

## **SUMMARY ANNUAL REPORT FOR MAGELLAN 401(K) PLAN**

This is the final summary of the annual report Form 5500 Annual Return/Report of Employee Benefit Plan of Magellan 401(K) Plan and Employer Identification Number 20-0019326/Plan Number 003 for the plan year January 1, 2024 through September 26, 2024. The final Form 5500 annual report has been filed with the Employee Benefits Security Administration, as required under the Employee Retirement Income Security Act of 1974 (ERISA). Your plan is a single employer, defined contribution plan with the following characteristics: profit sharing, code section 401(k) feature, code section 401(m) arrangement, ERISA section 404(c), participant-directed brokerage account, member of a controlled group and total or partial participant-directed account.

### **Basic Financial Statement**

Benefits under the plan are provided by insurance contracts and a trust fund. Plan expenses were \$99,069,142. These expenses included \$98,152 in administrative expenses and \$98,970,990 in benefits paid to participants and beneficiaries. There were no participants in or beneficiaries of the plan at the end of the plan year.

The value of plan assets, after subtracting liabilities of the plan, was \$0 as of the end of the plan year, compared to \$93,963,943 as of the beginning of the plan year. During the plan year, the plan experienced a change in its net assets of -\$93,963,943. This change includes unrealized appreciation or depreciation in the value of plan assets; that is, the difference between the value of the plan's assets at the end of the year and the value of the assets at the beginning of the year or the cost of assets acquired during the year. The plan had a total income of \$5,105,199 which was earnings from investments.

### **Your Rights to Additional Information**

You have the right to receive a copy of the full annual report, or any part thereof, on request. The items listed below are included in that report:

- An accountant's report;
- Financial information and information on payments to service providers;
- Information regarding any common or collective trusts, pooled separate accounts, master trusts or 103-12 investment entities in which the plan participates.

To obtain a copy of the full annual report, or any part thereof, write or call the Plan Administrator, ONEOK, Inc. Benefit Plan Administration Committee, 100 West 5th Street, Tulsa, OK 74103 and phone number, 918-588-7714. The charge to cover copying costs will be \$6.00 for the full annual report, or \$0.25 per page for any part thereof.

You also have the right to receive from the plan administrator, on request and at no charge, a statement of the assets and liabilities of the plan and accompanying notes, or a statement of income and expenses of the plan and accompanying notes, or both. If you request a copy of the full annual report from the plan administrator, these two statements and accompanying notes will be included as part of that report. The charge to cover copying costs given above does not include a charge for the copying of these portions of the report because these portions are furnished without charge.

You also have the legally protected right to examine the annual report at the main office of the plan: ONEOK, Inc., 100 West 5th Street, Tulsa, OK 74103, and at the U.S. Department of Labor in Washington, D.C., or to obtain a copy from the U.S. Department of Labor upon payment of copying costs. Requests to the Department should be addressed to: Public Disclosure Room, Room N-1513, Employee Benefits Security Administration, U.S. Department of Labor, 200 Constitution Avenue, N.W., Washington, D.C. 20210. The annual report is also available online at the Department of Labor website [www.efast.dol.gov](http://www.efast.dol.gov).