(2,189,262)
Shortfall	01/01/2021	34,310,804	12.00000	29,987,220	3,199,193
Total				77,220,889	7,612,672

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## Schedule SB – Statement by Enrolled Actuary

<b>Plan Sponsor</b>	Barclays Services Corporation
<b>EIN/PN</b>	13-3714398 / 001
<b>Plan Name</b>	Barclays Pension Plan
<b>Valuation Date</b>	January 1, 2024
<b>Enrolled Actuary</b>	Joseph Gamzon
<b>Enrollment Number</b>	23-06924

The actuarial assumptions that are not mandated by IRC § 430 and regulations, represent the enrolled actuary's best estimate of anticipated experience under the plan, subject to the following conditions:

The actuarial valuation, on which the information in this Schedule SB is based, has been prepared in reliance upon the employee and financial data furnished by the plan administrator and the trustee. The enrolled actuary has not made a rigorous check of the accuracy of this information but has accepted it after reviewing it and concluding it is reasonable in relation to similar information furnished in previous years. The amounts of contributions and dates paid shown in Item 18 of Schedule SB were listed in reliance on information provided by the plan administrator and/or trustee.

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## Schedule SB, Line 22 Description of Weighted Average Retirement Age as of January 1, 2024

<u>Age</u>	<u>Rate of Retirement</u>	<u>Population Survivorship</u>	<u>Number Retiring</u>	<u>Weighted Retirement by Age</u>	<u>Average Retirement Age</u>
55	12.5%	100,000	12,500	687,500	
56	12.5%	87,500	10,938	612,500	
57	12.5%	76,563	9,570	545,508	
58	12.5%	66,992	8,374	485,693	
59	8.5%	58,618	4,983	293,970	
60	8.5%	53,636	4,559	273,542	
61	8.5%	49,077	4,172	254,462	
62	20.0%	44,905	8,981	556,823	
63	25.0%	35,924	8,981	565,804	
64	30.0%	26,943	8,083	517,307	
65	30.0%	18,860	5,658	367,773	
66	30.0%	13,202	3,961	261,401	
67	30.0%	9,241	2,772	185,753	
68	50.0%	6,469	3,235	219,947	
69	75.0%	3,235	2,426	167,386	
70	100.0%	809	809	56,604	
Total		651,973	100,000	6,051,973	60.52

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## Schedule SB, Line 26b Schedule of Projection of Benefit Payments (Annuity Substitution)

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2065	1,625,642	3,354,158	354,606	5,334,406
2066	1,451,347	2,959,526	293,494	4,704,367
2067	1,284,683	2,593,344	244,450	4,122,477

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2071	715,438	1,417,181	127,048	2,259,667
2072	601,436	1,193,143	109,916	1,904,495
2073	499,570	995,185	95,674	1,590,429

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Plan Sponsor: Barclays Services Corporation  
Valuation Date: January 1, 2024

# SCHEDULE SB ATTACHMENTS

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## Schedule SB, Part V Summary of Plan Provisions

### Plan Sponsor

Barclays Services Corporation

### Plan Provisions

#### Effective Date and Most Recent Amendment

The plan was originally effective October 1, 1967. The Plan was amended and restated generally effective January 1, 1995 and subsequently amended and restated through December 31, 2010. During 2012 the plan was amended to freeze participation and benefit accruals and the maximum permissible dollar limit under Section 415 of the Internal Revenue Code for all participants effective September 30, 2012. The plan was amended to offer a lump sum optional form of payment for active participants who terminate on or after April 1, 2012

#### Plan Year

The twelve-month period ending December 31.

