

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

2024

This Form is Open to Public Inspection

Part I Annual Report Identification Information

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

- A This return/report is for: [ ] a multiemployer plan [ ] a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.) [x] a single-employer plan [ ] a DFE (specify) \_\_\_\_
B This return/report is: [ ] the first return/report [x] the final return/report [ ] an amended return/report [ ] a short plan year return/report (less than 12 months)
C If the plan is a collectively-bargained plan, check here. [x]
D Check box if filing under: [x] Form 5558 [ ] automatic extension [ ] the DFVC program [ ] special extension (enter description)
E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. [ ]

Part II Basic Plan Information—enter all requested information

1a Name of plan: DOMINION ENERGY OHIO UNION PENSION PLAN
1b Three-digit plan number (PN): 016
1c Effective date of plan: 07/01/1973
2a Plan sponsor's name (employer, if for a single-employer plan): C/O DOMINION ENERGY SERVICES, INC. 120 TREDEGAR ST, CLEARINGHOUSE 3FL ATTN BENEFITS REPORTING RICHMOND, VA 23219-4306
2b Employer Identification Number (EIN): 54-1229715
2c Plan Sponsor's telephone number: 877-947-4636
2d Business code (see instructions): 221500

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.

Table with 4 columns: SIGN HERE, Signature of plan administrator, Date, Enter name of individual signing as plan administrator. Includes rows for employer/plan sponsor and DFE.

For Paperwork Reduction Act Notice, see the Instructions for Form 5500.

Form 5500 (2024) v. 240311

<b>3a</b> Plan administrator's name and address <input type="checkbox"/> Same as Plan Sponsor  DOMINION ENERGY SERVICES, INC.  120 TREDEGAR ST, CLEARINGHOUSE 3FL ATTN BENEFITS REPORTING RICHMOND, VA 23219-4306	<b>3b</b> Administrator's EIN 54-1962730  <b>3c</b> Administrator's telephone number 877-947-4636																				
<b>4</b> If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: <b>a</b> Sponsor's name <b>c</b> Plan Name	<b>4b</b> EIN  <b>4d</b> PN																				
<b>5</b> Total number of participants at the beginning of the plan year	<b>5</b> 3011																				
<b>6</b> Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines <b>6a(1)</b> , <b>6a(2)</b> , <b>6b</b> , <b>6c</b> , and <b>6d</b> ). <b>a(1)</b> Total number of active participants at the beginning of the plan year ..... <b>a(2)</b> Total number of active participants at the end of the plan year ..... <b>b</b> Retired or separated participants receiving benefits..... <b>c</b> Other retired or separated participants entitled to future benefits ..... <b>d</b> Subtotal. Add lines <b>6a(2)</b> , <b>6b</b> , and <b>6c</b> ..... <b>e</b> Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. .... <b>f</b> Total. Add lines <b>6d</b> and <b>6e</b> ..... <b>g(1)</b> Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) ..... <b>g(2)</b> Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) ..... <b>h</b> Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	<table border="1" style="width:100%; border-collapse: collapse;"> <tr><td style="width:10%;"><b>6a(1)</b></td><td style="text-align: right;">1109</td></tr> <tr><td><b>6a(2)</b></td><td style="text-align: right;">0</td></tr> <tr><td><b>6b</b></td><td style="text-align: right;">0</td></tr> <tr><td><b>6c</b></td><td style="text-align: right;">0</td></tr> <tr><td><b>6d</b></td><td style="text-align: right;">0</td></tr> <tr><td><b>6e</b></td><td style="text-align: right;">0</td></tr> <tr><td><b>6f</b></td><td style="text-align: right;">0</td></tr> <tr><td><b>6g(1)</b></td><td></td></tr> <tr><td><b>6g(2)</b></td><td></td></tr> <tr><td><b>6h</b></td><td style="text-align: right;">2</td></tr> </table>	<b>6a(1)</b>	1109	<b>6a(2)</b>	0	<b>6b</b>	0	<b>6c</b>	0	<b>6d</b>	0	<b>6e</b>	0	<b>6f</b>	0	<b>6g(1)</b>		<b>6g(2)</b>		<b>6h</b>	2
<b>6a(1)</b>	1109																				
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<b>6b</b>	0																				
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<b>6d</b>	0																				
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<b>6g(1)</b>																					
<b>6g(2)</b>																					
<b>6h</b>	2																				
<b>7</b> Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item) .....	<b>7</b>																				

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

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

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

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

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

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

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

**11c** Enter the Receipt Confirmation Code for the 2024 Form M-1 annual report. If the plan was not required to file the 2024 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code \_\_\_\_\_

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<b>SCHEDULE SB</b> <b>(Form 5500)</b>  <small>Department of the Treasury Internal Revenue Service</small>  <small>Department of Labor Employee Benefits Security Administration</small>  <small>Pension Benefit Guaranty Corporation</small>	<b>Single-Employer Defined Benefit Plan</b> <b>Actuarial Information</b>  This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code).  <b>▶ File as an attachment to Form 5500 or 5500-SF.</b>	<small>OMB No. 1210-0110</small>  <b>2024</b>  <b>This Form is Open to Public Inspection</b>
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

▶ **Round off amounts to nearest dollar.**  
 ▶ **Caution:** A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.

<b>A</b> Name of plan <u>DOMINION ENERGY OHIO UNION PENSION PLAN</u>	<b>B</b> Three-digit plan number (PN) ▶	<u>016</u>
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF <u>DOMINION ENERGY, INC.</u>	<b>D</b> Employer Identification Number (EIN) <u>54-1229715</u>	
<b>E</b> Type of plan: <input checked="" type="checkbox"/> Single <input type="checkbox"/> Multiple-A <input type="checkbox"/> Multiple-B	<b>F</b> Prior year plan size: <input type="checkbox"/> 100 or fewer <input type="checkbox"/> 101-500 <input checked="" type="checkbox"/> More than 500	

**Part I Basic Information**

<b>1</b> Enter the valuation date: Month <u>01</u> Day <u>01</u> Year <u>2024</u>			
<b>2</b> Assets:			
<b>a</b> Market value .....	<b>2a</b>	<u>1395502446</u>	
<b>b</b> Actuarial value .....	<b>2b</b>	<u>1503812125</u>	
<b>3</b> Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
<b>a</b> For retired participants and beneficiaries receiving payment .....	<u>1686</u>	<u>260087436</u>	<u>260087436</u>
<b>b</b> For terminated vested participants .....	<u>559</u>	<u>24009390</u>	<u>24009390</u>
<b>c</b> For active participants .....	<u>1050</u>	<u>118593895</u>	<u>132531448</u>
<b>d</b> Total .....	<u>3295</u>	<u>402690721</u>	<u>416628274</u>
<b>4</b> If the plan is in at-risk status, check the box and complete lines (a) and (b)..... <input type="checkbox"/>			
<b>a</b> Funding target disregarding prescribed at-risk assumptions .....	<b>4a</b>		
<b>b</b> Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor .....	<b>4b</b>		
<b>5</b> Effective interest rate .....	<b>5</b>	<u>5.17 %</u>	
<b>6</b> Target normal cost			
<b>a</b> Present value of current plan year accruals .....	<b>6a</b>	<u>1616393</u>	
<b>b</b> Expected plan-related expenses .....	<b>6b</b>	<u>2791005</u>	
<b>c</b> Target normal cost .....	<b>6c</b>	<u>4407398</u>	

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

<b>SIGN HERE</b>			
	Signature of actuary	<u>10/14/2025</u>	Date
	<u>ROBERT WINN</u>	<u>23-06988</u>	Most recent enrollment number
	<u>WILLIS TOWERS WATSON US LLC</u>	<u>703-258-8000</u>	Telephone number (including area code)
	<u>800 NORTH GLEBE ROAD FLOOR 10 ARLINGTON, VA 22203</u>		
	Address of the firm		

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

<b>Part II Beginning of Year Carryover and Prefunding Balances</b>		(a) Carryover balance	(b) Prefunding balance
<b>7</b>	Balance at beginning of prior year after applicable adjustments (line 13 from prior year) .....	5724548	0
<b>8</b>	Portion elected for use to offset prior year's funding requirement (line 35 from prior year) .....		
<b>9</b>	Amount remaining (line 7 minus line 8) .....	5724548	0
<b>10</b>	Interest on line 9 using prior year's actual return of <u>10.72</u> % .....	613672	0
<b>11</b>	Prior year's excess contributions to be added to prefunding balance:		
<b>a</b>	Present value of excess contributions (line 38a from prior year) .....		0
<b>b(1)</b>	Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of <u>5.29</u> % .....		
<b>b(2)</b>	Interest on line 38b from prior year Schedule SB, using prior year's actual return .....		
<b>c</b>	Total available at beginning of current plan year to add to prefunding balance .....		0
<b>d</b>	Portion of (c) to be added to prefunding balance .....		
<b>12</b>	Other reductions in balances due to elections or deemed elections .....		
<b>13</b>	Balance at beginning of current year (line 9 + line 10 + line 11d - line 12) .....	6338220	0

<b>Part III Funding Percentages</b>			
<b>14</b>	Funding target attainment percentage .....	<b>14</b>	359.42 %
<b>15</b>	Adjusted funding target attainment percentage .....	<b>15</b>	360.94 %
<b>16</b>	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement .....	<b>16</b>	341.09 %
<b>17</b>	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage .....	<b>17</b>	%

<b>Part IV Contributions and Liquidity Shortfalls</b>						
<b>18</b> Contributions made to the plan for the plan year by employer(s) and employees:						
(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	
<b>Totals ▶</b>			<b>18(b)</b>	0	<b>18(c)</b>	0

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

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

**20** Quarterly contributions and liquidity shortfalls:

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

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

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

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

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

**21** Discount rate:

<b>a</b> Segment rates:	1st segment: 4.75 %	2nd segment: 4.87 %	3rd segment: 5.59 %	<input type="checkbox"/> N/A, full yield curve used
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**b** Applicable month (enter code) ..... **21b** 4

**22** Weighted average retirement age ..... **22** 62

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

**Part VI Miscellaneous Items**

**24** Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment.....  Yes  No

**25** Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment.....  Yes  No

**26** Demographic and benefit information

**a** Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment.....  Yes  No

**b** Is the plan required to provide a projection of expected benefit payments? 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**

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

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

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

<b>a</b> Target normal cost (line 6c) .....	<b>31a</b>	4407398
<b>b</b> Excess assets, if applicable, but not greater than line 31a .....	<b>31b</b>	4407398

<b>32</b> Amortization installments:	Outstanding Balance	Installment
<b>a</b> Net shortfall amortization installment .....		
<b>b</b> Waiver amortization installment .....		

