

<p><b>Form 5500</b></p> <p>Department of the Treasury Internal Revenue Service</p> <hr/> <p>Department of Labor Employee Benefits Security Administration</p> <hr/> <p>Pension Benefit Guaranty Corporation</p>	<p><b>Annual Return/Report of Employee Benefit Plan</b></p> <p>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>▶ <b>Complete all entries in accordance with the instructions to the Form 5500.</b></p>	<p>OMB Nos. 1210-0110 1210-0089</p> <hr/> <p style="font-size: 24pt; font-weight: bold;">2024</p> <hr/> <p><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>ENBRIDGE EMPLOYEE SERVICES, INC. EMPLOYEES' PENSION PLAN</u></p>	<p><b>1b</b> Three-digit plan number (PN) ▶ <u>002</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>ENBRIDGE EMPLOYEE SERVICES, INC.</u></p> <p><u>915 N. ELDRIDGE PARKWAY</u> <u>SUITE 1100</u> <u>HOUSTON, TX 77079</u></p>	<p><b>1c</b> Effective date of plan <u>08/01/1950</u></p> <p><b>2b</b> Employer Identification Number (EIN) <u>76-0697621</u></p> <p><b>2c</b> Plan Sponsor's telephone number <u>713-627-5400</u></p> <p><b>2d</b> Business code (see instructions) <u>561300</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	TONYA BENNETT
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
<b>SIGN HERE</b>	Filed with authorized/valid electronic signature.	10/14/2025	TYLER BRADY
	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 checked="" type="checkbox"/> Same as Plan Sponsor	<b>3b</b> Administrator's EIN
	<b>3c</b> Administrator's telephone number

<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>	7685
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<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>a(1)</b> Total number of active participants at the beginning of the plan year ..... <b>a(2)</b> Total number of active participants at the end of the plan year ..... <b>b</b> Retired or separated participants receiving benefits..... <b>c</b> Other retired or separated participants entitled to future benefits ..... <b>d</b> Subtotal. Add lines <b>6a(2)</b> , <b>6b</b> , and <b>6c</b> ..... <b>e</b> Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. .... <b>f</b> Total. Add lines <b>6d</b> and <b>6e</b> ..... <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>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>h</b> Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	<b>6a(1)</b>	3603
	<b>6a(2)</b>	5354
	<b>6b</b>	1580
	<b>6c</b>	1516
	<b>6d</b>	8450
	<b>6e</b>	952
	<b>6f</b>	9402
	<b>6g(1)</b>	
<b>6g(2)</b>		
<b>6h</b>		44

<b>7</b> Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item) .....	<b>7</b>	
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**8a** If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:  
1A 1C 1E 3H

**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) (1) <input type="checkbox"/> Insurance (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts (3) <input checked="" type="checkbox"/> Trust (4) <input type="checkbox"/> General assets of the sponsor	<b>9b</b> Plan benefit arrangement (check all that apply) (1) <input type="checkbox"/> Insurance (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts (3) <input checked="" type="checkbox"/> Trust (4) <input type="checkbox"/> General assets of the sponsor
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**10** Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

**a Pension Schedules**

(1)  **R** (Retirement Plan Information)

(2)  **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary

(3)  **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary

(4)  **DCG** (Individual Plan Information) – Number Attached \_\_\_\_\_

(5)  **MEP** (Multiple-Employer Retirement Plan Information)

**b General Schedules**

(1)  **H** (Financial Information)

(2)  **I** (Financial Information – Small Plan)

(3)  **A** (Insurance Information) – Number Attached 0

(4)  **C** (Service Provider Information)

(5)  **D** (DFE/Participating Plan Information)

(6)  **G** (Financial Transaction Schedules)

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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>ENBRIDGE EMPLOYEE SERVICES, INC. EMPLOYEES' PENSION PLAN</u>	<b>B</b> Three-digit plan number (PN) ▶	<u>002</u>
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF <u>ENBRIDGE EMPLOYEE SERVICES, INC.</u>	<b>D</b> Employer Identification Number (EIN) <u>76-0697621</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>817260676</u>
	<b>b</b> Actuarial value .....	<b>2b</b>	<u>830292681</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>2612</u>	<u>272545163</u>
	<b>b</b> For terminated vested participants .....	<u>1527</u>	<u>145619598</u>
	<b>c</b> For active participants .....	<u>3603</u>	<u>261853895</u>
	<b>d</b> Total .....	<u>7742</u>	<u>680018656</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>5.11 %</u>
<b>6</b>	Target normal cost		
	<b>a</b> Present value of current plan year accruals .....	<b>6a</b>	<u>23230268</u>
	<b>b</b> Expected plan-related expenses .....	<b>6b</b>	<u>6118559</u>
	<b>c</b> Target normal cost .....	<b>6c</b>	<u>29348827</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>09/10/2025</u> Date
	<u>KEVIN BILLS, FSA, EA</u> Type or print name of actuary	<u>23-07029</u> Most recent enrollment number
	<u>MERCER</u> Firm name	<u>713-276-2100</u> Telephone number (including area code)
	<u>500 DALLAS STREET, SUITE 1400 HOUSTON, TX 77002-4800</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	154795632
<b>8</b>	Portion elected for use to offset prior year's funding requirement (line 35 from prior year) .....	0	3877281
<b>9</b>	Amount remaining (line 7 minus line 8) .....	0	150918351
<b>10</b>	Interest on line 9 using prior year's actual return of <u>10.28</u> % .....	0	15514406
<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>5.20</u> % .....		0
	<b>b(2)</b> Interest on line 38b from prior year Schedule SB, using prior year's actual return .....		
	<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 .....		
<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	166432757

<b>Part III Funding Percentages</b>			
<b>14</b>	Funding target attainment percentage .....	<b>14</b>	96.86 %
<b>15</b>	Adjusted funding target attainment percentage .....	<b>15</b>	118.48 %
<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>	103.51 %
<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

<b>19</b>	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
<b>20</b>	Quarterly contributions and liquidity shortfalls:	
	<b>a</b> Did the plan have a "funding shortfall" for the prior year? .....	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	<b>b</b> If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? .....	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<b>c</b> 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		

<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 %	3rd segment: 5.59 %	<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 checked="" type="checkbox"/> Yes <input 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> 29348827
<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 .....	21476173		1953912	
<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> 31302739
	Carryover balance	Prefunding balance	Total balance	
<b>35</b> Balances elected for use to offset funding requirement .....	31302739		31302739	
<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>
<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</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>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>ENBRIDGE EMPLOYEE SERVICES, INC. EMPLOYEES' PENSION PLAN</b>	<b>B</b> Three-digit plan number (PN) ▶	<b>002</b>
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 <b>ENBRIDGE EMPLOYEE SERVICES, INC.</b>	<b>D</b> Employer Identification Number (EIN) <b>76-0697621</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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**(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 TOWER 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?
18 28 50 72 99	NONE	1196000	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)

GLOBAL INFRASTRUCTURE MANAGEMENT

20-5504170

(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	NONE	905000	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)

OAKTREE CAPITAL MANAGEMENT, LP

26-0189082

(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	NONE	905000	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"/>

**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)

BROOKFIELD STRATEGIC REAL ESTATE

250 VESEY STREET  
15TH FLOOR  
NEW YORK, NY 10281-1023

(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	NONE	641000	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)

TENEX CAPITAL MANAGEMENT LP

27-1629147

(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	NONE	488000	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

94-3127830

(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?
70	NONE	380000	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"/>

**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)

KPS CAPITAL PARTNERS, LP

13-3548908

(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	NONE	357000	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)

MERCER US INC.

13-2834414

(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 12 14 16 50 70	NONE	345000	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)

BRIGHTON PARK CAPITAL

330 RAILROAD AVE,  
SUITE 200  
GREENWICH, CT 06830

(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	NONE	331000	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"/>

**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)

CAMBRIDGE ASSOCIATES

125 HIGH STREET  
BOSTON, MA 02110-2122

(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 70	NONE	259000	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)

THE BANK OF NEW YORK MELLON

25-6078093

(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?
18 28 50 72 99	NONE	205000	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)

WARREN EQUITY PARTNERS, LLC

1030 2ND STREET  
SUITE 201  
JACKSONVILLE BEACH, FL 32250

(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?
18 28 50 72 99	NONE	197000	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"/>

**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)

CORE INDUSTRIAL PARTNERS

150 N. RIVERSIDE PLAZA  
SUITE 2050  
CHICAGO, IL 60606

(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	NONE	158000	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)

BRANDES INVESTMENT PARTNERS,L.P.

36-7202056

(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	NONE	143000	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)

CONNOR, CLARK & LUNN INVESTMENT

98-1299598

(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	NONE	129000	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"/>

**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)

LUMINATE CAPITAL MANAGEMENT, LLC

47-1175357

(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	NONE	124000	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)

CENTANA GROWTH PARTNERS

540 COWPER STREET  
SUITE 200  
PALO ALTO, CA 34301

(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	NONE	113000	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)

LEVEL EQUITY

140 EAST 45TH STREET  
42ND FLOOR  
NEW YORK, NY 10017

(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	NONE	77000	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"/>

**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)

HILLSDALE INVESTMENT MANAGEMENT INC

1 FIRST CANADIAN PLACE 100 KING ST WEST ST 5900, BOX 477  
TORONTO, ONTARIO M5X 1E4 CA

<b>(b)</b> Service Code(s)	<b>(c)</b> Relationship to employer, employee organization, or person known to be a party-in-interest	<b>(d)</b> Enter direct compensation paid by the plan. If none, enter -0-.	<b>(e)</b> Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	<b>(f)</b> Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	<b>(g)</b> Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	<b>(h)</b> Did the service provider give you a formula instead of an amount or estimated amount?
28	NONE	75000	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)

GREAT HILL PARTNERS, LP.

04-3436577

<b>(b)</b> Service Code(s)	<b>(c)</b> Relationship to employer, employee organization, or person known to be a party-in-interest	<b>(d)</b> Enter direct compensation paid by the plan. If none, enter -0-.	<b>(e)</b> Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	<b>(f)</b> Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	<b>(g)</b> Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	<b>(h)</b> Did the service provider give you a formula instead of an amount or estimated amount?
28	NONE	42000	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)

PEAK ROCK CAPITAL LLC

45-5458021

<b>(b)</b> Service Code(s)	<b>(c)</b> Relationship to employer, employee organization, or person known to be a party-in-interest	<b>(d)</b> Enter direct compensation paid by the plan. If none, enter -0-.	<b>(e)</b> Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	<b>(f)</b> Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	<b>(g)</b> Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	<b>(h)</b> Did the service provider give you a formula instead of an amount or estimated amount?
28	NONE	26000	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"/>

**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)

EVESTMENT ALLIANCE, LLC

58-2540972

(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?
70	NONE	14000	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?
70	NONE	10000	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)

PREQIN, INC.

26-3820466

(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?
70	NONE	10000	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"/>

**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)

PARTHENON CAPITAL

399 BOYLSTON STREET  
13TH FLOOR  
BOSTON, MA 02116

(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	NONE	8000	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)

HAYNES AND BOONE

75-1312888

(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	8000	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)

BCA RESEARCH INC

1002 SHERBROOKE ST. W SUITE 1600  
MONTREAL, QUEBEC H3A 3L6 CA

(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	NONE	5000	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: KRISTY THORNTON	<b>b</b> EIN: 13-2834414
<b>c</b> Position: ACTUARY	
<b>d</b> Address: 4400 COMERICA BANK TOWER 1717 MAIN STREET DALLAS, TX 75201	<b>e</b> Telephone: 214-220-3500

Explanation: KRISTY THORNTON IS NO LONGER EMPLOYED AT MERCER.

<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>  <small>Department of the Treasury Internal Revenue Service</small>  <small>Department of Labor Employee Benefits Security Administration</small>	<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>ENBRIDGE EMPLOYEE SERVICES, INC. EMPLOYEES' PENSION PLAN</u>	<b>B</b> Three-digit plan number (PN)	<u>002</u>
<b>C</b> Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>ENBRIDGE EMPLOYEE SERVICES, INC.</u>	<b>D</b> Employer Identification Number (EIN) <u>76-0697621</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>GQG PARTNERS GLOBAL EQUITY CIT FUND</u>		
<b>b</b> Name of sponsor of entity listed in (a):	<u>RELIANCE TRUST COMPANY</u>		
<b>c</b> EIN-PN <u>82-6251411-010</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>55866000</u>
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE:	<u>BLACKROCK MSCI WORLD INDEX FUND</u>		
<b>b</b> Name of sponsor of entity listed in (a):	<u>BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.</u>		
<b>c</b> EIN-PN <u>26-3689229-001</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>138681000</u>
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE:	<u>LONG TERM GOVERNMENT BOND INDEX FUN</u>		
<b>b</b> Name of sponsor of entity listed in (a):	<u>BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.</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>66764000</u>
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE:	<u>MSCI EMERGING MARKETS FREE</u>		
<b>b</b> Name of sponsor of entity listed in (a):	<u>BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.</u>		
<b>c</b> EIN-PN <u>33-1030441-001</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>15795000</u>
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE:	<u>BLACKROCK MSCI CAN SMALL CAP EQUITY</u>		
<b>b</b> Name of sponsor of entity listed in (a):	<u>BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.</u>		
<b>c</b> EIN-PN <u>33-6379493-001</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>723000</u>
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE:	<u>BLACKROCK MSCI EAFE SMALL CAP EQUIT</u>		
<b>b</b> Name of sponsor of entity listed in (a):	<u>BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.</u>		
<b>c</b> EIN-PN <u>26-0719768-001</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>6332000</u>
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE:	<u>BLACKROCK MSCI USA SMALL CAP EQUITY</u>		
<b>b</b> Name of sponsor of entity listed in (a):	<u>BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.</u>		
<b>c</b> EIN-PN <u>46-4180573-001</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>11004000</u>

**a** Name of MTIA, CCT, PSA, or 103-12 IE: **BRANDES GLOBAL SMALL CAP PORTFOLIO**

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

<b>c</b> EIN-PN <b>36-7202056-001</b>	<b>d</b> Entity code <b>C</b>	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	<b>25025000</b>
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**a** Name of MTIA, CCT, PSA, or 103-12 IE: **LONG TERM CREDIT BOND INDEX FUND**

**b** Name of sponsor of entity listed in (a): **BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.**

<b>c</b> EIN-PN <b>94-3118550-001</b>	<b>d</b> Entity code <b>C</b>	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	<b>201888000</b>
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**a** Name of MTIA, CCT, PSA, or 103-12 IE: **WORLD EX-US ALPHA TILTS FUND**

**b** Name of sponsor of entity listed in (a): **BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.**

<b>c</b> EIN-PN <b>03-0382077-001</b>	<b>d</b> Entity code <b>C</b>	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	<b>26203000</b>
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**a** Name of MTIA, CCT, PSA, or 103-12 IE: **CC&L Q EMERGING MARKETS EQUITY FUND**

**b** Name of sponsor of entity listed in (a): **CONNOR, CLARK & LUNN INVESTMENT MANAGEMENT LTD.**

<b>c</b> EIN-PN <b>98-1299598-001</b>	<b>d</b> Entity code <b>C</b>	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	<b>23273000</b>
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**a** Name of MTIA, CCT, PSA, or 103-12 IE: **COMMINGLED PENSION TRUST FUND OF JP**

**b** Name of sponsor of entity listed in (a): **JP MORGAN CHASE BANK, N.A**

<b>c</b> EIN-PN <b>82-0820670-001</b>	<b>d</b> Entity code <b>C</b>	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	<b>0</b>
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**a** Name of MTIA, CCT, PSA, or 103-12 IE: **EB TEMPORARY INVESTMENT FUND 1.147%**

**b** Name of sponsor of entity listed in (a): **THE BANK OF NEW YORK MELLON**

<b>c</b> EIN-PN <b>25-6078093-023</b>	<b>d</b> Entity code <b>C</b>	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	<b>20834000</b>
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**a** Name of MTIA, CCT, PSA, or 103-12 IE: **RUSSELL 1000 ALPHA TILTS FUND**

**b** Name of sponsor of entity listed in (a): **BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.**

<b>c</b> EIN-PN <b>94-3127830-001</b>	<b>d</b> Entity code <b>C</b>	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	<b>75128000</b>
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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>ENBRIDGE EMPLOYEE SERVICES, INC. EMPLOYEES' PENSION PLAN</b>	<b>B</b> Three-digit plan number (PN) <b>002</b>
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 <b>ENBRIDGE EMPLOYEE SERVICES, INC.</b>	<b>D</b> Employer Identification Number (EIN) <b>76-0697621</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>	2016000
		6047000
<b>c</b> General investments:		
<b>(1)</b> Interest-bearing cash (include money market accounts & certificates of deposit) .....	<b>1c(1)</b>	637000
<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>	42141000
<b>(5)</b> Partnership/joint venture interests .....	<b>1c(5)</b>	353097000
<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>	468890000
<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>	8429000
<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>	0
		235000

<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>	875210000	1107145000
<b>Liabilities</b>			
<b>g</b> Benefit claims payable.....	<b>1g</b>		
<b>h</b> Operating payables.....	<b>1h</b>	454000	5671000
<b>i</b> Acquisition indebtedness.....	<b>1i</b>		
<b>j</b> Other liabilities.....	<b>1j</b>		
<b>k</b> Total liabilities (add all amounts in lines 1g through 1j).....	<b>1k</b>	454000	5671000
<b>Net Assets</b>			
<b>l</b> Net assets (subtract line 1k from line 1f).....	<b>1l</b>	874756000	1101474000

**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>		
<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>	6222000	
<b>(G)</b> Total interest. Add lines <b>2b(1)(A)</b> through <b>(F)</b> .....	<b>2b(1)(G)</b>		6222000
<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>		
<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>		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts .....	<b>2b(6)</b>		
(7) Net investment gain (loss) from pooled separate accounts .....	<b>2b(7)</b>		
(8) Net investment gain (loss) from master trust investment accounts .....	<b>2b(8)</b>		
(9) Net investment gain (loss) from 103-12 investment entities .....	<b>2b(9)</b>		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds) .....	<b>2b(10)</b>		
<b>c</b> Other income .....	<b>2c</b>		74720000
<b>d</b> Total income. Add all <b>income</b> amounts in column (b) and enter total .....	<b>2d</b>		80942000

**Expenses**

<b>e</b> Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers .....	<b>2e(1)</b>	67524000	
(2) To insurance carriers for the provision of benefits .....	<b>2e(2)</b>		
(3) Other .....	<b>2e(3)</b>		
(4) Total benefit payments. Add lines <b>2e(1)</b> through <b>(3)</b> .....	<b>2e(4)</b>		67524000
<b>f</b> Corrective distributions (see instructions) .....	<b>2f</b>		
<b>g</b> Certain deemed distributions of participant loans (see instructions) .....	<b>2g</b>		
<b>h</b> Interest expense .....	<b>2h</b>		
<b>i</b> Administrative expenses:			
(1) Salaries and allowances .....	<b>2i(1)</b>		
(2) Contract administrator fees .....	<b>2i(2)</b>		
(3) Recordkeeping fees .....	<b>2i(3)</b>	1196000	
(4) IQPA audit fees .....	<b>2i(4)</b>	2000	
(5) Investment advisory and investment management fees .....	<b>2i(5)</b>	5342000	
(6) Bank or trust company trustee/custodial fees .....	<b>2i(6)</b>	172000	
(7) Actuarial fees .....	<b>2i(7)</b>	345000	
(8) Legal fees .....	<b>2i(8)</b>	8000	
(9) Valuation/appraisal fees .....	<b>2i(9)</b>		
(10) Other trustee fees and expenses .....	<b>2i(10)</b>		
(11) Other expenses .....	<b>2i(11)</b>	996000	
(12) Total administrative expenses. Add lines <b>2i(1)</b> through <b>(11)</b> .....	<b>2i(12)</b>		8061000
<b>j</b> Total expenses. Add all <b>expense</b> amounts in column (b) and enter total .....	<b>2j</b>		75585000

**Net Income and Reconciliation**

<b>k</b> Net income (loss). Subtract line <b>2j</b> from line <b>2d</b> .....	<b>2k</b>		5357000
<b>l</b> Transfers of assets:			
(1) To this plan .....	<b>2l(1)</b>		221361000
(2) From this plan .....	<b>2l(2)</b>		

**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: **MCCONNELL & JONES LLP**

(2) EIN: **76-0488832**

**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		500000
<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.)		X	
<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.)

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

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

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year 560770.

<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>ENBRIDGE EMPLOYEE SERVICES, INC. EMPLOYEES' PENSION PLAN</u>	<b>B</b> Three-digit plan number (PN) ▶	<u>002</u>
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 <u>ENBRIDGE EMPLOYEE SERVICES, INC.</u>	<b>D</b> Employer Identification Number (EIN) <u>76-0697621</u>	

<b>Part I</b>	<b>Distributions</b>
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**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): 25-1926855

**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		293
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<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.)
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**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>
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**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.
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**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: 40.3 % Private Equity: \_\_\_\_\_ % Investment-Grade Debt and Interest Rate Hedging Assets: 24.8 %  
 High-Yield Debt: 0.0 % Real Assets: 8.8 % Cash or Cash Equivalents: \_\_\_\_\_ % Other: 26.1 %

**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 \_\_\_\_\_.

**ENBRIDGE EMPLOYEE SERVICES, INC. EMPLOYEES' PENSION PLAN**

**INDEPENDENT AUDITOR'S REPORT, FINANCIAL STATEMENTS,  
AND SUPPLEMENTARY INFORMATION**

**December 31, 2024 and 2023**



## INDEPENDENT AUDITOR'S REPORT

To the Participants and Plan Administrator of the  
Enbridge Employee Services, Inc. Employees' Pension Plan

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

We have performed audits of the financial statements of Enbridge Employee Services, Inc. Employees' 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, and the related statements of changes in net assets available for benefits for the years then ended, the statement of accumulated plan benefits as of January 1, 2024, and the related statement of changes in accumulated plan benefits for the year then ended, and the related notes to the financial statements (collectively, the financial statements).