#### Coverage and Participation

Employees are eligible for Membership upon attainment of age 21 and completion of a Period of Service of one year. Former employees of First Westchester National Bank who were participants under the FWNB plan were eligible under the Barclays Company plan on the merger date of May 31, 1974. Former Bankers Master Trust employees who became Barclays employees in the November 17, 1980 merger are eligible as of the merger date. Former Bankers Trust of Hudson Valley employees who became Barclays employees in the November 1, 1982 merger became members as of that date. Former Chemical Bank employees who became Barclays employees as of April 2, 1984 became members as of that date. Former Barcal employees who were employed by Barcal on May 31, 1988 are entitled to future deferred benefits. Former BAC Plan participants as of December 31, 1995 became members as of that date. Former Wachovia employees who became employees of the HomeEq division of Barclays Capital Real Estate as of April 1, 2007 became members as of that date; prior service is recognized for eligibility and vesting.

Participation is closed to new entrants hired on or after September 22, 2008 and former Lehman employees except for specifically named individuals in Appendix 12 of the amendment.

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Effective January 1, 2011, the benefits for certain top executives are frozen. Effective September 30, 2012, participation and benefit accruals for all participants were frozen.

**Year of Credit** One Year of Credit (or a fraction thereof) is earned for each full year (or fraction thereof) of Period of Service.

**Period of Service** As Employee's total Period of Service measured in years and months commencing when the Employee first performs an Hour of Service and ending on his Severance from Service Date.

**Final Average Pay** Final Average Pay is the highest consecutive five-year average Annual Compensation out of the last 10 years, using completed calendar years. Annual Compensation is generally base pay plus bonus and other specified amounts for services rendered (less certain exclusions) to a maximum of 125% of base pay. For employees of Barclays de Zoete Wedd Incorporated and Barclays de Zoete Wedd Securities Inc., Annual Compensation is base pay prior to January 1, 1992. For former BAC Plan participants Annual Compensation is total W-2 compensation for services rendered (less certain exclusions). Annual Compensation is limited to the Internal Revenue Code maximum amount (effective January 1, 2002, \$200,000 for 2002 and prior plan years) but no greater than \$350,000.

**Covered Compensation** Average of the Social Security Taxable Wage Base in effect for each calendar year during the 35 years ending with the calendar year in which the participant attains Social Security Retirement age.

## Normal Retirement Benefit

- **Normal Retirement Date** The later of the day of the employee's 65th birthday or completion of a Period of Service of 5 years.
- **Monthly Benefit Formula** The Member's Accrued Benefit at Normal Retirement Date.
- **Normal Form of Retirement Income** Retirement Income is payable for the life of the Member unless a Surviving Spouse Annuity, as described below, becomes payable. Benefits are payable at the beginning of the month.

**Late retirement** If employment continues after Normal Retirement, pension payments do not commence until the first day of the month following actual retirement. Years of Credit are accrued until actual retirement date.

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## Accrued Benefit

(a) For Members Other Than Former Employees of the First Westchester National Bank, Bankers Trust (Acquired December 17, 1980 and December 1, 1982), Chemical bank or former BAC Plan participants:

- (i) 1.67% times Final Average Pay, plus
- (ii) 0.30% times Final Average Pay in excess of Covered Compensation  
The total is multiplied by Years of Credit not greater than 30.

(b) Former Westchester National Bank Employees:

For the former FWNB employees who were participants in the New York State Bankers Retirement System, the Actuarial Equivalent of the employee's contribution with interest, payable as a monthly annuity, is added to (a).

(c) Former Bankers Trust and Chemical Bank Employees:

For the former Bankers Trust and Chemical Bank employees who were participants in their respective plans, their benefit is the greater of their accrued benefit under their plan as of the merger dates and (a) above.

(d) Certain Long-Service Employees:

For certain long-service employees hired prior to April 23, 1970, their benefit is the greater of (a) and their Final Base pay, multiplied by their Period of Service/60, less the Primary Social Security Benefit commencing at age 65, multiplied by their Period of Service/80. A Social Security Supplement equal to the Primary Social Security Benefit commencing at age 65, multiplied by their Period of Service/80, is payable up until age 65. Also, certain long-service former employees hired prior to April 23, 1970, were eligible for enhanced retirement benefits.

(e) Former BAC Plan Participants:

- (i) Members Other Than Former Employees of the Northwestern Mortgage Corporation:
  - (a) 1.1% multiplied by Final Average Pay multiplied by Years of Credit, plus
  - (b) 0.65% multiplied by Final Average Pay in excess of covered compensation multiplied by Years of Credit not greater than 35.

