Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

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

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

OMB Nos. 1210-0110
1210-0089

2021

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021

A This return/report is for:
- [ ] a multiemployer plan
- [X] a multiple-employer plan (Filers checking this box must attach a list of 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:
- [X] Form 5558
- [ ] automatic extension
- [ ] the DFVC program
- [ ] special extension (enter description)

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
THE SAVANNAH RIVER NUCLEAR SOLUTIONS, LLC MULTIPLE EMPLOYER PENSION PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 04/01/1989

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

BENEFITS AND PAYROLL ACCOUNTING
BLDG. 703-1B, RM. 1145
AIKEN, SC 29808

2b Employer Identification Number (EIN) 61-1565172

2c Plan Sponsor's telephone number 803-952-5706

2d Business code (see instructions) 541990

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/13/2022	REBECCA WARD
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/13/2022	ROSANNE THORNTON
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

SAVINGS PENSION PLAN BEN. COMM. PLAN ADMINISTRATOR

SAVANNAH RIVER NUCLEAR SOLUTIONS
BLDG. 703-1B, RM. 2183
AIKEN, SC 29808

3b Administrator's EIN: 27-0583928

3c Administrator's telephone number: 803-952-5748

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

4b EIN

4d PN

5 Total number of participants at the beginning of the plan year	**5**	16418
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines **6a(1), 6a(2), 6b, 6c,** and **6d**).		
a(1) Total number of active participants at the beginning of the plan year	**6a(1)**	2788
a(2) Total number of active participants at the end of the plan year	**6a(2)**	2366
b Retired or separated participants receiving benefits	**6b**	9841
c Other retired or separated participants entitled to future benefits	**6c**	2461
d Subtotal. Add lines **6a(2)**, **6b**, and **6c**	**6d**	14668
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	1551
f Total. Add lines **6d** and **6e**	**6f**	16219
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	0
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

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

1A

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

9a Plan funding arrangement (check all that apply)

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

9b Plan benefit arrangement (check all that apply)

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

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

a Pension Schedules

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

b General Schedules

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

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

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

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

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

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

Receipt Confirmation Code_____

SCHEDULE SB (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Single-Employer Defined Benefit Plan Actuarial Information

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

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

OMB No. 1210-0110

2021

This Form is Open to Public Inspection

For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021

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

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

A Name of plan
THE SAVANNAH RIVER NUCLEAR SOLUTIONS, LLC MULTIPLE EMPLOYER PENSION PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
SAVANNAH RIVER NUCLEAR SOLUTIONS, LLC

D Employer Identification Number (EIN)
61-1565172

E Type of plan: ☐ Single ☒ Multiple-A ☐ Multiple-B

F Prior year plan size: ☐ 100 or fewer ☐ 101-500 ☒ More than 500

Part I Basic Information

1 Enter the valuation date: Month 01 Day 01 Year 2021

2 Assets:

a Market value	**2a**	3843550006
b Actuarial value	**2b**	3504850243

3 Funding target/participant count breakdown

	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment	11026	2357175151	2357175151
b For terminated vested participants	2604	176935450	176935450
c For active participants	2788	1317377682	1328613724
d Total	16418	3851488283	3862724325

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

a Funding target disregarding prescribed at-risk assumptions	**4a**	
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	**4b**	
5 Effective interest rate	**5**	4.95 %
6 Target normal cost		
a Present value of current plan year accruals	**6a**	64555890
b Expected plan-related expenses	**6b**	13307224
c Total (line 6a + line 6b)	**6c**	77863114

Statement by Enrolled Actuary

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

SIGN HERE

Signature of actuary

10/12/2022
Date

DAVID R. JARRETT
Type or print name of actuary

20-04821
Most recent enrollment number

BUCK GLOBAL, LLC
Firm name

412-281-2506
Telephone number (including area code)

11 STANWIX STREET, SUITE 700
PITTSBURGH, PA 15222

Address of the firm

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

Part II Beginning of Year Carryover and Prefunding Balances

		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	0
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9	Amount remaining (line 7 minus line 8)	0	0
10	Interest on line 9 using prior year's actual return of 16.23 %	0	0
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		98142516
	b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of 5.38 %		5280067
	b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
	c Total available at beginning of current plan year to add to prefunding balance		103422583
	d Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	0

Part III Funding Percentages

14	Funding target attainment percentage	14	90.73 %
15	Adjusted funding target attainment percentage	15	90.73 %
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	85.64 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and Liquidity Shortfalls

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

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
03/31/2021	86186440	0			
10/15/2021	43093220	0			
01/14/2022	43093220	0			
03/31/2022	209813560	0			
			Totals ► 18(b)	382186440	18(c) 0

19	Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:		
	a Contributions allocated toward unpaid minimum required contributions from prior years	19a	0
	b Contributions made to avoid restrictions adjusted to valuation date	19b	0
	c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	365230329

20 Quarterly contributions and liquidity shortfalls:

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

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

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

Liquidity shortfall as of end of quarter of this plan year

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

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

21 Discount rate:

a Segment rates:

1st segment:	2nd segment:	3rd segment:	
3.32 %	4.79 %	5.47 %	☐ N/A, full yield curve used

b Applicable month (enter code)	**21b**	4
22 Weighted average retirement age	**22**	63

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

Part VI Miscellaneous Items

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

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

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

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

Part VIII Minimum Required Contribution For Current Year

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

a Target normal cost (line 6c)	**31a**	77863114
b Excess assets, if applicable, but not greater than line 31a	**31b**	0

32 Amortization installments:

	Outstanding Balance	Installment
a Net shortfall amortization installment	357874082	113662308
b Waiver amortization installment	0	0

33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	**33**	
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)	**34**	191525422

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

36 Additional cash requirement (line 34 minus line 35)	**36**	191525422
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	**37**	365230329
38 Present value of excess contributions for current year (see instructions)		
a Total (excess, if any, of line 37 over line 36)	**38a**	173704907
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	**38b**	0
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	**39**	0
40 Unpaid minimum required contributions for all years	**40**	0

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

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

a Schedule elected ☐ 2 plus 7 years ☒ 15 years

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

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

For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021

A Name of plan	**B** Three-digit plan number (PN) ▶
THE SAVANNAH RIVER NUCLEAR SOLUTIONS, LLC MULTIPLE EMPLOYER PENSION PLAN	001
C Plan sponsor's name as shown on line 2a of Form 5500	**D** Employer Identification Number (EIN)
SAVANNAH RIVER NUCLEAR SOLUTIONS, LLC	61-1565172

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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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)

SAVANNAH RIVER NUCLEAR SOLUTIONS

26-0240191

(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?
14 50	PLAN ADMINISTRATOR	449843	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

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

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

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)

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

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

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

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

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

Part I Service Provider Information (continued)

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

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

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

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

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

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

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

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

OMB No. 1210-0110

2021

This Form is Open to Public Inspection.

For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021

A Name of plan
THE SAVANNAH RIVER NUCLEAR SOLUTIONS, LLC MULTIPLE EMPLOYER PENSION PLAN

B Three-digit plan number (PN) ▶ 001

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
SAVANNAH RIVER NUCLEAR SOLUTIONS, LLC

D Employer Identification Number (EIN)
61-1565172

Part I Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)

(Complete as many entries as needed to report all interests in DFEs)

a Name of MTIA, CCT, PSA, or 103-12 IE: SRNS MASTER TRUST

b Name of sponsor of entity listed in (a): SAVINGS PENSION BEN. COMM. PLAN ADMIN.

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
26-0240191-001	M	4160851898

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

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

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

OMB No. 1210-0110

2021

This Form is Open to Public Inspection

For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021

A Name of plan
THE SAVANNAH RIVER NUCLEAR SOLUTIONS, LLC MULTIPLE EMPLOYER PENSION PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
SAVANNAH RIVER NUCLEAR SOLUTIONS, LLC

D Employer Identification Number (EIN)
61-1565172

Part I Asset and Liability Statement

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	169424669	252906780
(2) Participant contributions	1b(2)		
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)	3675840050	4160851898
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)		
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

			(a) Beginning of Year	**(b)** End of Year
1d	Employer-related investments:			
	(1) Employer securities	1d(1)		
	(2) Employer real property	1d(2)		
e	Buildings and other property used in plan operation	1e		
f	Total assets (add all amounts in lines 1a through 1e)	1f	3845264719	4413758678
	Liabilities			
g	Benefit claims payable	1g		
h	Operating payables	1h		
i	Acquisition indebtedness	1i		
j	Other liabilities	1j		
k	Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
	Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	3845264719	4413758678

Part II Income and Expense Statement

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

	Income		**(a)** Amount	**(b)** Total
a	**Contributions:**			
	(1) Received or receivable in cash from: **(A)** Employers	2a(1)(A)	382242250	
	(B) Participants	2a(1)(B)		
	(C) Others (including rollovers)	2a(1)(C)		
	(2) Noncash contributions	2a(2)		
	(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		382242250
b	**Earnings on investments:**			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
	(B) U.S. Government securities	2b(1)(B)		
	(C) Corporate debt instruments	2b(1)(C)		
	(D) Loans (other than to participants)	2b(1)(D)		
	(E) Participant loans	2b(1)(E)		
	(F) Other	2b(1)(F)		
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		0
	(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
	(B) Common stock	2b(2)(B)		
	(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)		
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		0
	(3) Rents	2b(3)		
	(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
	(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
	(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0
	(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
	(B) Other	2b(5)(B)		
	(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		404948947
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		787191197
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	207280170	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		207280170
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses: (1) Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)	11417068	
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		11417068
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		218697238
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		568493959
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

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

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

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

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

(1) Name: ELLIOTT DAVIS, LLC **(2)** EIN: 57-0381582

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

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

Part IV Compliance Questions

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

During the plan year:

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

			Yes	No	Amount
b	Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	**4b**		X	
c	Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	**4c**		X	
d	Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	**4d**		X	
e	Was this plan covered by a fidelity bond?	**4e**	X		1000000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	**4f**		X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4g**		X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4h**		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	**4i**		X	
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	**4j**		X	
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	**4k**		X	
l	Has the plan failed to provide any benefit when due under the plan?	**4l**		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	**4m**			
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3	**4n**			

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

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

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

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

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

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year 438192.

SCHEDULE R (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Retirement Plan Information

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

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

OMB No. 1210-0110

2021

This Form is Open to Public Inspection.

For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021

A Name of plan
THE SAVANNAH RIVER NUCLEAR SOLUTIONS, LLC MULTIPLE EMPLOYER PENSION PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
SAVANNAH RIVER NUCLEAR SOLUTIONS, LLC

D Employer Identification Number (EIN)
61-1565172

Part I Distributions

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

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

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

EIN(s): 61-1565172

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** | 0

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

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

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

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

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

6	**a** Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived)	**6a**	
	b Enter the amount contributed by the employer to the plan for this plan year	**6b**	
	c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount)	**6c**	

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

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

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

Part III Amendments

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

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

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

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

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

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

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

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

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

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

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

a Enter the percentage of plan assets held as:
Stock: 53.6 % Investment-Grade Debt: 25.8 % High-Yield Debt: 0.0 % Real Estate: 3.9 % Other: 16.7 %

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

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

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

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

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

☐ Yes.