Plan management (Management), having determined it is permissible in the circumstances, has elected to have the audits of the 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 (DOL) 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 DOL's Rules and Regulations for Reporting and Disclosure under ERISA (qualified institution).

Management has obtained certifications from a qualified institution as of December 31, 2024 and 2023, and for the years then ended, stating that the certified investment information, as described in Note 7 to the financial statements, is complete and accurate.

### ***Opinion on the Financial Statements***

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

- the amounts and disclosures in the accompanying financial statements, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America (US GAAP).
- 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 (US GAAS). Our responsibilities under those standards are further described in the



*Auditor's Responsibilities for the Audit of the Financial Statements* section of our report. We are required to be independent of the Plan and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

### ***Responsibilities of Management for the Financial Statements***

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

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

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

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

Except as described in the *Scope and Nature of the ERISA Section 103(a)(3)(C) Audit* section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with US 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 US 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 internal controls of the Plan. 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 ability of the Plan 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 certifications, 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 US GAAP.

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 US GAAP.

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

### ***Other Matter – Supplemental Schedules Required by ERISA***

The supplemental information in the accompanying Schedule of Assets (Held at End of Year) as of December 31, 2024, and the Schedule of Reportable Transactions for the year then ended, is presented for purposes of additional analysis and is not a required part of the financial statements but is supplementary information required by the DOL'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 auditing procedures applied in the audits 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 US GAAS. For information included in the supplemental schedules that is 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 DOL'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 is agreed to or is derived from the certified investment information,



# McConnell Jones

are presented, in all material respects, in conformity with the DOL'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).

*McConnell & Jones LLP*

Houston, Texas  
September 26, 2025

**ENBRIDGE EMPLOYEE SERVICES, INC. EMPLOYEES' PENSION PLAN  
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS**

December 31,	2024	2023
<i>(thousands of dollars)</i>		
<b>Assets</b>		
Investments, at fair value <i>(Note 4)</i>	1,030,774	819,039
Investment related receivables	5,660	1,891
Net assets held in 401(h) account <i>(Note 6)</i>	70,390	54,279
<b>Total assets</b>	<b>1,106,824</b>	<b>875,209</b>
<b>Liabilities</b>		
Investment related payables	4,691	-
Accrued administration expenses	659	453
Net assets held in 401(h) account <i>(Note 6)</i>	70,390	54,279
<b>Total liabilities</b>	<b>75,740</b>	<b>54,732</b>
<b>Net assets available for benefits</b>	<b>1,031,084</b>	<b>820,477</b>

*The accompanying notes are an integral part of these financial statements.*

**ENBRIDGE EMPLOYEE SERVICES, INC. EMPLOYEES' PENSION PLAN  
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS**

Year ended December 31, <i>(thousands of dollars)</i>	2024	2023
<b>Additions</b>		
Investment income	5,827	3,986
Net appreciation in fair value of investments	69,987	78,160
Asset transfers from acquisition <i>(Note 1)</i>	210,014	-
<b>Total additions</b>	<b>285,828</b>	82,146
<b>Deductions</b>		
Benefits paid to participants	67,524	51,926
Administrative expenses	7,697	6,142
<b>Total deductions</b>	<b>75,221</b>	58,068
Net increase in net assets available for benefits	210,607	24,078
Net assets available for benefits, beginning of year	820,477	796,399
<b>Net assets available for benefits, end of year</b>	<b>1,031,084</b>	820,477

*The accompanying notes are an integral part of these financial statements.*

**ENBRIDGE EMPLOYEE SERVICES, INC. EMPLOYEES' PENSION PLAN  
STATEMENT OF ACCUMULATED PLAN BENEFITS**

January 1,	2024
<i>(thousands of dollars)</i>	
<b>Vested benefits</b>	
Participants currently receiving payments	224,409
Other participants	354,650
	579,059
<b>Non-vested benefits</b>	3,494
<b>Accumulated plan benefits</b>	<b>582,553</b>

*The accompanying notes are an integral part of these financial statements.*

**ENBRIDGE EMPLOYEE SERVICES, INC. EMPLOYEES' PENSION PLAN  
STATEMENT OF CHANGES IN ACCUMULATED PLAN BENEFITS**

Year ended January 1,	2024
<i>(thousands of dollars)</i>	
<b>Net increase in accumulated Plan benefits during the year attributable to</b>	
Increase in interest due to decrease in discount period	40,613
Benefits accumulated and (gains)/losses	18,770
Benefits paid to participants	(51,926)
Change in actuarial assumptions	(1,856)
Net increase in accumulated plan benefits	5,601
Net accumulated plan benefits, beginning of year	576,952
Net accumulated plan benefits, end of year	582,553

*The accompanying notes are an integral part of these financial statements.*

# ENBRIDGE EMPLOYEE SERVICES, INC. EMPLOYEES' PENSION PLAN NOTES TO THE FINANCIAL STATEMENTS

## 1. DESCRIPTION OF PLAN

The Enbridge Employee Services, Inc. Employees' Pension Plan (the Plan) is a defined benefit pension plan. For complete information, reference should be made to the Plan documents.

The Plan is sponsored and administrated by Enbridge Employee Services, Inc. (the Company), a wholly owned subsidiary of Enbridge Inc. (Enbridge). The Plan is governed by Enbridge's Pension Committee and is subject to the rules and regulations of the United States Department of Labor's Employee Retirement Income Security Act of 1974, as amended (ERISA).

### **Transfer from Dominion Energy Entities**

Pursuant to three separate purchase and sale agreements (PSA) between Enbridge and Dominion Energy, Inc. (Dominion), Enbridge acquired three utilities companies in 2024: The East Ohio Gas Company (EOG), Questar Gas Company (Questar), including its affiliate, Wexpro Gas Company (Wexpro), and Public Service Company of North Carolina, Incorporated (PSNC). The closing dates of the acquisitions were March 6, 2024 for EOG, May 31, 2024 for Questar and Wexpro and September 30, 2024 for PSNC. The employees of EOG, Wexpro, Questar and PSNC (collectively, "US Utilities"), including unionized employees, transferred to Enbridge on their respective closing dates and had previously participated in qualified pension plans sponsored by Dominion.

On March 6, 2024, the Plan was amended such that it calculates pension benefits for U.S. Utilities employees on an individual basis to "mirror" the benefits they would have received under the applicable Dominion pension plan, excluding G555 unionized employees. The Plan was also amended to allow for the transfer of assets and liabilities from the Dominion pension plans associated with the transferred U.S. Utilities employees, excluding G555 unionized employees, from EOG, Questar and Wexpro. In 2024, Dominion transferred Plan assets of \$210 million into the Plan. For employees in PSNC, there was no transfer of pension related assets or liabilities into the Plan.

### **Participation and Purpose**

The purpose of the Plan is to provide post-retirement pension benefits to eligible employees to enhance their long-term financial security.

#### *All Employees Except U.S. Utilities Employees*

All regular employees of the Company, or a 'participating affiliate', hired to fill a full-time or part-time established position, or temporary employees who are laborers and who have reached one year of vesting service, are eligible to participate in the Plan.

#### *U.S. Utilities Employees*

U.S. Utilities employees, excluding G555 unionized employees, are eligible to participate in the Plan if they participated in a Dominion pension plan prior to the applicable transfer dates. U.S. Utilities employees not eligible to participate in the Plan will instead receive Company contributions under the Enbridge Employee Services, Inc. Employees' Savings Plan.

### **Payment of Benefits and Vesting**

#### *All Employees Except U.S. Utilities Employees*

Benefits under the Plan's cash balance benefits provisions are determined using a formula based on remuneration multiplied by a pay credit that is based on years of service and age. Pay credits range from between 4 and 7 percent of pay for remuneration below, and between 8 and 11 percent of pay for remuneration above 75 percent of the Social Security Taxable Wage Base, respectively. Annual interest

## **ENBRIDGE EMPLOYEE SERVICES, INC. EMPLOYEES' PENSION PLAN NOTES TO THE FINANCIAL STATEMENTS**

credits for cash balance benefits are accumulated based on the yield of 30-year U.S. government treasury bonds, subject to a 4 percent minimum and 9 percent maximum yield.

Certain employees hired prior to January 1, 2002 participate in the Plan's grandfathered benefits provisions. The grandfathered benefits are determined using a formula based on the employee's highest consecutive 36 months of base pay during their last ten years of service, with an offset for Social Security benefits. Credited service under the grandfathered benefits provisions was frozen at December 31, 2017. Any benefits related to services rendered after December 31, 2017 accrue under the Plan's cash balance benefits provisions. Normal retirement is at age 65. If a vested participant retires prior to age 65, meets certain service requirements and elects an annuity, they will receive an enhancement to their annuity of between 5 and 25 percent.

Upon retirement, a vested participant with cash balance benefits may elect to receive a lump-sum distribution or an annuity. Upon retirement, a vested participant with grandfathered benefits will receive an annuity for that portion of their benefits. A terminated, vested participant may elect to begin receiving benefits as described in the Plan documents.

Participants are required to have three years of vesting service to be entitled to receive any benefits from the Plan.

### *U.S. Utilities Employees*

The Plan provides for retirement and surviving spouse benefits for U.S. Utilities employees, except for G555 unionized employees. The Plan's pension benefits are calculated using a variety of cash balance and final average pay formulas depending upon the plan of origin and the participant's years of service, and age at retirement. The normal retirement age for the Plan is 65. In addition, the Plan contains a special retirement account (SRA) component that credits 2% of eligible pay each month. Certain existing participants voluntarily elected to cease receiving compensation credits under the Plan's cash balance formula and instead receive Company contributions under the Enbridge Employee Services, Inc. Employees' Savings Plan. The Plan permits early retirement beginning at age 55. If the participant is married at his or her benefit commencement date, the benefit can be paid in the form of a 50% joint and survivor annuity. Otherwise, the benefit is paid in the form of a single life annuity. Married participants may elect to receive their pension benefits in the form of a single life annuity, if their spouse consents to such an election, or in the form of a 75% or 100% joint and survivor annuity. The SRA component of the benefit may be paid in the form of a lump sum or as part of the monthly annuity. A terminated, vested participant may elect to begin receiving benefits as described in the Plan documents.

Participants are required to have three years of vesting service to be entitled to receive any benefits from the Plan.

### **Contributions**

Funding for benefits under the Plan is provided by contributions from the Company and participating affiliates to the Plan trust maintained by The Bank of New York Mellon (the Trustee). Participants do not contribute to the Plan.

Employer contributions are made based upon independent actuarial valuations, as necessary, to provide the Plan with sufficient assets to meet the funding requirements for benefits to be paid to participants upon their retirement or termination of employment. For the years ended December 31, 2024 and 2023, the minimum funding requirements outlined in ERISA regulations were satisfied by the Plan.

# ENBRIDGE EMPLOYEE SERVICES, INC. EMPLOYEES' PENSION PLAN

## NOTES TO THE FINANCIAL STATEMENTS

### **Plan Termination**

Although it has not expressed any intention to do so, the Company has the right under the Plan to terminate the Plan subject to ERISA rules and regulations. In the event the Plan is terminated, the net assets of the Plan will be allocated for payment of benefits to Participants in the order of priority as determined in accordance with the ERISA rules and regulations and the Plan documents.

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

## **2. SIGNIFICANT ACCOUNTING POLICIES**

### **Basis of Presentation**

These financial statements are prepared in accordance with generally accepted accounting principles in the United States of America (US GAAP) and are presented in compliance with ERISA's rules and regulations for reporting and disclosure. Certain schedules required by ERISA regulation 29 CFR 2520.103-10 have been omitted because they are not applicable.

Amounts are stated in United States dollars unless otherwise noted.

### **Use of Estimates**

The preparation of financial statements in conformity with US GAAP requires the use of estimates and assumptions that affect the reported amounts of, and changes in, net assets available for benefits and accumulated Plan benefits. Actual results could differ from those estimates.

### **Risks and Uncertainties**

The Plan's investments are comprised of various financial instruments that are exposed to various risks, such as interest rate risk, credit risk and overall market volatility. Due to the level of risk associated with certain investments, it is reasonably possible that changes in the values of investments will occur in the near term and such changes could materially affect the amounts reported in the financial statements.

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

### **Fair Value Measurement**

The Plan's investments are reported at fair value maximizing the use of observable inputs and minimizing the use of unobservable inputs. Fair value is the exchange price that would be received for an asset or paid to transfer a liability (an exit price) in the principal or most advantageous market for that asset or liability in an orderly transaction between market participants on the measurement date.

The Plan categorizes assets and liabilities measured at fair value into one of three different levels depending on the observability of the inputs employed in the measurement. A financial instrument's level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement:

#### **Level 1**

Fair value is based on unadjusted quoted prices in active markets for identical assets or liabilities.

# ENBRIDGE EMPLOYEE SERVICES, INC. EMPLOYEES' PENSION PLAN

## NOTES TO THE FINANCIAL STATEMENTS

### Level 2

Fair value is based on quoted prices for similar assets and liabilities in active markets, and inputs that are observable for the asset or liability, either directly or indirectly, for substantially the full term of the financial instrument.

### Level 3

Fair value is based on valuation methods using inputs that are less observable, unavailable or where the observable data does not support a significant portion of the financial instrument's fair value. Inputs may be internally developed methodologies that result in a best estimate of the fair value. The use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value at the reporting date.

### Net Asset Value

The Plan's investments in infrastructure, private debt, private equity, and real estate funds are stated at fair value which has been measured at the net asset value (NAV) of the funds as a practical expedient. NAV is determined by the organization sponsoring such funds by dividing the fair value of the fund's net assets by its units outstanding at the valuation date. Investments valued using NAV have been excluded from the fair value hierarchy.

### Investment Income

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recognized on the accrual basis. Investment income earned on investments in bond index funds, public equity funds or infrastructure, private debt, private equity, and real estate funds is recognized when distributions are declared.

Management fees and operating expenses charged to the Plan for investments in bond index funds, public equity funds or infrastructure, private debt, private equity, and real estate funds are either paid from the respective fund balance or deducted from investment income which is earned on a daily basis. Consequently, investment income for these investments is presented net of such management fees and operating expenses.

### Realized Gains and Losses on Sale of Investments

Realized gains and losses on the sale of investments is the difference between net proceeds received and the average cost of the investments sold.

### Administrative Expenses

Administrative expenses of the Plan are paid by the Plan or the Company in accordance with the terms outlined in the Plan documents. Expenses that are paid directly by the Company are excluded from these financial statements.

### 401(h) Account

Participants do not contribute to the 401(h) account. Payment of benefits from the 401(h) account is limited to post-retirement medical expenses reimbursable for benefits provided by the Enbridge Employee Services, Inc. Welfare Benefits Plan, Enbridge Employee Services, Inc. Health Reimbursement Account Plan, Spectra Energy Retiree Medical Plan, and Enbridge Employee Services, Inc. Dominion Energy Retiree Health and Welfare Mirror Plan (collectively, the Health and Welfare Plans). The 401(h) account may not be used to fund the Plan's pension benefits. The obligations of the Health and Welfare Plans are not obligations of the Plan. The Health and Welfare Plans' net assets are reflected in the Health and Welfare Plans' financial statements.

### Exempt Party-In-Interest Transactions

Transactions with the Trustee, record keeper and other service providers qualify as exempt party-in-interest transactions from the prohibited transactions regulations outlined in ERISA. Fees paid by the Plan for investment management services provided by exempt parties-in-interest are netted with investment income.

# ENBRIDGE EMPLOYEE SERVICES, INC. EMPLOYEES' PENSION PLAN NOTES TO THE FINANCIAL STATEMENTS

## Employer Contributions

Employer contributions are recorded and funded as determined by the Plan's actuary, Mercer, based on the traditional unit credit method of funding. Contributions receivable are recorded to the extent that amounts due are pursuant to formal commitments and legal or contractual requirements in existence at the end of the Plan year. The objective under this method is to fund each participant's benefits under the Plan as they would accrue.

## Accumulated Plan Benefits

Accumulated Plan benefits are those future periodic payments, including lump-sum distributions that are attributable, in accordance with the Plan's provisions, to the services that participants have rendered.

Accumulated Plan benefits include benefits expected to be paid to (1) retired or terminated participants or their beneficiaries; (2) beneficiaries of participants who have died; and (3) active participants, or their beneficiaries.

The accumulated Plan benefits for active participants under the Plan's grandfathered benefits provisions are based on their average compensation during the three years preceding the valuation date.

Benefits payable under all circumstances, such as retirement, death and termination of employment, are included to the extent they are deemed attributable to participant service rendered to the valuation date.

The Plan's actuary estimates the actuarial present value of accumulated Plan benefits, which is the amount that results from applying actuarial assumptions to adjust the accumulated Plan benefits earned by the participants to reflect the time value of money (through discounts for interest) and the probability of payment (by means of decrements such as for death, withdrawal or retirement) between the valuation date and the expected date of payment.

The following table summarizes the significant actuarial assumptions used in the calculation of the employer contribution requirements and accumulated Plan benefits:

January 1,	2024	2023
Discount rate	<b>7.55%</b>	7.40%
Mortality	<b>Pri-2012 tables, separate for healthy employees and annuitants, sex distinct with no collar adjustments and separate tables for contingent survivor mortality for current beneficiaries as of valuation date, projected generationally using scale MP-2021</b>	Pri-2012 tables, separate for healthy employees and annuitants, sex distinct with no collar adjustments and separate tables for contingent survivor mortality for current beneficiaries as of valuation date, projected generationally using scale MP-2021

The computations of the actuarial present value of accumulated Plan benefits were made as of January 1, 2024.

The foregoing assumptions are based on the presumption 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 the post-retirement benefit obligations.

# ENBRIDGE EMPLOYEE SERVICES, INC. EMPLOYEES' PENSION PLAN

## NOTES TO THE FINANCIAL STATEMENTS

### 3. FEDERAL INCOME TAX STATUS

The Internal Revenue Service (IRS) has determined and informed the Company by letter dated June 11, 2020 that the Plan is qualified under the provisions of Section 401(a) of the Internal Revenue Code. Although the Plan has been amended since receiving this determination letter, the current design and operation of the Plan is considered by management and legal counsel to be in compliance with the applicable IRS exemption requirements. Accordingly, no provision for income taxes has been included in the Plan's financial statements.

US GAAP requires Plan management to evaluate tax positions taken by the Plan and recognize a tax liability or asset if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. There are no uncertain tax positions taken or expected to be taken that would require recognition of a liability or disclosure in the financial statements. The Plan is not currently under audit by any taxing jurisdictions.

### 4. FAIR VALUE MEASUREMENTS

The following is a description of the valuation methodologies used for financial instruments measured at fair value:

#### **Short-term investments**

Investments in money market funds are valued at quoted market prices. These investments are highly liquid and readily convertible to known amounts of cash.

#### **Bond index and public equity funds**

Investments in bond index and public equity funds are valued based on the fair value of the underlying investments held by the funds, for which fair value is based on unadjusted quoted prices for similar financial instruments on actively traded markets.

#### **Infrastructure, private debt, private equity, and real estate funds**

As a practical expedient, the fair value of infrastructure, private debt, private equity, and real estate funds is determined by multiplying a fund's NAV, as calculated and provided by the organization sponsoring the fund, without adjustment, by the interest held by the Plan on the valuation date.

#### **Receivables and liabilities**

Receivables and payables are measured at cost, which approximates fair value on the basis of their short settlement term.