**33** If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_) and the waived amount ..... **33**

<b>34</b> Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33).....	<b>34</b>	0
	Carryover balance	Prefunding balance
<b>35</b> Balances elected for use to offset funding requirement .....		0
<b>36</b> Additional cash requirement (line 34 minus line 35) .....	<b>36</b>	0
<b>37</b> Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c) .....	<b>37</b>	

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

<b>a</b> Total (excess, if any, of line 37 over line 36)	<b>38a</b>	0
<b>b</b> Portion included in line 38a attributable to use of prefunding and funding standard carryover balances .....	<b>38b</b>	

<b>39</b> Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37) .....	<b>39</b>	0
<b>40</b> Unpaid minimum required contributions for all years .....	<b>40</b>	0

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

**41** If an election was made to use the extended amortization rule for a plan year beginning on or before December 31, 2021, check the box to indicate the first plan year for which the rule applies.  2019  2020  2021

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

<b>A</b> Name of plan <b>DOMINION ENERGY OHIO UNION PENSION PLAN</b>	<b>B</b> Three-digit plan number (PN) ▶	<b>016</b>
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 <b>DOMINION ENERGY, INC.</b>	<b>D</b> Employer Identification Number (EIN) <b>54-1229715</b>	

**Part I Service Provider Information (see instructions)**

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

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

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

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

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

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

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

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

TEMPO HOLDING CO LLC DBA ALIGHT

82-1061233

(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	PLNADMR	97972	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

DELOITTE & TOUCHE LLP

13-3891517

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10 50	ACCTNG	31710	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

WILLIS TOWERS WATSON

53-0181291

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
11 50	ACTURAL	23799	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

**Part I Service Provider Information (continued)**

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

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

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

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

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

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

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

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

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

<b>A</b> Name of plan <u>DOMINION ENERGY OHIO UNION PENSION PLAN</u>	<b>B</b> Three-digit plan number (PN)	<u>016</u>
<b>C</b> Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>DOMINION ENERGY, INC.</u>	<b>D</b> Employer Identification Number (EIN) <u>54-1229715</u>	

<b>Part I</b>	<b>Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)</b> (Complete as many entries as needed to report all interests in DFEs)
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<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: <u>DOMINION ENERGY, INC. DEF BEN MT</u>		
<b>b</b> Name of sponsor of entity listed in (a): <u>DOMINION ENERGY, INC.</u>		
<b>c</b> EIN-PN <u>25-6263994-047</u>	<b>d</b> Entity code <u>M</u>	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>0</u>
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE:		
<b>b</b> Name of sponsor of entity listed in (a):		
<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE:		
<b>b</b> Name of sponsor of entity listed in (a):		
<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE:		
<b>b</b> Name of sponsor of entity listed in (a):		
<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE:		
<b>b</b> Name of sponsor of entity listed in (a):		
<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE:		
<b>b</b> Name of sponsor of entity listed in (a):		
<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE:		
<b>b</b> Name of sponsor of entity listed in (a):		
<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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<b>SCHEDULE H</b> <b>(Form 5500)</b>  <small>Department of the Treasury Internal Revenue Service</small>  <small>Department of Labor Employee Benefits Security Administration</small>  <small>Pension Benefit Guaranty Corporation</small>	<b>Financial Information</b>  This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code).  <b>▶ File as an attachment to Form 5500.</b>	<small>OMB No. 1210-0110</small>  <b>2024</b>  <b>This Form is Open to Public Inspection</b>
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For calendar plan year 2024 or fiscal plan year beginning <b>01/01/2024</b> and ending <b>12/31/2024</b>	
<b>A</b> Name of plan <b>DOMINION ENERGY OHIO UNION PENSION PLAN</b>	<b>B</b> Three-digit plan number (PN) ▶ <b>016</b>
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 <b>DOMINION ENERGY, INC.</b>	<b>D</b> Employer Identification Number (EIN) <b>54-1229715</b>

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

<b>Assets</b>	<b>(a) Beginning of Year</b>	<b>(b) End of Year</b>
<b>a</b> Total noninterest-bearing cash .....	<b>1a</b>	
<b>b</b> Receivables (less allowance for doubtful accounts):		
<b>(1)</b> Employer contributions .....	<b>1b(1)</b>	
<b>(2)</b> Participant contributions .....	<b>1b(2)</b>	
<b>(3)</b> Other .....	<b>1b(3)</b>	
<b>c</b> General investments:		
<b>(1)</b> Interest-bearing cash (include money market accounts & certificates of deposit) .....	<b>1c(1)</b>	
<b>(2)</b> U.S. Government securities .....	<b>1c(2)</b>	
<b>(3)</b> Corporate debt instruments (other than employer securities):		
<b>(A)</b> Preferred .....	<b>1c(3)(A)</b>	
<b>(B)</b> All other .....	<b>1c(3)(B)</b>	
<b>(4)</b> Corporate stocks (other than employer securities):		
<b>(A)</b> Preferred .....	<b>1c(4)(A)</b>	
<b>(B)</b> Common .....	<b>1c(4)(B)</b>	
<b>(5)</b> Partnership/joint venture interests .....	<b>1c(5)</b>	
<b>(6)</b> Real estate (other than employer real property) .....	<b>1c(6)</b>	
<b>(7)</b> Loans (other than to participants) .....	<b>1c(7)</b>	
<b>(8)</b> Participant loans .....	<b>1c(8)</b>	
<b>(9)</b> Value of interest in common/collective trusts .....	<b>1c(9)</b>	
<b>(10)</b> Value of interest in pooled separate accounts .....	<b>1c(10)</b>	
<b>(11)</b> Value of interest in master trust investment accounts .....	<b>1c(11)</b>	0
<b>(12)</b> Value of interest in 103-12 investment entities .....	<b>1c(12)</b>	
<b>(13)</b> Value of interest in registered investment companies (e.g., mutual funds) .....	<b>1c(13)</b>	
<b>(14)</b> Value of funds held in insurance company general account (unallocated contracts) .....	<b>1c(14)</b>	
<b>(15)</b> Other .....	<b>1c(15)</b>	

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(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	1395486253	0
<b>Liabilities</b>			
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 through 1j).....	1k	0	0
<b>Net Assets</b>			
l Net assets (subtract line 1k from line 1f).....	1l	1395486253	0

**Part II Income and Expense Statement**

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

<b>Income</b>		(a) Amount	(b) Total
<b>a Contributions:</b>			
(1) Received or receivable in cash from: (A) Employers.....	2a(1)(A)		
(B) Participants.....	2a(1)(B)		
(C) Others (including rollovers).....	2a(1)(C)		
(2) Noncash contributions.....	2a(2)		
(3) Total contributions. Add lines 2a(1)(A), (B), (C), and line 2a(2).....	2a(3)		0
<b>b Earnings on investments:</b>			
(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 .....	<b>2b(6)</b>		
(7) Net investment gain (loss) from pooled separate accounts .....	<b>2b(7)</b>		
(8) Net investment gain (loss) from master trust investment accounts .....	<b>2b(8)</b>		35312822
(9) Net investment gain (loss) from 103-12 investment entities .....	<b>2b(9)</b>		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds) .....	<b>2b(10)</b>		
<b>c</b> Other income .....	<b>2c</b>		
<b>d</b> Total income. Add all <b>income</b> amounts in column (b) and enter total .....	<b>2d</b>		35312822

**Expenses**

<b>e</b> Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers .....	<b>2e(1)</b>	26351843	
(2) To insurance carriers for the provision of benefits .....	<b>2e(2)</b>		
(3) Other .....	<b>2e(3)</b>		
(4) Total benefit payments. Add lines <b>2e(1)</b> through <b>(3)</b> .....	<b>2e(4)</b>		26351843
<b>f</b> Corrective distributions (see instructions) .....	<b>2f</b>		
<b>g</b> Certain deemed distributions of participant loans (see instructions) .....	<b>2g</b>		
<b>h</b> Interest expense .....	<b>2h</b>		
<b>i</b> Administrative expenses:			
(1) Salaries and allowances .....	<b>2i(1)</b>	4683	
(2) Contract administrator fees .....	<b>2i(2)</b>	97972	
(3) Recordkeeping fees .....	<b>2i(3)</b>		
(4) IQPA audit fees .....	<b>2i(4)</b>	31710	
(5) Investment advisory and investment management fees .....	<b>2i(5)</b>		
(6) Bank or trust company trustee/custodial fees .....	<b>2i(6)</b>		
(7) Actuarial fees .....	<b>2i(7)</b>	23800	
(8) Legal fees .....	<b>2i(8)</b>		
(9) Valuation/appraisal fees .....	<b>2i(9)</b>		
(10) Other trustee fees and expenses .....	<b>2i(10)</b>		
(11) Other expenses .....	<b>2i(11)</b>	286178	
(12) Total administrative expenses. Add lines <b>2i(1)</b> through <b>(11)</b> .....	<b>2i(12)</b>		444343
<b>j</b> Total expenses. Add all <b>expense</b> amounts in column (b) and enter total .....	<b>2j</b>		26796186

**Net Income and Reconciliation**

<b>k</b> Net income (loss). Subtract line <b>2j</b> from line <b>2d</b> .....	<b>2k</b>		8516636
<b>l</b> Transfers of assets:			
(1) To this plan .....	<b>2l(1)</b>		
(2) From this plan .....	<b>2l(2)</b>		1404002889

**Part III Accountant's Opinion**

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

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

(1)  Unmodified (2)  Qualified (3)  Disclaimer (4)  Adverse

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

(1)  DOL Regulation 2520.103-8 (2)  DOL Regulation 2520.103-12(d) (3)  neither DOL Regulation 2520.103-8 nor DOL Regulation 2520.103-12(d).