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

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

☐ No. Other. Provide explanation _____

Savannah River Nuclear Solutions, LLC
Multiple Employer Pension Plan and Trust

Report on the Financial Statements

For the years ended December 31, 2021 and 2020

elliott davis

Savannah River Nuclear Solutions, LLC Multiple Employer Pension Plan and Trust

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elliott davis

Independent Auditor's Report

Plan Administrator and the Savings and
Pension Administrative Committee
Savannah River Nuclear Solutions, LLC
Multiple Employer Pension Plan and Trust
Aiken, South Carolina

Scope and Nature of the ERISA Section 103(a)(3)(C) Audit of the 2021 Financial Statements

We have performed an audit of the financial statements of Savannah River Nuclear Solutions, LLC Multiple Employer Pension Plan and Trust (the "Plan"), an employee benefit plan subject to the Employee Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) (ERISA Section 103(a)(3)(C) audit). The financial statement comprise the statements of net assets available for benefits as of December 31, 2021, the related statements of changes in net assets available for benefits for the year ended and the statement of accumulated plan benefits as of December 31, 2020, and the related statement of changes in accumulated plan benefits for the year then ended, and the related notes to the financial statements (2021 financial statements).

Management, having determined it is permissible in the circumstances, has elected to have the audit of the 2021 Plan's financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's (DOL) Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audit need not extend to any statements of information related to assets held for investment of the Plans (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 the assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA (qualified institution).

Management has obtained a certification from BNY Mellon N.A. as of and for the year ended December 31, 2021, stating that the certified investment information, as described in Note 4 to the financials statements, is complete and accurate.

Opinion on the 2021 Financial Statements

In our opinion, based on our audit and on the procedures performed as described in the Auditor's Responsibilities for the Audit of the 2021 Financial Statements section:

- The amounts and disclosures in the accompanying 2021 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 (U.S. GAAP).

- The information in the accompanying 2021 financial statements related to assets held by and certified to by BNY Mellon N.A. 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 on the 2021 Financial Statements

We conducted our audit in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the 2021 Financial Statement 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 related to our audit. 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 2021 Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with U.S. 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 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 2021 Financial Statements

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit of the 2021 Financial Statements section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if, there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.

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

Auditor's Responsibilities for the Audit of the 2021 Financial Statements, Continued

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

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

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

Our audit did not extend to the certified investment information, except for obtaining and reading the certification, comparing the certified investment information with the related information presented and disclosed in the financial statements, and reading the disclosures relating to the certified investment information to assess whether they are in accordance with the presentation and disclosure requirements of U.S. 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 U.S. 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.

Auditor's Report on the 2020 Financial Statements

We have audited the statements of net assets available for benefits as of December 31, 2020 and the related statements of changes in net assets available for benefits for the year then ended, and the statement of accumulated plan benefits of the Plan as of December 31, 2019 (not presented herein) and the related statement of changes in accumulated plan benefits for the year then ended (not presented herein), and in our report dated October 14, 2021, we expressed an unmodified opinion on those financial statements.

Elliott Davis, LLC

Augusta, Georgia
October 12, 2022

Savannah River Nuclear Solutions, LLC Multiple Employer Pension Plan and Trust

Statements of Net Assets Available for Benefits

As of December 31, 2021 and 2020

	2021	2020
Assets		
Investments at fair value		
Plan interest in Master Trust (see Note 4)	$ 4,160,851,898	$ 3,675,840,050
Contributions receivable	252,906,780	169,424,669
Total assets	4,413,758,678	3,845,264,719
Liabilities		
Accrued expenses	1,995,363	965,929
Net assets available for benefits	$ 4,411,763,315	$ 3,844,298,790

See Notes to the Financial Statements

Savannah River Nuclear Solutions, LLC Multiple Employer Pension Plan and Trust

Statements of Changes in Net Assets Available for Benefits

For the years ended December 31, 2021 and 2020

	2021	2020
Additions		
Plan interest in investment income of Master Trust	$ 404,948,947	$ 518,575,542
Employer contributions	382,242,250	290,591,342
Total additions	787,191,197	809,166,884
Deductions		
Benefits paid to participants	207,280,170	196,583,621
Administrative expenses	12,446,502	10,778,340
Total deductions	219,726,672	207,361,961
Net increase	567,464,525	601,804,923
Net assets available for benefits, beginning of year	3,844,298,790	3,242,493,867
Net assets available for benefits, end of year	$ 4,411,763,315	$ 3,844,298,790

See Notes to the Financial Statements

Savannah River Nuclear Solutions, LLC Multiple Employer Pension Plan and Trust

Statement of Accumulated Plan Benefits

As of December 31, 2020

Actuarial present value of accumulated Plan benefits	
Vested benefits:	
Participants currently receiving payments	$ 2,144,818,632
Other participants	1,345,840,480
Total vested benefits	3,490,659,112
Nonvested benefits	9,892,844
Total actuarial present value of accumulated Plan benefits	$ 3,500,551,956

See Notes to the Financial Statements

Savannah River Nuclear Solutions, LLC Multiple Employer Pension Plan and Trust

Statement of Changes in Accumulated Plan Benefits

For the year ended December 31, 2020

Actuarial present value of accumulated Plan benefits at beginning of year	$ 3,240,925,260
Increase (decrease) during the year attributed to:	
Change in actuarial assumptions (See Note 3)	196,940,753
Benefits accumulated	58,141,023
Increase for interest	201,128,541
Benefits paid	(196,583,621)
Net increase	259,626,696
Actuarial present value of accumulated Plan benefits at end of year	$ 3,500,551,956

See Notes to the Financial Statements

Note 1. Description of the Plan

The following brief description of Savannah River Nuclear Solutions, LLC Multiple Employer Pension Plan and Trust (the "Plan") provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General:

The Plan was established on April 1, 1989. The Plan is a noncontributory, defined benefit pension plan covering all eligible employees of the Participating Employers. The Participating Employers include Savannah River Nuclear Solutions, LLC ("SRNS"), Savannah River Remediation LLC ("SRR") and Battelle Savannah River Alliance ("BSRA"), the current contractors at the Savannah River Site in Aiken, South Carolina ("SRS") that participate in the Plan, and certain former SRS contractors that previously participated in the Plan (collectively, the "Participating Employers"). The Plan is currently sponsored by SRNS, SRR, and BSRA (together, the "Plan Sponsor"). Although SRNS, SRR, and BSRA sponsor the Plan, the Plan's obligations are settled by the U.S. Department of Energy ("DOE") under the operating budget for the Savannah River Site ("SRS"), a DOE facility located near Aiken, South Carolina.

The Plan is a participant in the Savannah River Nuclear Solutions, LLC, Master Trust (the "Master Trust") of which BNY Mellon, N.A. is the trustee. See Note 4.

The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

Participants' accounts:

Under the Plan provisions, amounts are credited by the Plan Sponsor to the participants' hypothetical accounts. The accounts are allocated compensation credits and investment credits at the end of every quarter. The compensation credits are allocated based on a percentage of the participants' certified compensation as defined in the plan document for the particular quarter. The applicable percentage is based on the participants' age plus years of credited service (as defined in the plan document) at the end of the quarter. Age and credited service are determined in whole years at the end of the quarter.

Eligibility:

Eligible employees are full-service employees, as defined by the Plan, and limited service employees who work more than 1,000 hours during any 12 month period. Full-service employees were eligible to participate in the Plan as of their first day of employment or re-employment with the Participating Employers. Employees of former SRS contractors who were eligible to participate in the Plan are not eligible to accrue additional benefits in the Plan after June 30, 2009. In 2009, the Plan was partially frozen through an amendment that limited the addition of eligible employees to the Plan to those that were employed as of August 1, 2008, for employees of SRNS and as of September 30, 2009, for employees of SRR that were former employees of former SRS contractors, as defined by the Plan.

Note 1. Description of the Plan, Continued

Pension benefits:

The Plan provides for a normal retirement benefit at age 65. Benefits are determined primarily as a function of both a participant's years of service, as defined by the Plan, and their highest compensation over 36 consecutive months at any time throughout the participant's employment by the Participating Employers. After 15 years of eligibility service, as defined by the Plan, participants are eligible for an unreduced normal retirement pension benefit. The Plan also provides for early retirement, optional retirement, joint and survivor, and disability benefits.

Vesting:

Participants become 100% vested after 5 years of credited service. Persons terminating prior to achieving 5 years of credited service forfeit their right to receive pension benefits.

Contributions and funding policy:

Contributions to the Plan are made at the direction of the Plan Sponsor from the DOE's operating budget for SRS. The funding policy adopted for the Plan, subject to minimum and maximum funding requirements of ERISA and the Internal Revenue Code ("IRC"), is to contribute such amounts as determined on an actuarial basis to provide assets sufficient to meet the Plan's benefit obligations. The Plan Sponsor directs the payment of quarterly contributions, on behalf of the DOE, based on the operating budget for SRS to meet, or exceed, minimum funding requirements of the Plan. The Plan met the minimum funding requirements for the Plan years ended December 31, 2021 and 2020, and the Adjusted Funding Target Attainment Percentage determined by the Plan's actuary (see Note 3 and Note 7) as of January 1, 2021 was 90.73%.

Note 2. Summary of Significant Accounting Policies and Activities

Basis of accounting:

The Plan's financial statements have been prepared on the accrual method of accounting and in conformity with accounting principles generally accepted in the United States of America ("GAAP").

Use of estimates:

The preparation of financial statements in accordance with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of Plan assets available for benefits and the actuarial present value of the accumulated plan benefits as of the date of the financial statements. Actual results could differ from those estimates. The Plan uses an actuary to determine the actuarial present value of accumulated plan benefits. A change in the actuarial assumptions used could significantly change the amount of the actuarial present value of accumulated plan benefits reported in the accompanying financial statements.

Note 2. Summary of Significant Accounting Policies and Activities, Continued

Investment valuation and income recognition:

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Plan Administrator and the Savings and Pension Administrative Committee determine the Plan's valuation policies utilizing information provided by the trustee and investment managers. See Note 5 for disclosure of fair value measurements. See Note 4 for disclosure of the Plan's interest in the Master Trust.

The Master Trust records purchases and sales of securities on a trade date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. The Plan's interest in Master Trust investment income or loss includes the gains and losses of the Master Trust on investments bought and sold as well as held during the year.

Payment of benefits:

Benefit payments to participants are recorded upon distribution.

Expenses:

Certain administrative functions are performed by officers and/or employees of SRNS, SRR, and BSRA. No such officer or employee receives compensation from the Plan. Certain other administrative expenses are paid directly by the Master Trust and allocated to the Plan as a reduction of investment earnings. Administrative expenses paid by the Master Trust are allocated to the Plan based upon the Plan's proportionate interest in the Master Trust and the nature of the expense. The Plan's proportionate interest in the Master Trust is 100%. See Note 4 and Note 10.

Subsequent events:

The Plan has evaluated subsequent events through October 12, 2022, which is the date these financial statements were available to be issued.

Recently issued accounting pronouncements:

Accounting standards that have been issued or proposed by the Financial Accounting Standards Board or other standards-setting bodies are not expected to have a material impact on the Plan's financial statements.

Note 3. Actuarial Present Value of Accumulated Plan Benefits

Accumulated plan benefits are those future periodic payments, including lump-sum distributions that are attributable under the Plan's provisions to the service employees have rendered. Accumulated plan benefits include benefits expected to be paid to:

(a) Retired or terminated employees or their beneficiaries,
(b) Beneficiaries of employees who have died, and
(c) Present employees or their beneficiaries.