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- (ii) Former Northwestern Mortgage Corporation Employees: For the former Northwestern Mortgage Corporation Employees who were participants in the Pension Plan of Northwestern Financial Corporation (NFC Plan), their benefit under the plan is their accrued benefit under the NFC Plan as of December 31, 1985 plus their benefit under (i) based on Years of Credit since December 1, 1985.
- (iii) (iii) Employees of the Data Center or Barclays Group Inc. (USA) (formerly Barclays Capital): Members who are employees of the Data Center or of Barclays Group Inc. (USA) accrue benefits under the formula in the Barclays Pension Plan prospectively from their date of transfer to the Data Center or Barclays Group Inc. (USA), respectively.

Effective September 30, 2012, the plan was amended to cease benefit accruals.

## Early Retirement Benefit

- Eligibility Must have attained age 55 and completed a Period of Service of 10 years (5 years for former Barcal Plan participants).
- Benefit
  - (a) Members other than former BAC or Barcal Plans participants:

The Member's Accrued Benefit. Full retirement pension commences at Normal Retirement Date. Reduced pension may commence on the first day of any month coincident with or next following early retirement.

The reductions are as follows: 4% reduction for each year before age 65 if member retires from active status between ages 55 and 60. 3% reduction for each year before age 65 if member retires from active status between 60 and 65. No reduction if member retires from active status after attainment of age 55 and completion of a Period of Service of 25 years. If member retires from active status after attainment of age 55 and completion of a Period of Service of 20 years, 2% reduction for each year that Period of Service is less than 25 years. If member is subject to a job elimination on or after attainment of age 55 (or his age plus Period of Service is 70 or more) and is credited with a Period of Service of at least fifteen years, 2% reduction for each year that Period of Service is less than 25 years.

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(b) Former BAC Plan participants:

The Member's Accrued Benefit. Full retirement pension commences at Normal Retirement Date. Reduced pension may commence on the first day of any month coincident with or next following early retirement. The reductions are in accordance with a table of factors in the Restated Retirement Plan of BarclaysAmericanCorporation plan document.

(c) Former Barcal Plan participants:

The Member's Accrued Benefit. Full retirement pension commences at Normal Retirement Date. Reduced pension may commence on the first day of any month coincident with or next following early retirement. The reductions are in accordance with a table of factors in the Restated Retirement Plan of Barclays Bank of California plan document.

## Disability benefit

- Eligibility Must qualify for disability benefits under the Federal Social Security Act and either the Company's Long Term Disability Plan or an applicable state workmen's compensation program.
- Benefit The Member's Benefit based on Final Average Pay and Years of Credit at date of disability, plus number of years to age 65 as if he remained in employment to his Normal Retirement Date. Pension commences on Member's Normal Retirement Date.

## Vested benefits upon termination of service

- Vesting Must have completed a Period of Service of 5 years to be eligible for a deferred pension. If these conditions are not met, no benefit is payable, except that former participants in the First Westchester National Bank pension plan are entitled to a return of contributions.
- Benefit The Member's Accrued Benefit. Full retirement pension commences at Normal Retirement Date. Reduced pension may commence on the first day of any month after age 55 if 10 (5 for former Barcal Plan participants) Year Period of Service was completed.

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## Surviving spouse annuity

- Pre-retirement
  - (a) Eligibility: at date of death, Member must have been eligible for Deferred Vested, Early or Normal Retirement.
  - (b) Benefit: 50% of the benefit the member would have received if he had retired under Early Retirement on his date of death with a post-retirement spouse's annuity in effect.
  - (c) Payment: Benefit commences on the date the Member could have first been eligible to receive benefits and continues for the lifetime of the Surviving Spouse
- Post-retirement
  - (a) Eligibility Requirements – Surviving Spouse must have been married to the Member at the date the Member's payments commenced and the Member did not reject this benefit.
  - (b) Annual Benefit – 50% of the Member's Normal, Late or Early Retirement benefit above, which may have been reduced at the time of this retirement to reflect this benefit.
  - (c) Payment – commences on the regular payment date following the death of the Member and continues for the lifetime of the Surviving Spouse.