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

(1) Name: **DELOITTE & TOUCHE LLP**

(2) EIN: **13-3891517**

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

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

**Part IV Compliance Questions**

**4** CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete lines 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete lines 4j and 4l. MTIAs also do not complete line 4l. DCGs do not complete lines 4e, 4f, 4k, 4l, and 5, and DCGs generally complete the rest of Part IV collectively for all plans in the DCG, except as otherwise provided (see instructions).

During the plan year:

	Yes	No	Amount
<b>a</b> Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)		X	
<b>b</b> Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)		X	
<b>c</b> Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		X	
<b>d</b> Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)		X	
<b>e</b> Was this plan covered by a fidelity bond?	X		50000000
<b>f</b> Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
<b>g</b> Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
<b>h</b> Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
<b>i</b> Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)		X	
<b>j</b> Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)		X	
<b>k</b> Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	X		
<b>l</b> Has the plan failed to provide any benefit when due under the plan?		X	
<b>m</b> If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
<b>n</b> If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			

**5a** Has a resolution to terminate the plan been adopted during the plan year or any prior plan year?  Yes  No  
If "Yes," enter the amount of any plan assets that reverted to the employer this year \_\_\_\_\_.

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

<b>5b(1)</b> Name of plan(s)	<b>5b(2)</b> EIN(s)	<b>5b(3)</b> PN(s)
DOMINION ENERGY PENSION PLAN	54-1229715	101
ENBRIDGE GAS OHIO UNION PENSION PLAN	76-0697621	004

**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 558622.

<b>SCHEDULE R</b> <b>(Form 5500)</b>  <small>Department of the Treasury Internal Revenue Service</small>  <small>Department of Labor Employee Benefits Security Administration</small>  <small>Pension Benefit Guaranty Corporation</small>	<b>Retirement Plan Information</b>  This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code).  <b>▶ File as an attachment to Form 5500.</b>	<small>OMB No. 1210-0110</small>  <b>2024</b>  <b>This Form is Open to Public Inspection.</b>
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

<b>A</b> Name of plan <u>DOMINION ENERGY OHIO UNION PENSION PLAN</u>	<b>B</b> Three-digit plan number (PN) ▶	<u>016</u>
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 <u>DOMINION ENERGY, INC.</u>	<b>D</b> Employer Identification Number (EIN) <u>54-1229715</u>	

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

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

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

1	
---	--

**2** Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):  
 EIN(s): 25-6263994

**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	12
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<b>Part II</b>	<b>Funding Information</b> (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part.)
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**4** Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? .....  Yes  No  N/A  
**If the plan is a defined benefit plan, go to line 8.**

**5** If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. **Date:** Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_  
**If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.**

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

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

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

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

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

<b>Part IV</b>	<b>ESOPs</b> (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.
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**10** Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? .....  Yes  No

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

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

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

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

**13** Enter the following information for each employer that (1) contributed more than 5% of total contributions to the plan during the plan year or (2) was one of the top-ten highest contributors (measured in dollars). See instructions. Complete as many entries as needed to report all applicable employers.

**a** Name of contributing employer

**b** EIN

**c** Dollar amount contributed by employer

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

**e** Contribution rate information (If more than one rate applies, check this box  and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) \_\_\_\_\_

(2) Base unit measure:  Hourly  Weekly  Unit of production  Other (specify): \_\_\_\_\_

**a** Name of contributing employer

**b** EIN

**c** Dollar amount contributed by employer

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

**e** Contribution rate information (If more than one rate applies, check this box  and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) \_\_\_\_\_

(2) Base unit measure:  Hourly  Weekly  Unit of production  Other (specify): \_\_\_\_\_

**a** Name of contributing employer

**b** EIN

**c** Dollar amount contributed by employer

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

**e** Contribution rate information (If more than one rate applies, check this box  and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) \_\_\_\_\_

(2) Base unit measure:  Hourly  Weekly  Unit of production  Other (specify): \_\_\_\_\_

**a** Name of contributing employer

**b** EIN

**c** Dollar amount contributed by employer

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

**e** Contribution rate information (If more than one rate applies, check this box  and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) \_\_\_\_\_

(2) Base unit measure:  Hourly  Weekly  Unit of production  Other (specify): \_\_\_\_\_

**a** Name of contributing employer

**b** EIN

**c** Dollar amount contributed by employer

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

**e** Contribution rate information (If more than one rate applies, check this box  and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) \_\_\_\_\_

(2) Base unit measure:  Hourly  Weekly  Unit of production  Other (specify): \_\_\_\_\_

**a** Name of contributing employer

**b** EIN

**c** Dollar amount contributed by employer

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

**e** Contribution rate information (If more than one rate applies, check this box  and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) \_\_\_\_\_

(2) Base unit measure:  Hourly  Weekly  Unit of production  Other (specify): \_\_\_\_\_

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

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

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

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

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

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

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

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

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

**19** If the total number of participants is 1,000 or more, complete lines (a) and (b):

**a** Enter the percentage of plan assets held as:  
 Public Equity: 41.00 % Private Equity: \_\_\_\_\_% Investment-Grade Debt and Interest Rate Hedging Assets: 25.00 %  
 High-Yield Debt: 3.00 % Real Assets: 1.00 % Cash or Cash Equivalents: \_\_\_\_\_% Other: 30.00 %

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

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

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

**b** If line 20a is "Yes," has PBGC been notified as required by ERISA sections 4043(c)(5) and/or 303(k)(4)? Check the applicable box:  
 Yes.  
 No. Reporting was waived under 29 CFR 4043.25(c)(2) because contributions equal to or exceeding the unpaid minimum required contribution were made by the 30th day after the due date.  
 No. The 30-day period referenced in 29 CFR 4043.25(c)(2) has not yet ended, and the sponsor intends to make a contribution equal to or exceeding the unpaid minimum required contribution by the 30th day after the due date.  
 No. Other. Provide explanation: \_\_\_\_\_

**Part VII IRS Compliance Questions**

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

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

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

**DOMINION ENERGY OHIO UNION  
PENSION PLAN**

Employer ID No: 54-1229715  
Plan Number: 016

Financial Statements as of and for the  
Years Ended December 31, 2024 and 2023,  
and Independent Auditor's Report

# DOMINION ENERGY OHIO UNION PENSION PLAN

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

## INDEPENDENT AUDITOR'S REPORT

To the Plan Administrator of  
Dominion Energy Ohio Union Pension Plan

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

We have performed audits of the financial statements of Dominion Energy Ohio Union Pension Plan (the "Plan"), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the statements of net assets available for pension benefits as of December 31, 2024 and 2023, and the related statements of changes in net assets available for pension benefits for the years then ended, and the related notes to the financial statements.

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

Management has obtained certifications from a qualified institution as of December 31, 2024 and 2023 and for the years then ended, stating that the certified investment information, as described in Note 5 to the financial statements, is complete and accurate.

### Opinion

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

- The amounts and disclosures in the accompanying financial statements, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.
- The information in the accompanying financial statements related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information

prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

### **Basis for Opinion**

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

### **Emphasis of Matter – Plan Merger**

As discussed in Note 1 to the financial statements, effective December 31, 2024 (the Merger Date), the Plan merged out of existence. The assets and liabilities of the Plan were transferred into Dominion Energy Pension Plan as of the Merger Date. Our opinion is not modified with respect to this matter.

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

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

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

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

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

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

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for a reasonable period of time.

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

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

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

*Deloitte & Touche LLP*

October 15, 2025

# DOMINION ENERGY OHIO UNION PENSION PLAN

## STATEMENTS OF NET ASSETS AVAILABLE FOR PENSION BENEFITS AS OF DECEMBER 31, 2024 AND 2023

	2024	2023
<b>ASSETS</b>		
Investments:		
Plan interest in Master Trust	\$ —	\$ 1,395,486,253
<b>NET ASSETS AVAILABLE FOR PENSION BENEFITS</b>	<b>\$ —</b>	<b>\$ 1,395,486,253</b>

See notes to financial statements.