Note 3. Actuarial Present Value of Accumulated Plan Benefits, Continued

Benefits under the Plan are accumulated based on employees' compensation during each year of credited service. The accumulated plan benefits for active employees will equal the accumulation, with interest, of the annual benefit accruals as of the benefit information date. Benefits payable under all circumstances (retirement, death, disability, and termination of employment) are included to the extent that they are deemed attributable to employee service rendered to the valuation date.

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

The actuary's estimate of the actuarial present value of accumulated plan benefits is made as of the beginning of the Plan year, January 1, 2021. The Plan Administrator estimates that there were no material changes in the accumulated plan benefits from December 31, 2020 to January 1, 2021. The following were significant actuarial assumptions used in the Plan's valuations as of January 1, 2021:

Discount rate: The actuarial present value of accumulated plan benefits was determined using a discount rate of 5.80%, which decreased from the prior valuation of 6.40%.

Salary increases: Representative values of the assumed annual rates of salary increases are as follows:

Age	Salary increase assumptions
30	6.09%
40	4.22%
50	3.70%

Normal retirement: The probability of retirement at age 50 is 3%, at age 60 is 16%, at age 65 is 30%, and at age 70 is 100%.

Spouses: 75% of the participants are assumed to be married at death. Husbands are assumed to be 3 years older than their wives.

Mortality: Mortality is based on the Pri-2012 Mortality table, projected with Mortality Improvement Scale MP-2020.

For the prior valuation, the Pri-2012 Mortality table, projected with Mortality Improvement Scale MP-2019.

Investment return: The expected return on Plan assets is estimated to be 5.80% per annum.

Note 3. Actuarial Present Value of Accumulated Plan Benefits, Continued

The foregoing actuarial 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 accumulated plan benefits.

Changes in actuarial assumptions that impacted the actuarial present value of accumulated plan benefits by $196,940,753 as of January 1, 2021 compared to January 1, 2020, include an update to the mortality tables, and an update to the expected rate of return, which significantly increased the estimate of the actuarial present value of accumulated plan benefits.

Note 4. Interest in Master Trust and Trustee Certification

The Plan invests in a Master Trust which was established for the investment of the Plan's assets and the retirement plans of other plan sponsors. At December 31, 2021 and 2020, the Plan was the only participating plan in the Master Trust, and, thus, the Plan had a 100% interest in the net assets of the Master Trust. The assets of the Master Trust are held by BNY Mellon N.A. (the "trustee").

The following table presents the net assets of the Master Trust as of December 31, 2021 and 2020:

	2021	2020
	(in thousands)	*(in thousands)*
Assets		
Investments, at fair value:		
Interest bearing cash	$ 15,907	$ 17,698
Corporate stocks	749,288	666,085
Corporate debt instruments	504,291	455,305
U.S. Government securities	400,833	534,614
Municipal and other bonds	17,391	19,240
Investment corporations and limited partnership Interests	676,293	580,852
Common collective trust funds	1,753,317	1,627,675
Registered investment companies	161,572	106,651
Total investments	4,278,892	4,008,120
Accrued interest and dividends receivable	17,818	21,622
Securities sold but not settled	1,127	20,135
Cash, non interest bearing	3,287	-
Total assets	4,301,124	4,049,877
Securities purchased but not settled	140,272	357,440
Benefit payments in excess of cash	-	16,597
Total liabilities	140,272	374,037
Master Trust's net assets available for benefits	$ 4,160,852	$ 3,675,840
Plan interest in Master Trust	$ 4,160,852	$ 3,675,840

Note 4. Interest in Master Trust and Trustee Certification, Continued

The following table presents the changes in net assets for the Master Trust for the years ended December 31, 2021 and 2020:

	2021	2020
	(in thousands)	*(in thousands)*
Interest	$ 18,900	$ 17,541
Dividends	19,105	16,326
Net appreciation in fair value of investments	376,195	491,920
Total Master Trust investment income	414,200	525,787
Administrative and other expenses	(9,251)	(7,212)
Master Trust investment income, net	404,949	518,575
Net transfers between the Plan and Master Trust	80,063	34,173
Net increase in net assets of Master Trust	485,012	552,748
Master Trust net assets, beginning of year	3,675,840	3,123,092
Master Trust net assets, end of year	$ 4,160,852	$ 3,675,840

Net transfers between the Plan and Master Trust represent the net of contributions into the Plan that are invested in the Master Trust and funding received from the Master Trust by the Plan for the payment of benefits to Plan participants and for Plan expenses.

The Plan Administrator obtained a certification from the trustee that the information provided to the Plan Administrator by the trustee regarding the Plan's interest in the investment income of the Master Trust is complete and accurate. The trustee certified that the Plan's interest in the investment income of the Master Trust was $414,199,950 for the year ended December 31, 2021.

Note 5. Fair Value Measurements

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

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

Level 2: Inputs to the valuation methodology include:

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

Note 5. Fair Value Measurements, Continued

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

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

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

The following is a description of the valuation methodologies used for assets of the Master Trust measured at fair value. There have been no changes in methodologies used at December 31, 2021 and 2020.

Interest bearing cash: Consists principally of over-night deposits and certificates of deposit that are valued at cost, which approximates fair value.

Corporate stocks: Valued at the closing price reported on the active market on which the individual securities are traded.

Corporate debt instruments and municipal and other bonds: Valued using pricing models maximizing the use of observable inputs for similar securities. This includes basing the value on yields currently available on comparable securities of issuers with similar credit ratings.

U.S. government securities: Consist of U.S. Treasury Securities valued at unadjusted closing prices quoted in an active market for identical securities and of Agency Securities that are asset-backed or mortgage-backed securities where valuation is based on market corroborated pricing or by utilizing inputs such as yield curves or indices.

Common collective trust funds, investment corporations and limited partnership interests: Valued at the net asset value ("NAV") of units held by the Plan at year-end, without further adjustment. The NAV, as provided by the trustee, is used as a practical expedient to estimate fair value. The NAV is based on the fair value of the underlying investments held by the fund less its liabilities. This practical expedient is not used when it is determined to be probable that the fund will sell the investment for an amount different than the reported NAV. Were the Master Trust to initiate a full redemption of the investment, the investment advisor reserves the right to temporarily delay withdrawal from the trust in order to ensure that securities liquidations will be carried out in an orderly business manner. The terms of each investment may stipulate further liquidity restrictions. See Note 6.

Registered investment companies (mutual funds): Valued at the daily closing price as reported by the fund. Mutual funds held by the Plan are open-end mutual funds that are registered with the Securities and Exchange Commission. These funds are required to publish their daily NAV and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded.

Note 5. Fair Value Measurements, Continued

The following table sets forth by level, within the fair value hierarchy, the investments of the Master Trust, at fair value as of December 31, 2021:

	Level 1	Level 2	Level 3	Total
	(in thousands)	*(in thousands)*	*(in thousands)*	*(in thousands)*
Interest bearing cash	$ -	$ 15,907	$ -	$ 15,907
Corporate stocks	749,288	-	-	749,288
Corporate debt instruments	-	504,291	-	504,291
U.S. Government securities	-	400,833	-	400,833
Municipal and other bonds	-	17,391	-	17,391
Registered investment companies	161,572	-	-	161,572
Master Trust investments in the fair value hierarchy	$ 910,860	$ 938,422	$ -	1,849,282
Investments measured at NAV (a):				2,429,610
Total Master Trust investments at fair value				$ 4,278,892

The following table sets forth by level, within the fair value hierarchy, the investments of the Master Trust, at fair value as of December 31, 2020:

	Level 1	Level 2	Level 3	Total
	(in thousands)	*(in thousands)*	*(in thousands)*	*(in thousands)*
Interest bearing cash	$ -	$ 17,698	$ -	$ 17,698
Corporate stocks	666,085	-	-	666,085
Corporate debt instruments	-	455,305	-	455,305
U.S. Government securities	-	534,614	-	534,614
Municipal and other bonds	-	19,240	-	19,240
Registered investment companies	106,651	-	-	106,651
Master Trust investments in the fair value hierarchy	$ 772,736	$ 1,026,857	$ -	1,799,593
Investments measured at NAV (a):				2,208,527
Total Master Trust investments at fair value				$ 4,008,120

(a) Certain investments that were measured at NAV per share or its equivalent have not been classified in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair value hierarchy to the line items presented in the statements of net assets available for benefits of the Master Trust, as disclosed in Note 4. Also, see Note 6.

Note 6. Investments in Common Collective Trust Funds, Investment Corporations and Limited Partnerships

The Plan's Master Trust has diversified its portfolio of investments by investing in limited partnerships and common collective trust funds. Many of these investments are not actively traded and are subject to certain redemption restrictions that limit the liquidity of those investments to the Plan. These investments are valued at NAV as a practical expedient (see Note 5). The following is a summary of those investments.

	Fair value	Unfunded commitment	Redemption frequency	Redemption notice period
	(in thousands)			
As of December 31, 2021:				
Investment corporations and limited partnership interests:				
UBS Trumbull Property (a)	$ 54,222	$ -	Quarterly	60 days (a)
BPIF Non-Taxable LP (b)	109,869	-	Semi-Annually	60-95 days (b)
Credit basket funds (c)	46,817	-	See (c)	45-65 days (c)
Bank loan funds (d)	59,973	-	See (d)	30-90 days (d)
Stratus Fund (e)	60,383	-	Monthly	60 days (e)
HBK Class A Subclass A.1 Series (f)	88,023	-	Quarterly	90 days (f)
Wolverine Flagship Fund (g)	98,665	-	Quarterly	45 days (g)
Graham Absolute Return LTD (h)	70,066	-	Quarterly	30 days (h)
OWS Capital Offshore Fund (i)	57,265	-	Quarterly	90 days (i)
Selwood AM Credit Fund (j)	31,010	-	Monthly	30 days (j)
Common collective trust funds (k):				
U.S. Government, LT fixed income	390,430	-	Daily	None
Index funds	1,263,976	-	Daily	None
Strategic Property Fund	98,911	-	Daily	None
	$ 2,429,610	$ -		
As of December 31, 2020:				
Investment corporations and limited partnership interests:				
UBS Trumbull Property (a)	$ 60,549	$ -	Quarterly	60 days (a)
BPIF Non-Taxable LP (b)	103,276	-	Semi-Annually	60-95 days (b)
Credit basket funds (c)	44,229	-	See (c)	45-65 days (c)
Bank loan funds (d)	57,456	-	See (d)	30-90 days (d)
Stratus Fund (e)	55,114	-	Monthly	60 days (e)
HBK Class A Subclass A.1 Series (f)	61,168	-	Quarterly	90 days (f)
Wolverine Flagship Fund (g)	69,261	-	Quarterly	45 days (g)
Graham Absolute Return LTD (h)	67,587	-	Monthly	4 days (h)
OWS Capital Offshore Fund (i)	32,171	-	Quarterly	90 days (i)
Selwood AM Credit Fund (j)	30,041	-	Monthly	30 days (j)
Common collective trust funds (k):				
U.S. Government, LT fixed income	258,292	-	Daily	None
Index funds	1,286,852	-	Daily	None
Strategic Property Fund	82,531	-	Daily	None
	$ 2,208,527	$ -		

Note 6. Investments in Common Collective Trust Funds, Investment Corporations and Limited Partnerships, Continued

(a) The investment, UBS Trumbull Property Fund LP, is an investment in a Delaware limited partnership that invests in rental real estate in the U.S., REITs, other real estate holding companies, and mortgage debt instruments. The Master Trust may redeem its investment in the limited partnership by providing at least a 60 day notice prior to the end of a calendar quarter, subject to the limits of available cash in the limit partnership to fund the redemption request. The Master Trust cannot obligate the limited partnership to sell assets or borrow funds to consummate a redemption request of the Master Trust. At December 31, 2021 and 2020, no such redemption was requested, and there were no unfunded commitments to the Plan. See Note 5.