## ENBRIDGE EMPLOYEE SERVICES, INC. EMPLOYEES' PENSION PLAN NOTES TO THE FINANCIAL STATEMENTS

December 31, <i>(thousands of dollars)</i>	2024				2023			
	Level 1	Level 2	NAV	Total	Level 1	Level 2	NAV	Total
<b>Net investment assets held in the Plan available for benefits</b>								
Investments measured at fair value								
Short-term investments	24,457	-	-	24,457	4,511	-	-	4,511
Fixed income securities								
Government bond index fund	-	62,500	-	62,500	-	36,921	-	36,921
Corporate bond index funds	-	188,994	-	188,994	-	117,445	-	117,445
Equity								
Global pooled funds	-	411,396	-	411,396	-	328,964	-	328,964
	24,457	662,890	-	687,347	4,511	483,330	-	487,841
Investments measured at NAV								
Infrastructure	-	-	104,367	104,367	-	-	101,824	101,824
Private debt	-	-	65,314	65,314	-	-	70,732	70,732
Private equity	-	-	84,197	84,197	-	-	66,924	66,924
Real estate	-	-	89,549	89,549	-	-	91,718	91,718
	-	-	343,427	343,427	-	-	331,198	331,198
	24,457	662,890	343,427	1,030,774	4,511	483,330	331,198	819,039
Investment related receivables	-	5,660	-	5,660	15	1,876	-	1,891
Investment related liabilities	-	(4,691)	-	(4,691)	-	-	-	-
Net investment assets held in the Plan	24,457	663,859	343,427	1,031,743	4,526	485,206	331,198	820,930
Accrued administrative expenses	(659)	-	-	(659)	(453)	-	-	(453)
<b>Net assets held in the Plan available for benefits</b>	23,798	663,859	343,427	1,031,084	4,073	485,206	331,198	820,477
<b>Net investment assets held in 401(h) account available for benefits</b>								
Investments measured at fair value								
Short-term investments	1,668	-	-	1,668	298	-	-	298
Fixed income securities								
Government bond index funds	-	4,265	-	4,265	-	2,441	-	2,441
Corporate bond index funds	-	12,895	-	12,895	-	7,765	-	7,765
Equity								
Global pooled funds	-	28,067	-	28,067	-	21,749	-	21,749
	1,668	45,227	-	46,895	298	31,955	-	32,253
Investments measured at NAV								
Infrastructure	-	-	7,122	7,122	-	-	6,733	6,733
Private debt	-	-	4,455	4,455	-	-	4,676	4,676
Private equity	-	-	5,743	5,743	-	-	4,427	4,427
Real estate	-	-	6,109	6,109	-	-	6,066	6,066
	-	-	23,429	23,429	-	-	21,902	21,902
	1,668	45,227	23,429	70,324	298	31,955	21,902	54,155
Investment related receivables	-	387	-	387	1	124	-	125
Investment related liabilities	-	(321)	-	(321)	-	-	-	-
Net investment assets held in 401(h) account	1,668	45,293	23,429	70,390	299	32,079	21,902	54,280
Accrued administrative expenses	-	-	-	-	(1)	-	-	(1)
<b>Net assets held in the 401(h) account available for benefits</b>	1,668	45,293	23,429	70,390	298	32,079	21,902	54,279

# ENBRIDGE EMPLOYEE SERVICES, INC. EMPLOYEES' PENSION PLAN

## NOTES TO THE FINANCIAL STATEMENTS

### 5. NET ASSET VALUE PER UNIT

The following tables provides details for the Plan's investments in infrastructure, private debt, private equity, and real estate funds, for which fair value is measured and reported based on NAV per unit:

December 31,	Redemption Frequency	Redemption Notice Period	Other Restrictions	Fair Value		Unfunded Commitment	
				2024	2023	2024	2023
<i>(thousands of dollars)</i>							
<b>Investments held in the Plan</b>							
<b>Infrastructure</b>							
Global Infrastructure Partners B, L.P.	None	N/A	None	11	15	-	-
Global Infrastructure Partners II-B Feeder Fund, L.P.	None	N/A	None	961	2,119	430	431
Global Infrastructure Partners III-B Feeder Fund, L.P.	None	N/A	None	5,227	7,836	813	814
Global Infrastructure Partners IV-B Feeder Fund, L.P.	None	N/A	None	18,451	16,254	3,806	3,992
IFM Global Infrastructure (US), L.P.	Daily	90 days	None	56,205	53,324	-	-
Brookfield Super-Core Infrastructure Partners	Quarterly	90 days	None	23,512	22,276	-	-
<b>Private Debt</b>							
IFM USIDF (US) A, L.P.	Quarterly	60 days	None	8,852	13,323	-	-
Mesa West Core Lending Fund, L.P.	Quarterly	30 days	None	21,124	21,286	-	1,380
Mesa West Real Estate Income Fund V, L.P.	Quarterly	30 days	None	7,291	4,479	7,190	10,068
Oaktree Opportunities Fund XI, L.P.	None	N/A	None	28,047	31,644	4,704	4,713
<b>Private Equity</b>							
DW Healthcare Partners V, L.P.	None	N/A	None	7,378	5,166	719	737
KPS Special Situations Fund V	None	N/A	None	4,314	3,972	1,362	2,805
KPS Special Situations Fund VI	None	N/A	None	335	-	2,465	-
Parthenon Investors VI Parallel, L.P.	None	N/A	None	6,819	4,581	1,501	2,129
Brighton Park Capital Fund I, L.P.	None	N/A	None	8,224	7,617	378	266
Brighton Park Capital Fund II, L.P.	None	N/A	None	1,417	459	2,753	3,501
Great Hill Equity Partners VII-Pref PV, L.P.	None	N/A	None	3,476	4,884	135	136
Great Hill Equity Partners VIII-Pref PV, L.P.	None	N/A	None	2,439	918	3,014	4,486
Tenex Capital Partners III, L.P.	None	N/A	None	6,081	5,505	823	1,880
Warren Equity Partners Fund III-A, L.P.	None	N/A	None	10,107	8,988	1,150	1,438
Warren Equity Partners Fund IV-A, L.P.	None	N/A	None	2,972	1,643	1,684	2,564
Centana Growth Partners II, L.P.	None	N/A	None	3,609	2,890	1,120	1,743
Centana Growth Partners III, L.P.	None	N/A	None	(21)	-	2,330	-
Peak Rock Capital Fund III-A, L.P.	None	N/A	None	6,056	3,744	888	2,404
Core Industrial Partners Fund II, Parallel L.P.	None	N/A	None	6,652	6,774	682	1,742
Core Industrial Partners Fund III, Parallel L.P.	None	N/A	None	557	-	2,150	-
Level Equity Opportunities Fund 2021, L.P.	None	N/A	None	2,933	1,878	1,796	2,635
Level Equity Growth Partners V, L.P.	None	N/A	None	3,569	2,316	1,230	2,256
Luminate Capital Partners III-A, LP	None	N/A	None	6,955	5,565	2,005	3,657
Parthenon Investors VII Parallel, L.P.	None	N/A	None	325	24	2,432	2,775
<b>Real Estate</b>							
Brookfield Strategic Real Estate Partners II LP	None	N/A	None	2,901	3,532	1,268	1,420
Brookfield Strategic Real Estate Partners III LP	None	N/A	None	17,403	16,691	3,417	3,197
Cortland Growth & Income, L.P.	Quarterly	90 days	None	20,738	20,995	-	-
USAA Eagle Real Estate Fund	Quarterly	60 days	None	21,311	22,418	-	-
Lubert-Adler Recovery & Enhancement Capital Fund C, L.P.	At Manager's Discretion	At Manager's Discretion	None	10,612	10,510	1,251	1,777
MetLife Core Property Fund, LP	Quarterly	60 days	None	16,584	17,572	-	-
				<b>343,427</b>	<b>331,198</b>	<b>53,496</b>	<b>64,946</b>

# ENBRIDGE EMPLOYEE SERVICES, INC. EMPLOYEES' PENSION PLAN

## NOTES TO THE FINANCIAL STATEMENTS

December 31, (thousands of dollars)	Redemption			Fair Value		Unfunded Commitment	
	Redemption Frequency	Notice Period	Other Restrictions	2024	2023	2024	2023
<b>Investments held in 401(h) account</b>							
<b>Infrastructure</b>							
Global Infrastructure Partners B, L.P.	None	N/A	None	1	1	-	-
Global Infrastructure Partners II-B Feeder Fund, L.P.	None	N/A	None	66	140	29	29
Global Infrastructure Partners III-B Feeder Fund, L.P.	None	N/A	None	357	518	55	54
Global Infrastructure Partners IV-B Feeder Fund, L.P.	None	N/A	None	1,259	1,075	260	264
IFM Global Infrastructure (US), L.P.	Daily	90 days	None	3,835	3,526	-	-
Brookfield Super-Core Infrastructure Partners	Quarterly	90 days	None	1,604	1,473	-	-
<b>Private Debt</b>							
IFM USIDF (US) A, L.P.	Quarterly	60 days	None	604	881	-	-
Mesa West Core Lending Fund, L.P.	Quarterly	30 days	None	1,441	1,407	-	91
Mesa West Real Estate Income Fund V, L.P.	Quarterly	30 days	None	497	296	491	666
Oaktree Opportunities Fund XI, L.P.	None	N/A	None	1,913	2,092	321	312
<b>Private Equity</b>							
DW Healthcare Partners V, L.P.	None	N/A	None	503	342	49	49
KPS Special Situations Fund V	None	N/A	None	294	263	93	185
KPS Special Situations Fund VI	None	N/A	None	23	-	168	-
Parthenon Investors VI Parallel, L.P.	None	N/A	None	465	303	102	141
Brighton Park Capital Fund I, L.P.	None	N/A	None	561	504	26	18
Brighton Park Capital Fund II, L.P.	None	N/A	None	97	30	188	231
Great Hill Equity Partners VII-Pref PV, L.P.	None	N/A	None	237	323	9	9
Great Hill Equity Partners VIII-Pref PV, L.P.	None	N/A	None	166	61	206	297
Tenex Capital Partners III, L.P.	None	N/A	None	415	364	56	124
Warren Equity Partners Fund III-A, L.P.	None	N/A	None	690	594	78	95
Warren Equity Partners Fund IV-A, L.P.	None	N/A	None	203	109	115	170
Centana Growth Partners II, L.P.	None	N/A	None	246	191	76	115
Centana Growth Partners III, L.P.	None	N/A	None	(1)	-	159	-
Peak Rock Capital Fund III-A, L.P.	None	N/A	None	413	248	61	159
Core Industrial Partners Fund II, Parallel L.P.	None	N/A	None	454	448	47	115
Core Industrial Partners Fund III, Parallel L.P.	None	N/A	None	38	-	147	-
Level Equity Opportunities Fund 2021, L.P.	None	N/A	None	200	124	123	174
Level Equity Growth Partners V, L.P.	None	N/A	None	243	153	84	149
Luminate Capital Partners III-A, LP	None	N/A	None	474	368	137	242
Parthenon Investors VII Parallel, L.P.	None	N/A	None	22	2	166	183
<b>Real Estate</b>							
Brookfield Strategic Real Estate Partners II LP	None	N/A	None	198	233	87	94
Brookfield Strategic Real Estate Partners III LP	None	N/A	None	1,187	1,104	233	211
Cortland Growth & Income, L.P.	Quarterly	90 days	None	1,415	1,388	-	-
USAA Eagle Real Estate Fund	Quarterly	60 days	None	1,454	1,482	-	-
Lubert-Adler Recovery & Enhancement Capital Fund C, L.P.	At Manager's Discretion	At Manager's Discretion	None	724	695	85	117
MetLife Core Property Fund, LP	Quarterly	60 days	None	1,131	1,164	-	-
				<b>23,429</b>	<b>21,902</b>	<b>3,651</b>	<b>4,294</b>

**ENBRIDGE EMPLOYEE SERVICES, INC. EMPLOYEES' PENSION PLAN  
NOTES TO THE FINANCIAL STATEMENTS**

**6. NET ASSETS HELD IN 401(H) ACCOUNT**

The 401(h) account assets are held with the Trustee in conjunction with the Plan assets. The components of the net assets available for obligations of the Health and Welfare Plans and the related changes in such net assets, are as follows:

December 31, <i>(thousands of dollars)</i>	2024	2023
<b>Assets</b>		
Investments, at fair value	70,324	54,155
Investment related receivables	387	125
	<b>70,711</b>	<b>54,280</b>
<b>Liabilities</b>		
Investment related payables	321	-
Accrued administrative expenses	-	1
<b>Net assets</b>	<b>70,390</b>	<b>54,279</b>

Year ended December 31, <i>(thousands of dollars)</i>	2024
<b>Additions</b>	
Investment income	395
Net appreciation in fair value of investments	4,733
Asset transfer from acquisition	11,347
<b>Total additions</b>	<b>16,475</b>
<b>Deductions</b>	
Administrative expenses	364
<b>Total deductions</b>	<b>364</b>
Net increase in net assets	16,111
Net assets, beginning of year	54,279
<b>Net assets, end of year</b>	<b>70,390</b>

**7. TRUSTEE CERTIFICATION**

Certain information in the Plan's financial statements and supplemental schedules were derived from information prepared and certified by the Trustee as at December 31, 2024 and 2023 and for the years then ended. As permitted under ERISA regulation 29 CFR 2520.103-8, the Plan's independent auditor did not perform additional procedures for such certified information, other than ensuring consistency to those disclosed in the Plan's financial statements and supplemental schedules.

**ENBRIDGE EMPLOYEE SERVICES, INC. EMPLOYEES' PENSION PLAN  
NOTES TO THE FINANCIAL STATEMENTS**

**8. RECONCILIATION OF FINANCIAL STATEMENTS TO ERISA ANNUAL REPORT FILING UNDER FORM 5500**

The following table reconciles net assets available for benefits per the Statements of Net Assets Available for Benefits to net assets per the Form 5500:

December 31,	2024	2023
<i>(thousands of dollars)</i>		
Net assets available for benefits per the Statements of Net Assets Available for Benefits	<b>1,031,084</b>	820,477
Net assets held in 401(h) account	<b>70,390</b>	54,279
<b>Net assets per Form 5500</b>	<b>1,101,474</b>	<b>874,756</b>

December 31,	2024
<i>(thousands of dollars)</i>	
Net increase in net assets available for benefits per the Statement of Changes in Net Assets Available for Benefits	<b>210,607</b>
Net increase in net assets held in 401(h) account	<b>16,111</b>
<b>Net income per Form 5500</b>	<b>226,718</b>

**9. SUBSEQUENT EVENTS**

In preparing the accompanying financial statements, Plan management has reviewed for inclusion in these financial statements and related notes all known events that have occurred after December 31, 2024 through September 26, 2025, which is the date these financial statements were issued.

**ENBRIDGE EMPLOYEE SERVICES, INC.  
EMPLOYEES' PENSION PLAN  
EIN: 76-0697621 PN:002**

**FORM 5500, SCHEDULE H, LINE 4I -  
SCHEDULE OF ASSETS (HELD AT END OF YEAR)**

a. b. Identity of issue, borrower, lessor, or similar party <i>(thousands of dollars)</i>	c. Description of investment including maturity date, rate of interest, par or maturity value	d. Cost December 31, 2024	e. Current Value December 31, 2024
Long Term Government Bond Index Fund	Government Bond Index Fund	65,989	62,500
Long Term Credit Bond Index Fund	Corporate Bond Index Fund	185,948	188,994
USAA Eagle Real Estate Fund	Real Estate Fund	20,383	21,311
MetLife Core Property Fund, LP	Real Estate Fund	14,394	16,584
EB Temporary Investment Fund, 1.147% 12/31/49	Short-Term Investment	24,457	24,457
Russell 1000 Alpha Tilts Fund	Global Equity Fund	41,001	70,330
MSCI Emerging Markets Free Fund	Global Equity Fund	13,840	14,786
BlackRock MSCI World Index Fund	Global Equity Fund	82,669	129,824
BlackRock MSCI Canada Small Cap Equity Index Fund	Global Equity Fund	633	677
BlackRock MSCI EAFE Small Cap Equity Index Fund	Global Equity Fund	5,896	5,928
BlackRock MSCI USA Small Cap Equity Index Fund	Global Equity Fund	9,160	10,301
World Ex-US Alpha Tilts Fund	Global Equity Fund	17,341	24,529
Morgan Stanley Institutional Fund, Inc. Global Franchise Portfolio Class IS	Global Equity Fund	30,219	31,392
GQG Partners Global Equity Fund CIT Class C	Global Equity Fund	38,326	52,298
Brandes Global Small Cap Portfolio	Global Equity Fund	11,880	23,427
Hillsdale Global Performance Equity Fund	Global Equity Fund	19,114	26,117
Global Infrastructure Partners B, L.P.	Infrastructure Fund	523	11
Global Infrastructure Partners II-B Feeder Fund, L.P.	Infrastructure Fund	1,228	961
IFM Global Infrastructure (US), L.P.	Infrastructure Fund	28,445	56,205
KPS Special Situations Fund V	Private Equity Fund	2,955	4,314
KPS Special Situations Fund VI	Private Equity Fund	342	335
Centana Growth Partners II, L.P.	Private Equity Fund	2,833	3,609
Centana Growth Partners III, L.P.	Private Equity Fund	10	(21)
Parthenon Investors VI Parallel, L.P.	Private Equity Fund	3,938	6,819
Tenex Capital Partners III, L.P.	Private Equity Fund	5,204	6,081
Oaktree Opportunities Fund XI, L.P.	Private Debt Fund	20,322	28,047
Peak Rock Capital Fund III-A, L.P.	Private Equity Fund	3,488	6,056
Brighton Park Capital Fund I, L.P.	Private Equity Fund	4,941	8,224
Global Infrastructure Partners III-B Feeder Fund, L.P.	Infrastructure Fund	3,477	5,227
IFM USIDF (US) A, L.P.	Private Debt Fund	6,693	8,852
Brookfield Super-Core Infrastructure Partners	Infrastructure Fund	15,610	23,512
DW Healthcare Partners V, L.P.	Private Equity Fund	4,474	7,378
Global Infrastructure Partners IV-B Feeder Fund, L.P.	Infrastructure Fund	13,877	18,451
CC&L Q Emerging Markets Equity Fund	Global Equity Fund	17,141	21,787
Lubert-Adler Recovery & Enhancement Capital Fund C, L.P.	Real Estate Fund	11,561	10,612
Warren Equity Partners Fund III-A, L.P.	Private Equity Fund	6,832	10,107
Luminate Capital Partners III-A, LP	Private Equity Fund	5,800	6,955
Core Industrial Partners Fund II, Parallel L.P.	Private Equity Fund	4,430	6,652
Core Industrial Partners Fund III, Parallel L.P.	Private Equity Fund	596	557
Level Equity Opportunities Fund 2021, L.P.	Private Equity Fund	2,418	2,933
Level Equity Growth Partners V, L.P.	Private Equity Fund	2,701	3,569
Brighton Park Capital Fund II, L.P.	Private Equity Fund	1,357	1,417
Warren Equity Partners Fund IV-A, L.P.	Private Equity Fund	2,315	2,972
Parthenon Investors VII Parallel, L.P.	Private Equity Fund	376	325
Brookfield Strategic Real Estate Partners II LP	Real Estate Fund	3,105	2,901
Mesa West Core Lending Fund. L.P.	Private Debt Fund	21,725	21,124
Brookfield Strategic Real Estate Partners III LP	Real Estate Fund	13,070	17,403
Cortland Growth & Income, L.P.	Real Estate Fund	20,923	20,738
Mesa West Real Estate Income Fund V, L.P.	Private Debt Fund	7,255	7,291
Great Hill Equity Partners VII-Pref PV, L.P.	Private Equity Fund	2,391	3,476
Great Hill Equity Partners VIII-Pref PV, L.P.	Private Equity Fund	2,589	2,439
<b>Plan Assets</b>		<b>826,195</b>	<b>1,030,774</b>

**ENBRIDGE EMPLOYEE SERVICES, INC.  
EMPLOYEES' PENSION PLAN  
EIN: 76-0697621 PN:002**

**FORM 5500, SCHEDULE H, LINE 4I -  
SCHEDULE OF ASSETS (HELD AT END OF YEAR)**

a. b. Identity of issue, borrower, lessor, or similar party <i>(thousands of dollars)</i>	c. Description of investment including maturity date, rate of interest, par or maturity value	d. Cost December 31,	e. Current Value December 31,
Long Term Government Bond Index Fund	Government Bond Index Fund	4,502	4,265
Long Term Credit Bond Index Fund	Corporate Bond Index Fund	12,686	12,895
USAA Eagle Real Estate Fund	Real Estate Fund	1,391	1,454
MetLife Core Property Fund, LP	Real Estate Fund	982	1,131
EB Temporary Investment Fund, 1.147% 12/31/49	Short-Term Investment	1,668	1,668
Russell 1000 Alpha Tilts Fund	Global Equity Fund	2,797	4,798
MSCI Emerging Markets Free Fund	Global Equity Fund	944	1,009
BlackRock MSCI World Index Fund	Global Equity Fund	5,640	8,857
BlackRock MSCI Canada Small Cap Equity Index Fund	Global Equity Fund	43	46
BlackRock MSCI EAFE Small Cap Equity Index Fund	Global Equity Fund	402	404
BlackRock MSCI USA Small Cap Equity Index Fund	Global Equity Fund	625	703
World Ex-US Alpha Tilts Fund	Global Equity Fund	1,183	1,673
Morgan Stanley Institutional Fund, Inc. Global Franchise Portfolio Class IS	Global Equity Fund	2,062	2,142
GQG Partners Global Equity Fund CIT Class C	Global Equity Fund	2,615	3,568
Brandes Global Small Cap Portfolio	Global Equity Fund	811	1,598
Hillsdale Global Performance Equity Fund	Global Equity Fund	1,304	1,782
Global Infrastructure Partners B, L.P.	Infrastructure Fund	36	1
Global Infrastructure Partners II-B Feeder Fund, L.P.	Infrastructure Fund	84	66
IFM Global Infrastructure (US), L.P.	Infrastructure Fund	1,941	3,835
KPS Special Situations Fund V	Private Equity Fund	202	294
KPS Special Situations Fund VI	Private Equity Fund	23	23
Centana Growth Partners II, L.P.	Private Equity Fund	193	246
Centana Growth Partners III, L.P.	Private Equity Fund	1	(1)
Parthenon Investors VI Parallel, L.P.	Private Equity Fund	269	465
Tenex Capital Partners III, L.P.	Private Equity Fund	355	415
Oaktree Opportunities Fund XI, L.P.	Private Debt Fund	1,386	1,913
Peak Rock Capital Fund III-A, L.P.	Private Equity Fund	238	413
Brighton Park Capital Fund I, L.P.	Private Equity Fund	337	561
Global Infrastructure Partners III-B Feeder Fund, L.P.	Infrastructure Fund	237	357
IFM USIDF (US) A, L.P.	Private Debt Fund	457	604
Brookfield Super-Core Infrastructure Partners	Infrastructure Fund	1,065	1,604
DW Healthcare Partners V, L.P.	Private Equity Fund	305	503
Global Infrastructure Partners IV-B Feeder Fund, L.P.	Infrastructure Fund	947	1,259
CC&L Q Emerging Markets Equity Fund	Global Equity Fund	1,169	1,487
Lubert-Adler Recovery & Enhancement Capital Fund C, L.P.	Real Estate Fund	789	724
Warren Equity Partners Fund III-A, L.P.	Private Equity Fund	466	690
Luminate Capital Partners III-A, LP	Private Equity Fund	396	474
Core Industrial Partners Fund II, Parallel L.P.	Private Equity Fund	302	454
Core Industrial Partners Fund III, Parallel L.P.	Private Equity Fund	41	38
Level Equity Opportunities Fund 2021, L.P.	Private Equity Fund	165	200
Level Equity Growth Partners V, L.P.	Private Equity Fund	184	243
Brighton Park Capital Fund II, L.P.	Private Equity Fund	93	97
Warren Equity Partners Fund IV-A, L.P.	Private Equity Fund	158	203
Parthenon Investors VII Parallel, L.P.	Private Equity Fund	26	22
Brookfield Strategic Real Estate Partners II LP	Real Estate Fund	212	198
Mesa West Core Lending Fund, L.P.	Private Debt Fund	1,482	1,441
Brookfield Strategic Real Estate Partners III LP	Real Estate Fund	892	1,187
Cortland Growth & Income, L.P.	Real Estate Fund	1,427	1,415
Mesa West Real Estate Income Fund V, L.P.	Private Debt Fund	495	497
Great Hill Equity Partners VII-Pref PV, L.P.	Private Equity Fund	163	237
Great Hill Equity Partners VIII-Pref PV, L.P.	Private Equity Fund	177	166
<b>401(h) Account Assets</b>		<b>56,368</b>	<b>70,324</b>