# DOMINION ENERGY OHIO UNION PENSION PLAN

## STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR PENSION BENEFITS FOR THE YEARS ENDED DECEMBER 31, 2024 AND 2023

	2024	2023
<b>ADDITIONS</b>		
Investment income:		
Net investment income - Plan interest from the Master Trust	\$ 35,312,822	\$ 136,356,084
<b>DEDUCTIONS</b>		
Benefits paid to participants	26,351,843	25,803,837
Administrative expenses	444,343	490,222
Total deductions	26,796,186	26,294,059
<b>INCREASE IN NET ASSETS BEFORE TRANSFER AND PLAN MERGER</b>	<b>8,516,636</b>	<b>110,062,025</b>
<b>TRANSFER AS PART OF SALE (Note 1)</b>	<b>(449,500,057)</b>	<b>—</b>
<b>PLAN MERGER (Note 1)</b>	<b>(954,502,832)</b>	<b>—</b>
<b>(DECREASE) INCREASE IN NET ASSETS</b>	<b>(1,395,486,253)</b>	<b>110,062,025</b>
<b>NET ASSETS AVAILABLE FOR PENSION BENEFITS</b>		
Beginning of year	1,395,486,253	1,285,424,228
End of year	\$ —	\$ 1,395,486,253

See notes to financial statements.

# DOMINION ENERGY OHIO UNION PENSION PLAN

## NOTES TO FINANCIAL STATEMENTS

AS OF AND FOR THE YEARS ENDED DECEMBER 31, 2024 AND 2023

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### 1. DESCRIPTION OF PLAN

The following brief description of the Dominion Energy Ohio Union Pension Plan (the Plan) is provided for general information purposes only. Participants should refer to the Summary Plan Description for a more complete description of the Plan's provisions.

- a. **General**—The Plan is a defined benefit pension plan covering substantially all employees of the Dominion Energy East Ohio Gas Company (the Company), hired prior to March 2024, who are represented for collective bargaining purposes by, and are members of, the Gas Workers Union, Local G555, Utility Workers' Union of America, AFL-CIO. Dominion Energy, Inc. (Dominion Energy) is the designated plan sponsor. The plan administrator is Dominion Energy Services, Inc. (DES), a subsidiary of Dominion Energy. The Bank of New York Mellon Trust Company, N.A. (Bank of New York Mellon) is trustee of the Plan effective January 1, 2024. Prior to that date, the Northern Trust Company (Northern Trust) served as the trustee of the Plan. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA), as amended. Participation in the Plan for eligible employees is immediate and employees are vested after attainment of age 65 or three years of service.

During 2024, Dominion Energy completed the sale of certain natural gas distribution utilities to Enbridge, Inc. Upon closing, the natural gas companies ceased to be participating employers in the Plan, which continues to be sponsored by Dominion Energy. All affected participants have been fully vested in their accrued benefits under the Plan upon the closing of the sale. Enbridge assumed a pro rata share of the Plan assets which reduced the Plan assets and accumulated benefit obligations by \$449,500,057 and \$127,221,661, respectively.

In 2024, Dominion Energy entered into an agreement under which it increased the pension benefits of retirees represented by The Gas Workers Union, Local G555, UWUA AFL- CIO as of the closing date of the sale by eight percent. This transaction is expected to increase the actuarial present value of accumulated plan benefits by approximately \$18 million.

Effective December 31, 2024, the Plan merged into Dominion Energy Pension Plan (the Dominion Energy Plan). As a result, the Plan's net assets available for benefits and accumulated benefit obligations of \$954,502,832 and \$232,499,403, respectively, were transferred into the Dominion Energy Plan. This merger did not affect the participants' pension benefits because the benefit provisions of the Plan were incorporated into the Dominion Energy Plan.

Prior to December 31, 2024, the Plan's investment assets consist of an interest in the Dominion Energy, Inc. Defined Benefit Master Trust (the Master Trust), a master trust established by Dominion Energy and administered by the trustee as defined by the Plan.

- b. **Pension Benefits**—Pension benefits are calculated using a variety of final average pay formulas depending upon the participant's years of service and age at retirement. Generally the normal retirement age for the Plan is

65. In addition, the Plan contains a special retirement account (SRA) component that credits 2% of eligible pay each month. The Plan permits early retirement beginning at age 55. If the participant is married at his or her benefit commencement date, the benefit is paid in the form of a 50% joint and survivor annuity. Otherwise, the benefit is paid in the form of a single life annuity. Married participants may elect to receive their pension benefits in the form of a single life annuity, if their spouse consents to such an election, or in the form of a 75% or 100% joint and survivor annuity. The supplemental portion of the benefit may be paid in the form of a lump sum or as part of the monthly annuity.

## 2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

- a. **Basis of Accounting**—The accompanying financial statements of the Plan have been prepared in accordance with accounting principles generally accepted in the United States of America (GAAP).
- b. **Use of Estimates**—The preparation of financial statements in conformity with GAAP requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, disclosure of contingent assets and liabilities and the actuarial present value of accumulated plan benefits and changes therein at the date of the financial statements. Actual results could differ from those estimates.
- c. **Risks and Uncertainties**—The Plan, through its interest in the Master Trust, utilizes various investment securities as more fully described in Notes 3 and 4. Investment securities, in general, are exposed to various risks, such as interest rate risk, credit risk and overall market volatility. Market volatility includes global events which could impact the value of investment securities, such as a pandemic or international conflict. Due to the level of risk associated with certain investment securities, it is reasonably possible that changes in the values of investment securities will occur in the near term and such changes could materially affect the amounts reported in the financial statements.
- d. **Valuation of Investments**—All investments are at fair value, with the exception of the investment in immediate participation guarantee contracts. Investments in the immediate participation guarantee contracts with Equitable and Prudential, as held in the Master Trust, were entered into prior to 1992 and therefore grandfathered under applicable accounting guidance and are not subject to fair value measurement. These investments are valued at contract value, which represents aggregate amounts of contributions, interest and/or dividends earned thereon, less benefits paid and expenses. See Note 4 for further information on fair value measurements.
- e. **Income Recognition**—Purchases and sales of securities are recorded on a trade-date basis. Dividends are recorded on the ex-dividend date. Interest income is recorded on the accrual basis.
- f. **Administrative Expenses**— Expenses incurred directly in the administration of the Plan are paid by the Plan. The Master Trust pays investment management fees and other expenses and charges in connection with the purchase, sale, or disposition of securities and investments related to the assets of the Master Trust, which are netted with the net appreciation (depreciation) in fair value of investments reported in Note 3.
- g. **Payment of Benefits**—Benefit payments to participants are recorded upon distribution.

- h. **Actuarial Present Value of Accumulated Plan Benefits**—The actuarial present value of accumulated plan benefits is determined by an independent actuary, and is discussed in Note 6.

### 3. INTEREST IN MASTER TRUST

The Master Trust permits commingling of the trust assets of several defined benefit pension plans of Dominion Energy and its subsidiaries for investment and administrative purposes. The Master Trust is used solely for maintaining the assets of those plans. On December 31, 2024, the Plan was merged into the Dominion Energy Plan (Note 1). As a result, the Plan's assets, including the Plan's interest in investments held by the Master Trust were transferred to the Dominion Energy Plan. The Plan's assets and the Plan's interest in the Master Trust were zero as of December 31, 2024. As of December 31, 2023 the Plan's interest in the net assets of the Master Trust was approximately 15.5% with varying interests in each of the Master Trust investment accounts.

Although assets are commingled in the Master Trust, the trustee maintains supporting records for the purpose of allocating investment gains and losses to the participating plans based on the relationship of the interest of each plan to the total interests of the participating plans. In addition, the trustee maintains supporting records for the purpose of allocating investment gains and losses to the Plan assets designated to pay pension benefits based on the relationship of the designated assets to the Plan's interest in the Master Trust.

The Asset Management Committee, appointed by the Chief Executive Officer of Dominion Energy, establishes investment guidelines for the Master Trust assets and allocate contributions to the various investment managers. The Administrative Benefits Committee administers the Plan and is made up of employees of DES which were appointed by the Chief Executive Officer of Dominion Energy. The net assets of the Master Trust and the Plan's interest in the Master Trust at December 31, 2023 are summarized as follows:

	2023	
	Master Trust	Plan's Interest in Master Trust
Investments at fair value:		
Cash and cash equivalents	\$ 25,211,720	\$ 3,906,393
Government securities	1,804,851,300	279,650,046
Corporate debt instruments	624,913,361	96,826,287
Common and preferred stocks	1,916,206,976	296,903,888
Registered investment companies	439,355,076	68,075,230
Common/collective trust funds	1,564,053,890	242,340,043
Alternative investments	2,084,615,752	322,997,740
Investment contract	171,046,499	26,502,550
Other investments	1,975,093	306,028
	8,632,229,667	1,337,508,205
Investments at contract value:		
Immediate participation guarantee contracts	84,895,214	13,153,965
Receivables	339,446,974	52,595,115
Subscriptions in Advance	—	—
Payables	(50,153,963)	(7,771,032)
Total Master Trust	\$ 9,006,417,892	\$ 1,395,486,253

The net investment (loss) income of the Master Trust for the years ended December 31, 2024 and 2023 was as follows:

	2024	2023
Interest and dividends	\$ 110,253,479	\$ 145,578,611
Other income	269,774,655	20,217,503
Net appreciation in fair value of investments	96,853,490	722,674,997
Income (loss) earned on investments carried at contract value	(1,022,334)	6,522,570
Net investment income of the Master Trust	\$ 475,859,290	\$ 894,993,681

#### 4. FAIR VALUE MEASUREMENTS

Fair value is defined as the price that would be received to sell an asset or paid to transfer a liability (exit price) in an orderly transaction between market participants at the measurement date. Fair values are based on assumptions that market participants would use when pricing an asset or liability, including assumptions about risk and the risks inherent in valuation techniques and the inputs to valuations. Fair value measurements assume that the transaction occurs in the principal market for the asset or liability (the market with the most volume and activity for the asset or liability from the perspective of the reporting entity), or in the absence of a principal market, the most advantageous market for the asset or liability (the market in which the reporting entity would be able to maximize the amount received or minimize the amount paid). The Plan applies fair value measurements to the Plan's investments in accordance with the requirements described above.