(b) The investment, BPIF Non-Taxable L.P., is an investment in a Blackstone limited partnership, which held as its primary investment a 100% ownership interest in the Blackstone Partners Non-Taxable Offshore Master Fund, Ltd. (the "Blackstone Fund"). The Blackstone Fund is an exempted company, which was incorporated under the laws of the Cayman Islands and is registered as a regulated mutual fund under the Mutual Funds Law of the Cayman Islands. The Blackstone Fund invests in other funds that hold non-traditional investments including commodities, derivative contracts, and equity instruments. The Master Trust may make additional investments into the Blackstone limited partnership on a monthly basis, but it is restricted to making requests of withdrawals from the Blackstone limited partnership to June 30 and December 31 of each year and must provide at least a 60 to 95 day notice of its withdrawal request. At December 31, 2021 and 2020, no such redemption was requested, and there were no unfunded commitments to the Plan. See Note 5.

(c) The credit basket funds consist of investments in Anchorage Capital Partners Offshore, Ltd, class E shares ("Anchorage"); York Credit Opportunities Unit Trust, class AR1 shares ("York"); and King Street Capital, Ltd, class A1 and S shares ("King Street"). The Anchorage, Brigade, and York investments are in companies that are incorporated under the laws of the Cayman Islands. The King Street investment is in a company incorporated under the laws of the British Virgin Islands. Each of the credit basket investments invest substantially all of their assets in other funds. The investments pursue risk adjusted high yield investment strategies in debt securities of distressed or reorganizing companies. The credit basket investments are subject to certain redemption restrictions, as follows: Anchorage – redemption may be requested on each 24 month anniversary, with 45 day notice period; Brigade – redemption may be requested quarterly, with a 60 day notice period; York – redemption may be requested annually, with 60 day notice period; King Street – redemption may be requested for up to 25% of its shares on a quarterly basis with a 65 day notice, or for an accelerated redemption if notice of at least 180 days is provided. At December 31, 2021 and 2020, no such redemption was requested, and there were no unfunded commitments to the Plan. See Note 5.

Note 6. Investments in Common Collective Trust Funds, Investment Corporations and Limited Partnerships, Continued

(d) The bank loan funds consist of investments in Eaton Vance Institutional Senior Loan Fund "Eaton Vance") and. Eaton Vance is a mutual fund company incorporated under the laws of the Cayman Islands. Oaktree is a Delaware limited partnership. The investment strategy of these investments consists of investments in senior bank loans and other senior debt instruments, including bridge loans for high yield bond commitments. The bank loan funds are subject to certain redemption restrictions, as follows: Eaton Vance may be redeemed monthly, with a notice period ranging from 30 to 90 days, depending on the percentage of the planned redemption. Oaktree may be redeemed on a monthly basis, with a notice period ranging from 60 to 90 days and certain provisions that permit the general partner of the fund to delay or suspend such redemptions under the terms of the Partnership agreement. At December 31, 2021 and 2020, no such redemption was requested, and there were no unfunded commitments to the Plan. See Note 5.

(e) The investment, Stratus Feeder Limited, class B shares, is an investment in an open-ended investment company incorporated under the laws of the British Virgin Islands (the "Stratus Fund"). The Stratus Fund invests substantially all of its capital in the Stratus Master Limited, class D1 and E1 shares (the "Stratus Master Fund"). The investment objective of the Stratus Master Fund is to achieve long-term capital appreciation, through returns that seek to be uncorrelated with traditional asset classes. The investment program of the fund consisted of a directional trading strategy, directional volatility trading, an intraday trading, a volatility arbitrage strategy and an equity statistical arbitrage strategy. Redemption of the investment can be made monthly, subject to a 60 day notice period. At December 31, 2021 and 2020, no such redemption was requested, and there were no unfunded commitments to the Plan. See Note 5.

(f) The investment, HBK Multi-Strategy Offshore Fund LTD, class A shares, is an investment in an open-ended investment company incorporated under the laws of the Cayman Islands (the "Offshore Feeder"). The Offshore Feeder invests in HBK Master Fund L.P. (the "Master Fund"). The investment objective of the Offshore Feeder and Master Fund are to invest in an unlimited range of securities, derivatives, and other financial instruments throughout the world. Redemption of the investment can be made quarterly, subject to a 90 day notice period. At December 31, 2021 and 2020, no such redemption was requested, and there were no unfunded commitments to the Plan. See Note 5.

(g) The investment, Wolverine Flagship Fund, is an investment in an open-ended investment company incorporated under the laws of the Cayman Islands. The fund invests in Wolverine Flagship Fund Trading Limited (the "Master Fund"). The investment objective of the fund and Master Fund are to seek returns on capital through the use of arbitrage and relative value strategies. Redemption of the investment can be made quarterly, subject to a 45 day notice period. At December 31, 2021 and 2020, no such redemption was requested, and there were no unfunded commitments to the Plan. See Note 5.

Note 6. Investments in Common Collective Trust Funds, Investment Corporations and Limited Partnerships, Continued

(h) The investment, Graham Absolute Return, LTD, is an investment that invests in Absolute Return Trading LTD, a British Virgin Island business company. The investment objective of the fund is to achieve long-term capital appreciation through professionally managed trading in both U.S. And foreign markets primarily in futures contracts, forward contracts, spot currency contracts, and associated derivative instruments, such as options and swaps as well as equity and fixed income securities, through its investment in Absolute Return Trading LTD, which in turn invests in various master funds. In 2021 Redemption of the investment can be made quarterly, subject to a 30 day notice period. In 2020 Redemption of the investment can be made monthly, subject to a 4 day notice period. At December 31, 2021 and 2020, no such redemption was requested, and there were no unfunded commitments to the Plan. See Note 5.

(i) The investment, OWS Capital Offshore Fund, is an investment in an open-ended investment company incorporated under the laws of the Cayman Islands. The fund invests in One William Street Capital Management, L.P. (the "Master Fund"). The investment objective of the fund and Master Fund are to seek superior risk-adjusted absolute returns primarily through an actively managed portfolio of asset-based credit instruments. Redemption of the investment can be made quarterly, subject to a 90 day notice period. At December 31, 2021 and 2020, no such redemption was requested, and there were no unfunded commitments to the Plan. See Note 5.

(j) The investment, Selwood AM Credit Fund, is an investment in an open-ended investment company incorporated under the laws of the Cayman Islands. The fund invests in Selwood AM Credit Master Fund Limited (the "Master Fund"). The investment objective of the fund and Master Fund are to deliver superior risk adjusted to investors primarily through opportunistic investments in the credit markets by pursuing its objective through investing and trading on a discretionary basis in a range of medium to long-term strategies primarily on credit assets referencing predominantly European and US corporate issuers. Redemption of the investment can be made monthly, subject to a 30 day notice period. At December 31, 2021 and 2020, no such redemption was requested, and there were no unfunded commitments to the Plan. See Note 5.

(k) Each of the Master Trust investments in common collective trusts are direct filing entities.

Note 7. Risks and Uncertainties

The Master Trust, in which the Plan invests, holds various investment securities. Investment securities are exposed to various risks such as interest rate, market, and credit risks as well as liquidity risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect the amounts reported in the 2021 statement of net assets available for benefits.

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

Note 7. Risks and Uncertainties, Continued

The Pension Protection Act of 2006 (PPA) as amended by the Worker, Retiree and Employer Recovery Act of 2008 (WRERA) imposes certain benefit restrictions for qualified defined benefit plans that do not meet certain funding thresholds. The "At-Risk" status is referred to as the Funding Target Attainment Percentage (FTAP). A plan's funded percentage is referred to as the Adjusted Funding Target Attainment Percentage (AFTAP). The AFTAP for the Plan as of January 1, 2021 and 2020 was 90.73% and 85.64%, respectively. Because the Plan's AFTAP equals or exceeds 80%, the Plan is currently not subject to any benefit restrictions. However, material changes in investment returns in future periods could cause the Plan's AFTAP to fall below 80%. If the Plan's AFTAP were to fall below 80%, benefit restrictions would be imposed on the Plan.

Note 8. Plan Termination

The Plan may be amended or discontinued at any time by action of the Plan Administrator, subject to the approval of the DOE, provided no amendment to the Plan shall vest in the Plan Sponsor any interest in, or ownership or control of, any of the present or subsequent funds of the Master Trust.

The Plan Administrator does not currently have plans to terminate the Plan. However, if the Plan were to be terminated, the net assets of the Plan would be allocated, as prescribed by ERISA and its related regulations, generally to provide the following benefits in the order indicated:

a. Annuity benefits that former employees or their beneficiaries have been receiving for at least three years, or that employees eligible to retire for that three-year period would have been receiving if they had retired with benefits in the normal form of annuity under the Plan. The benefit amount is limited to the lowest benefit that was payable (or would have been payable) during those years. The amount is further limited to the lowest benefit that would have been payable under the Plan provisions in effect at any time during the five years preceding Plan termination.

b. Other vested benefits insured by the Pension Benefit Guaranty Corporation ("PBGC") up to the applicable limitations.

c. All other vested benefits (vested benefits not insured by the PBGC).

d. All non-vested benefits.

Certain benefits under the Plan are insured by the PBGC if the Plan terminates. Generally, the PBGC guarantees most vested normal age retirement benefits, early retirement benefits, and certain disability and survivor benefits. However, the PBGC does not guarantee all types of benefits under the Plan, and the amount of benefit protection may be subject to certain limitations.

Whether all participants receive their benefits should the Plan terminate at some future time will depend on the sufficiency, at that time, of the Plan's net assets to provide for accumulated benefit obligations and may also depend on appropriations of the DOE and the level of benefits guaranteed by the PBGC.

Note 9. Tax Status

The Internal Revenue Service has determined and informed the Plan Sponsor by a letter dated August 8, 2013, that the Plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code ("IRC"). Although the Plan has since been amended since applying for the determination letter, the Plan Administrator and its counsel believe that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC and therefore believe that the Plan is qualified and the related trust is tax-exempt.

GAAP requires Plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that more likely than not would not be substantiated upon examination by the Internal Revenue Service. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

Note 10. Related Parties and Party-in-Interest Transactions

BNY Mellon N.A. is the trustee of the Plan and the Master Trust, therefore, transactions with the trustee are considered party-in-interest transactions. The investments of the Master Trust are managed by various fund managers selected by the Plan's Savings and Pension Administrative Committee. The fees of fund managers, which are charged to expense of the Master Trust and are considered party-in-interest transactions, are reflected in the Plan interest in investment income of the Master Trust. The Plan Sponsor receives reimbursements from the Plan for certain costs associated with administering the Plan.

Administrative expenses incurred by the Master Trust and allocated to the Plan include fiduciary, investment management, actuarial and other professional service fees, and other administrative fees. Expenses incurred and paid directly by the Plan include insurance premiums paid to the PBGC and administrative fees. Premiums paid to the PBGC for the years ended December 31, 2021 and 2020 were $10,967,224 and $10,653,048, respectively. Other administrative fees include certain costs reimbursed to the Plan Sponsor and fees from other service providers.