**ENBRIDGE EMPLOYEE SERVICES, INC.  
EMPLOYEES' PENSION PLAN  
EIN: 76-0697621 PN:002**

**FORM 5500, SCHEDULE H, LINE 4J -  
SCHEDULE OF REPORTABLE TRANSACTIONS (SERIES)  
YEAR ENDED DECEMBER 31, 2024**

a. Security description	b. Shares	c. Cost of Acquisitions	d. Proceeds of Dispositions	g. Cost of Assets Disposed	i. Gain/Loss
BNY Mellon Cash Reserve 0.100% 12/31/2049 DD 06/26/97	172,538,934.46	172,538,934	-	-	-
BNY Mellon Cash Reserve 0.100% 12/31/2049 DD 06/26/97	170,247,247.98	-	170,247,248	170,247,248	-
EB Temporary Investment Fund, 1.147% 12/31/2049 DD 11/01/01	261,770,975.35	261,770,975	-	-	-
EB Temporary Investment Fund, 1.147% 12/31/2049 DD 11/01/01	245,756,261.52	-	245,756,262	245,756,262	-
Blackrock MSCI World Index Fund	81,931.69	-	5,000,000	2,994,154	2,005,846
Blackrock MSCI World Index Fund	647,691.21	37,800,000	-	-	-
Blackrock MSCI World Index Fund	833,844.84	-	48,500,000	29,425,079	19,074,921
Long Term Credit Bond Index Fund B	881,707.81	83,700,000	-	-	-
Long Term Credit Bond Index Fund B	32,181.75	-	3,000,000	2,939,908	60,092

**ENBRIDGE EMPLOYEE SERVICES, INC.  
EMPLOYEES' PENSION PLAN  
EIN: 76-0697621 PN:002**

**FORM 5500, SCHEDULE H, LINE 4J -  
SCHEDULE OF REPORTABLE TRANSACTIONS (SINGLE)  
YEAR ENDED DECEMBER 31, 2024**

<b>a. Security description</b>	<b>b. Shares</b>	<b>c. Cost of Acquisitions</b>	<b>d. Proceeds of Dispositions</b>	<b>g. Cost of Assets Disposed</b>	<b>i. Gain/Loss</b>
BNY Mellon Cash Reserve 0.100% 12/31/2049 DD 06/26/97	49,358,696	49,358,696	-	-	-
BNY Mellon Cash Reserve 0.100% 12/31/2049 DD 06/26/97	49,408,549	-	49,408,549	49,408,549	-
BNY Mellon Cash Reserve 0.100% 12/31/2049 DD 06/26/97	101,416,823	101,416,823	-	-	-
BNY Mellon Cash Reserve 0.100% 12/31/2049 DD 06/26/97	101,413,966	-	101,413,966	101,413,966	-
EB Temporary Investment Fund, 1.147% 12/31/2049 DD 11/01/01	49,392,176	49,392,176	-	-	-
EB Temporary Investment Fund, 1.147% 12/31/2049 DD 11/01/01	93,434,647	93,434,647	-	-	-
EB Temporary Investment Fund, 1.147% 12/31/2049 DD 11/01/01	77,999,071	-	77,999,071	77,999,071	-

**Schedule SB, line 26a — Schedule of Active Participant Data**

Attained age	Years of credited service										Total
	Under 1	1–4	5–9	10–14	15–19	20–24	25–29	30–34	35–39	40 & up	
Under 25	29	28	1								58
	74,453	69,455									
	1,232	4,946									
25–29	54	170	79								303
	87,965	79,848	81,709								
	1,913	7,206	16,348								
30–34	62	232	279	65	3		1				642
	98,468	91,776	95,653	104,321							
	2,097	9,572	22,047	36,261							
35–39	70	234	288	214	91	3		1			901
	108,746	104,468	105,180	110,051	117,322						
	3,332	14,621	29,205	43,691	52,370						
40–44	62	183	255	183	176	37	3				899
	106,061	111,847	105,449	119,281	125,239	104,859					
	4,067	16,527	32,683	54,422	71,178	56,582					
45–49	42	143	174	146	142	75	29				751
	126,046	118,772	113,059	121,571	116,231	135,776	107,726				
	4,924	18,369	40,480	69,248	69,985	93,517	26,571				
50–54	32	128	132	100	155	87	72	51	1		758
	119,971	123,348	113,516	114,237	135,572	123,532	115,943	113,050			
	5,747	22,685	47,022	70,514	108,901	105,642	68,946	77,058			
55–59	18	78	97	73	113	66	56	120	64	2	687
		125,855	123,819	117,081	113,516	117,879	123,892	122,223	133,814		
		24,997	53,205	76,739	94,908	103,453	82,476	103,676	175,233		
60–64	10	44	59	45	66	39	28	76	68	44	479
		118,160	121,863	121,543	116,509	116,722	109,129	123,994	123,394	123,652	
		24,242	58,544	93,816	102,929	158,322	76,532	108,597	186,621	198,148	
65–69	4	13	19	9	9	6	4	19	5	24	112
										107,558	
										298,135	
70 & up		1	1	1	1		1	2		5	12
Total	383	1,254	1,384	836	756	313	194	269	138	75	5,602

In each cell, the top number is the count of active participants for each age/service combination, the central number is average pay for 2024 limited to \$345,000 and the bottom number is average cash balance. Cash balance amounts are determined as of January 1, 2024. Participants accruing benefits other than cash balance are reported with a \$0 balance. Average pay and average cash balance are not shown for cells with fewer than 20 participants.

**Schedule SB, Part V — Statement of Actuarial Assumptions/Methods****Actuarial assumptions for January 1, 2024 funding valuation**

<b>Economic Assumptions</b>		
<b>Discount rate elections</b>		
• Segment rates or full yield curve	Segment	
• Look-back months	4	
	<b><u>Stabilized</u></b>	<b><u>Nonstabilized</u></b>
• First 5 years	4.75%	3.62%
• Next 15 years	4.87%	4.46%
• Over 20 years	5.59%	4.52%
<b>Mortality sponsor elections</b>		
• Healthy and disabled participants	Section 430(h)(3) prescribed separate generational annuitant and non-annuitant mortality tables.	
<b>Non-417(e) lump sums</b>		
	<u>Former PanEnergy benefits</u>	
• Mortality table	GAM 83 mortality for males	
• Interest rate	2.50%	
<b>Cash balance plans</b>		
• Interest accumulation rate	Legacy Enbridge and Legacy Spectra: 4.50% Dominion Energy: 3.75%	
• Whipsaw calculations	No	
• Annuity conversion		
– Mortality table	2024 IRC Section 417(e) unisex mortality	
– Interest rate basis	IRC Section 417(e) lump sum rates for the September preceding the valuation date	
<b>Other economic assumptions</b>		
• Expected return on plan assets	7.45% per year	
• Salary increases	See table of sample rates <sup>1</sup>	
• Target Bonus (for legacy Enbridge and Spectra)	120% of target for SPP, Senior Management Employees and 105% for all others	
• Social Security wage base	Legacy Enbridge and Legacy Spectra: 4.75% per year graded down to 2.95% for 2027 and later Dominion Energy: 2.95% per year	
• Inflation	Legacy Enbridge and Legacy Spectra: 4.00% per year graded down to 2.20% for 2027 and later Dominion Energy: 2.20% per year	

<sup>1</sup> A 3.5% load is applied to accrued benefits from year of transfer to year of assumed commencement for Transfers whose pay continues to be recognized in Average Final Earnings.

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

• Expenses	Expected administrative and investment expenses (assumed to equal prior year actual expenses adjusted for payment of PBGC premiums) are included in normal cost.
• Post-retirement indexing	50% of inflation

**Rationale for economic assumptions**

- Discount rate – The discount rate is prescribed by the plan sponsor through an election from allowable alternatives under IRS regulations. Under ARPA's interest rate relief, the corridor around the 25-year average segment rate was narrowed to 5% through 2025, after which it was scheduled to widen. Under IJA's interest rate relief, the corridor around the 25-year average segment rates remains at 5% through 2030, after which it will increase 5% per year until it reaches 30% in 2035. ARPA also applies a 5% floor to each of the 25-year average segment interest rates used to set the corridor.
- Non-417(e) Former PanEnergy lump sum conversion rate – Lump sum benefits for former PanEnergy participants are valued using a long term assumption for the plan's lump sum conversion rate that is not significantly inconsistent with what would be reasonable based on a combination of market conditions at the measurement date and future expectations consistent with other economic assumptions used, other than the discount rate.
- Cash balance interest accumulation rate – Cash balance interest accumulation rate – The plan's interest crediting rate is based on the 30-year U.S. Treasury constant maturity yields, with a minimum of 4.0% and maximum of 9.0% for Enbridge and Spectra and a minimum of 1.5% for Dominion Energy with no maximum. The assumption is based on the mean range of interest crediting rates over a 20-year horizon published by Mercer Investment Consulting in their Capital Market Simulations dated July 2023 rounded to the nearest 25 bps.
- Annuity conversion rate for cash balances – The assumed annuity conversion rate is based on the current plan year's conversion basis of IRC 417(e)(3). The Dominion Energy cash balances are assumed to be paid as a lump sum.
- Salary increases – The salary increase assumption is an age based table of rates based on an experience study undertaken in 2023 using data from 2018 through 2022.
- Target bonus - The target pensionable bonus percentage is based on management's expectations for future bonus payments and based on the plan design differences for Senior Management Employees (SME).
- Social Security taxable wage base increases – The Social Security taxable wage base increase assumption reflects 0.75% real wage growth. This assumed level is based on a review of historical US Average Wage increases and annual average CPI-U over extended time periods, and consideration of more recent and potential future prospects for real wage increases.
- Inflation – The inflation assumption is based on the inflation assumption periodically published by Mercer Investment Consulting in their Capital Markets Outlook dated July 2023 for Legacy Enbridge and Legacy Spectra and January 2024 for Legacy Dominion Energy.

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

- Expected investment return – The expected rate of return on plan assets is based on the median simulated 20-year investment return for the plan’s target asset mix using capital market assumptions published in Mercer Investment Consulting’s Capital Markets Outlook dated October 2023.
- Assumed plan-paid expenses for the upcoming year are based on prior year experience, adjusted (if material for this purpose) for expected changes in the upcoming year. For Legacy Dominion Energy, assumed plan-paid expenses for the upcoming year are estimated based on prior experience, as provided by prior actuary, adjusted (if material for this purpose) for expected changes in the upcoming year.

**Demographic Assumptions- Legacy Enbridge and Legacy Spectra**

• Withdrawal	See table of sample rates.	
• Disability incidence	None assumed.	
• Retirement age	<b>Attained age</b>	<b>Percentage Retirement</b>
	55	10.00%
	56	10.00
	57	10.00
	58	15.00
	59	15.00
	60	15.00
	61	20.00
	62	20.00
	63	20.00
	64	20.00
	65	40.00
	66	40.00
	67	40.00
	68	40.00
	69	40.00
	70	100.00

**Benefit commencement age for**

• Future vested deferred	
– Grandfathered	60
– Cash balance	Lump sum: 70% immediately; 30% age 60 Annuity: 60
• Current vested deferred	
– Grandfathered	60

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

– Cash balance	60 if younger than 60; 65 otherwise		
• Spouse assumptions	<b>Male participants</b>	<b>Female participants</b>	
• Percentage married	80%	80%	
• Spouse age difference	3 years younger	3 years older	
<b>Form of payment</b>	<b>Lump sum</b>	<b>100% J&amp;S</b>	<b>50% J&amp;S</b>
• Active retirements			
– Grandfathered	-	-	100%
– Cash balance	80%	20%	-
• Future vested deferred			
– Grandfathered	-	-	100%
– Cash balance	70% immediate 24% deferred	6% deferred	-
• Future deaths			
– Grandfathered	-		100%
– Cash balance	100%		-
• Current vested deferred			
– Grandfathered	-		100%
– Cash balance	80%	20%	-
<b>Unpredictable contingent event assumptions</b>	Not applicable		

**Table of sample rates**

Attained age	Percentage
	Withdrawal
20	10.00%
25	10.00%
30	8.00%
35	7.25%
40	6.50%
45	6.50%
50	5.00%

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

**Salary increase**

Attained age	Percentage
20	6.00%
25	6.00%
30	4.75%
35	4.25%
40	3.75%
45	3.00%
50	2.50%
55	2.00%
60	1.25%
65	0.75%

**Rationale for demographic assumptions**

- Mortality – Prescribed assumption and based on plan sponsor’s PPA election.
- Withdrawal – The withdrawal rates are based on an experience study undertaken in 2023 using data from 2018 through 2022.
- Retirement age – The retirement rates are based on an experience study undertaken in 2023 using data from 2018 through 2022.
- Benefit commencement age – The benefit commencement age is based on an experience study undertaken in 2023 using data from 2018 through 2022. The analysis was done separately for grandfathered and cash balance participants.
- Form of payment – The percentage of retiring participants assumed to take lump sums is based on an experience study undertaken in 2023 using data from 2018 through 2022. The percentage of retiring participants assumed to take annuities is based on an experience study undertaken in 2023 using data from 2018 through 2022.

**Demographic Assumptions- Dominion Energy**

• Withdrawal	See table of sample rates.
• Disability incidence	For Legacy Dominion, rates of disablement are assumed to equal 30% of female rates from the 1987 GLTD Incidence Table for 6-month elimination periods. For Legacy Questar, there is no disability assumption.

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

• Retirement age	<b>Non-Union Participants</b>		
	<b>Attained age</b>	<b>Percentage Retirement</b>	
		<b>Service &lt;30 years</b>	<b>Service &gt;=30 years</b>
	55	4.00%	4.00%
	56	4.00%	4.00%
	57	4.00%	4.00%
	58	6.00%	10.00%
	59	7.00%	10.00%
	60	11.00%	17.00%
	61	11.00%	17.00%
	62	14.00%	23.00%
	63	17.00%	20.00%
	64	13.00%	20.00%
	65	20.00%	25.00%
	66 and over	25.00%	25.00%
• Benefit commencement age for all participants	70		
• Spouse assumptions	<b>Male participants</b>	<b>Female participants</b>	
• Percentage married			
- Legacy Questar	80%		60%
- Legacy Dominion	75%		50%
• Spouse age difference			
- Legacy Questar	3 years older		3 years younger
- Legacy Dominion	2 years older		2 years younger



**Schedule SB, Part V — Statement of Actuarial Assumptions/Methods****Table of sample rates - withdrawal**

Attained age	Non-union participants	
	Service < 10 years	Service >= 10 years
25	8.50%	4.25%
30	7.00%	4.25%
35	6.50%	4.25%
40	5.50%	3.50%
45	5.50%	3.25%
50	5.00%	2.00%
55 and over	5.00%	2.00%

**Rationale for demographic assumptions**

- Mortality – Prescribed assumption and based on plan sponsor's PPA election.
- All other demographic assumptions – Based on assumptions previously selected by the prior actuary and/or previous plan sponsor. Termination and Retirement rates selected by the prior actuary and/or previous plan sponsor were based on a 2021 experience study factoring in future expectations of participant behavior. Significant demographic assumptions will be reviewed in subsequent years.

**Actuarial methods for funding****Asset methods**

The asset valuation method is an average of the adjusted market value for each year during the last 2 years preceding the valuation date. The adjusted market value is the market value at each determination date adjusted to the valuation date based on actual cash flows and expected interest at the lesser of the expected rate of return and the third segment rate. This amount is adjusted to be no greater than 110 percent and no less than 90% of the fair market value, as defined in IRC Section 430.

A characteristic of this asset method is that, over time, it is slightly more likely to produce an actuarial value of assets that is less than the market value of assets than an actuarial value that is greater than the market value.

**Participant methods**

Participants or former participants are included or excluded from the valuation as described below:

- **Participants included:** The plan sponsor provides us with data on all employees as of the valuation date, but only those employees who have completed the plan's eligibility requirements are included in the valuation of liabilities.

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

- **Participants excluded:** No actuarial liability is included for nonvested participants who terminated prior to the valuation date. For this purpose, participants with a break in service on the valuation date are treated as terminated participants.
- **Insurance contracts:** The plan does have insurance contracts. Annuity contracts are fully deducted from plan assets and therefore excluded from the plan's liabilities.
- **Disabled participants:** The liabilities for participants on long-term disability have been included with the liabilities for active participants. Grandfathered participants who become disabled before retirement continue to earn credited service during their disability. We have valued these participants using the assumption that they will remain disabled until their normal retirement date.
- **Transferred participants:** The liabilities for employees who have transferred to an Associate Company have been included with the liabilities for terminated vested participants; estimated liabilities for employees who have transferred from another business unit of the plan sponsor have been included with the estimated liabilities for active participants, with credited service from date of transfer.

### **Minimum funding methods**

The funding target for minimum funding calculations is computed using the traditional unit credit method of funding. The objective under this method is to fund each participant's benefits under the plan as they accrue. Thus, the total pension to which each participant is expected to become entitled at retirement is broken down into units, each associated with a year of past or future credited service.

A detailed description of the calculation follows:

- The plan's valuation date is the beginning of the plan year.
- An individual's **funding target** is the present value of future benefits based on credited service and average pay as of the beginning of the plan year, and an individual's **target normal cost** is the present value of the benefit expected to accrue in the plan year. If multiple decrements are used, the funding target and the target normal cost for an individual are the sum of the component funding targets and target normal costs associated with the various anticipated separation dates.
- The plan's **target normal cost** is the sum of the individual target normal costs, and the plan's **funding target** is the sum of the individual funding targets for all participants under the plan.