##### *Inputs and Assumptions*

The Plan maximizes the use of observable inputs and minimizes the use of unobservable inputs when measuring the fair value of its investments. Fair value is based on actively-quoted market prices, if available. In the absence of actively-quoted market prices, the Plan seeks price information from external sources, including broker quotes. When evaluating pricing information provided by brokers, the Plan considers whether the broker is willing and able to trade at the quoted price, if the broker quotes are based on an active market or an inactive market and the extent to which brokers are utilizing a particular model if pricing is not readily available. If pricing information from external sources is not available, or if the Plan believes that observable pricing is not indicative of fair value, judgment is required to develop the estimates of fair value. In those cases, the Plan must estimate prices based on available historical and near-term future price information and certain statistical methods that reflect market assumptions.

The inputs and assumptions used in measuring fair value for investments include the following:

- Quoted securities prices and indices
- Securities trading information including volume and restrictions
- Maturity
- Interest rates
- Credit quality

The Plan regularly evaluates and validates the inputs used to estimate fair value by several methods, including review and verification of models, as well as various market price verification procedures such as the use of multiple broker quotes to support the market price of the various investments in which the Plan transacts.

The Plan's interest in the Master Trust is determined based on the fair values of the underlying investments of the Master Trust, which have been determined as follows:

- *Cash and Cash Equivalents*—Represents interest-bearing cash and foreign cash. Interest-bearing cash is valued at cost plus accrued interest. The foreign cash balances are valued at the amount held and translated on the reporting date based on prevailing exchange rates. Cash and cash equivalents held in a variation margin account and with various brokers, are less liquid and therefore have been classified as Level 2. Foreign cash and interest-bearing cash are classified as Level 1.
- *Common and Preferred Stocks*— Investments in common stocks are valued at the closing price reported on the active market on which the individual securities are traded and classified as Level 1. Investments in preferred stocks are classified as Level 2 and are valued using pricing models maximizing the use of observable inputs for similar securities. This includes basing value on yields currently available on comparable securities of issuers with similar credit ratings. When quoted prices are not available for identical or similar instruments, the instrument is valued under a discounted cash flows approach that maximizes observable inputs, such as current yields of similar instruments, but includes adjustments for certain risks that may not be observable, such as credit and liquidity risks or a broker quote, if available.
- *Investment Contract*—Investment Contract with John Hancock was entered into after 1992 and is stated at fair value based on the fair value of the underlying securities as provided by the managers and include investments in U.S. government securities, corporate debt instruments, and state and municipal debt securities.
- *Corporate Debt Instruments*—Investments are valued using pricing models maximizing the use of observable inputs for similar securities. This includes basing value on yields currently available on comparable securities of issuers with similar credit ratings. When quoted prices are not available for identical or similar instruments, the instrument is valued under a discounted cash flows approach that maximizes observable inputs, such as current yields of similar instruments, but includes adjustments for certain risks that may not be observable, such as credit and liquidity risks or a broker quote, if available.
- *Government Securities*—Investments are valued using pricing models maximizing the use of observable inputs for similar securities.
- *Registered Investment Companies*—Includes investments that are valued at the daily closing price as reported by the fund. These funds are required to publish their daily net asset value (NAV) and transact at that price and are deemed to be actively traded. Such investments are classified as Level 1. Additional investments are privately-held mutual funds that are not actively traded. The net asset values of these funds are calculated on a daily basis and are the values at which purchases, and sales are conducted. As the prices of privately-held funds are not publicly available, they are classified as Level 2.
- *Other Investments*— Investments represent participatory notes that are designated to offer a return linked to a particular underlying equity security and valued daily based on the price of the underlying security. As they are not actively traded, they are classified as Level 2.
- *Common/Collective Trust Funds*—Investments in common/collective trust funds are stated at the NAV as determined by the issuer of the common/collective trust funds and are based on the fair value of the underlying investments held by the fund less its liabilities. The NAV is used as a practical expedient to estimate fair value. The common/collective trust funds do not have any unfunded commitments and do not

have any applicable liquidation periods or defined terms/periods to be held. The majority of common/collective trust funds have limited withdrawal or redemption restrictions during the term of the investment.

- *Alternative Investments*—Investments in real estate funds, private equity funds, debt funds and hedge funds are stated at fair value based on the NAV of the Plan’s proportionate share of the funds’ fair value as determined by reference to audited financial statements or NAV statements provided by the investment manager. The NAV is used as a practical expedient to estimate fair value.

In connection with alternative investments held in the Master Trust, the Master Trust (as a limited partner) makes capital commitments that are called over time as the general partner makes investments. Investment strategies of the alternative investments are real estate, private equity and debt-based and also include hedge funds related to the debt investments. The typical term of these investments is 10-12 years. The Master Trust has limited withdrawal or redemption rights during the term of the investment. As a general rule, a limited partner’s interest can be sold in secondary markets subject to the approval of the general partner. Secondary markets tend to be illiquid especially during periods of market stress. Funds returned to the Master Trust as income, profits and capital are distributed over the term of the investment.

Presented below are the fair values, unfunded commitments and estimated liquidation periods for alternative investments held by the Master Trust at December 31, 2023:

	2023		
	Fair Value of Investments	Unfunded Commitments	Estimated Period of Liquidation (average years)
Alternative investments:			
Real estate funds	\$ 74,459,552	\$ 45,635,922	3
Private equity funds	1,502,559,865	777,932,344	9
Debt funds	254,288,037	123,821,378	5
Hedge funds	253,308,298	—	1
Total	\$ 2,084,615,752	\$ 947,389,643	7

### **Levels**

The Plan utilizes the following fair value hierarchy, which prioritizes the inputs to valuation techniques used to measure fair value into three broad levels:

- *Level 1*—Quoted prices (unadjusted) in active markets for identical assets that the Plan has the ability to access at the measurement date. This primarily includes exchange-listed securities.
- *Level 2*—Inputs other than quoted prices included within Level 1 that are either directly or indirectly observable for the asset, including quoted prices for similar assets and liabilities in active markets, quoted prices for identical or similar assets in inactive markets, inputs other than quoted prices that are observable for the asset, and inputs that are derived from observable market data by correlation or other means. This primarily includes certain Treasury securities, certain common and preferred stock and corporate, state and municipal debt instruments.

- *Level 3*—Unobservable inputs for the asset, including situations where there is little, if any, market activity for the asset.

The fair value hierarchy gives the highest priority to quoted prices in active markets (Level 1) and the lowest priority to unobservable data (Level 3). In some cases, the inputs used to measure fair value might fall in different levels of the fair value hierarchy. In these cases, the lowest level input that is significant to a fair value measurement in its entirety determines the applicable level in the fair value hierarchy. Assessing the significance of a particular input to the fair value measurement in its entirety requires judgment, considering factors specific to the asset.

### ***Recurring Fair Value Measurements***

Fair value measurements are separately disclosed below by level within the fair value hierarchy.

The following table presents the investments held in the Master Trust for the Plan and other employee benefit plans of Dominion Energy and its subsidiaries that are measured at fair value for each hierarchy level as of December 31, 2023:

At December 31,	2023			
	Level 1	Level 2	Level 3	Total
Cash and cash equivalents	\$ 17,162,912	\$ 8,048,808	\$ —	\$ 25,211,720
Common and preferred stocks	1,914,231,883	1,975,093	—	1,916,206,976
Investment contract	—	171,046,499	—	171,046,499
Corporate debt instruments	—	624,913,361	—	624,913,361
Government securities	—	1,804,851,300	—	1,804,851,300
Registered investment companies	421,087,122	18,267,954	—	439,355,076
Other investments	—	1,975,093	—	1,975,093
Total recorded at fair value	\$ 2,352,481,917	\$ 2,631,078,108	\$ —	\$ 4,983,560,025
Assets recorded at NAV <sup>(1)</sup> :				
Common/collective trust funds				1,564,053,890
Alternative investments:				
Real estate				74,459,552
Private equity				1,502,559,865
Debt				254,288,037
Hedge funds				253,308,298
Total alternative investments				2,084,615,752
Total recorded at NAV				3,648,669,642
Total investments				\$ 8,632,229,667

- (1) These investments that are measured at fair value using the NAV per share (or its equivalent) as a practical expedient which are not required to be leveled in the fair value hierarchy.

## **5. INFORMATION CERTIFIED BY THE TRUSTEES**

The following summarizes the Plan's certified investment information as of December 31, 2024 and 2023, and for the years then ended, prepared by Bank of New York Mellon and Northern Trust, the trustees of the Plan, and furnished to the plan administrator, included in the accompanying financial statements. The plan administrator has obtained certifications from Bank of New York Mellon and Northern Trust that such information is complete and accurate.