Note 11. Reconciliation of Financial Statements to Form 5500

The following is a reconciliation of net assets available for benefits per the financial statements to Form 5500:

	2021	2020
Net assets available for benefits per the financial statements	$ 4,411,763,315	$ 3,844,298,790
Accrued expenses not recorded on Form 5500	1,995,363	965,929
Net assets available for benefits per Form 5500	$ 4,413,758,678	$ 3,845,264,719

The following is a reconciliation of the net increase per the financial statements to net income per Form 5500:

Net increase per the financial statements	$ 567,464,525	$ 601,804,923
Change in accrued expenses not recorded on Form 5500	1,029,434	(594,609)
Net income per Form 5500	$ 568,493,959	$ 601,210,314

Note 12. COVID-19

On March 11, 2020 the World Health Organization characterized coronavirus (COVID-19) as a pandemic. As a result of COVID-19, there has been heightened risk associated with the pandemic, and this could materially affect the Plan. However, Plan management is unable to estimate the total impact the pandemic will have on the Plan.

Savannah River Nuclear Solutions, LLC
Multiple Employer Pension Plan

EIN: 61-1565172

PLAN NUMBER: 001

ATTACHMENT TO SCHEDULE SB OF 2021 FORM 5500

Schedule SB, Line 26 - Schedule of Active Participant Data

Combined Distribution by Age & Service as of January 1, 2021

		Service									
Age		**<1**	**1-4**	**5-9**	**10-14**	**15-19**	**20 - 24**	**25 - 29**	**30 - 34**	**35 - 39**	**40 +**
<25	Number	0	0	0	0	0	0	0	0	0	0
	Avg. Salary										
25 - 29	Number	0	0	0	0	0	0	0	0	0	0
	Avg. Salary										
30 - 34	Number	0	0	0	0	1	0	0	0	0	0
	Avg. Salary										
35 - 39	Number	0	0	0	16	5	0	0	0	0	0
	Avg. Salary										
40 - 44	Number	0	0	0	24	51	15	0	0	0	0
	Avg. Salary				$129,439	$119,752					
45 - 49	Number	0	0	0	12	35	37	4	1	0	0
	Avg. Salary					$128,644	$127,990				
50 - 54	Number	0	0	0	8	26	48	117	302	0	0
	Avg. Salary					$123,684	$131,251	$127,985	$126,549		
55 - 59	Number	0	0	0	6	18	45	96	685	164	0
	Avg. Salary						$140,267	$126,210	$120,215	$118,918	
60 - 64	Number	0	0	0	4	19	22	79	333	225	73
	Avg. Salary						$127,943	$130,605	$120,064	$126,451	$122,448
65-69	Number	0	0	0	0	12	8	36	113	51	41
	Avg. Salary							$125,441	$126,485	$116,283	$116,866
70 +	Number	0	0	0	1	2	3	9	21	8	12
	Avg. Salary								$126,060		

Savannah River Nuclear Solutions Distribution by Age & Service as of January 1, 2021

		Service									
Age		**<1**	**1-4**	**5-9**	**10-14**	**15-19**	**20 - 24**	**25 - 29**	**30 - 34**	**35 - 39**	**40 +**
<25	Number	0	0	0	0	0	0	0	0	0	0
	Avg. Salary										
25 - 29	Number	0	0	0	0	0	0	0	0	0	0
	Avg. Salary										
30 - 34	Number	0	0	0	0	1	0	0	0	0	0
	Avg. Salary										
35 - 39	Number	0	0	0	13	3	0	0	0	0	0
	Avg. Salary										
40 - 44	Number	0	0	0	23	38	8	0	0	0	0
	Avg. Salary				$126,048	$122,450					
45 - 49	Number	0	0	0	9	29	28	1	1	0	0
	Avg. Salary					$129,409	$126,882				
50 - 54	Number	0	0	0	8	21	40	80	211	0	0
	Avg. Salary					$122,733	$133,260	$127,056	$125,429		
55 - 59	Number	0	0	0	5	14	36	68	492	124	0
	Avg. Salary						$142,682	$125,804	$120,546	$118,087	
60 - 64	Number	0	0	0	2	12	10	62	259	180	66
	Avg. Salary							$126,586	$120,961	$123,527	$122,954
65-69	Number	0	0	0	0	6	5	27	85	46	33
	Avg. Salary							$125,062	$128,557	$115,180	$115,818
70 +	Number	0	0	0	1	1	2	6	18	7	10

Savannah River Remediation Distribution by Age & Service as of January 1, 2021

		Service									
Age		**<1**	**1-4**	**5-9**	**10-14**	**15-19**	**20 - 24**	**25 - 29**	**30 - 34**	**35 - 39**	**40 +**
<25	Number	0	0	0	0	0	0	0	0	0	0
	Avg. Salary										
25 - 29	Number	0	0	0	0	0	0	0	0	0	0
	Avg. Salary										
30 - 34	Number	0	0	0	0	0	0	0	0	0	0
	Avg. Salary										
35 - 39	Number	0	0	0	3	2	0	0	0	0	0
	Avg. Salary										
40 - 44	Number	0	0	0	1	13	7	0	0	0	0
	Avg. Salary										
45 - 49	Number	0	0	0	3	6	9	3	0	0	0
	Avg. Salary										
50 - 54	Number	0	0	0	0	5	8	37	91	0	0
	Avg. Salary							$129,992	$129,145		
55 - 59	Number	0	0	0	1	4	9	28	193	40	0
	Avg. Salary							$127,196	$119,373	$121,495	
60 - 64	Number	0	0	0	2	7	12	17	74	45	7
	Avg. Salary								$116,923	$138,147	
65-69	Number	0	0	0	0	6	3	9	28	5	8
	Avg. Salary								$120,193		
70 +	Number	0	0	0	0	1	1	3	3	1	2
	Avg. Salary										

Savannah River Nuclear Solutions, LLC
Multiple Employer Pension Plan

EIN: 61-1565172

PLAN NUMBER: 001

ATTACHMENT TO SCHEDULE SB OF 2021 FORM 5500

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

Prescribed Funding/PBGC Assumptions and Methods

The following assumptions and methods are prescribed by ERISA, as currently amended.

Funding interest rates

For 2021 Plan Year: Segment Rates with four-month lookback, constrained in accordance with relevant legislation as follows:

	Unconstrained Rates*	Rates Reflecting Corridor**
First Segment Rate	2.22%	3.32%
Second Segment Rate	3.38%	4.79%
Third Segment Rate	3.92%	5.47%
Effective Interest Rate	3.55%	4.95%

For 2020 Plan Year: Segment Rates with four-month lookback, constrained in accordance with relevant legislation as follows:

	Unconstrained Rates*	Rates Reflecting Corridor**
First Segment Rate	2.79%	3.64%
Second Segment Rate	3.92%	5.21%
Third Segment Rate	4.38%	5.94%
Effective Interest Rate	4.06%	5.38%

* Used for maximum tax deduction and 4010 reporting purposes.

** Used for minimum funding and benefit restriction purposes.

Mortality

Mortality tables mandated by current legislation as specified in IRS Regulation 1.430(h)(3)-1, as amended in IRS Notice 2019-67, applied on a fully generational basis.

Actuarial cost method

The Funding Target is the present value of accrued benefits based on compensation and service to date. The Target Normal Cost is the present value of benefits expected to be accrued during the current plan year, reflecting the effect of expected compensation increases during the year and including expected plan administrative expenses to be paid from plan assets during the year.

Non-Prescribed Funding Assumptions and Methods

The following assumptions were selected by the plan's enrolled actuary. The assumptions are chosen based on the experience study done in 2016. The asset valuation method was selected by the plan sponsor with the actuary's advice and is an acceptable method under the applicable provisions of the Internal Revenue Code and associated regulations. The expected asset return is based on an analysis conducted by the plan's investment consultant.

Salary increases

Based on actual experience and future expectations. Includes cost-of-living and merit adjustments. Select ages shown.

Age	Current Year
25	7.67%
30	6.09%
35	4.93%
40	4.22%
45	3.92%
50	3.70%
55	3.56%
60	3.50%

Expenses

Expected plan administrative expenses of $13,307,224 were added to the Target Normal Cost. The expected plan administrative expenses consist of PBGC premiums and administrative expenses anticipated for the plan year.

Frequency of optional payment forms

30% of participants are assumed to elect a single life annuity and 70% are assumed to elect the level income option.

Marital percentage

75% of participants are assumed to be married at death. Husbands are assumed to be 3 years older than their wives.

Retirement rates

Age	Probability of Reduced Retirement	Probability of Unreduced Retirement	Portion Assumed to Receive Optional Retirement Benefits
50	3.00%		5.00%
51	2.00		6.00
52	2.00		7.00
53	3.00		7.00
54	4.00		7.00
55	4.00		8.00
56	5.00		8.00
57	7.00		8.00
58	7.00	20.00%	8.00
59	7.00	16.00	8.00
60	10.00	16.00	8.00
61	13.00	16.00	8.00
62	16.00	22.00	8.00
63	15.00	18.00	8.00
64	15.00	18.00	8.00
65		30.00	7.00
66		30.00	7.00
67		30.00	7.00
68		30.00	7.00
69		30.00	7.00
70		100.00	0.00

Terminated vested participants are assumed to commence receiving benefits the earliest age eligible for unreduced benefits.

Disability rates

Age	Assumption
35	0.03%
40	0.04
45	0.07
50	0.29
55	0.77
60	1.11

Withdrawal rates for active participants not eligible for retirement

Based on actual experience and future expectations. Sample rates as follows:

Age	Assumption
20	13.00%
25	13.00
30	11.60
35	4.90
40	2.70
45	1.80
50	1.90
55	4.80
60	8.80

Asset valuation method

The Actuarial Value of Assets is market value as of the valuation date, including discounted receivable contributions, reduced by 2/3 and 1/3 of the of the gain/(loss) in each of the prior 2 years, respectively. The gain/(loss) for each period is determined as the actual return on market value during the period less the expected return on market value based on an assumed earnings rate chosen by the actuary but required by PPA to be not greater than the applicable third Segment Rate. The resulting value is constrained to be within a corridor of 90% to 110% of market value, including discounted receivable contributions.

	Actuary's Assumption	Third Segment Rate	Reflecting PPA Limit
2021 Expected Return	5.80%	5.47%	5.47%
2020 Expected Return	6.40%	5.94%	5.94%
2019 Expected Return	6.40%	6.11%	6.11%

Future actuarial measurements

Future actuarial measurements may differ significantly from current measurements due to plan experience differing from that anticipated by the economic and demographic assumptions, changes expected as part of the natural operation of the methodology used for these measurements, and changes in plan provisions, applicable law or regulations. An analysis of the potential range of such future differences is beyond the scope of this report.

Use of Models

Actuarial Standard of Practice No. 56 ("ASOP 56") provides guidance to actuaries when performing actuarial services with respect to designing, developing, selecting, modifying, using, reviewing, or evaluating models. Buck uses third-party software and internally developed models in the performance of annual actuarial valuations and projections. The models are intended to calculate the liabilities associated with the provisions of the plan using data and assumptions as of the measurement date under the funding rules and accounting standards specified in this report. Further, the model applies those funding rules and accounting standards to the liabilities derived and other inputs, such as plan assets and contributions, to generate many of the exhibits found in this report. Buck has an extensive review process whereby the results of the liability calculations are checked using detailed sample output, changes from year to year are summarized by source, and significant deviations from expectations are investigated. Other funding and accounting outputs are similarly reviewed in detail and at a high level for accuracy, reasonability and consistency with prior results. Buck also reviews the models when significant changes are made to the software. The review is performed by experts within the company who are familiar with applicable funding and accounting rules as well as the manner in which the model generates its output.