**ENBRIDGE EMPLOYEE SERVICES, INC.  
EMPLOYEES' PENSION PLAN  
EIN: 76-0697621 PN:002**

**FORM 5500, SCHEDULE H, LINE 4J -  
SCHEDULE OF REPORTABLE TRANSACTIONS (SERIES)  
YEAR ENDED DECEMBER 31, 2024**

a. Security description	b. Shares	c. Cost of Acquisitions	d. Proceeds of Dispositions	g. Cost of Assets Disposed	i. Gain/Loss
BNY Mellon Cash Reserve 0.100% 12/31/2049 DD 06/26/97	172,538,934.46	172,538,934	-	-	-
BNY Mellon Cash Reserve 0.100% 12/31/2049 DD 06/26/97	170,247,247.98	-	170,247,248	170,247,248	-
EB Temporary Investment Fund, 1.147% 12/31/2049 DD 11/01/01	261,770,975.35	261,770,975	-	-	-
EB Temporary Investment Fund, 1.147% 12/31/2049 DD 11/01/01	245,756,261.52	-	245,756,262	245,756,262	-
Blackrock MSCI World Index Fund	81,931.69	-	5,000,000	2,994,154	2,005,846
Blackrock MSCI World Index Fund	647,691.21	37,800,000	-	-	-
Blackrock MSCI World Index Fund	833,844.84	-	48,500,000	29,425,079	19,074,921
Long Term Credit Bond Index Fund B	881,707.81	83,700,000	-	-	-
Long Term Credit Bond Index Fund B	32,181.75	-	3,000,000	2,939,908	60,092

**ENBRIDGE EMPLOYEE SERVICES, INC.  
EMPLOYEES' PENSION PLAN  
EIN: 76-0697621 PN:002**

**FORM 5500, SCHEDULE H, LINE 4J -  
SCHEDULE OF REPORTABLE TRANSACTIONS (SINGLE)  
YEAR ENDED DECEMBER 31, 2024**

<b>a. Security description</b>	<b>b. Shares</b>	<b>c. Cost of Acquisitions</b>	<b>d. Proceeds of Dispositions</b>	<b>g. Cost of Assets Disposed</b>	<b>i. Gain/Loss</b>
BNY Mellon Cash Reserve 0.100% 12/31/2049 DD 06/26/97	49,358,696	49,358,696	-	-	-
BNY Mellon Cash Reserve 0.100% 12/31/2049 DD 06/26/97	49,408,549	-	49,408,549	49,408,549	-
BNY Mellon Cash Reserve 0.100% 12/31/2049 DD 06/26/97	101,416,823	101,416,823	-	-	-
BNY Mellon Cash Reserve 0.100% 12/31/2049 DD 06/26/97	101,413,966	-	101,413,966	101,413,966	-
EB Temporary Investment Fund, 1.147% 12/31/2049 DD 11/01/01	49,392,176	49,392,176	-	-	-
EB Temporary Investment Fund, 1.147% 12/31/2049 DD 11/01/01	93,434,647	93,434,647	-	-	-
EB Temporary Investment Fund, 1.147% 12/31/2049 DD 11/01/01	77,999,071	-	77,999,071	77,999,071	-

<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>  <small>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).</small>  <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 ENBRIDGE EMPLOYEE SERVICES, INC. EMPLOYEES' PENSION PLAN	<b>B</b> Three-digit plan number (PN) ▶	002
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF ENBRIDGE EMPLOYEE SERVICES, INC.	<b>D</b> Employer Identification Number (EIN) 76-0697621	
<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>	817,260,676	
<b>b</b> Actuarial value .....	<b>2b</b>	830,292,681	
<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 .....	2,612	272,545,163	272,545,163
<b>b</b> For terminated vested participants .....	1,527	145,619,598	145,619,598
<b>c</b> For active participants .....	3,603	261,853,895	267,171,336
<b>d</b> Total .....	7,742	680,018,656	685,336,097
<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>	5.11%	
<b>6</b> Target normal cost			
<b>a</b> Present value of current plan year accruals .....	<b>6a</b>	23,230,268	
<b>b</b> Expected plan-related expenses .....	<b>6b</b>	6,118,559	
<b>c</b> Target normal cost .....	<b>6c</b>	29,348,827	

**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>	<u>KB</u> Signature of actuary  KEVIN BILLS, FSA, EA Type or print name of actuary  MERCER Firm name  500 DALLAS STREET, SUITE 1400 HOUSTON TX 77002-4800 Address of the firm	<u>9/10/2025</u> Date  2307029 Most recent enrollment number  713-276-2100 Telephone number (including area code)
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**Part V Assumptions Used to Determine Funding Target and Target Normal Cost**

<b>21</b> Discount rate:				
<b>a</b> Segment rates:	1st segment: 4.75%	2nd segment: 4.87%	3rd segment: 5.59%	<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	

**Part VI Miscellaneous Items**

<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 checked="" type="checkbox"/> Yes <input 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>

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

<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

**Part VIII Minimum Required Contribution For Current Year**

<b>31</b> Target normal cost and excess assets (see instructions):			
<b>a</b> Target normal cost (line 6c).....	<b>31a</b>	29,348,827	
<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 .....	21,476,173	1,953,912	
<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>	31,302,739	
	Carryover balance	Prefunding balance	Total balance
<b>35</b> Balances elected for use to offset funding requirement .....		31,302,739	31,302,739
<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>		
<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	

**Part IX Pension Funding Relief Under the American Rescue Plan Act of 2021 (See Instructions)**

<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, line 15 — Reconciliation of Difference Between Valuation Results and Amounts Used to Calculate AFTAP**

The following schedule shows each AFTAP that was certified for the 2024 plan year, the date made, and a description of the AFTAP change:

Certification date	AFTAP	Update description
12/28/2024	118.48%	N/A

The following chart shows a comparison of the final 2024 AFTAP and the FTAP shown on the 2024 Schedule SB, line 14.

	Final certified AFTAP	Schedule SB Line 14 FTAP	Difference (explained below)
<b>1. Adjusted plan assets</b>			
a. Actuarial value of plan assets <sup>2</sup>	\$ 1,040,237,314	\$ 830,292,681	\$ 209,944,633
b. Credit balances subtracted	0	166,432,757	
c. Annuity purchases for non-HCEs in prior two plan years	0	0	
d. Earmarked contributions during plan year	0	0	
e. Adjusted plan assets: (a.) – (b.) + (c.) + (d.)	\$ 1,040,237,314	\$ 663,859,924	\$ 376,377,390
<b>2. Adjusted funding target</b>			
a. Funding target <sup>3</sup>	\$ 877,920,511	\$ 685,336,097	\$ 192,584,414
b. Funding target increases not already reflected in (a.) due to amendments, UCEBs, etc.	0	0	
c. Annuity purchases for non-HCEs in prior two plan years	0	0	
d. Adjusted funding target: (a.) + (b.) + (c.)	\$ 877,920,511	\$ 685,336,097	\$ 192,584,414
3. 2024 AFTAP/FTAP: (1.e.) ÷ (2.d.)	118.48%	96.86%	

<sup>2</sup> The actuarial value of assets used in the final certified AFTAP includes the assets transferred during 2024 as part of the Dominion Energy acquisitions.

<sup>3</sup> The final certified AFTAP was based on funding target including the Dominion Energy acquisitions during 2024 that are now part of the plan.

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

Each employee is assumed to retire in accordance with the table of retirement rates. The proportion of employees expected to retire at each potential retirement age is shown below. The average retirement age is 61.

1.	Average Weighted Retirement Age for Legacy Enbridge and Legacy Spectra participants	60
2.	Estimated percentage of active Legacy Enbridge and Legacy Spectra participants	64.3%
3.	Average Weighted Retirement Age for Dominion Energy participants	63
4.	Estimated percentage of active Dominion Energy participants	35.7%
5.	Average Weighted Retirement Age [(1. X 2.) + (3. X 4.)]	61

**Average Weighted Retirement Age for Legacy Enbridge and Legacy Spectra Participants**

(A) Retirement age	(B) Retirement percent	(C) Lx	(D) Number of employees expected to retire (B) X (C)	(E) (A) X (D)
55	10.00%	10,000	1,000	55,000
56	10.00%	9,000	900	50,400
57	10.00%	8,100	810	46,170
58	15.00%	7,290	1,094	63,423
59	15.00%	6,197	929	54,839
60	15.00%	5,267	790	47,403
61	20.00%	4,477	895	54,619
62	20.00%	3,582	716	44,412
63	20.00%	2,865	573	36,102
64	20.00%	2,292	458	29,340
65	40.00%	1,834	734	47,678
66	40.00%	1,100	440	29,047
67	40.00%	660	264	17,692
68	40.00%	396	158	10,774
69	40.00%	238	95	6,559
70	100.00%	143	143	9,982
Total			10,000	603,440
Average				60.34

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

**Average Weighted Retirement Age for Dominion Energy Participants**

	(A)	(B)	(C)
	Number of Participants	Weighted Average Retirement Age	[(A)/Total(A)]*(B)
Service <30 years	1,708	62.95	53.78
Service >= 30 years	291	61.85	9.00
<b>Total</b>	<b>1,999</b>		<b>62.79</b>

**Service <30 years**

(A)	(B)	(C)	(D)	(E)
Retirement age	Retirement percent	Lx	Number of employees expected to retire (B) X (C)	(A) X (D)
55	4.00%	10,000	400	22,000
56	4.00%	9,600	384	21,504
57	4.00%	9,216	369	21,012
58	6.00%	8,847	531	30,789
59	7.00%	8,317	582	34,347
60	11.00%	7,734	851	51,047
61	11.00%	6,884	757	46,189
62	14.00%	6,126	858	53,177
63	17.00%	5,269	896	56,428
64	13.00%	4,373	568	36,383
65	20.00%	3,805	761	49,459
66	25.00%	3,044	761	50,220
67	25.00%	2,283	571	38,235
68	25.00%	1,712	428	29,105
69	25.00%	1,284	321	22,149
70	100.00%	963	963	67,411
<b>Total</b>			<b>10,000</b>	<b>629,455</b>
<b>Average</b>				<b>62.95</b>

**Schedule SB, line 22 — Description of Weighted Average Retirement Age****Service >=30 years**

(A)	(B)	(C)	(D)	(E)
Retirement age	Retirement percent	Lx	Number of employees expected to retire (B) X (C)	(A) X (D)
55	4.00%	10,000	400	22,000
56	4.00%	9,600	384	21,504
57	4.00%	9,216	369	21,012
58	10.00%	8,847	885	51,315
59	10.00%	7,963	796	46,979
60	17.00%	7,166	1,218	73,097
61	17.00%	5,948	1,011	61,682
62	23.00%	4,937	1,135	70,400
63	20.00%	3,801	760	47,898
64	20.00%	3,041	608	38,927
65	25.00%	2,433	608	39,535
66	25.00%	1,825	456	30,107
67	25.00%	1,369	342	22,923
68	25.00%	1,026	257	17,449
69	25.00%	770	192	13,279
70	100.00%	577	577	40,414
Total			10,000	618,521
Average				61.85

***Schedule SB, line 31a – MRC Determination***

Enbridge Employee Services, Inc. entered into an agreement with Dominion Energy, Inc. to purchase Dominion Energy Ohio Gas effective March 6, 2024, as well as Dominion Energy Questar Gas effective May 31, 2024. At the time of each acquisition, the active participants in DEPP who were transferring their employment from Dominion Energy, Inc. were spun-off from the DEPP into the EESI QPP. These spin-offs were non-de minimis. As of the January 1, 2024 valuation date for the EESI QPP, the spin-offs of the DEPP employees had not yet occurred since the acquisitions were not effective until March 6, 2024 and May 31, 2024 respectively. The assets which were spun-off to the EESI QPP were non-de minimis from the perspective of the EESI QPP for both acquisitions. Assets spun-off as of March 6, 2024 were \$69,269,769 from DEPP for the Ohio Gas acquisition and \$138,517,172 from DEPP for the Questar Gas acquisition as of May 31, 2024. Adjusting for investment return, the equivalent asset amounts at the January 1, 2024 valuation date would be \$70,193,416 and \$139,751,216 respectively. The funding target liability amounts as of January 1, 2024 spun off from DEPP were \$63,403,534 and \$129,146,985 respectively. The 2024 valuation results for the employees who were spun-off from DEPP were adjusted to reflect only benefits expected to be accrued after the respective spinoff dates in determining the target normal cost.

Funding balances are being allocated from DEPP pursuant to the spin-offs. No waiver amortization charges are being allocated pursuant to the spin-offs because no such charges exist as of January 1, 2024 for DEPP.

The minimum required contribution consists of the target normal cost, shortfall amortization charges and waiver amortization charges for EESI QPP for the full year prior to reflecting the acquisitions. The minimum required contribution for the DEPP was \$0, therefore the minimum required contribution for the portions spun-off from DEPP is \$0.

**Schedule SB, line 31a — MRC Determination**

The exhibit below shows the calculations for the annual minimum required contribution for the EESI QPP plan prior to reflecting the acquisitions for the 2024 Plan Year as well as the calculations for the portions of the plan spun-off from DEPP. The minimum required contribution under IRC Section 430 is equal to the target normal cost minus excess assets plus the shortfall amortization charge plus the waiver amortization charge. The target normal cost is based on the increase in pension benefits during the current plan year plus expected expenses while the shortfall and waiver amortizations are based on the funding shortfall and amount of contribution waived, respectively.

Plan year beginning January 1, 2024	EESI QPP before acquisitions	Ohio Gas acquisition 3/6/2024	Questar acquisition 5/31/2024	TOTAL
Actuarial value of assets (AVA)	830,292,681	70,193,416	139,751,216	\$ 1,040,237,313
Carryover balance (COB)	0	20,298	37,354	
Prefunding balance (PFB)	166,432,757	9,315,006	17,142,445	
AVA minus COB and PFB	663,859,924			
Funding target	(685,336,097)			
Funding shortfall	21,476,173			
Excess assets	N/A			
Target normal cost	23,230,268	2,671,730	4,940,930	
Expected expenses	6,118,559	449,238	894,408	
Total target normal cost, including expenses	29,348,827	3,120,968	5,835,338	
Target normal cost net of excess assets	29,348,827	0	0	29,348,827
Shortfall amortization charge (no bases prior to 1/1/2024)	1,953,912	0	0	1,953,912
<b>Minimum required contribution (before available credit balance)</b>	<b>31,302,739</b>	<b>0</b>	<b>0</b>	<b>\$ 31,302,739</b>
Credit balance available to offset minimum	(166,432,757)	(9,335,304)	(17,179,799)	(192,947,860)
<b>Minimum required contribution (after available credit balance)</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>\$ 0</b>
Effective interest rate				5.16%

**Schedule SB, Part V — Summary of Plan Provisions****Summary of major plan provisions**

- 
- **Effective date and plan year** August 1, 1950; Amended and restated effective January 1, 1996; Amended and restated July 1, 2002. Amended and restated January 1, 2006. Amended and restated January 1, 2017. Amended effective January 1, 2018. Amended and restated January 1, 2019. The Spectra Energy Retirement Cash Balance Plan was merged into this Plan effective December 31, 2018. Participants from the Dominion Energy Pension Plan were merged into this Plan from Ohio Gas effective March 7, 2024, from Questar and Wexpro effective May 31, 2024 and from PSNC SCANA effective September 30, 2024.
- 

**Summary of major plan provisions - Legacy Enbridge**

- 
- **Status of the plan** The cash balance formula of the plan has ongoing benefit accruals and new employees are eligible to participate in the plan once they satisfy the participation requirements. Final average pay benefits for participants hired prior to January 1, 2002 (“grandfathered”) had credited service frozen effective December 31, 2017.
- 

- **Administration** Enbridge Employee Services, Inc.
- 

- **Eligibility Requirements for Plan Participation** First of month coincident with or next following date of hire to a full-time or part-time established position if hire date is prior to January 1, 2002. Laborers hired before January 1, 2002 become eligible on the first of the month coincident with or next following the completion of a year of vesting service, or the date of hire into an established position if earlier. Special rules exist for employees hired by an Associate Company on or after January 1, 2002, and who transferred to employment with the Employer or Participating Affiliate on or between January 1, 2011, and December 31, 2014.
- 

- **Service Considered** Vesting Service  
The greater of a) one year for each 750 hour calendar year through December 31, 2003 and b) the number of full and fractional years of service based on time elapsed from date of hire as for credited service, but including time during breaks in service lasting less than one year. Certain employees as specified in the plan document are granted service from their date of hire with a former employer.

Credited Service

One year of service for every full year worked from date of hire (prorated to reflect full months), until date of termination of employment. Excludes service for employers other than the Company, its Participating Affiliates, Recognized Former Employers, Associate Companies, and Foreign Affiliates.

Portal Service

Service prior to January 1, 1996 for Portal employees as of December 31, 1995.

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

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Expected Credited Service

Credited Service to date plus additional years the participant would have earned in full-time employment to normal retirement date (includes Portal Service).

Service Fraction

Fraction with a numerator of Credited Service and a denominator of Expected Credited Service, but not in excess of 1.0.

Grandfathered Service Freeze

Service for the US QPP grandfathered benefit is frozen as of December 31, 2017.

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- Compensation Considered

Base Pay

Base compensation plus scheduled overtime, excluding unscheduled overtime, bonuses, incentive pay and other remuneration and determined without regard to any salary reduction under a 401(k) or a Section 125 plan. Compensation in excess of applicable pay limit under Section 401(a)(17) is disregarded.

Pensionable Bonus

Annual performance incentive compensation for each year beginning January 1, 2007. For each year prior to January 1, 2007, each participant will be treated as receiving a \$0 Pensionable Bonus.

With respect to an Oil/NGL Marketing Employee that participates in an EBT Bonus, effective on or after January 1, 2015, any cash amount of the EBT Bonus is limited to twice the corporate notional short-term incentive target for that Participant's career grade classification.

Average Final Pay

The average of the highest 36 (60 months for Portal Service Pension Benefits) consecutive calendar months of base pay during the 120 month period ending on the earlier of the participant's termination date or retirement date plus, effective January 1, 2007, the sum of 50% of each of the highest 3 Pensionable Bonuses of the 5 Pensionable Bonuses paid to the participant prior to such date divided by 36.

Social Security Benefit

Except as provided below, the projected amount of the participant's primary Social Security benefit according to the law in effect at the date of termination of employment assuming continuation of then current earnings to age 65. If employment terminates between early retirement age and NRD, no additional earnings are considered and payments are assumed to begin at the earliest date for receipt of benefits (age 65 for formula (B) of the Monthly Pension Benefit).

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

<ul style="list-style-type: none"> <li>• Normal retirement date (NRD)</li> </ul>	<p>First of month coinciding with or next following the attainment of age 65.</p>
<ul style="list-style-type: none"> <li>• Monthly Pension Benefit</li> </ul>	<p>As of any date, the larger of (A) and (B) below, less (C) payable monthly as a life annuity:</p> <p>(A) 1.6% of Average Final Pay, excluding 50% of Pensionable Bonus, times Credited Service through December 31, 2006, plus 1.6% of Average Final Pay times Credited Service beginning January 1, 2007; less 1.5% of Social Security Benefit times Credited Service up to 33-1/3 years. For Portal employees, this formula only applies prior to eligibility for early retirement.</p> <p>(B) 1.6% of Average Final Pay, excluding 50% of Pensionable Bonus, times Expected Credited Service times the Service Fraction with numerator equal to Credited Service through December 31, 2006, plus 1.6% of Average Final Pay times Expected Credited Service times the Service Fraction with numerator equal to Credited Service beginning January 1, 2007; less 1.5% of the Social Security Benefit times Expected Credited Service up to 33-1/3 years times the Service Fraction. For Portal employees, this formula only applies after eligibility for early retirement.</p> <p>(C) Recognized Former Employer pension or a forfeited pension from a prior contribution refund, if any.</p> <p>For Enbridge Services participants, references to 1.5% in (A) and (B) are replaced by 0.75%.</p> <p>The Monthly Pension Benefit determined above must equal or exceed the participant's Monthly Pension Benefit accrued as of July 31, 2008.</p> <p>After January 1, 2018, all participants accrue benefits under the Cash Balance formula.</p>
<ul style="list-style-type: none"> <li>• Portal Service Pension Benefit</li> </ul>	<p>The benefit calculated as above, but using Portal Service instead of Credited Service.</p>
<ul style="list-style-type: none"> <li>• Monthly Preretirement Spouse Benefit</li> </ul>	<p>50% of the Monthly Pension Benefit plus the Portal Service Pension Benefit as of the date of death, reduced for payment as early as the participant's 55th birthday.</p>
<ul style="list-style-type: none"> <li>• Eligibility for Benefits</li> </ul>	<p><u>Normal Retirement</u>                  Retirement on NRD.</p> <p><u>Early Retirement</u>                  Retirement before NRD and on or after both attaining age 55 and completing three years of Vesting Service (age 51 and 30 years of Vesting service for former participants in the Nantahala Salaried or Hourly Retirement Plan on December 31, 1998).</p>

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

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Postponed Retirement

Retirement after NRD.

Deferred Vested

Termination for reasons other than death or retirement after completing three years of Vesting Service.

Preretirement Spouse Benefit

Death with a surviving spouse.

- Monthly Benefits Paid Upon the Following Events

Normal Retirement

Monthly Pension Benefit determined as of NRD.

Early Retirement

Monthly Pension Benefit determined as of early retirement date, reduced 5.0% for each year of payment before age 60. For Portal Service Pension Benefit, 5.0% for each year of payment before age 62.

For participants who terminate after age 55 and have 30 or more years of Vesting Service, there is no reduction for early payment of benefits. For participants whose age plus Credited Service (including Portal Service) equals 85, there is no reduction for early payment of Portal Service Pension Benefits.

A Social Security supplement equal to the percentage of Social Security benefit described in Monthly Pension Benefit part (A) or part (B), whichever is applicable, is payable until the participant's earliest Social Security entitlement date.

- Monthly Benefits Paid Upon the Following Events (continued)

Early Retirement Window

A participant may be eligible to elect a special voluntary early retirement benefit if the participant's effective date of termination is no earlier than May 1, 2004 and no later than May 30, 2004. In addition to the Monthly Pension Benefit, if elected and eligible, the participant could receive a life only annuity commencing as of the first of the month following termination of employment that is actuarially equivalent to a lump sum determined as of the participant's date of termination equal to 80% of Average Monthly Final Pay times Credited Service.

Postponed Retirement

Monthly Pension Benefit determined as of actual retirement date, but not less than the benefit calculated at NRD actuarially increased to reflect later commencement.