**STATEMENTS OF NET ASSETS AVAILABLE FOR PENSION BENEFITS**
**Investments<sup>(1)</sup>:**

Plan interest in Master Trust	\$	—	\$ 1,072,488,513
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**STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR PENSION BENEFITS**
**Investment income<sup>(2)</sup>:**

Net investment income - Plan interest from the Master Trust	\$	<b>8,983,482</b>	\$ 112,973,696
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(1) Alternative investments held within the Master Trust are not certified. As a result, the Plan's interest in alternative investments within the Master Trust amounting to \$322,997,740 at December 31, 2023 are not certified.

(2) Net investment income derived from uncertified common/collective trust funds, alternative investments and an investment contract held within the Master Trust is not certified. As a result \$26,329,340 and \$23,382,382 for the years ended December 31, 2024 and 2023, respectively, are not certified.

All investment balances and investment information included in Notes 3 and 4 are certified by Northern Trust, except for the information related to the Plan's interest in, income from the alternative investments that are part of the net assets of the Master Trust, and their respective unfunded commitments and estimated period of liquidation years. In addition, the fair value hierarchy categorization and leveling in Note 4 has been determined by the plan sponsor and is not certified.

**6. ACTUARIAL PRESENT VALUE OF ACCUMULATED PLAN BENEFITS**

Accumulated plan benefits are those future benefit payments attributable under the Plan's provisions for service that employees have rendered as of the valuation date. Accumulated plan benefits include benefits expected to be paid to (1) retired or terminated employees or their beneficiaries, (2) beneficiaries of employees who have died, and (3) present employees or their beneficiaries. The actuarial present value of accumulated plan benefits is determined by an independent actuary and is that 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 payment dates.

The actuarial present value of accumulated plan benefits presented in the accompanying financial statements is presented using the beginning of the year benefit information date. The actuarial present value of accumulated plan benefits is measured as of January 1, 2024, which is a proxy for December 31, 2023. The effect of plan amendments on accumulated plan benefits is recognized during the year in which such amendments become effective. Therefore the impact of the amendments described in Note 1 that occurred during 2024 are not reflected in the accumulated plan benefits. There were no amendments effective January 1 recognized in the actuarial present value of accumulated plan benefits below.

The actuarial present value of accumulated plan benefits as of December 31, 2023 is as follows:

<b>Vested benefits:</b>			
Participants and/or beneficiaries currently receiving benefits	\$		<b>205,992,295</b>
Other participants			<b>94,875,006</b>
Total vested benefits			<b>300,867,301</b>
<b>Non-vested benefits</b>			
Total actuarial present value of accumulated plan benefits	\$		<b>309,523,653</b>

The changes in the actuarial present value of accumulated plan benefits from the previous valuation date are as follows:

Actuarial present value of accumulated plan benefits at December 31, 2022	\$	308,062,040
Increase (decrease) attributable to:		
Benefits accumulated		4,630,601
Increase for interest due to the decrease in the discount period		25,032,525
Actuarial gains		(2,397,676)
Benefits paid		(25,803,837)
Net increase		<u>1,461,613</u>
Actuarial present value of accumulated plan benefits at December 31, 2023	\$	<u>309,523,653</u>

The significant actuarial assumptions used in determining accumulated plan benefits are as follows:

Discount Rate	8.35% compounded annually
Mortality	For non-disabled participants: The PRI-2012 Nondisabled Annuitant Mortality Table, blended 70% white collar and 30% blue collar, projected generationally using Scale MP-2020
Retirement	Annual estimated probability of retirement when eligible, from ages 55 to 70 and over for employees with less than 30 years of service and for employees with 30 or more years of service
SRA Interest Crediting Rate	4.47% for 2024 and 4.00% thereafter
Asset Valuation	Valuation assets are equal to the market value of assets as of the valuation date plus accrued contributions, if any

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

## 7. FUNDING POLICY

The Company's funding policy is to make contributions in accordance with the provisions of ERISA. The Plan is currently overfunded, and therefore is not required to make contributions. Contributions to the Plan are conditional on being deductible in the year deemed to have been made under Section 404 of the Internal Revenue Code (IRC). The cost of providing benefits is determined by an independent actuary to determine the normal cost and the target liability for retirement, termination and ancillary benefits. The Plan met the minimum funding requirements of ERISA as of December 31, 2024 and 2023. The Company did not make any contributions during 2024 or 2023.

## 8. EXEMPT PARTY-IN-INTEREST TRANSACTIONS

During 2024 and 2023, the Plan invested in a Master Trust managed by Bank of New York Mellon and Northern Trust, the trustees as defined by the Plan, and therefore the related transactions qualify as exempt party-in-interest transactions. Fees paid by the Master Trust for investment management services are included as a reduction of the return earned on each fund. The Master Trust paid \$1,023,992 and \$1,112,279 to DES, the plan administrator, during 2024 and 2023, respectively, for costs associated with administration of the Plan. The

Plan paid \$4,683 and \$6,357 to DES, the plan administrator, during 2024 and 2023, respectively, for costs associated with administration of the Plan.

## **9. PLAN TERMINATION**

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

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

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

## **10. FEDERAL INCOME TAX STATUS**

The Plan has obtained a determination letter from the Internal Revenue Service (IRS) dated April 7, 2021, in which the IRS determined that the Plan and related trust, at the time of the determination letter application, were designed in accordance with Section 401(a) of the IRC and therefore are exempt from federal income taxes under IRC Section 501(a). While some of the income from the Master Trust is considered exempt function income and therefore is exempt from income taxes, certain investments held in the Master Trust do generate income, as defined in IRC Section 512, that is subject to the unrelated business income tax (UBIT) at a maximum rate of 37%. Any UBIT paid during the year is included in administrative expenses of the Master Trust.

In December 2016, the IRS began publishing a Required Amendments List (List) for individually designed plans which specifies changes in qualification requirements. The List is published annually and requires plans to be amended for each item on the List, as applicable, to retain its tax-exempt status. The Plan has been amended since applying for the determination letter; however, the plan administrator believes that the Plan and related trust are currently designed, have been amended and are being operated in compliance with the applicable requirements of the IRC and continues to be tax-exempt, except to the extent of any unrelated business income received. Therefore, no provision for income taxes has been included in the Plan's financial statements.

<b>SCHEDULE SB</b> <b>(Form 5500)</b>  <small>Department of the Treasury Internal Revenue Service</small>  <small>Department of Labor Employee Benefits Security Administration</small>  <small>Pension Benefit Guaranty Corporation</small>	<b>Single-Employer Defined Benefit Plan</b> <b>Actuarial Information</b>  This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code).  <b>▶ File as an attachment to Form 5500 or 5500-SF.</b>	<small>OMB No. 1210-0110</small>  <b>2024</b>  <b>This Form is Open to Public Inspection</b>
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

▶ **Round off amounts to nearest dollar.**  
 ▶ **Caution:** A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.

<b>A</b> Name of plan Dominion Energy Ohio Union Pension Plan	<b>B</b> Three-digit plan number (PN) ▶	016
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF DOMINION ENERGY, INC.	<b>D</b> Employer Identification Number (EIN)  54-1229715	
<b>E</b> Type of plan: <input checked="" type="checkbox"/> Single <input type="checkbox"/> Multiple-A <input type="checkbox"/> Multiple-B	<b>F</b> Prior year plan size: <input type="checkbox"/> 100 or fewer <input type="checkbox"/> 101-500 <input checked="" type="checkbox"/> More than 500	

<b>Part I Basic Information</b>			
<b>1</b> Enter the valuation date:	Month <u>1</u>	Day <u>1</u>	Year <u>2024</u>
<b>2</b> Assets:			
<b>a</b> Market value .....	<b>2a</b>	1,395,502,446	
<b>b</b> Actuarial value .....	<b>2b</b>	1,503,812,125	
<b>3</b> Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
<b>a</b> For retired participants and beneficiaries receiving payment .....	1,686	260,087,436	260,087,436
<b>b</b> For terminated vested participants .....	559	24,009,390	24,009,390
<b>c</b> For active participants .....	1,050	118,593,895	132,531,448
<b>d</b> Total .....	3,295	402,690,721	416,628,274
<b>4</b> If the plan is in at-risk status, check the box and complete lines (a) and (b)..... <input type="checkbox"/>			
<b>a</b> Funding target disregarding prescribed at-risk assumptions .....	<b>4a</b>		
<b>b</b> Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor .....	<b>4b</b>		
<b>5</b> Effective interest rate .....	<b>5</b>	5.17 %	
<b>6</b> Target normal cost .....			
<b>a</b> Present value of current plan year accruals .....	<b>6a</b>	1,616,393	
<b>b</b> Expected plan-related expenses .....	<b>6b</b>	2,791,005	
<b>c</b> Target normal cost .....	<b>6c</b>	4,407,398	

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

<b>SIGN HERE</b>	Robert Winn <i>RDW</i>  Signature of actuary	10/14/2025  Date
	Robert Winn  Type or print name of actuary	23-06988  Most recent enrollment number
	Willis Towers Watson US LLC  Firm name	(703) 258-8000  Telephone number (including area code)
	800 NORTH GLEBE ROAD Floor 10 Arlington VA 22203  Address of the firm	