Summary of Changes from the January 1, 2020 Valuation

Prescribed Assumptions: The interest rates and mortality tables were updated to the current rates in accordance with PPA and HAFTA.

Non-Prescribed Assumptions: For determination of the Actuarial Value of Assets, the Actuary's Assumption for the expected return on assets for 2021 was decreased from 6.40% to 5.80% to be consistent with the plan investment consultant’s current 30-year return expectation.

These assumption changes increased the Funding Target approximately $156,959,000, decreased the plan’s AFTAP by 3.8%.

Multiple Employer Plan Participating Employer Information

THE SAVANNAH RIVER NUCLEAR SOLUTIONS, LLC
MULTIPLE EMPLOYER PENSION PLAN

EIN NO. 61-1565172/PLAN NO. 001

(a) Savannah River Nuclear Solutions, LLC	(b) EIN 26-0240191	(c) 74.98%
(a) Savannah River Remediation, LLC	(b) EIN 26-3972730	(c) 25.02%

SCHEDULE SB (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Single-Employer Defined Benefit Plan Actuarial Information

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

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

OMB No. 1210-0110

2021

This Form is Open to Public Inspection

For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021

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

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

A Name of plan
THE SAVANNAH RIVER NUCLEAR SOLUTIONS, LLC MULTIPLE EMPLOYER PENSION PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
SAVANNAH RIVER NUCLEAR SOLUTIONS, LLC

D Employer Identification Number (EIN)
61-1565172

E Type of plan: ☐ Single ☒ Multiple-A ☐ Multiple-B

F Prior year plan size: ☐ 100 or fewer ☐ 101-500 ☒ More than 500

Part I Basic Information

1 Enter the valuation date: Month 01 Day 01 Year 2021

2 Assets:

a Market value	**2a**	3,843,550,006
b Actuarial value	**2b**	3,504,850,243

3 Funding target/participant count breakdown

	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment	11,026	2,357,175,151	2,357,175,151
b For terminated vested participants	2,604	176,935,450	176,935,450
c For active participants	2,788	1,317,377,682	1,328,613,724
d Total	16,418	3,851,488,283	3,862,724,325

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

a Funding target disregarding prescribed at-risk assumptions	**4a**	
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	**4b**	
5 Effective interest rate	**5**	4.95%
6 Target normal cost		
a Present value of current plan year accruals	**6a**	64,555,890
b Expected plan-related expenses	**6b**	13,307,224
c Total (line 6a + line 6b)	**6c**	77,863,114

Statement by Enrolled Actuary

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

SIGN HERE

David R. Jarrett
Signature of actuary

10/12/2022
Date

DAVID R. JARRETT
Type or print name of actuary

2004821
Most recent enrollment number

BUCK GLOBAL, LLC
Firm name

412-281-2506
Telephone number (including area code)

11 STANWIX STREET, SUITE 700

PITTSBURGH PA 15222
Address of the firm

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

Part II Beginning of Year Carryover and Prefunding Balances

		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	0
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9	Amount remaining (line 7 minus line 8)	0	0
10	Interest on line 9 using prior year's actual return of 16.23%	0	0
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		98,142,516
	b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of 5.38%		5,280,067
	b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
	c Total available at beginning of current plan year to add to prefunding balance		103,422,583
	d Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	0

Part III Funding Percentages

14	Funding target attainment percentage	14	90.73%
15	Adjusted funding target attainment percentage	15	90.73%
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	85.64%
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and Liquidity Shortfalls

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

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
03/31/2021	86,186,440	0			
10/15/2021	43,093,220	0			
01/14/2022	43,093,220	0			
03/31/2022	209,813,560	0			
			Totals ► 18(b)	382,186,440	18(c) 0

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

a Contributions allocated toward unpaid minimum required contributions from prior years.	19a	0
b Contributions made to avoid restrictions adjusted to valuation date	19b	0
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	365,230,329

20 Quarterly contributions and liquidity shortfalls:

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

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

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

Liquidity shortfall as of end of quarter of this plan year

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

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

21 Discount rate:

a Segment rates:

1st segment:	2nd segment:	3rd segment:	
3.32 %	4.79 %	5.47 %	☐ N/A, full yield curve used

b Applicable month (enter code)	**21b**	4
22 Weighted average retirement age	**22**	63

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

Part VI Miscellaneous Items

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

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

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

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

Part VIII Minimum Required Contribution For Current Year

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

a Target normal cost (line 6c)	**31a**	77,863,114
b Excess assets, if applicable, but not greater than line 31a	**31b**	0

32 Amortization installments:	Outstanding Balance	Installment
a Net shortfall amortization installment	357,874,082	113,662,308
b Waiver amortization installment	0	0

33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	**33**	
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)	**34**	191,525,422

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

36 Additional cash requirement (line 34 minus line 35)	**36**	191,525,422
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	**37**	365,230,329

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

a Total (excess, if any, of line 37 over line 36)	**38a**	173,704,907
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	**38b**	0
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	**39**	0
40 Unpaid minimum required contributions for all years	**40**	0

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

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

a Schedule elected ☐ 2 plus 7 years ☒ 15 years

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

SCHEDULE SB (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Single-Employer Defined Benefit Plan Actuarial Information

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

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

OMB No. 1210-0110

2021

This Form is Open to Public Inspection

For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021

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

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

A Name of plan
THE SAVANNAH RIVER NUCLEAR SOLUTIONS, LLC MULTIPLE EMPLOYER PENSION PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
SAVANNAH RIVER NUCLEAR SOLUTIONS, LLC

D Employer Identification Number (EIN)
61-1565172

E Type of plan: ☐ Single ☒ Multiple-A ☐ Multiple-B

F Prior year plan size: ☐ 100 or fewer ☐ 101-500 ☒ More than 500

Part I Basic Information

1 Enter the valuation date: Month 01 Day 01 Year 2021

2 Assets:

a Market value	**2a**	2,911,140,939
b Actuarial value	**2b**	2,654,606,551

3 Funding target/participant count breakdown

	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment	8,487	1,802,142,586	1,802,142,586
b For terminated vested participants	1,951	131,358,028	131,358,028
c For active participants	2,091	983,614,355	992,163,094
d Total	12,529	2,917,114,969	2,925,663,708

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

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

5 Effective interest rate	**5**	4.95%
6 Target normal cost		
a Present value of current plan year accruals	**6a**	49,408,755
b Expected plan-related expenses	**6b**	10,184,870
c Total (line 6a + line 6b)	**6c**	59,593,625

Statement by Enrolled Actuary

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

SIGN HERE

Signature of actuary

Date

DAVID R. JARRETT

Type or print name of actuary

2004821

Most recent enrollment number

BUCK GLOBAL, LLC

Firm name

412-281-2506

Telephone number (including area code)

11 STANWIX STREET, SUITE 700

PITTSBURGH PA 15222

Address of the firm

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

Part II Beginning of Year Carryover and Prefunding Balances

		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	0
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9	Amount remaining (line 7 minus line 8)	0	0
10	Interest on line 9 using prior year's actual return of 16.23%	0	0
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		57,058,889
	b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of 5.37%		3,064,062
	b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
	c Total available at beginning of current plan year to add to prefunding balance		60,122,951
	d Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	0

Part III Funding Percentages

14	Funding target attainment percentage	14	90.73%
15	Adjusted funding target attainment percentage	15	90.73%
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	85.64%
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and Liquidity Shortfalls

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

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
03/31/2021	65,221,128	0			
10/15/2021	32,610,564	0			
01/14/2022	32,610,564	0			
03/31/2022	156,397,942	0			
			Totals ► 18(b)	286,840,198	18(c) 0

19	Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:		
	a Contributions allocated toward unpaid minimum required contributions from prior years.	19a	0
	b Contributions made to avoid restrictions adjusted to valuation date	19b	0
	c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	274,147,409

20 Quarterly contributions and liquidity shortfalls:

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

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

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

Liquidity shortfall as of end of quarter of this plan year

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

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

21 Discount rate:

a Segment rates:

1st segment:	2nd segment:	3rd segment:	
3.32 %	4.79 %	5.47 %	☐ N/A, full yield curve used

b Applicable month (enter code)	**21b**	4
22 Weighted average retirement age	**22**	63

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

Part VI Miscellaneous Items

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

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

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

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

Part VIII Minimum Required Contribution For Current Year

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

a Target normal cost (line 6c)	**31a**	59,593,625
b Excess assets, if applicable, but not greater than line 31a	**31b**	0

32 Amortization installments:	Outstanding Balance	Installment
a Net shortfall amortization installment	271,057,157	85,342,216
b Waiver amortization installment	0	0

33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	**33**	
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)	**34**	144,935,841

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

36 Additional cash requirement (line 34 minus line 35)	**36**	144,935,841
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	**37**	274,147,409
38 Present value of excess contributions for current year (see instructions)		
a Total (excess, if any, of line 37 over line 36)	**38a**	129,211,568
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	**38b**	0
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	**39**	0
40 Unpaid minimum required contributions for all years	**40**	0

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

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

a Schedule elected ☐ 2 plus 7 years ☒ 15 years

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

SCHEDULE SB (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Single-Employer Defined Benefit Plan Actuarial Information

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

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

OMB No. 1210-0110

2021

This Form is Open to Public Inspection

For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021

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

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

A Name of plan
THE SAVANNAH RIVER NUCLEAR SOLUTIONS, LLC MULTIPLE EMPLOYER PENSION PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
SAVANNAH RIVER REMEDIATION

D Employer Identification Number (EIN)
65-1565172

E Type of plan: ☐ Single ☒ Multiple-A ☐ Multiple-B

F Prior year plan size: ☐ 100 or fewer ☐ 101-500 ☒ More than 500

Part I Basic Information

1 Enter the valuation date: Month 01 Day 01 Year 2021

2 Assets:

a Market value	**2a**	932,409,067
b Actuarial value	**2b**	850,243,692

3 Funding target/participant count breakdown

	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment	2,539	555,032,565	555,032,565
b For terminated vested participants	653	45,577,422	45,577,422
c For active participants	697	333,763,327	336,450,630
d Total	3,889	934,373,314	937,060,617

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

a Funding target disregarding prescribed at-risk assumptions	**4a**	
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	**4b**	
5 Effective interest rate	**5**	4.95%
6 Target normal cost		
a Present value of current plan year accruals	**6a**	15,147,135
b Expected plan-related expenses	**6b**	3,122,354
c Total (line 6a + line 6b)	**6c**	18,269,489

Statement by Enrolled Actuary

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

SIGN HERE

Signature of actuary

Date

DAVID R. JARRETT

Type or print name of actuary

2004821

Most recent enrollment number

BUCK GLOBAL, LLC

Firm name

412-281-2506

Telephone number (including area code)

11 STANWIX STREET, SUITE 700

PITTSBURGH PA 15222

Address of the firm

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

Part II Beginning of Year Carryover and Prefunding Balances

		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	0
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9	Amount remaining (line 7 minus line 8)	0	0
10	Interest on line 9 using prior year's actual return of 16.23%	0	0
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		41,083,627
	b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of 5.40%		2,218,516
	b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
	c Total available at beginning of current plan year to add to prefunding balance		43,302,143
	d Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	0