Disabled Retirement

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

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	<p>Monthly Pension Benefit determined as of the earlier of a participant's recovery from disability if they are not reemployed with Enbridge or their benefit calculated at NRD.</p> <p><u>Termination with Deferred Vested Benefit</u>                  Monthly Pension Benefit determined as of termination date, reduced as for early retirement.</p> <p><u>Death with Preretirement Spouse Benefits</u>                  Monthly Preretirement Spouse Benefit is payable.</p>
<ul style="list-style-type: none"> <li>• Forms of Payment</li> </ul>	<p>Preretirement Spouse Benefits are payable as described above or, if the spouse elects, as a lump sum if less than \$20,000. Monthly Pension Benefits are paid as described above in the form of a 50% joint and survivor annuity option (actuarial reductions apply to the Portal Service Pension Benefit). Monthly Pension Benefits for unmarried participants are payable for life. If the participant elects and the spouse consents, benefits can be paid in another actuarially equivalent optional form offered by the plan. Optional forms are a 75% or 100% joint and survivor annuity, a life annuity, a 5-year, 10-year or 15-year certain and life annuity and a lump sum if present value is less than \$20,000 (No limit for Portal Service Pension Benefit).</p>
<ul style="list-style-type: none"> <li>• Actuarial Equivalence</li> </ul>	<p>Actuarial equivalence is based on formulae defined in the plan document.</p>
<ul style="list-style-type: none"> <li>• Maximum on Benefits and Pay</li> </ul>	<p>All benefits and pay for any calendar year may not exceed the maximum limitations for that year as defined in the Internal Revenue Code. The plan provides for increasing the dollar limits automatically as such changes become effective.</p>
<ul style="list-style-type: none"> <li>• Cost-of-Living Supplements</li> </ul>	<p>The Monthly Pension Benefit payable to retired Legacy Enbridge participants has been increased periodically on an ad hoc basis. The most recent increase was effective on January 1, 2001. An automatic increase of one-half of CPI has been added to the monthly benefits of participants who retired from active service and participants who terminate on or after December 1, 2001 with vested benefits. The first increase is applied on the December 1 following one year of payments to the employee or beneficiary. The increase is applied annually on December 1. Increases do not apply to the Portal Accrued Benefit. Benefits accrued after January 1, 2018 do not receive an increase.</p>

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

**Plan provisions – Legacy Enbridge and Legacy Spectra Cash balance participants**

Following is a summary of the major plan provisions used to determine the plan’s financial position for cash balance participants, including Legacy Spectra Energy Retirement Cash Balance Plan participants as of January 1, 2022. All provisions are the same as for non-Portal grandfathered participants except as noted below. This summary should not be used in determining plan benefits.

• Eligible Employees	An employee becomes eligible upon date of hire to a full-time position if such hire date is on or after January 1, 2002. Laborers hired on or after January 1, 2002 become eligible following the completion of a year of vesting service, or on the date of hire into an established position, if earlier. Grandfathered participants accrue under the Cash Balance formula after January 1, 2018.															
• Participation Date	Later of July 1, 2002 and hire date.															
• Points Service	Same as Vesting Service for grandfathered provisions, but not including periods of less than one year break in service.															
• Pay Credits	<p>Based on attained age plus Points Service at end of prior plan year. The following schedule is effective January 1, 2018 for Legacy Enbridge participants and January 1, 2019 for Legacy Spectra participants:</p> <table border="1"> <thead> <tr> <th>Points</th> <th>Below Social Security Integration Level</th> <th>Above Social Security Integration Level</th> </tr> </thead> <tbody> <tr> <td>0 – 34</td> <td>4%</td> <td>8%</td> </tr> <tr> <td>35 – 49</td> <td>5%</td> <td>9%</td> </tr> <tr> <td>50 – 64</td> <td>6%</td> <td>10%</td> </tr> <tr> <td>65 +</td> <td>7%</td> <td>11%</td> </tr> </tbody> </table> <p>Social Security Integration Level is defined as 75% of Social Security Taxable Wage Base. Pay Credits are applied to the Account Balance on a monthly basis.</p>	Points	Below Social Security Integration Level	Above Social Security Integration Level	0 – 34	4%	8%	35 – 49	5%	9%	50 – 64	6%	10%	65 +	7%	11%
Points	Below Social Security Integration Level	Above Social Security Integration Level														
0 – 34	4%	8%														
35 – 49	5%	9%														
50 – 64	6%	10%														
65 +	7%	11%														
• Interest Credits	Interest on the Account Balance as of the end of the prior year is added to the Account Balance at the end of each year. The rate credited after January 1, 2018, is based on the 30-year U.S. Treasury constant maturity yields with minimum of 4.0% and maximum of 9.0%.															
• Account Balance	<p>The sum of Pay Credits and Interest Credits credited to date of determination, plus the additional Opening account balance (for certain prior plan participants), listed below:</p> <p><u>Opening account balance</u></p> <ul style="list-style-type: none"> <li>• For former Duke Employees, the single sum actuarial equivalent of the benefit accrued under the prior plan as of January 1, 1997.</li> <li>• For former PanEnergy or Nantahala employees, the single sum actuarial equivalent of the benefit accrued under the prior plan as of January 1, 1999.</li> </ul>															
• Accrued benefit	The participant’s Cash balance account, but no less than any prior plan protected benefits (on an Actuarial equivalent basis).															
• Participant Contributions	None allowed.															
• Vesting	Three years of Vesting Service.															

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

<ul style="list-style-type: none"> <li>Forms of Benefit</li> </ul>	<p>Benefits may begin at any time after termination of employment with vested benefits for any reason other than death.</p> <p>Optional forms of payment are lump sum, single life annuity, joint and survivor annuity (50%, 75% or 100%), and certain and life annuity (5, 10, or 15 year certain period).</p> <p>Additional forms of payments are available to Legacy Spectra prior plan participants with benefits accrued prior to January 1, 1999.</p> <p>Normal form of payment for married participants is 50% joint and survivor annuity.</p>																					
<ul style="list-style-type: none"> <li>Actuarial Equivalence</li> </ul>	<p>The applicable mortality table and interest rates as defined in IRC Section 417(e).</p> <p>Prior to January 1, 2019, the Legacy Spectra actuarial equivalence was GAM 83 blended mortality and 7% interest for the conversion of single life annuities to other optional forms.</p> <p>Actuarial Equivalence under Prior Plan Formulas (other than for lump sum):</p> <ul style="list-style-type: none"> <li>Duke Energy – UP-84 mortality tables set forward one year and 8% interest</li> <li>PanEnergy – GAM 83 mortality for males and 8%</li> <li>Nantahala – GAM 83 mortality for males and 6%</li> </ul>																					
<ul style="list-style-type: none"> <li>Normal Retirement Benefit</li> </ul>	<p>Lump sum equal to Account Balance at time of payment or monthly amount actuarially equivalent to such balance.</p>																					
<ul style="list-style-type: none"> <li>Early Retirement Benefit</li> </ul>	<p><u>Less than 10 years of service</u>                  Same as retirement at Normal Retirement Date, based on account balance at commencement date.</p> <p><u>At least 10 years of service</u>                  If form of payment is monthly annuity, account balance is converted to an immediate annuity and increased by the following percentage:</p> <table border="1" data-bbox="589 1524 1344 1793"> <thead> <tr> <th>Age at Commencement</th> <th>10 - 19 years of service</th> <th>20+ years of service</th> </tr> </thead> <tbody> <tr> <td>55 – 59</td> <td>10%</td> <td>10%</td> </tr> <tr> <td>60</td> <td>10%</td> <td>25%</td> </tr> <tr> <td>61</td> <td>10%</td> <td>20%</td> </tr> <tr> <td>62</td> <td>10%</td> <td>15%</td> </tr> <tr> <td>63</td> <td>10%</td> <td>10%</td> </tr> <tr> <td>64</td> <td>5%</td> <td>5%</td> </tr> </tbody> </table> <p>Otherwise, a lump sum equal to the Account Balance at the time of early retirement.</p>	Age at Commencement	10 - 19 years of service	20+ years of service	55 – 59	10%	10%	60	10%	25%	61	10%	20%	62	10%	15%	63	10%	10%	64	5%	5%
Age at Commencement	10 - 19 years of service	20+ years of service																				
55 – 59	10%	10%																				
60	10%	25%																				
61	10%	20%																				
62	10%	15%																				
63	10%	10%																				
64	5%	5%																				

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

	Prior PanEnergy protected benefits are reduced 3.50% for each year of payment before age 60.
• Deferred Vested Benefit	Accrued benefit Prior PanEnergy protected benefits are reduced 6.67% for the first five years and 3.33% for each additional year of payment before age 65.
• Disability Benefit	Accrued benefit, including Pay credits and Interest credits from the date of disability until the date of first payment or recovery. Pay credits are determined based on the rate of Compensation at disability. Credited service continues to accrue while disabled.
• Death with Survivor Benefit	The spouse of a deceased member of the plan may choose to receive the member's entire account balance as a lump sum or as a monthly single life annuity. Other beneficiaries may receive the account balance only as a lump sum.
• Cost-of-Living Supplements	None.

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

**Plan Provisions – Dominion Energy Salaried participants**

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<ul style="list-style-type: none"> <li>• Covered Employee</li> </ul>	<p>Old Plan - Non-Union Participants hired before January 1, 2001.                  New Plan – Effective January 1, 2001, for non-union participants hired before January 1, 2008.</p>
<ul style="list-style-type: none"> <li>• Eligibility Requirements for Plan Participation</li> </ul>	<p>Old Plan: Employees became eligible to participate in the plan on the first day of the month coincident with or next following the later of age 21 and six months of employment.                  New Plan: Non-Union employees became eligible to participate in the plan as of the later of date of hire and attainment of age 18. Those Non-Union employees ineligible to participate under the Old Plan as of December 31, 2000 were eligible to participate on January 1, 2001 if they were at least age 18 on that date.</p>
<ul style="list-style-type: none"> <li>• Service Considered</li> </ul>	<p><u>Vesting Service</u>                  Old Plan: Total number of plan years during which the employee has completed at least 1,000 hours of service and has attained age 18 or older.                  New Plan: Based on elapsed time from date of hire.</p> <p><u>Credited Service</u>                  Service prior to December 31, 2000 determined under provisions of the Old Plan for salaried. Service after January 1, 2001 based on elapsed time from date of hire. Service is awarded for each calendar month in which at least one hour of service is worked.</p>
<ul style="list-style-type: none"> <li>• Compensation Considered</li> </ul>	<p><u>Base Pay</u>                  Compensation for periods prior to January 1, 2001 determined under prior plan provisions.                  For salaried, actual base salary paid including any amounts deferred under Code sections 125, 132(f)(4) and 401(k), plus differential wage payments and merit lump sum payments.</p> <p><u>Average Final Pay</u>                  For salaried, the annual average of the highest 60 consecutive months of compensation out of the last 120 months of employment.</p> <p><u>Social Security Benefit</u>                  The projected amount of the participant’s primary Social Security benefit according to the law in effect at the date of termination of employment assuming no future earnings.</p>
<ul style="list-style-type: none"> <li>• Normal retirement date (NRD)</li> </ul>	<p>First of month coinciding with or next following the attainment of age 65.</p>
<ul style="list-style-type: none"> <li>• Monthly Pension Benefit</li> </ul>	<p>Salaried receive the Old Plan benefit for service prior to January 1, 2001, plus the New Plan benefit for service on or after January 1, 2001, plus the Special Retirement Account benefit.                  Old Plan: One-twelfth of</p>

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

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	<p>(A) 2.03% of final average earnings times credited service up to 30 years, minus</p> <p>(B) 2.00% of the Social Security benefit times credited service up to 30 years.</p> <p>New Plan: One-twelfth of</p> <p>(A) 1.80% of final average earnings times credited service up to 30 years (30-year service cap includes credited service under the Old Plan formula), minus</p> <p>(B) 1.50% of the Social Security benefit times credited service up to 30 years (30-year service cap includes credited service under the Old Plan formula).</p>
<ul style="list-style-type: none"> <li>• Supplemental Pension Benefit for Participants who transferred from a Union Plan</li> </ul>	<p>For a Participant that transfers from a Union Plan, the Participant receives a supplemental benefit calculated as the excess of (A) over (B), where:</p> <p>(A) is the benefit that would have been payable under the Union Plan if the Participants final average under this Plan were deemed to be applied under the Union Plan, and</p> <p>(B) is the benefit that is actually payable under the Union Plan.</p> <p>The supplemental benefit is payable at the same time and form as the Participant's benefit under this Plan.</p>
<ul style="list-style-type: none"> <li>• Special Retirement Account (SRA)</li> </ul>	<p><u>Pay Credits:</u> 2.00% of compensation, beginning January 1, 2001 for salaried participants.</p> <p><u>Interest Credited to Account Balance:</u> Credited on a daily basis at a rate annually equivalent to the 30-year Treasury bond rate for September of the preceding year, subject to a minimum rate of 1.5%.</p> <p><u>Payment Options:</u>                  Immediate lump sum – equal to the account balance;                  Immediate annuity; or                  Deferred annuity – paid in same form and beginning at the same time as the Old Plan or New Plan retirement benefit.</p> <p><u>Annuity Options:</u>                  Retirement-eligible terminated participant – Same as payment options for remaining retirement benefit.                  Deferred vested terminated participant – single life annuity or 50% joint and survivor annuity, if paid as an immediate annuity. Same as payment options for remaining retirement benefit, if paid as a deferred annuity.</p> <p><u>Annuity Conversion Basis:</u> The SRA is converted from an account balance to a single life annuity at benefit commencement date using the section 417(e) applicable mortality table and the 30-year Treasury bond rate used for interest crediting in the year of benefit commencement. All other payment</p>

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

options are converted using the Plan's actuarial equivalence basis for payment options.

• **Monthly Preretirement Death Benefit**

Old Plan: For participants who die while actively employed, the surviving spouse will receive an immediate monthly income under the Old Plan payable for life equal to 50% of the participant's accrued benefit at the date of death. For terminated vested participants who die, the surviving spouse will receive a monthly retirement income payable for life in an amount equal to 50% of the amount the participant would have received if he had survived and elected to commence receiving a retirement income at the earliest date allowed under the plan, payable under the 50% joint and survivor option. The spouse may elect to defer the survivor benefit until normal retirement date.

New Plan: For non-union participants who were in the plan on December 31, 2000 and who die while actively employed, the surviving spouse will receive an immediate monthly income payable for life equal to 50% of the participant's accrued benefit at the date of death under the New Plan formula and valued under the 50% joint and survivor option and with the pieces of the New Plan formula reduced for early retirement using the active early retirement factors. For benefit commencement before the participant's earliest early retirement date, the benefit under the a) and b) pieces of the New Plan formula is further reduced for ages below 55 as follows:

Ages	Yearly Reduction %
35-55	3.000%
30-35	0.500%
<30	0.333%

For non-union employees who become participants on or after January 1, 2001 and who die while actively employed, the surviving spouse will receive a monthly retirement income under the New Plan formula payable for life in an amount equal to 50% of the amount the participant would have received if he had survived and elected to commence receiving a retirement income at the earliest date allowed under the plan, payable under the 50% joint and survivor option. The spouse may elect to defer the survivor benefit until normal retirement date.

The SRA is payable to the surviving spouse of an active vested participant who dies, as either:

- (A) an immediate lump sum;
- (B) an immediate annuity payable for the spouse's lifetime; or
- (C) an annuity deferred to the date of benefit commencement for the remaining death benefit and payable for the spouse's remaining lifetime.

For terminated vested participants who die, the surviving spouse will receive a monthly retirement income under the Old Plan formula and the a) and b) pieces of the New Plan formula payable for life in an amount equal to 50% of the amount the participant would have received if he had survived and

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


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	<p>elected to commence receiving a retirement income at the earliest date allowed under the plan, payable under the 50% joint and survivor option. The same SRA payment options apply to the surviving spouses of deceased vested participants and surviving spouses of deceased active participants.</p>
<ul style="list-style-type: none"> <li>• Eligibility for Benefits</li> </ul>	<p><u>Normal Retirement</u> Retirement on NRD.</p> <p><u>Early Retirement</u></p> <p>Salaried retirement before NRD and on or after attaining age 55 and completing three years of vesting service. Eligibility for early retirement at age 55 also applies to certain former employees associated with the E&amp;P divestiture.</p> <p><u>Postponed retirement</u> Retirement after NRD.</p> <p><u>Deferred Vested</u> For salaried participants, termination for reasons other than disability, death or retirement upon the earlier of completing three years of vesting service or attainment of age 65 (or age 50 if entitled to benefits as of January 1, 2001).</p> <p><u>Preretirement Spouse Benefit</u> Death while eligible for normal, early, postponed, or deferred vested retirement benefits, with a surviving spouse.</p> <p><u>Disability</u> Salaried participants who qualify for benefits under long-term disability plan for Legacy Dominion Energy participants and after completing 5 years of vesting service.</p>
<ul style="list-style-type: none"> <li>• Monthly Benefits Paid Upon the Following Events</li> </ul>	<p><u>Normal Retirement</u> Monthly Pension Benefit determined as of NRD.</p> <p><u>Early Retirement</u> The monthly pension benefit determined as of the early retirement date under the normal retirement formula with the following reductions:</p> <p>Old Plan: The benefit is unreduced upon attainment of age 60 and completion of 30 years of credited service. Otherwise, the benefit amount based on final average pay in part (A) above is reduced 1/4% for each month by which the participant's 60th birthday or early retirement date, if later, precedes his unreduced retirement date, plus 1/2% for each of the next sixty months by which the benefit commencement date precedes age 60; and the benefit amount based on the Social Security benefit in part (B) above is reduced 5/9% for each month within the first sixty</p>

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

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months, and 5/18% for each month within the next sixty months by which the benefit commencement date precedes NRD.

New Plan: The benefit is unreduced upon attainment of age 60.

Otherwise, the benefit is reduced 1/4% for each month within the first 24 months by which the participant's benefit commencement date precedes age 60, plus 1/2% for each month within the next 36 months by which the benefit commencement date precedes age 58.

SRA: The SRA as of the early retirement date is payable as an immediate lump sum or immediate annuity taken in the same optional form as the monthly pension benefit.

Temporary Supplementary Early Retirement Allowance

Monthly benefit payable to age 62, starting at the later of benefit commencement age or age 55, in an amount equal to credited service (not to exceed 30 years) multiplied by \$5.

Additional Supplementary Early Retirement Allowance

Monthly benefit payable to age 62, starting at the later of benefit commencement age or age 55, in an amount equal to credited service earned before December 31, 2002 (not to exceed 30 years) multiplied by \$15.

Postponed Retirement

The late retirement income will be the normal retirement benefit calculated using credited service, final average earnings, Social Security benefit, and SRA compensation and interest credits as of the late retirement date.

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Disabled Retirement

Old Plan: The accrued benefit payable immediately based on credited service, final average compensation and Primary Insurance Amount at the date of disability.

New Plan: The accrued benefit payable at normal retirement date under the Old Plan and New Plan formulas based on final average earnings and Social Security amount at the date of disability. Vesting and credited service continue to accrue until the earlier of recovery from disability and normal retirement date.

The SRA is available as an immediate lump sum or immediate annuity at disability. No further compensation credits are granted to the SRA after disability. If an immediate lump sum or immediate annuity is not elected, the disabled participant may take a deferred annuity reflecting additional interest credits after disability at the same time and in the same form as the remaining retirement benefit.

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

Termination with Deferred Vested Benefit

Non-Union Participants prior to January 1, 2001: The termination benefit for vested non-union participants who terminate prior to January 1, 2001 is equal to the accrued benefit. The benefit is payable any time after attainment of age 55 reduced as an early retirement benefit, or at age 65. In the case of early retirement benefits for terminated vested participants, the unreduced retirement date is the normal retirement date.

Non-Union Participants on or after January 1, 2001: The termination benefit for vested non-union participants who terminate on or after January 1, 2001 is equal to the accrued benefit. The benefit is payable any time after attainment of age 55 with the Old Plan benefit reduced as an early retirement benefit at age 65. In the case of early retirement benefits for terminated vested participants, the unreduced retirement date is the normal retirement date. The a) and the b) pieces of the New Plan benefit are reduced in accordance with the table of factors below or are payable without reduction at age 65.

Age	Reduction %	Age	Reduction %
55	55%	60	35%
56	52%	61	30%
57	48%	62	23%
58	44%	63	16%
59	40%	64	9%

plus

For participants who have an SRA balance, either:

SRA determined as of termination date payable as an immediate lump sum or an immediate annuity; or

SRA determined as of retirement date payable as an annuity in the same form as the remaining retirement benefit.

Death with Preretirement Spouse Benefits

The monthly preretirement death benefit payable on behalf of an active or terminated vested employee is as described in the section above.

• Forms of Payment

Preretirement death benefits are payable only as described above. Monthly pension benefits are paid as described above as a life annuity, if the participant has no spouse as of the date payments begin, or if the participant so elects. Otherwise, benefits are paid in the form of a 50% joint and survivor annuity option or, if the participant elects and the spouse consents, another actuarially equivalent optional form offered by the plan. Optional forms are as follows:

- (A) 50% joint and survivor annuity
- (B) 75% joint and survivor annuity
- (C) 100% joint and survivor annuity
- (D) Social Security leveling option to age 62

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

	Forms of payment available for the SRA are described above.
• Actuarial Equivalence	The applicable mortality table and interest rates as defined in IRC Section 417(e).
• Pension Increase	Old Plan: Benefits in payment will be increased by ½ of the first five percentage points increase in the Consumer Price Index each year. New Plan: None.
• Maximum on Benefits and Pay	All benefits and pay for any calendar year may not exceed the maximum limitations for that year as defined in the Internal Revenue Code. The plan provides for increasing the dollar limits automatically as such changes become effective.
• Cost-of-Living Supplements	Old Plan: Benefits in payment will be increased by ½ of the first five percentage points increase in the Consumer Price Index each year. New Plan: None.