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

<b>Part II Beginning of Year Carryover and Prefunding Balances</b>		(a) Carryover balance	(b) Prefunding balance
<b>7</b>	Balance at beginning of prior year after applicable adjustments (line 13 from prior year) .....	5,724,548	0
<b>8</b>	Portion elected for use to offset prior year's funding requirement (line 35 from prior year) .....		
<b>9</b>	Amount remaining (line 7 minus line 8) .....	5,724,548	0
<b>10</b>	Interest on line 9 using prior year's actual return of <u>10.72%</u> .....	613,672	0
<b>11</b>	Prior year's excess contributions to be added to prefunding balance:		
<b>a</b>	Present value of excess contributions (line 38a from prior year) .....		0
<b>b(1)</b>	Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of <u>5.29%</u> .....		
<b>b(2)</b>	Interest on line 38b from prior year Schedule SB, using prior year's actual return .....		
<b>c</b>	Total available at beginning of current plan year to add to prefunding balance .....		0
<b>d</b>	Portion of (c) to be added to prefunding balance .....		
<b>12</b>	Other reductions in balances due to elections or deemed elections .....		
<b>13</b>	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12) .....	6,338,220	0

<b>Part III Funding Percentages</b>			
<b>14</b>	Funding target attainment percentage.....	<b>14</b>	359.42%
<b>15</b>	Adjusted funding target attainment percentage .....	<b>15</b>	360.94%
<b>16</b>	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement.....	<b>16</b>	341.09%
<b>17</b>	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage.....	<b>17</b>	%

<b>Part IV Contributions and Liquidity Shortfalls</b>							
<b>18</b> Contributions made to the plan for the plan year by employer(s) and employees:							
(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees		
			<b>Totals ▶</b>	<b>18(b)</b>	0	<b>18(c)</b>	0

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

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

**20** Quarterly contributions and liquidity shortfalls:

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

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

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

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

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

**21** Discount rate:

<b>a</b> Segment rates:	1st segment: 4.75 %	2nd segment: 4.87 %	3rd segment: 5.59 %	<input type="checkbox"/> N/A, full yield curve used
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**b** Applicable month (enter code) ..... **21b** 4

**22** Weighted average retirement age ..... **22** 62

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

**Part VI Miscellaneous Items**

**24** Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment.....  Yes  No

**25** Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment.....  Yes  No

**26** Demographic and benefit information

**a** Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment.....  Yes  No

**b** Is the plan required to provide a projection of expected benefit payments? 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**

**29** Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a)..... **29**

**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):

<b>a</b> Target normal cost (line 6c) .....	<b>31a</b>	4,407,398
<b>b</b> Excess assets, if applicable, but not greater than line 31a .....	<b>31b</b>	4,407,398

**32** Amortization installments:

	Outstanding Balance	Installment
<b>a</b> Net shortfall amortization installment .....		
<b>b</b> Waiver amortization installment .....		

**33** If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_) and the waived amount ..... **33**

**34** Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)..... **34** 0

	Carryover balance	Prefunding balance	Total balance
<b>35</b> Balances elected for use to offset funding requirement .....			0
<b>36</b> Additional cash requirement (line 34 minus line 35) .....			0
<b>37</b> Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c) .....			0

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

<b>a</b> Total (excess, if any, of line 37 over line 36)	<b>38a</b>	0
<b>b</b> Portion included in line 38a attributable to use of prefunding and funding standard carryover balances.....	<b>38b</b>	

**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 the American Rescue Plan Act of 2021 (See Instructions)**

**41** If an election was made to use the extended amortization rule for a plan year beginning on or before December 31, 2021, check the box to indicate the first plan year for which the rule applies.  2019  2020  2021

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## Schedule SB – Statement by Enrolled Actuary

<b>Plan Sponsor</b>	Dominion Energy, Inc.
<b>EIN/PN</b>	54-1229715/016
<b>Plan Name</b>	Dominion Energy Ohio Union Pension Plan
<b>Valuation Date</b>	January 1, 2024
<b>Enrolled Actuary</b>	Robert D. Winn
<b>Enrollment Number</b>	23-06988

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

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

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

See Schedule SB, Part V – Statement of Actuarial Assumptions/Methods for retirement rates. The average retirement age for Line 22 was calculated by determining the average age at retirement for those current active participants expected to reach retirement, based on all current decrements assumed.

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

### Economic Assumptions

#### Interest rate basis

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

#### Interest rates

	Reflecting Stabilization	Not Reflecting Stabilization
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#### Annual rates of increase

- Compensation:

Service (Years)	Current Valuation Average
0-4	9.9%
5-9	6.1%
10-14	3.8%
15-19	3.2%
20-24	3.2%
25-29	2.9%
30-34	2.8%
35 and up	2.7%

- Future Social Security wage bases 3.50%
- Statutory limits on compensation 2.50%
- Cash balance interest crediting rate 4.47% for 2024; 4.00% thereafter. 2024 uses the actual 30-year Treasury rate with a September 2023 lookback

#### Plan-related expenses

Assume 0.2% of market value of assets, not including any receivable contributions, as of the first day of the plan year. The amount included this year for plan-related expenses is \$2,791,005.

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As permitted by law, rates reflecting stabilization are used to determine the funding target and target normal cost, and thus the minimum required contribution under IRC §430 for the plan. Because these assumptions are subject to a corridor based on average interest rates over a 25-year period, they may differ from (and currently are higher than) current market interest rates, and may be inconsistent with other economic assumptions used in the valuation.

## Demographic Assumptions

**Inclusion date** The valuation date coincident with or next following the date on which the employee becomes a participant.

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

**Mortality**

- **Healthy** Separate rates for non-annuitants and annuitants based on Pri-2012 “Employees” and “Healthy Annuitants” (participants and beneficiaries combined) tables, respectively, without collar or amount adjustments and then projected forward with generational projection as specified in the regulations under §1.430(h)(3)-1 using the IRS adjusted Scale MP-2021 (i.e., MP-2021 with no mortality improvement for 2020-2023 and future mortality improvement capped at 0.78% for years after 2024).

- **Disabled** Same as Healthy mortality

**Termination** Representative Rates

Attained Age	Gas Union Participants	
	Service < 3 Years	Service >= 3 Years
25	5.3%	3.3%
30	4.8%	2.8%
35	4.2%	2.2%
40	3.7%	1.7%
45	3.1%	1.1%
50	3.1%	1.1%
55 and over	3.1%	1.1%

Preretirement termination benefits are assumed to commence at age 65.

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## Disability

Rates of disablement are assumed to equal 30% of female rates from the 1987 GLTD Incidence Table for 6-month elimination periods.

## Retirement

Age	Service <30 years	Service >=30 years
55	4.0%	4.0%
56	4.0%	4.0%
57	4.0%	4.0%
58	4.0%	25.0%
59	6.0%	20.0%
60	13.0%	23.0%
61	14.0%	23.0%
62	20.0%	26.0%
63	18.0%	30.0%
64	12.0%	20.0%
65	35.0%	35.0%
66 and over	35.0%	35.0%

All participants are assumed to retire by age 70, or immediately if older.

## Benefit commencement date

- Preretirement death benefit

Cash Balance and SRA: Upon Death

Old Plan and New Plan: The later of the date of death or the date the participant would have attained age 65
- Deferred vested benefit<sup>1</sup>

Cash Balance and SRA: 65% upon termination; 35% at age 62

Old Plan and New Plan: Normal Retirement Date
- Disability benefit

Cash Balance and SRA: Upon Disablement

Old Plan and New Plan: Normal Retirement Date
- Retirement benefit

Cash Balance and SRA: Upon retirement

Old Plan and New Plan: Upon retirement

## Form of payment

Cash Balance and SRA: Lump sum

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<sup>1</sup> Participants who transferred out of the plan with a vested benefit are assumed to commence at age 65.

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Old Plan and New Plan: 50% of participants are assumed to elect a single life annuity and 50% of participants are assumed to elect a 100% joint and survivor annuity.

**Percent married**

It is assumed that 75% of active male participants and 50% of active female participants are married to an eligible spouse.

**Spouse age**

Wife 2 years younger than husband

**Covered pay**

Compensation assumed paid in the current year beginning on the valuation date is the current annual rate of pay

**At-risk assumptions**

For at-risk calculations, all participants eligible to elect benefits during the current and subsequent ten plan years are assumed to commence benefits at the earliest possible date under the plan, but not before the end of the current plan year, except in accordance with the regular valuation assumptions. In addition, all participants (not just those eligible to begin benefits within the next 11 years) are assumed to elect the most valuable form of benefit under the plan, which is usually the 100% Joint and Survivor form of payment for the Final Average Pay benefits and lump sum form of payment for the Cash Balance benefits.

**Timing of benefit payments**

Annuity payments are payable monthly at the beginning of the month and lump sum payments are payable on date of decrement.

## Methods

**Valuation date**

First day of plan year

**Funding target**

Present value of accrued benefits as required by regulations under IRC §430.

**Target normal cost**

Present value of benefits expected to accrue during the plan year plus plan-related expenses expected to be paid from plan assets during the plan year as required by regulations under IRC §430.

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## **Decrement timing**

The approach used is called rounded middle of year (rounded MOY) decrement timing. Most events are assumed to occur at the middle of year during which the eligibility condition will be met or the start/end date will occur. For death and disability decrements, the rate applied is based on the participant's rounded age (nearest integer age) at the beginning of the year, to align with the methodology generally used to create those rate tables. For retirement and withdrawal decrements: the age is generally the participant's rounded age at the middle of the year.

## **Actuarial value of assets**

Average of the fair market value of assets on the valuation date and 12 and 24 months preceding the valuation date, adjusted for contributions, benefits, administrative expenses and expected earnings (with such expected earnings limited as described in IRS Notice 2009-22). The average asset value must be within 10% of market value, including discounted contributions receivable (discounted using the effective interest rate for the prior plan year.)