Part III Funding Percentages

14	Funding target attainment percentage	14	90.73%
15	Adjusted funding target attainment percentage	15	90.73%
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	85.64%
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and Liquidity Shortfalls

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

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
03/31/2021	20,965,312	0			
10/15/2021	10,482,656	0			
01/14/2022	10,482,656	0			
03/31/2022	53,415,618	0			
			Totals ► 18(b)	95,346,242	18(c) 0

19	Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:		
	a Contributions allocated toward unpaid minimum required contributions from prior years.	19a	0
	b Contributions made to avoid restrictions adjusted to valuation date	19b	0
	c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	91,082,920

20 Quarterly contributions and liquidity shortfalls:

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

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

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

Liquidity shortfall as of end of quarter of this plan year

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

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

21 Discount rate:

a Segment rates:

1st segment:	2nd segment:	3rd segment:	
3.32 %	4.79 %	5.47 %	☐ N/A, full yield curve used

b Applicable month (enter code)	**21b**	4
22 Weighted average retirement age	**22**	63

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

Part VI Miscellaneous Items

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

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

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

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

Part VIII Minimum Required Contribution For Current Year

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

a Target normal cost (line 6c)	**31a**	18,269,489
b Excess assets, if applicable, but not greater than line 31a	**31b**	0

32 Amortization installments:

	Outstanding Balance	Installment
a Net shortfall amortization installment	86,816,925	28,320,092
b Waiver amortization installment	0	0

33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	**33**	
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)	**34**	46,589,581

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

36 Additional cash requirement (line 34 minus line 35)	**36**	46,589,581
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	**37**	91,082,920

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

a Total (excess, if any, of line 37 over line 36)	**38a**	44,493,339
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	**38b**	0
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	**39**	0
40 Unpaid minimum required contributions for all years	**40**	0

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

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

a Schedule elected ☐ 2 plus 7 years ☒ 15 years

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

SCHEDULE SB (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Single-Employer Defined Benefit Plan Actuarial Information

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

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

OMB No. 1210-0110

2021

This Form is Open to Public Inspection

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

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

A Name of plan
THE SAVANNAH RIVER NUCLEAR SOLUTIONS, LLC MULTIPLE EMPLOYER PENSION PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
SAVANNAH RIVER NUCLEAR SOLUTIONS, LLC

D Employer Identification Number (EIN)
61-1565172

E Type of plan: ☐ Single ☒ Multiple-A ☐ Multiple-B

F Prior year plan size: ☐ 100 or fewer ☐ 101-500 ☒ More than 500

Part I Basic Information

1 Enter the valuation date: Month 01 Day 01 Year 2021

2 Assets:

a Market value	**2a**	3,843,550,006
b Actuarial value	**2b**	3,504,850,243

3 Funding target/participant count breakdown

	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment	11,026	2,357,175,151	2,357,175,151
b For terminated vested participants	2,604	176,935,450	176,935,450
c For active participants	2,788	1,317,377,682	1,328,613,724
d Total	16,418	3,851,488,283	3,862,724,325

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

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

5 Effective interest rate	**5**	4.95%
6 Target normal cost		
a Present value of current plan year accruals	**6a**	64,555,890
b Expected plan-related expenses	**6b**	13,307,224
c Total (line 6a + line 6b)	**6c**	77,863,114

Statement by Enrolled Actuary

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

SIGN HERE

Signature of actuary

Date

DAVID R. JARRETT

Type or print name of actuary

2004821

Most recent enrollment number

BUCK GLOBAL, LLC

Firm name

412-281-2506

Telephone number (including area code)

11 STANWIX STREET, SUITE 700

PITTSBURGH PA 15222

Address of the firm

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

Part II Beginning of Year Carryover and Prefunding Balances

		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	0
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9	Amount remaining (line 7 minus line 8)	0	0
10	Interest on line 9 using prior year's actual return of 16.23%	0	0
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		98,142,516
	b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of 5.38%		5,280,067
	b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
	c Total available at beginning of current plan year to add to prefunding balance		103,422,583
	d Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	0

Part III Funding Percentages

14	Funding target attainment percentage	14	90.73%
15	Adjusted funding target attainment percentage	15	90.73%
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	85.64%
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and Liquidity Shortfalls

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

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
03/31/2021	86,186,440	0			
10/15/2021	43,093,220	0			
01/14/2022	43,093,220	0			
03/31/2022	209,813,560	0			
			Totals ► 18(b)	382,186,440	18(c) 0

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

a Contributions allocated toward unpaid minimum required contributions from prior years.	19a	0
b Contributions made to avoid restrictions adjusted to valuation date	19b	0
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	365,230,329

20 Quarterly contributions and liquidity shortfalls:

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

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

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

Liquidity shortfall as of end of quarter of this plan year

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

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

21 Discount rate:

a Segment rates:

1st segment:	2nd segment:	3rd segment:	
3.32 %	4.79 %	5.47 %	☐ N/A, full yield curve used

b Applicable month (enter code)	**21b**	4
22 Weighted average retirement age	**22**	63

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

Part VI Miscellaneous Items

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

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

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

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

Part VIII Minimum Required Contribution For Current Year

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

a Target normal cost (line 6c)	**31a**	77,863,114
b Excess assets, if applicable, but not greater than line 31a	**31b**	0

32 Amortization installments:	Outstanding Balance	Installment
a Net shortfall amortization installment	357,874,082	113,662,308
b Waiver amortization installment	0	0

33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	**33**	
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)	**34**	191,525,422

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

36 Additional cash requirement (line 34 minus line 35)	**36**	191,525,422
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	**37**	365,230,329

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

a Total (excess, if any, of line 37 over line 36)	**38a**	173,704,907
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	**38b**	0
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	**39**	0
40 Unpaid minimum required contributions for all years	**40**	0

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

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

a Schedule elected ☐ 2 plus 7 years ☒ 15 years

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

Savannah River Nuclear Solutions, LLC
Multiple Employer Pension Plan

EIN: 61-1565172

PLAN NUMBER: 001

ATTACHMENT TO SCHEDULE SB OF 2021 FORM 5500

Schedule SB, Line 22 – Description of Weighted Average Retirement Age

Combined

(1) Age	(2) Expected Active Headcount	(3) Retirement Rate	(4) Expected Retirements (2)*(3)	(5) Weighted Age (1)*(4)
50	205.2986	0.0160	3.2874	164.3703
51	254.2771	0.0198	5.0260	256.3260
52	318.7644	0.0197	6.2778	326.4457
53	448.2641	0.0297	13.3325	706.6212
54	567.4009	0.0399	22.6560	1,223.4259
55	712.7270	0.0399	28.4311	1,563.7117
56	882.9292	0.0498	44.0047	2,464.2612
57	1,039.4690	0.0699	72.6358	4,140.2384
58	1,169.1287	0.1923	224.8486	13,041.2180
59	1,124.6373	0.1552	174.5619	10,299.1514
60	1,112.1435	0.1573	174.9611	10,497.6683
61	1,099.8265	0.1592	175.1273	10,682.7649
62	1,066.4382	0.2191	233.6745	14,487.8187
63	954.4803	0.1797	171.4889	10,803.8038
64	910.1292	0.1793	163.1821	10,443.6514
65	831.5163	0.2997	249.2020	16,198.1318
66	662.0948	0.3000	198.6284	13,109.4769
67	514.0245	0.3000	154.2073	10,331.8915
68	390.1861	0.3000	117.0558	7,959.7967
69	297.2526	0.3000	89.1758	6,153.1286
70	225.8427	1.0000	225.8427	15,808.9860
71	14.0000	1.0000	14.0000	994.0000
72	4.0000	1.0000	4.0000	288.0000
73	4.0000	1.0000	4.0000	292.0000
74	7.0000	1.0000	7.0000	518.0000
75	2.0000	1.0000	2.0000	150.0000
76	5.0000	1.0000	5.0000	380.0000
77	0.0000	1.0000	0.0000	0.0000
78	3.0000	1.0000	3.0000	234.0000
79	1.0000	1.0000	1.0000	79.0000
80	2.0000	1.0000	2.0000	160.0000
81	1.0000	1.0000	1.0000	81.0000
Total			2,590.6077	163,838.8883

WARA: Total (5) / Total (4) = 63.24 years

Savannah River Nuclear Solutions

(1) Age	(2) Expected Active Headcount	(3) Retirement Rate	(4) Expected Retirements (2)*(3)	(5) Weighted Age (1)*(4)
50	154.4624	0.0158	2.4478	122.3887
51	195.9458	0.0197	3.8594	196.8281
52	241.9268	0.0196	4.7410	246.5345
53	335.4660	0.0297	9.9485	527.2721
54	408.8464	0.0399	16.3139	880.9483
55	520.9161	0.0399	20.7587	1,141.7278
56	639.7661	0.0498	31.8465	1,783.4047
57	754.3302	0.0698	52.6760	3,002.5343
58	851.7133	0.1908	162.5177	9,426.0264
59	825.0734	0.1545	127.4603	7,520.1599
60	819.1897	0.1574	128.9057	7,734.3393
61	821.5728	0.1594	130.9360	7,987.0983
62	792.8551	0.2194	173.9182	10,782.9309
63	714.9415	0.1798	128.5231	8,096.9578
64	688.0782	0.1793	123.3814	7,896.4109
65	635.7803	0.2996	190.4812	12,381.2802
66	506.5868	0.3000	151.9760	10,030.4179
67	394.4998	0.3000	118.3499	7,929.4464
68	301.6341	0.3000	90.4902	6,153.3350
69	227.1772	0.3000	68.1532	4,702.5688
70	171.5857	1.0000	171.5857	12,010.9961
71	11.0000	1.0000	11.0000	781.0000
72	3.0000	1.0000	3.0000	216.0000
73	1.0000	1.0000	1.0000	73.0000
74	7.0000	1.0000	7.0000	518.0000
75	2.0000	1.0000	2.0000	150.0000
76	5.0000	1.0000	5.0000	380.0000
77	0.0000	1.0000	0.0000	0.0000
78	3.0000	1.0000	3.0000	234.0000
79	1.0000	1.0000	1.0000	79.0000
80	1.0000	1.0000	1.0000	80.0000
81	1.0000	1.0000	1.0000	81.0000
Total			1,944.2706	123,145.6063

WARA: **Total (5) / Total (4) =** **63.34 years**

Savannah River Remediation

(1) Age	(2) Expected Active Headcount	(3) Retirement Rate	(4) Expected Retirements (2)*(3)	(5) Weighted Age (1)*(4)
50	50.8362	0.0165	0.8396	41.9816
51	58.3313	0.0200	1.1666	59.4979
52	76.8377	0.0200	1.5368	79.9112
53	112.7982	0.0300	3.3839	179.3491
54	158.5544	0.0400	6.3422	342.4776
55	191.8109	0.0400	7.6724	421.9839
56	243.1630	0.0500	12.1582	680.8565
57	285.1389	0.0700	19.9597	1,137.7041
58	317.4153	0.1964	62.3309	3,615.1916
59	299.5639	0.1572	47.1016	2,778.9915
60	292.9538	0.1572	46.0555	2,763.3290
61	278.2537	0.1588	44.1913	2,695.6666
62	273.5831	0.2184	59.7563	3,704.8878
63	239.5389	0.1794	42.9658	2,706.8459
64	222.0510	0.1792	39.8006	2,547.2406
65	195.7360	0.3000	58.7208	3,816.8516
66	155.5080	0.3000	46.6524	3,079.0590
67	119.5246	0.3000	35.8574	2,402.4450
68	88.5520	0.3000	26.5656	1,806.4618
69	70.0754	0.3000	21.0226	1,450.5598
70	54.2570	1.0000	54.2570	3,797.9899
71	3.0000	1.0000	3.0000	213.0000
72	1.0000	1.0000	1.0000	72.0000
73	3.0000	1.0000	3.0000	219.0000
74	0.0000	1.0000	0.0000	0.0000
75	0.0000	1.0000	0.0000	0.0000
76	0.0000	1.0000	0.0000	0.0000
77	0.0000	1.0000	0.0000	0.0000
78	0.0000	1.0000	0.0000	0.0000
79	0.0000	1.0000	0.0000	0.0000
80	1.0000	1.0000	1.0000	80.0000
Total			646.3371	40,693.2820

WARA: Total (5) / Total (4) = 62.96 years

Note: The table presents values rounded to fewer significant digits than used in the calculations.