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

**Plan Provisions – Dominion Energy Cash Balance participants**

- Covered employees**

Non-union participants hired on or after January 1, 2008 and before July 1, 2021 unless covered under other provisions of the plan; Former Questar employees ineligible to participate under the Questar Corporation Retirement Plan as of July 1, 2010 became eligible to participate on January 1, 2018 if they were at least age 18 on that date; Former SCANA employees ineligible to participate under the SCANA Corporation Pension Plan as of January 1, 2014 became eligible to participate on January 1, 2021 if they were at least age 18 on that date; and Former employees of the Company (excluding leased employees) whose last dates of employment under the Dominion Energy West Virginia Union Pension Plan were with Dominion Energy Transmission, Inc., were in job classifications represented for collective bargaining purposes by, and were members of, The United Gas Worker’s Union, Local No. 69 – Division II, Utility Worker’s Union of America, ARL-CIO, and who were hired or rehired on or after March 23, 2017.

Certain employees who were active in the plan in March 2022 were offered a choice to remain in the cash balance formula or to stop cash balance pay credits and transition to a savings program effective May 1, 2022.

- Service Considered**

Vesting Service  
 Based on elapsed time from date of hire and attainment of age 18.

Pension Service  
 Based on elapsed time on or after January 1, 2008 while a Cash Balance Eligible Employee. Service is awarded for each calendar month in which at least one hour of service is worked.

- Compensation Considered**

Base Pay  
 Actual base salary paid plus including any amounts deferred under Code sections 125, 132(f)(4) and 401(k), plus differential wage payments and merit lump sum payments.

- Pay Based Credit**

Pay-Based Credits are credited monthly to the accounts of Cash Balance participants as a percentage of their plan compensation based on the following schedule:

Years of Credited Service	Pay-Based Credits as Percentage of earnings
Fewer than 5	4%
5 – 14	5%
15 – 24	6%
25 +	7%

For employees who choose the enhanced savings plan option beginning May 1, 2022, no additional pay credits will be earned after April 30, 2022.

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

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	<p><u>Interest crediting rate</u>                  Interest Credits are credited monthly to the Cash Balance account on a daily basis at a rate annually equivalent to the 30-year Treasury securities as specified by the Secretary of the Treasury for the month of September for the Plan Year prior to the Plan Year in which the determination is made, subject to a minimum rate of 1.5%.</p> <p>Balances as of September 30, 2024 for participants acquired with the PSNC transaction remained with Dominion Energy.</p>
• Normal retirement date (NRD)	First of month coinciding with or next following the attainment of age 65.
• Monthly Pension Benefit	The Cash Balance account as of normal retirement date payable as an immediate lump sum or immediate annuity taken in the normal form of payment or optional forms of retirement income.
• Monthly Preretirement Spouse Benefit	<p>Payable to the Cash Balance participant's beneficiary commencing on a benefit commencement date elected by the beneficiary following the Cash Balance participant's death.</p> <p>If the beneficiary is the cash balance participant's spouse, the beneficiary may receive the cash balance participant's retirement benefit in either (i) a single sum calculated as of the beneficiary's benefit commencement date or (ii) a single life annuity for the life of the beneficiary that is the actuarial equivalent of the participant's Cash Balance account as of the beneficiary's benefit commencement date.</p> <p>If the beneficiary is not the cash balance participant's spouse, the beneficiary may receive the cash balance participant's accrued benefit only as a single sum one-time payment.</p>
• Eligibility for Benefits	<p><u>Normal Retirement</u>                  Retirement on NRD.</p> <p><u>Deferred Vested</u>                  Earlier of attaining age 65 or three years of vesting service.</p> <p><u>Preretirement Spouse Benefit</u>                  Vested on date of death.</p>
• Monthly Benefits Paid Upon the Following Events	<p><u>Normal Retirement</u>                  Monthly Pension Benefit determined as of NRD.</p> <p><u>Termination with Deferred Vested Benefit</u>                  The Cash Balance account determined as of the benefit commencement date elected by the participant payable as an immediate lump sum or an immediate annuity.</p> <p><u>Death with Preretirement Spouse Benefits</u>                  The monthly preretirement death benefit payable on behalf of an active or terminated vested employee is as described in the section above.</p>

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

<ul style="list-style-type: none"> <li>Forms of Payment</li> </ul>	<p>Preretirement death benefits are payable only as described above. Monthly pension benefits are paid as described above as a life annuity, if the participant has no spouse as of the date payments begin, or if the participant so elects. Otherwise, benefits are paid in the form of a 50% joint and survivor annuity option or, if the participant elects and the spouse consents, another actuarially equivalent optional form offered by the plan. Optional forms are as follows:</p> <ul style="list-style-type: none"> <li>50% joint and survivor annuity</li> <li>75% joint and survivor annuity</li> <li>100% joint and survivor annuity</li> <li>Lump sum</li> </ul>
<ul style="list-style-type: none"> <li>Actuarial Equivalence</li> </ul>	<p>The applicable mortality table and interest rates as defined in IRC Section 417(e).</p>
<ul style="list-style-type: none"> <li>Maximum on Benefits and Pay</li> </ul>	<p>All benefits and pay for any calendar year may not exceed the maximum limitations for that year as defined in the Internal Revenue Code. The plan provides for increasing the dollar limits automatically as such changes become effective.</p>
<ul style="list-style-type: none"> <li>Minimum Lump Sum Distribution</li> </ul>	<p>If the Cash Balance account is \$1,000 or less, the vested benefit shall automatically be paid as a single sum as soon as administratively practicable after a participant's termination or death.</p>

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

**Plan Provisions – Dominion Energy Questar participants**

<ul style="list-style-type: none"> <li>Participation Date</li> </ul>	<p>Date of becoming a covered employee.</p>
<ul style="list-style-type: none"> <li>Eligibility Requirements for Plan Participation</li> </ul>	<p>Employees who were eligible to participate in the Dominion Questar Corporation Retirement Plan as of December 30, 2017.                  Legacy Questar employees hired or rehired on or after July 1, 2010 are not eligible for the benefits described in this section.</p>
<ul style="list-style-type: none"> <li>Service Considered</li> </ul>	<p><u>Vesting Service</u>                  Old Plan: A year of Vesting Service is granted for each 12-month period measured from date of hire (or anniversary of date of hire) during which an employee works 1,000 hours.                  New Plan: Based on elapsed time from January 1, 2018.</p> <p><u>Credited Service</u>                  Old Plan: A year of Credited Service is granted for each 12-month period ending December 31. The year will be prorated for employees who were hired after December 31, 2017, based on the number of months worked in that year, but not less than a full year of service will be credited for any employee who works at least 1,000 hours in that year.                  New Plan: Based on elapsed time from January 1, 2018. Service is awarded for each calendar month in which a participant is employed.</p>
<ul style="list-style-type: none"> <li>Compensation Considered</li> </ul>	<p><u>Base Pay</u>                  Old Plan: Service for purposes of income benefits is based on the highest average of monthly earnings for the 60 consecutive months prior to retirement, including base salary, overtime, bonuses, commissions, and shift premiums. Compensation is defined as the total of all earnings from the Dominion Questar Employees Retirement Plan, excluding certain items like non-cash benefits, fringe benefits, and other non-monetary compensation.                  New Plan: Compensation is defined as the total of all earnings from the Dominion Questar Employees Retirement Plan, excluding certain items like non-cash benefits, fringe benefits, and other non-monetary compensation.                  For 2018 and later, Old Plan compensation is 120% of New Plan compensation.                  New Plan: Actual base salary paid including any amounts deferred under Code sections 125, 132(f)(4) and 401(k), plus merit lump sum payments.</p> <p><u>Average Final Pay</u>                  Old Plan: The annual average of the highest 72 consecutive semi-monthly periods (or 36 consecutive months, if applicable) of compensation out of the last 120 months of employment.                  New Plan: The annual average of the highest 60 consecutive months of compensation out of the last 120 months of employment.</p> <p><u>Social Security Benefit</u></p>

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

	The projected amount of the participant’s primary Social Security benefit according to the law in effect at the date of termination of employment assuming no future earnings.																																															
• Normal retirement date (NRD)	First of month coinciding with or next following the attainment of age 65.																																															
• Monthly Pension Benefit	<p>The Old Plan benefit for service prior to January 1, 2018, plus the New Plan benefit for service on or after January 1, 2018, plus the Special Retirement Account benefit.</p> <p>Old Plan: One-twelfth of</p> <p>A) Basic Benefit: 1.3% of final average compensation times credited service up to 25 years, plus 0.5% of final average compensation times credited service in excess of 25 years, plus</p> <p>B) Permanent supplement: The excess of final average compensation over Covered Compensation times credited service up to 25 years times a Supplemental Factor based on retirement age and year of birth and summarized in the table below:</p> <table border="1" style="margin-left: 40px;"> <thead> <tr> <th rowspan="2">Retirement Age</th> <th colspan="3">Years of Birth</th> </tr> <tr> <th>&lt;1938</th> <th>1938-1954</th> <th>&gt;1954</th> </tr> </thead> <tbody> <tr><td>&gt;64</td><td>0.600%</td><td>0.600%</td><td>0.600%</td></tr> <tr><td>63</td><td>0.600%</td><td>0.600%</td><td>0.550%</td></tr> <tr><td>62</td><td>0.600%</td><td>0.550%</td><td>0.500%</td></tr> <tr><td>61</td><td>0.550%</td><td>0.500%</td><td>0.475%</td></tr> <tr><td>60</td><td>0.500%</td><td>0.475%</td><td>0.450%</td></tr> <tr><td>59</td><td>0.475%</td><td>0.450%</td><td>0.425%</td></tr> <tr><td>58</td><td>0.450%</td><td>0.425%</td><td>0.400%</td></tr> <tr><td>57</td><td>0.425%</td><td>0.400%</td><td>0.375%</td></tr> <tr><td>56</td><td>0.400%</td><td>0.375%</td><td>0.344%</td></tr> <tr><td>55</td><td>0.375%</td><td>0.344%</td><td>0.316%</td></tr> </tbody> </table> <p>plus</p> <p>C) Supplemental retirement benefit: Any employee employed at December 31, 1996 with vacation benefits earned between the anniversary of employment and December 31, 1996 that is due upon termination of employment.</p> <p>This benefit is provided in lieu of the respective vacation benefits as a monthly annuity that is the actuarial equivalent of the vacation benefits described above. This benefit is fully and immediately vested.</p> <p>New Plan: One-twelfth of</p> <p>A) 1.80% of final average compensation times credited service up to 30 years (30 year service cap includes credited service under the Old Plan formula), minus</p>	Retirement Age	Years of Birth			<1938	1938-1954	>1954	>64	0.600%	0.600%	0.600%	63	0.600%	0.600%	0.550%	62	0.600%	0.550%	0.500%	61	0.550%	0.500%	0.475%	60	0.500%	0.475%	0.450%	59	0.475%	0.450%	0.425%	58	0.450%	0.425%	0.400%	57	0.425%	0.400%	0.375%	56	0.400%	0.375%	0.344%	55	0.375%	0.344%	0.316%
Retirement Age	Years of Birth																																															
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**Schedule SB, Part V — Summary of Plan Provisions**


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	<p>B) 1.50% of the Social Security benefit times credited service up to 30 years (30 year service cap includes credited service under the Old Plan formula)</p> <p>The 30 year service cap does not apply to service completed between January 1, 2018 and December 31, 2022.</p>
<ul style="list-style-type: none"> <li>• Special Retirement Account (SRA)</li> </ul>	<p><u>Pay Credits:</u> 2.00% of compensation, beginning January 1, 2018</p> <p>Interest Credited to Account Balance: Credited on a daily basis at a rate annually equivalent to the 30-year Treasury bond rate for September of the preceding year, subject to a minimum rate of 1.5%.</p> <p><u>Payment Options:</u></p> <ul style="list-style-type: none"> <li>• Immediate lump sum – equal to the account balance;</li> <li>• Immediate annuity; or</li> <li>• Deferred annuity – paid in the same form and beginning at the same time as the Old Plan or New Plan retirement benefit.</li> </ul> <p><u>Annuity Options:</u></p> <ul style="list-style-type: none"> <li>• Retirement-eligible terminated participant – Same as payment options for remaining retirement benefit.</li> <li>• Deferred vested terminated participant – single life annuity or 50% joint and survivor annuity, if paid as an immediate annuity. Same as payment options for remaining retirement benefit, if paid as a deferred annuity.</li> </ul> <p><u>Annuity Conversion Basis:</u> The SRA is converted from an account balance to a single life annuity at benefit commencement age using the section 417(e) applicable mortality table and the 30-year Treasury bond rate used for interest crediting in the year of benefit commencement. All other payment options are converted using the Plan's actuarial equivalence basis for payment options.</p>
<ul style="list-style-type: none"> <li>• Eligibility for Benefits</li> </ul>	<p><u>Normal retirement</u> Retirement on NRD</p> <p><u>Early retirement</u> Old Plan: Retirement before NRD and on or after attaining age 55 and completing 10 years of credited service. New Plan: Retirement before NRD and on or after attaining age 55 and completing three years of vesting service.</p> <p><u>Temporary Supplement</u> Termination on or after Early Retirement Date.</p> <p><u>Postponed retirement</u> Retirement after NRD</p> <p><u>Deferred vested</u> Termination for reasons other than disability, death, or retirement upon (a) completing five years of vesting service (Old Plan) and (b) the earlier of completing three years of vesting service or attainment of normal retirement date.</p>

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

Preretirement spouse benefit

Death while eligible for normal, early, postponed, or deferred vested retirement benefits, with a surviving spouse.

Disability

Participants who qualify for benefits under Dominion Energy, Inc.'s long-term disability plan on or after January 1, 2018, and after completing 5 years of vesting service.

- Monthly Benefits Paid Upon the Following Events

Normal Retirement

Monthly Pension Benefit determined as of NRD.

Early retirement

The monthly pension benefit determined as of the early retirement date under the normal retirement formula with the following reductions:

Old Plan: The Basic Benefit is unreduced upon attainment of age 62.

Otherwise, the Basic Benefit is reduced 0.2083% for each month prior to age 62. The Permanent Supplement is unreduced upon attainment of age 55.

New Plan: The benefit is unreduced upon attainment of age 60. Otherwise, the benefit is reduced 14% for each month within the first 24 months by which the participant's benefit commencement date precedes age 60, plus 1/2% for each month within the next 36 months by which the benefit commencement date precedes age 58.

SRA: The SRA as of the early retirement date is payable as an immediate lump sum or immediate annuity taken in the same optional form as the remaining retirement benefit.

Temporary Supplement

Monthly benefit payable to age 62 in an amount equal to one-twelfth of \$204 times each year of Old Plan credited service up to 25 years.

Postponed retirement

The late retirement income will be the normal retirement benefit calculated using credited service, final average compensation, Primary Insurance Amount, and SRA compensation and interest credits as of the late retirement date.

Deferred vested

The monthly pension benefit is the sum of the Old Plan and New Plan benefits.

Old Plan: The unreduced retirement date is the normal retirement date. For commencements prior to age 55, the Basic Benefit plus Permanent Supplement Benefit actuarially reduced from age 65 to commencement age. For commencements after age 55, the Basic Benefit is reduced 0.5% per month for payment to age 65 plus Permanent Supplement Benefit.

New Plan: The unreduced retirement date is the normal retirement date. For retirement before NRD, the A) and B) pieces of the New Plan benefit are reduced in accordance with the table of factors below:

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

Age	Reduction %	Age	Reduction %
55	55%	60	35%
56	52%	61	30%
57	48%	62	23%
58	44%	63	16%
59	40%	64	9%

plus,

For participants who have an SRA balance, either:  
 SRA determined as of termination date payable as an immediate lumpsum or an immediate annuity; or  
 SRA determined as of retirement date payable as an annuity in the same form as the remaining benefit.

Preretirement spouse benefit

The monthly preretirement death benefit payable on behalf of an active or terminated vested employee is as described in the section above.

Disability

The accrued benefit payable at normal retirement date under the Old Plan and New Plan formulas based on final average compensation and Social Security amount at the date of disability. Vesting and credited service continue to accrue until the earlier of recovery from disability and normal retirement date. The SRA is available as an immediate lump sum or immediate annuity of disability. No further compensation credits are granted to the SRA after disability. If an immediate lump sum or immediate annuity is not elected, the disabled participant may take a deferred annuity reflecting additional interest credits after disability at the same time and in the same form as the remaining retirement benefit.

- Forms of Payment

Preretirement Spouse Benefits are payable as described above. Monthly pension benefits are paid as described above as a life annuity, if the participant has no spouse as of the date payments begin, or if the participant so elects. Otherwise, benefits are paid in the form of a 50% joint and survivor annuity option or, if the participant elects and the spouse consents, another actuarially equivalent optional form offered by the plan. Optional forms are as follows:

Old Plan Optional Forms:

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

- 
- 75% Survivor Annuity Option
  - 100% Survivor Annuity Option
  - Ten-Year Certain Option
  - Lump Sum Option
  - The Temporary Supplement for the old plan is only payable as a temporary single life annuity to age 62, without survivor benefits.

New Plan Optional Forms:

- 50% joint and survivor annuity
- 75% joint and survivor annuity
- 100% joint and survivor annuity
- Social Security leveling option to age 62

Forms of payment available for the SRA are described above.

- 
- **Actuarial Equivalence** The applicable mortality table and interest rates as defined in IRC Section 417(e).
  - **Maximum on Benefits and Pay** All benefits and pay for any calendar year may not exceed the maximum limitations for that year as defined in the Internal Revenue Code. The plan provides for increasing the dollar limits automatically as such changes become effective.
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**Schedule SB, Part V — Summary of Plan Provisions**

**Plan Provisions – Dominion Energy Consolidated Natural Gas (CNG) participants**

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<ul style="list-style-type: none"> <li>• Effective date and plan year</li> </ul>	<p>The term "Old Plan" in the following sections describes the plan provisions for Legacy CNG employees with credited service before January 1, 2001. Plan provisions applicable to participants who terminated prior to January 1, 2001 may be different from those described below. The term "New Plan" in the following sections describes the plan provisions effective January 1, 2001 for Legacy CNG employees with credited service on or after January 1, 2001.</p>
<ul style="list-style-type: none"> <li>• Covered Employees</li> </ul>	<p>Employees who were eligible to participate in the System Pension Plan of Consolidated Natural Gas Company and its Participating Subsidiaries for Employees who are not Represented by a Recognized Union (the "System Plan") on December 31, 2000.</p>
<ul style="list-style-type: none"> <li>• Participation Date</li> </ul>	<p>Date of becoming a covered employee.</p>
<ul style="list-style-type: none"> <li>• Eligibility Requirements for Plan Participation</li> </ul>	<p>An Employee who was a participant as of December 31, 2000 in the System Plan.</p>
<ul style="list-style-type: none"> <li>• Service Considered</li> </ul>	<p><u>Vesting Service</u>                  Based on elapsed time from date of hire.</p> <p><u>Credited Service</u>                  Old Plan: Years of credited service determined under the System Plan.                  New Plan: Service on or after January 1, 2001 is awarded for each calendar month in which at least one hour of service is worked.</p>
<ul style="list-style-type: none"> <li>• Compensation Considered</li> </ul>	<p><u>Base Pay</u>                  Old Plan: Earnings determined under the terms of the System Plan.                  New Plan: Actual base salary paid including any amounts deferred under Code sections 125, 132(f)(4) and 401(k), plus differential wage payments and merit lump sum payments.</p> <p><u>Average Final Pay</u>                  The annual average of compensation in the highest 60 consecutive months during the last 120 months of employment.</p> <p><u>Covered Compensation</u>                  The average (without indexing) of the contribution and benefit bases in effect under Section 230 of the Social Security Act for each year in the 35-year period ending in the calendar year in which the employee attains (or will attain) Social Security Retirement Age.</p> <p><u>Social Security Benefit</u>                  The projected amount of the participant's primary Social Security benefit according to the law in effect at the date of termination of employment assuming no future earnings.</p>

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

• Normal retirement date (NRD)	First of month coinciding with or next following the attainment of age 65.
• Monthly Pension Benefit	<p>The Old Plan benefit for service prior to January 1, 2001, plus the New Plan benefit for service on or after January 1, 2001, plus the Special Retirement Account benefit.</p> <p>Old Plan: One-twelfth of</p> <p>A) 1.70% of final average earnings times credited service, minus</p> <p>B) 0.40% of lesser of final average earnings or Covered Compensation, times years of credited service (up to a maximum of 35 years).</p> <p>New Plan: One-twelfth of</p> <p>A) 1.80% of final average earnings times credited service up to 30 years (30 year service cap includes credited service under the Old Plan formula), minus</p> <p>B) 1.50% of the Social Security benefit times credited service up to 30 years (30 year service cap includes credited service under the Old Plan formula).</p> <p>The 30 year service cap does not apply to service completed between January 1, 2001 and December 31, 2005.</p>
• Supplemental Pension Benefit for Participants who transferred from a Union Plan	<p>For a Participant that transfers from a Union Plan, the Participant receives a supplemental benefit calculated as the excess of (A) over (B), where:</p> <p>(A) is the benefit that would have been payable under the Union Plan if the Participants final average under this Plan were deemed to be applied under the Union Plan, and</p> <p>(B) is the benefit that is actually payable under the Union Plan.</p> <p>The supplemental benefit is payable at the same time and form as the Participant's benefit under this Plan.</p>
• Special Retirement Account(SRA)	<p><u>Pay Credits:</u> 2.00% of compensation, beginning January 1, 2018</p> <p><u>Interest Credited to Account Balance:</u> Credited on a daily basis at a rate annually equivalent to the 30-year Treasury bond rate for September of the preceding year, subject to a minimum rate of 1.5%.</p> <p><u>Payment Options:</u></p> <ul style="list-style-type: none"> <li>• Immediate lump sum – equal to the account balance;</li> <li>• Immediate annuity; or</li> <li>• Deferred annuity – paid in the same form and beginning at the same time as the Old Plan or New Plan retirement benefit.</li> </ul> <p><u>Annuity Options:</u></p> <ul style="list-style-type: none"> <li>• Retirement-eligible terminated participant – Same as payment options for remaining retirement benefit.</li> <li>• Deferred vested terminated participant – single life annuity or 50% joint and survivor annuity, if paid as an immediate annuity. Same as payment options for remaining retirement benefit, if paid as a deferred annuity.</li> </ul> <p><u>Annuity Conversion Basis:</u> The SRA is converted from an account balance to a single life annuity at benefit commencement age using the section 417(e) applicable mortality table and the 30-year Treasury bond rate used for interest</p>

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

crediting in the year of benefit commencement. All other payment options are converted using the Plan’s actuarial equivalence basis for payment options.