## Assumed Cost-of-Living

Annual COL adjustments are provided for retired Members and Beneficiaries after commencement of monthly payments. Benefits are increased as of January 1 of the second calendar year following the calendar year in which retirement or entitlement occurred, and annually each January, thereafter, by the lesser of 3% or one-half the amount of increase in the Consumer Price Index (expressed as a percentage). No COL adjustment is made to terminated vested benefits until benefit payments actually commence. Automatic COL adjustments apply only to benefits accrued through December 31, 1990 and do not apply to former BAC or Barcal Plans participants; however, automatic COL adjustments do apply to additional benefits accrued for certain long-service employees.

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## Optional Forms of Retirement Income in Lieu of Normal Form

- (a) Contingent Annuitant Option – a member may elect to receive a reduced benefit during his lifetime with 100%, 75% or 50% of such benefit payable thereafter to a beneficiary. The 50% Contingent Annuitant Option is unreduced for Early, Normal, and Late Retirement Benefits payable to spouses.
- (b) Commuted Benefit – a member may elect to commute a portion of his pension up to a maximum of 25% for a cash payment based on an actuarial equivalent value. Commutation option is only available for benefits accrued through December 31, 1990 and do not apply to former BAC or Barcal Plan participants; however, commutation option is available for additional benefits accrued for certain long-service employees.
- (c) Other optional forms of payment available on reduced basis for former BAC and BARCAL participants.
- (d) Lump-sum form of payment option available for active participants who terminate on or after April 1, 2012. The lump sum is the actuarial equivalent of the accrued benefit as of normal retirement date. Retirement eligible participants may elect a lump sum upon termination or any subsequent date on or after age 55 and prior to age 65. Non retirement eligible participants at termination of employment may elect a lump sum upon termination.

## Special Rule of 70 Benefit

- Eligibility Member is subject to a job elimination prior to eligibility for early retirement (“retirement eligible”) and age plus Period of Service equals or exceeds 70.
- Benefit The Member is treated as “retirement eligible,” but benefits start no earlier than age 55.

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<b>Plan Sponsor EIN</b>	<b>13-4942190</b>
<b>ERISA Plan #</b>	<b>001</b>
<b>Plan Year Ending</b>	<b>12/31/2024</b>

**The required attachment marked with an "X" in the Attachment column is included within the Accountant's Opinion attachment to Sch. H, Part III, Line 3, which consists of the entire audit report issued by the plan's Independent Qualified Public Accountant (IQPA).**

<b>Form/Schedule</b>	<b>Line #</b>	<b>Description</b>	<b>Attachment</b>
5500 Sch. H	Line 3	Financial statements used in formulating the IQPA's opinion	X
5500 Sch. H	Line 4a	Schedule of Delinquent Participant Contributions	
5500 Sch. H	Line 4i	Schedule of Assets (Held at End of Year)	X
5500 Sch. H	Line 4i	Schedule of Assets (Acquired and Disposed of Within Year)	X
5500 Sch. H	Line 4j	Schedule of Reportable Transactions	X

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## Schedule SB, Line 32 Schedule of Amortization Bases as of January 1, 2024

Type of Base	Date Established	Initial Amount	Remaining Amortization Period (Years)	Outstanding Balance	Amortization Payment
Shortfall	01/01/2024	(4,027,884)	15.00000	(4,027,884)	(366,458)
Shortfall	01/01/2023	76,098,983	14.00000	73,019,643	6,969,199
Shortfall	01/01/2022	(23,690,372)	13.00000	(21,758,090)	(2,189,262)
Shortfall	01/01/2021	34,310,804	12.00000	29,987,220	3,199,193
Total				77,220,889	7,612,672

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## Schedule SB, Line 24 Change in Actuarial Assumptions

The Consumer Price Index was changed from 3.05% to 2.70%.

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