Note to Column 2: The Expected Active Headcount for each age includes persons who are eligible to retire and persons who are not eligible to retire at each age.

Note to Column 3: At each age, these retirement rates are a weighted average of the rates shown in Attachment to Part V for active participants eligible to retire at the age and zero for all other active participants.

Savannah River Nuclear Solutions, LLC
Multiple Employer Pension Plan

EIN: 61-1565172

PLAN NUMBER: 001

ATTACHMENT TO SCHEDULE SB OF 2021
FORM 5500

Schedule SB, Line E – Information for Each Individual Employer

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The attached schedules provide information relative to each employer participating in the Plan based on available data.

Savannah River Nuclear Solutions, LLC
Multiple Employer Pension Plan

EIN: 61-1565172

PLAN NUMBER: 001

ATTACHMENT TO SCHEDULE SB OF 2021 FORM 5500

Schedule SB, Part V – Summary of Plan Provisions

Effective Date

Initially effective as of April 1, 1989 and has periodically been amended since then.

Eligible Employees

Any eligible employee who was a participant of the prior plan on March 31, 1989 became a participant on April 1, 1989. Every other Full Service employee becomes a participant as of date of hire. Every other Limited Service employee becomes a participant upon completion of one year of eligibility service. Participation in the plan was frozen for SRNS employees hired after August 1, 2008. Participation in the plan was frozen for SRR employees hired after July 1, 2009.

Retirement Types

Normal Retirement: Age 65 with 15 years of service.

Early Unreduced Retirement: Attainment of age 58 with combined age and service equal to 85 years or more.

Early Retirement: Age 50 with 15 years of service.

Incapability Retirement: Permanent incapacity after completion of 15 years of service.

Optional Retirement: Involuntary termination for reasons other than discharge for dishonesty, insubordination or other misconduct after completion of 15 years of service and attainment of age 50 or completion of 25 years of service and attainment of age 45. The length of benefit service required for eligibility shall be reduced by 2 months for each month which has elapsed since the employee reached age 45.

Special Window Retirement (effective May 31, 2000): Employees eligible for Normal Retirement or Early Unreduced Retirement no later than September 30, 2000, after adding an additional three years to their age and service. Also, certain other employees were included.

Special Window Retirement (effective April 30, 2002): Employees eligible for Normal Retirement or Early Unreduced Retirement no later than September 30, 2002, after adding an additional six years to their age and/or eligibility service.

Ad hoc Cost of Living Adjustment (effective September 1, 2002): Retirees (and their survivors) who retired prior to May 1, 1999.

Normal Retirement Benefit

The monthly regular pension is the greater of (1), (2) or (3) as follows:

(1) 1.2% of average monthly pay multiplied by benefit service,

(2) 1.5% of average monthly pay multiplied by benefit service, minus 50% of the Primary Social Security Benefit, or

(3) $9 multiplied by benefit service, plus 10% of average monthly pay accrued on a pro-rata basis prior to attainment of 15 years of benefit service.

Unreduced Early Retirement Benefit

Equal to the normal retirement pension accrued to date of retirement.

Early Retirement Benefit

The monthly regular pension is either:

(a) a regular pension deferred to age 65 equal to the normal retirement pension accrued to date of retirement; or

(b) an immediate regular pension equal to the deferred pension as follows:

i) If service at retirement is less than or equal to 20 years, 5% for each year prior to age 65 that payments start (50% maximum reduction),

ii) If service at retirement is greater than 20 and less than 27, 5% times (85 minus age minus service) up to a maximum of 50%, or

iii) If service at retirement is greater than or equal to 27, 5% for each year prior to age 58 that payments commence.

Vested Termination & Benefit

Equal to the normal retirement pension accrued to date of termination, except that under formula (3), a prorated percent of average monthly pay shall be substituted for 10% of average monthly pay when benefit service is less than 15 years.

The pension is payable based on the following table:

Years of Eligibility Service at Termination	Age When Payment May Begin	
	Reduced	Unreduced
Less than 10	Not Available	65 and over
10 through 14	60 through 64	65 and over
15 through 29	50 through 64	65 and over
30 or more	50 through 59	60 and over

Incapability Retirement Benefit

Equal to the normal retirement pension accrued to date of retirement, plus a supplement equal to the greater of 1) 50% of his Primary Social Security Benefit, or 2) $90 a month. The supplement is payable until the earliest date on which the participant becomes eligible for an old-age benefit or until he starts receiving a disability benefit under the Federal Social Security Act. The supplement is no longer payable for Incapability Retirements occurring after December 31, 2011.

Optional Retirement Benefit

The monthly regular pension is either:

(a) a regular pension deferred to age 65 equal to the normal retirement pension accrued to date of retirement; or

(b) an immediate regular pension equal to the deferred pension reduced 5% for each year that the date of retirement precedes the earlier of age 65 or the unreduced early retirement date.

Normal Form of Payment

If the employee is unmarried, the benefit will be payable as a monthly annuity for the life of the employee. If the employee is married, the benefit will be an amount actuarially equivalent to the single life amount, payable as a joint and survivor benefit, where 50% of the payment amount (including any Grandfathered Employer-Paid Post-Retirement Death Benefit) will continue to the spouse upon the death of the employee.

Pre-Retirement Death Benefit

The spouse of a vested participant (active or terminated) who dies prior to entering pay status is entitled to a death benefit on the earliest date the participant would have been eligible to receive a benefit, unless the participant had at least 15 years of service at the time of his death, in which case the death benefit is payable immediately.

The death benefit is equal to 50% of the participant's benefit, reduced for early commencement and for the 50% joint and survivor option.

Grandfathered Employer-Paid Post-Retirement Death Benefit

Participants who accrued service prior to January 1, 2012 and who retire from active service after attaining age 50 with at least 15 years of service are eligible for a grandfathered death benefit payable to the spouse (or minor children if there is no spouse).

The monthly benefit is the greater of:

(1) .5% of average monthly pay as of December 31, 2011 multiplied by benefit service as of December 31, 2011, or

(2) $4 multiplied by benefit service as of December 31, 2011, plus 4% of average monthly pay as of December 31, 2011.

This amount is reduced for early retirement, if applicable.

Summary of Changes from the January 1, 2020 Valuation

None.

Savannah River Nuclear Solutions, LLC
Multiple Employer Pension Plan

EIN: 61-1565172

PLAN NUMBER: 001

ATTACHMENT TO SCHEDULE SB OF 2021
FORM 5500

Schedule SB – Statement by Enrolled Actuary

In preparing this Schedule SB, the actuary relied on other parties for, and applied reasonability tests to, information on assets, contributions, plan provisions and data on people covered by the plan.

Future actuarial measurements may differ significantly from current measurements due to plan experience differing from that anticipated by the economic and demographic assumptions, changes expected as part of the natural operation of the methodology used for these measurements, and changes in plan provisions, applicable law or regulations. An analysis of the potential range of such future differences is beyond the scope of this report.

Savannah River Nuclear Solutions, LLC
Multiple Employer Pension Plan

EIN: 61-1565172

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ATTACHMENT TO SCHEDULE SB OF 2021 FORM 5500

Schedule SB, Line 32 – Schedule of Amortization Bases

Date Established	Initial Amount	Type of Base	Years Remaining	Shortfall Amortization Installment	Present Value of Remaining Installments as of January 1, 2021
	Combined				
January 1, 2010	$ 446,323,155	Shortfall	4	$ 44,523,815	$ 169,693,524
January 1, 2011	206,398,232	Shortfall	5	19,985,736	93,709,695
January 1, 2015	31,272,667	Shortfall	1	5,200,742	5,200,742
January 1, 2016	85,373,277	Shortfall	2	14,105,666	27,758,072
January 1, 2017	72,952,391	Shortfall	3	11,979,650	34,796,487
January 1, 2018	195,546,441	Shortfall	4	31,922,925	121,667,777
January 1, 2019	60,023,287	Shortfall	5	9,753,051	45,730,386
January 1, 2020	(63,596,280)	Shortfall	6	(10,300,719)	(56,450,386)
January 1, 2021	(84,232,215)	Shortfall	7	(13,508,558)	(84,232,215)
Total				$ 113,662,308	$ 357,874,082

Elections have been made under the Pension Relief Act of 2010 (PRA) to use the alternative 15-year amortization period for the bases established in 2010 and 2011.

Savannah River Nuclear Solutions

Date Established	Type Of Base	Years Remaining	Shortfall Amortization Installment	Present Value of Remaining Installments as of January 1, 2021
January 1, 2010	Shortfall	4	$ 32,796,271	$ 124,996,360
January 1, 2011	Shortfall	5	14,721,506	69,026,622
January 1, 2015	Shortfall	1	3,830,411	3,830,411
January 1, 2016	Shortfall	2	10,284,223	20,237,981
January 1, 2017	Shortfall	3	9,006,741	26,161,277
January 1, 2018	Shortfall	4	23,847,076	90,888,311
January 1, 2019	Shortfall	5	7,171,123	33,624,168
January 1, 2020	Shortfall	6	(5,328,911)	(29,203,698)
January 1, 2021	Shortfall	7	(10,986,224)	(68,504,275)
Total			$ 85,342,216	$ 271,057,157

Savannah River Remediation

Date Established	Type Of Base	Years Remaining	Shortfall Amortization Installment	Present Value of Remaining Installments as of January 1, 2021
January 1, 2010	Shortfall	4	$ 11,727,544	$ 44,697,164
January 1, 2011	Shortfall	5	5,264,230	24,683,073
January 1, 2015	Shortfall	1	1,370,331	1,370,331
January 1, 2016	Shortfall	2	3,821,443	7,520,091
January 1, 2017	Shortfall	3	2,972,909	8,635,210
January 1, 2018	Shortfall	4	8,075,849	30,779,466
January 1, 2019	Shortfall	5	2,581,928	12,106,218
January 1, 2020	Shortfall	6	(4,971,808)	(27,246,688)
January 1, 2021	Shortfall	7	(2,522,334)	(15,727,940)
Total			$ 28,320,092	$ 86,816,925

Savannah River Nuclear Solutions, LLC
Multiple Employer Pension Plan

EIN: 61-1565172

PLAN NUMBER: 001

ATTACHMENT TO SCHEDULE SB OF 2021 FORM 5500

Schedule SB, Line 24 – Change in Actuarial Assumptions

For determination of the Actuarial Value of Assets, the Actuary's Assumption for the expected return on assets for 2021 was decreased from 6.40% to 5.80% to be consistent with the plan investment consultant's current 30-year return expectation.