- **Monthly Preretirement Spouse Benefit**

The surviving spouse will receive an immediate monthly income payable for life equal to 50% of the participant’s accrued benefit at the date of death valued under the 50% joint and survivor option with the Old Plan benefit and the a) and b) pieces of the New Plan benefit reduced for early retirement using the active early retirement factors. For benefit commencement before the participant’s earliest retirement date, benefits are further reduced for ages below 55 as follows:

Ages	Yearly Reduction %
35-55	3.000%
30-35	0.500%
<30	0.333%

The spouse may elect to defer the survivor benefit until normal retirement date.

The SRA is payable to the surviving spouse of an active vested participant who dies, as either:

- A) an immediate lump sum;
- B) an immediate annuity payable for the spouse’s lifetime; or
- C) an annuity deferred to the date of benefit commencement for the remaining death benefit and payable for the spouse’s remaining lifetime.

For unmarried vested participants who die while in active service or after termination, the SRA is payable as an immediate lump sum to the named beneficiary.

For terminated vested participants who die, the surviving spouse will receive a monthly retirement income under the Old Plan formula and the A) and B) pieces of the New Plan formula payable for life in an amount equal to 50% of the amount the participant would have received if he had survived and elected to commence receiving a retirement income at the earliest date allowed under the plan, payable under the 50% joint and survivor option. The SRA is deemed vested immediately as it is summarized above for spouses of deceased vested participants.

- **Eligibility for Benefits**

Normal retirement  
 Retirement on NRD.

Early retirement  
 Retirement before NRD and on or after attaining age 55 and completing three years of vesting service.  
 Eligibility for early retirement at age 55 also applies to certain former employees associated with the E&P divestiture.

Postponed retirement  
 Retirement after age NRD

**Schedule SB, Part V — Summary of Plan Provisions**Deferred vested

Termination for reasons other than disability, death, or retirement upon the earlier of completing three years of vesting service or attainment of age 65.

Preretirement spouse benefit

Death while eligible for normal, early, postponed, or deferred vested retirement benefits, with a surviving spouse.

Disability

Participants who qualify for benefits under Dominion Energy, Inc.'s long-term disability plan on or after January 1, 2001 and after completing 5 years of vesting service.

- Monthly Benefits Paid Upon the Following Events

Normal Retirement

Monthly Pension Benefit determined as of NRD.

Early retirement

Old Plan: The benefit is unreduced upon attainment of age 62.

Otherwise, the benefit is reduced 1/4% for each month within the first 24 months by which the participant's benefit commencement date precedes age 62 plus 5/12% for each month within the next 60 months by which the benefit commencement date precedes age 60.

New Plan: The benefit is unreduced upon attainment of age 60.

Otherwise, the benefit is reduced 1/4% for each month within the first 24 months by which the participant's benefit commencement date precedes age 60 plus 1/2% for each month within the next 36 months by which the benefit commencement date precedes age 58.

SRA: The SRA as of the early retirement date is payable as an immediate lump sum or immediate annuity taken in the same optional form as the remaining retirement benefit.

Temporary Supplement

Monthly benefit payable to age 62 in an amount equal to one-twelfth of \$204 times each year of Old Plan credited service up to 25 years.

Postponed retirement

The late retirement income will be the normal retirement benefit calculated using credited service, final average earnings, Social Security amount, and SRA compensation and interest credits as of the late retirement date.

Deferred vested

The termination benefit is equal to the accrued benefit. The benefit is payable any time after attainment of age 55 with the Old Plan benefit and the a) and b) pieces of the New Plan benefit reduced in accordance with the table of factors below, or without reduction at age 65.

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

Age	Reduction %	Age	Reduction %
55	55%	60	35%
56	52%	61	30%
57	48%	62	23%
58	44%	63	16%
59	40%	64	9%

plus,

For participants who have an SRA balance, either:

SRA determined as of termination date payable as an immediate lump sum or an immediate annuity; or

SRA determined as of retirement date payable as an annuity in the same form as the remaining retirement benefit.

- Monthly Benefits Paid Upon the Following Events (continued)

Preretirement spouse benefit

The monthly preretirement death benefit payable on behalf of an active or terminated vested employee is as described in the section above.

Disability

The accrued benefit payable at normal retirement date under the Old Plan and New Plan formulas based on final average compensation and Social Security amount at the date of disability. Vesting and credited service continue to accrue until the earlier of recovery from disability and normal retirement date.

The SRA is available as an immediate lump sum or immediate annuity of disability. No further compensation credits are granted to the SRA after disability. If an immediate lump sum or immediate annuity is not elected, the disabled participant may take a deferred annuity reflecting additional interest credits after disability at the same time and in the same form as the remaining retirement benefit.

- Forms of Payment

Preretirement Spouse Benefits are payable as described above. Monthly pension benefits are paid as described above as a life annuity, if the participant has no spouse as of the date payments begin, or if the participant so elects. Otherwise, benefits are paid in the form of a 50% joint and survivor annuity option or, if the participant elects and the spouse consents, another actuarially equivalent optional form offered by the plan. Optional forms are as follows:

- 50% joint and survivor annuity
- 75% joint and survivor annuity
- 100% joint and survivor annuity
- Social Security leveling option to age 62

Forms of payment available for the SRA are described above.

- Plan Participants' contributions

Contributions have not been required or permitted under the plan since February 1, 1953.

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

• Actuarial Equivalence	The applicable mortality table and interest rates as defined in IRC Section 417(e).
• Maximum on Benefits and Pay	All benefits and pay for any calendar year may not exceed the maximum limitations for that year as defined in the Internal Revenue Code. The plan provides for increasing the dollar limits automatically as such changes become effective.

**Benefits included or excluded**

Unless noted below, all benefits provided by the plan, as amended and restated generally effective as of January 1, 2024, are included in this valuation. This summary is based on information provided by Enbridge about plan amendments to the QPP plan document that have not yet been drafted related to mirroring the DEPP provisions for the Dominion Energy acquisitions.

- **Plan amendments:** Amendments adopted after the valuation date or effective after the current plan year are excluded from the valuation, with the exception of the Dominion Energy provisions effective at each acquisition date.
- **Late retirement increases:** Grandfathered Legacy Enbridge participants over normal retirement age are valued including late retirement actuarial increases. Late retirement cash balance annuities for Legacy Enbridge active participants hired before January 1, 2019, who are not Spectra participants, and work beyond normal retirement date are estimated using the participant's cash balance at normal retirement date increased by pay credits through his assumed severance from service date and interest credits through his assumed annuity starting date. For Legacy Dominion Energy participants, consistent with the prior actuary, late retirement increases are not included in the valuation assuming timely suspension of benefit notices are provided.
- **Shutdown benefits:** We are not aware of any corporate actions that would create shutdown benefits; therefore, they are excluded.
- **IRC Section 415(b):** The limitations of Internal Revenue Code Section 415(b) have been incorporated into our calculations.
- **IRC Section 401(a)(17):** The limitations of Internal Revenue Code Section 401(a)(17) have been incorporated into our calculations. The salary limitation imposed by Section 401(a)(17) has not been projected for funding.
- **Benefit restrictions:** Benefit restrictions (if applicable) are ignored in this valuation.
- **IRC Section 416 rules for top-heavy plans:** We did not test whether this plan is top-heavy (when the present value of benefits for key employees equals or exceeds 60 percent of the present value for all participants). However, we expect that the plan is not top-heavy due to the large number of rank-and-file participants; therefore, the funding target and target normal cost do not reflect any liability for top-heavy accruals.

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

### Plan Provisions Specific to Funding

#### Additional Benefits Included or Excluded

- **IRC Section 436 benefit restrictions:**
  - *Unpredictable contingent event benefits:* This valuation excludes restricted contingent event benefits that occurred before the valuation date but includes contingent event benefits which are expected to occur on or after the valuation date regardless of anticipated funding-based limitations.
  - *Plan amendments:* See above.
  - *Prohibited payments:* Limitations on prohibited benefits (if any) are reflected for annuity starting dates before the valuation date but are ignored for annuity starting dates on or after the valuation date.
- **Unpredictable contingent event benefits:** The plan does not have any unpredictable contingent event benefits.

#### Plan Provision Changes Since Prior Valuation

- Maximum compensation amounts and maximum benefit amounts under IRS rules were updated from 2023 to 2024.
- Plan was amended adding Ohio Gas, Questar, Wexpro and PSNC participants from the prior Dominion Energy Pension Plan.

**ENBRIDGE EMPLOYEE SERVICES, INC.  
EMPLOYEES' PENSION PLAN  
EIN: 76-0697621 PN:002**

**FORM 5500, SCHEDULE H, LINE 4I -  
SCHEDULE OF ASSETS (HELD AT END OF YEAR)**

a. b. Identity of issue, borrower, lessor, or similar party <i>(thousands of dollars)</i>	c. Description of investment including maturity date, rate of interest, par or maturity value	d. Cost December 31, 2024	e. Current Value December 31, 2024
Long Term Government Bond Index Fund	Government Bond Index Fund	65,989	62,500
Long Term Credit Bond Index Fund	Corporate Bond Index Fund	185,948	188,994
USAA Eagle Real Estate Fund	Real Estate Fund	20,383	21,311
MetLife Core Property Fund, LP	Real Estate Fund	14,394	16,584
EB Temporary Investment Fund, 1.147% 12/31/49	Short-Term Investment	24,457	24,457
Russell 1000 Alpha Tilts Fund	Global Equity Fund	41,001	70,330
MSCI Emerging Markets Free Fund	Global Equity Fund	13,840	14,786
BlackRock MSCI World Index Fund	Global Equity Fund	82,669	129,824
BlackRock MSCI Canada Small Cap Equity Index Fund	Global Equity Fund	633	677
BlackRock MSCI EAFE Small Cap Equity Index Fund	Global Equity Fund	5,896	5,928
BlackRock MSCI USA Small Cap Equity Index Fund	Global Equity Fund	9,160	10,301
World Ex-US Alpha Tilts Fund	Global Equity Fund	17,341	24,529
Morgan Stanley Institutional Fund, Inc. Global Franchise Portfolio Class IS	Global Equity Fund	30,219	31,392
GQG Partners Global Equity Fund CIT Class C	Global Equity Fund	38,326	52,298
Brandes Global Small Cap Portfolio	Global Equity Fund	11,880	23,427
Hillsdale Global Performance Equity Fund	Global Equity Fund	19,114	26,117
Global Infrastructure Partners B, L.P.	Infrastructure Fund	523	11
Global Infrastructure Partners II-B Feeder Fund, L.P.	Infrastructure Fund	1,228	961
IFM Global Infrastructure (US), L.P.	Infrastructure Fund	28,445	56,205
KPS Special Situations Fund V	Private Equity Fund	2,955	4,314
KPS Special Situations Fund VI	Private Equity Fund	342	335
Centana Growth Partners II, L.P.	Private Equity Fund	2,833	3,609
Centana Growth Partners III, L.P.	Private Equity Fund	10	(21)
Parthenon Investors VI Parallel, L.P.	Private Equity Fund	3,938	6,819
Tenex Capital Partners III, L.P.	Private Equity Fund	5,204	6,081
Oaktree Opportunities Fund XI, L.P.	Private Debt Fund	20,322	28,047
Peak Rock Capital Fund III-A, L.P.	Private Equity Fund	3,488	6,056
Brighton Park Capital Fund I, L.P.	Private Equity Fund	4,941	8,224
Global Infrastructure Partners III-B Feeder Fund, L.P.	Infrastructure Fund	3,477	5,227
IFM USIDF (US) A, L.P.	Private Debt Fund	6,693	8,852
Brookfield Super-Core Infrastructure Partners	Infrastructure Fund	15,610	23,512
DW Healthcare Partners V, L.P.	Private Equity Fund	4,474	7,378
Global Infrastructure Partners IV-B Feeder Fund, L.P.	Infrastructure Fund	13,877	18,451
CC&L Q Emerging Markets Equity Fund	Global Equity Fund	17,141	21,787
Lubert-Adler Recovery & Enhancement Capital Fund C, L.P.	Real Estate Fund	11,561	10,612
Warren Equity Partners Fund III-A, L.P.	Private Equity Fund	6,832	10,107
Luminate Capital Partners III-A, LP	Private Equity Fund	5,800	6,955
Core Industrial Partners Fund II, Parallel L.P.	Private Equity Fund	4,430	6,652
Core Industrial Partners Fund III, Parallel L.P.	Private Equity Fund	596	557
Level Equity Opportunities Fund 2021, L.P.	Private Equity Fund	2,418	2,933
Level Equity Growth Partners V, L.P.	Private Equity Fund	2,701	3,569
Brighton Park Capital Fund II, L.P.	Private Equity Fund	1,357	1,417
Warren Equity Partners Fund IV-A, L.P.	Private Equity Fund	2,315	2,972
Parthenon Investors VII Parallel, L.P.	Private Equity Fund	376	325
Brookfield Strategic Real Estate Partners II LP	Real Estate Fund	3,105	2,901
Mesa West Core Lending Fund. L.P.	Private Debt Fund	21,725	21,124
Brookfield Strategic Real Estate Partners III LP	Real Estate Fund	13,070	17,403
Cortland Growth & Income, L.P.	Real Estate Fund	20,923	20,738
Mesa West Real Estate Income Fund V, L.P.	Private Debt Fund	7,255	7,291
Great Hill Equity Partners VII-Pref PV, L.P.	Private Equity Fund	2,391	3,476
Great Hill Equity Partners VIII-Pref PV, L.P.	Private Equity Fund	2,589	2,439
<b>Plan Assets</b>		<b>826,195</b>	<b>1,030,774</b>

**ENBRIDGE EMPLOYEE SERVICES, INC.  
EMPLOYEES' PENSION PLAN  
EIN: 76-0697621 PN:002**

**FORM 5500, SCHEDULE H, LINE 4I -  
SCHEDULE OF ASSETS (HELD AT END OF YEAR)**

a. b. Identity of issue, borrower, lessor, or similar party <i>(thousands of dollars)</i>	c. Description of investment including maturity date, rate of interest, par or maturity value	d. Cost December 31,	e. Current Value December 31,
Long Term Government Bond Index Fund	Government Bond Index Fund	4,502	4,265
Long Term Credit Bond Index Fund	Corporate Bond Index Fund	12,686	12,895
USAA Eagle Real Estate Fund	Real Estate Fund	1,391	1,454
MetLife Core Property Fund, LP	Real Estate Fund	982	1,131
EB Temporary Investment Fund, 1.147% 12/31/49	Short-Term Investment	1,668	1,668
Russell 1000 Alpha Tilts Fund	Global Equity Fund	2,797	4,798
MSCI Emerging Markets Free Fund	Global Equity Fund	944	1,009
BlackRock MSCI World Index Fund	Global Equity Fund	5,640	8,857
BlackRock MSCI Canada Small Cap Equity Index Fund	Global Equity Fund	43	46
BlackRock MSCI EAFE Small Cap Equity Index Fund	Global Equity Fund	402	404
BlackRock MSCI USA Small Cap Equity Index Fund	Global Equity Fund	625	703
World Ex-US Alpha Tilts Fund	Global Equity Fund	1,183	1,673
Morgan Stanley Institutional Fund, Inc. Global Franchise Portfolio Class IS	Global Equity Fund	2,062	2,142
GQG Partners Global Equity Fund CIT Class C	Global Equity Fund	2,615	3,568
Brandes Global Small Cap Portfolio	Global Equity Fund	811	1,598
Hillsdale Global Performance Equity Fund	Global Equity Fund	1,304	1,782
Global Infrastructure Partners B, L.P.	Infrastructure Fund	36	1
Global Infrastructure Partners II-B Feeder Fund, L.P.	Infrastructure Fund	84	66
IFM Global Infrastructure (US), L.P.	Infrastructure Fund	1,941	3,835
KPS Special Situations Fund V	Private Equity Fund	202	294
KPS Special Situations Fund VI	Private Equity Fund	23	23
Centana Growth Partners II, L.P.	Private Equity Fund	193	246
Centana Growth Partners III, L.P.	Private Equity Fund	1	(1)
Parthenon Investors VI Parallel, L.P.	Private Equity Fund	269	465
Tenex Capital Partners III, L.P.	Private Equity Fund	355	415
Oaktree Opportunities Fund XI, L.P.	Private Debt Fund	1,386	1,913
Peak Rock Capital Fund III-A, L.P.	Private Equity Fund	238	413
Brighton Park Capital Fund I, L.P.	Private Equity Fund	337	561
Global Infrastructure Partners III-B Feeder Fund, L.P.	Infrastructure Fund	237	357
IFM USIDF (US) A, L.P.	Private Debt Fund	457	604
Brookfield Super-Core Infrastructure Partners	Infrastructure Fund	1,065	1,604
DW Healthcare Partners V, L.P.	Private Equity Fund	305	503
Global Infrastructure Partners IV-B Feeder Fund, L.P.	Infrastructure Fund	947	1,259
CC&L Q Emerging Markets Equity Fund	Global Equity Fund	1,169	1,487
Lubert-Adler Recovery & Enhancement Capital Fund C, L.P.	Real Estate Fund	789	724
Warren Equity Partners Fund III-A, L.P.	Private Equity Fund	466	690
Luminate Capital Partners III-A, LP	Private Equity Fund	396	474
Core Industrial Partners Fund II, Parallel L.P.	Private Equity Fund	302	454
Core Industrial Partners Fund III, Parallel L.P.	Private Equity Fund	41	38
Level Equity Opportunities Fund 2021, L.P.	Private Equity Fund	165	200
Level Equity Growth Partners V, L.P.	Private Equity Fund	184	243
Brighton Park Capital Fund II, L.P.	Private Equity Fund	93	97
Warren Equity Partners Fund IV-A, L.P.	Private Equity Fund	158	203
Parthenon Investors VII Parallel, L.P.	Private Equity Fund	26	22
Brookfield Strategic Real Estate Partners II LP	Real Estate Fund	212	198
Mesa West Core Lending Fund, L.P.	Private Debt Fund	1,482	1,441
Brookfield Strategic Real Estate Partners III LP	Real Estate Fund	892	1,187
Cortland Growth & Income, L.P.	Real Estate Fund	1,427	1,415
Mesa West Real Estate Income Fund V, L.P.	Private Debt Fund	495	497
Great Hill Equity Partners VII-Pref PV, L.P.	Private Equity Fund	163	237
Great Hill Equity Partners VIII-Pref PV, L.P.	Private Equity Fund	177	166
<b>401(h) Account Assets</b>		<b>56,368</b>	<b>70,324</b>

**Schedule SB, line 32 — Schedule of Amortization Bases**

The total shortfall amortization charge is the sum of the individual shortfall amortization installment for each plan year since the IRC Section 430 changes made by ARPA took effect for the plan. Although an individual shortfall amortization installment can be negative, the combined shortfall amortization charge cannot be less than \$0.

Shortfall bases					
Year established		Outstanding balance	Years remaining		2024 Installment
2024	\$	21,476,173	15	\$	1,953,912
Total	\$	21,476,173		\$	1,953,912

***Schedule SB, line 25 — Change in Method***

No method changes have occurred since the January 1, 2023 valuation for Legacy Enbridge and Legacy Spectra. For the mid-year Dominion Energy mergers, a prorated portion of the minimum required contribution and credit balance, if applicable, was included for the acquired population.

**Schedule SB, line 24 — Change in Actuarial Assumptions****Actuarial assumption changes since prior valuation**

- Expected return on plan assets was updated from 7.29% for Legacy Enbridge and Legacy Spectra and 5.74% for Dominion Energy per year to 7.45% per year.
- Expense included in the normal cost increased from \$5,948,507 to \$6,118,559.
- Annuity conversion rates for cash balance lump sums use IRC Section 417(e) lump sum rates for the September preceding the valuation date.
- Inflation assumption was updated to select and ultimate grading from 4.00% down to 2.20% for 2027 for Legacy Enbridge and Legacy Spectra and 2.20% for Dominion Energy.
- Social security wage base assumption was updated to select and ultimate grading from 4.75% down to 2.95% for 2027 for Legacy Enbridge and Legacy Spectra and to 2.95% for Dominion Energy.
- Interest crediting rate was updated to 4.50% for Legacy Enbridge and Legacy Spectra and 3.75% for Dominion Energy.
- Salary increases, retirement rates, withdrawal rates, percent married assumption, form of payment and benefit commencement age assumptions were updated based on an experience study undertaken in 2023 using data from 2018 through 2022 for Legacy Enbridge and Legacy Spectra.
- Salary increases for Dominion Energy were updated to use the Enbridge salary increase table.