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

## **Benefits not valued**

All benefits described in the Plan Provisions section of this report were valued based on discussions with Dominion Energy, Inc. regarding the likelihood that these benefits will be paid. WTW has reviewed the plan provisions with Dominion Energy, Inc. and, based on that review, is not aware of any significant benefits required to be valued that were not.

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## Sources of Data and Other Information

The plan sponsor, through its third party administrator Alight Solutions, furnished participant data as of 1/1/2024. Information on assets, contributions and plan provisions was supplied by the plan sponsor. Data and other information were reviewed for reasonableness and consistency, but no audit was performed. Based on discussions with the plan sponsor, assumptions or estimates were made when data were not available, and the data was adjusted to reflect any significant events that occurred between the date the data was collected and the measurement date. In consultation with the plan sponsor, assumptions were made for missing or apparently inconsistent data elements as documented in the data question deliverables dated June 14, 2024.

We are not aware of any errors or omissions in the data that would have a significant effect on the results of our calculations.

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## Assumptions Rationale - Significant Economic Assumptions

<b>Discount rate</b>	For plan funding purposes, the basis chosen was selected by the plan sponsor from among choices prescribed by law, all of which are based on observed market data over certain periods of time.
<b>Cash Balance Interest crediting rate</b>	<p>The plan credits interest to cash balance accounts using the 30-year Treasury rate for September of the previous year. The long term estimate of the 30-year Treasury bond rate is 4.00%, based on a combination of current conditions and future economic expectations.</p> <p>For the reasons discussed above, we believe the assumptions selected do not significantly conflict with what would be reasonable.</p>
<b>Plan-related expenses</b>	As required by regulations, plan-related expenses are calculated by estimating the expenses to be paid from the trust during the coming year (including, for example, expected PBGC premiums and actuarial, accounting, legal, administration and trustee fees to be paid from the trust).
<b>Assumed return for asset smoothing</b>	The assumed return of 5.74% used for asset smoothing is the third segment rate. Although we have not explicitly determined an expected return on assets, based on an analysis of the plan sponsor's investment policy we believe the rate to be above the third segment rate.

## Assumptions Rationale - Significant Demographic Assumptions

<b>Healthy Mortality</b>	Assumptions used for funding purposes are as prescribed by IRC §430(h).
<b>Disabled Mortality</b>	Assumptions used for funding purposes are as prescribed by IRC §430(h).
<b>Termination</b>	Termination rates were based on an experience study conducted in 2021, with annual consideration of whether any

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conditions have changed that would be expected to produce different results in the future.

We believe the assumption does not significantly conflict with what would be reasonable because it reflects recent experience.

## Retirement

Retirement rates were based on an experience study conducted in 2021, with annual consideration of whether any conditions have changed that would be expected to produce different results in the future.

We believe the assumption does not significantly conflict with what would be reasonable because it reflects recent experience.

## Prescribed Methods

### Funding methods

The methods used for funding purposes as described in Appendix A, including the method of determining plan assets, are “prescribed methods set by law”, as defined in the actuarial standards of practice (ASOPs). These methods are required by IRC §430, or were selected by the plan sponsor from a range of methods permitted by IRC §430.

## Changes in Assumptions and Methods

### Change in assumptions since prior valuation

The segment interest rates used to calculate the funding target and target normal cost were updated to the current valuation date as required by IRC §430.

The mortality table used to calculate the funding target and target normal cost was updated to reflect the latest mortality improvement scale, as required by guidance issued by IRS under IRC §430. The mortality table was updated to include one additional year of projected mortality improvement as required by guidance issued by IRS under IRC §430.

### Change in methods since prior valuation

The target normal cost for the year was adjusted to reflect the effects of a spin-off of active employees to Enbridge.

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## Schedule SB, Line 25 Change in Method

As a result of a spin-off of active employees on March 6, 2024, the 2024 Target Normal Cost (TNC) was determined as the sum of the following:

- 1) Benefit accruals for the full year attributable to the retained population, determined as of the January 1, 2024 valuation; plus
- 2) Benefit accruals for the January 1, 2024 to March 6, 2024 partial year attributable to the spun-off group (representing benefits expected to accrue for the pre-spin period). The partial year TNC for spun-off participants is based on the methods used to determine the full year TNC in the January 1, 2024 valuation, with adjustments to reflect the period of accrual prior to spin-off, timing of salary increases and the effect of the service-based cash balance formula; plus
- 3) Plan expenses for the full year were retained by OUPP.

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## Schedule SB, Part V Summary of Plan Provisions

The Dominion River Gas Division Union Pension Plan (River Gas) was merged into the Dominion Ohio East Gas Union Pension Plan (East Ohio Gas) effective December 31, 2007. The Dominion Ohio West Gas Union Pension Plan (West Ohio Gas) was merged into the Dominion Ohio East Gas Union Pension Plan effective June 30, 2013.

### Plan Provisions

The plan was originally effective July 1, 1973. The most recent amendment reflected in the following plan provisions was effective January 1, 2021.

#### Covered employees

Old Plan East Ohio Gas: Any employee of the Company (excluding leased employees) who is in a job classification represented for collective bargaining purposes by, and is a member of, the Gas Workers Union, Local G555, Utility Worker's Union of America, AFL-CIO. The Old Plan East Ohio Gas closed to new hires effective January 1, 2002.

Old Plan West Ohio Gas: Any employee of the Company (excluding leased employees) who is in a job classification represented for collective bargaining purposes by, and is a member of, Local Union No. 308, The Utility Workers Union of America, AFL-CIO (Physical) or by Local Union No. 308-C, The Utility Workers Union of America, AFL-CIO (Clerical). The Old Plan West Ohio Gas closed to new hires effective January 1, 2003.

New Plan East Ohio Gas: Any employee of the Company (excluding leased employees) who is in a job classification represented for collective bargaining purposes by, and is a member of, the Gas Workers Union, Local G555, Utility Worker's Union of America, AFL-CIO, is eligible to participate in the New Plan as of the later of date of hire and attainment of age 18. All employees who were eligible to participate in the Old Plan as of December 31, 2001 are eligible to participate in the New Plan on January 1, 2002, even if they have not yet attained age 18. The New Plan East Ohio Gas closed to new hires effective January 1, 2019.

New Plan West Ohio Gas: Any employee of the Company (excluding leased employees) who is in a job classification represented for collective bargaining purposes by, and is a member

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of, Local Union No. 308, The Utility Workers Union of America, AFL-CIO or by Local Union No. 308-C, The Utility Workers Union of America, AFL-CIO, All employees who were eligible to participate in the Old Plan West Ohio Gas as of December 31, 2002 are eligible to participate in the New Plan West Ohio Gas on January 1, 2003, even if they have not yet attained age 18. The New Plan West Ohio Gas is closed to new hires effective January 1, 2019.

Cash Balance Plan: Any employee of the Company (excluding leased employees) who is hired or rehired on or after January 1, 2019 and in a job classification represented for collective bargaining purposes by, and is a member of, the Gas Workers Union, Local G555, Utility Worker's Union of America, AFL-CIO.

## Participation date

The later of date of hire and attainment of age 18 for the Cash Balance Plan. Participation in prior plans is closed.

## Definitions

### Vesting service

Based on elapsed time from date of hire

### Pension service

Old Plan (East and West Ohio Gas): Based on elapsed time from date of hire, with 15 or more days worked in a calendar month counting as 1/12 of a year of credited service.

New Plan (East and West Ohio Gas): Based on elapsed time from date of hire. Service is awarded for each calendar month in which at least one hour of service is worked.

Cash Balance Plan (East and West Ohio Gas): Based on elapsed time from date of hire. Service is awarded for each calendar month in which at least one hour of service is worked.

### Compensation

Old Plan East Ohio Gas: Wage or salary, excluding bonuses, but including overtime payments made on and after June 16, 1997, commissions, workers' compensation payments, disability benefits, and other specified amounts, subject to IRC 401(a)(17) compensation limits.

Old Plan West Ohio Gas: Wage or salary, excluding bonuses, but including overtime payments, commissions, workers' compensation payments, disability benefits, and other specified amounts, subject to IRC 401(a)(17) compensation limits.

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New Plan East Ohio Gas: Base pay actually paid plus any amounts deferred under Section 125 or Section 401(k) plans plus merit lump sum payments, and other specified amounts, subject to IRC 401(a)(17) compensation limits.

New Plan West Ohio Gas: Base pay actually paid plus any amounts deferred under Section 125 or Section 401(k) plans subject to IRC 401(a)(17) compensation limits.

Cash Balance Plan (East and West Ohio Gas): Base pay actually paid plus any amounts deferred under Section 125 or Section 401(k) plans plus merit lump sum payments, and other specified amounts, subject to IRC 401(a)(17) compensation limits.

## Final average compensation

Old Plan (East and West Ohio Gas): The annual average of Old Plan compensation in the 60 highest consecutive months during the last 120 months of employment.

New Plan (East and West Ohio Gas): The annual average of New Plan compensation in the 60 highest consecutive months during the last 120 months of employment.

## Social Security wage base

The contribution and benefit base in effect under Section 230 of the Social Security Act for the year of the calculation.

## Normal Retirement Date (NRD)

For participants who retired prior to January 1, 2002 for East Ohio Gas (January 1, 2003 for West Ohio Gas), first of month in which 65th birthday occurs. Benefits of female employees, credited in earlier years on the basis of younger normal retirement ages, are increased to actuarial equivalent amounts in the event of retirement after such ages.

For participants who retire after December 31, 2001 for East Ohio Gas (December 31, 2002 for West Ohio Gas), first of month coincident with or next following attainment of age 65.

## Special Retirement Account (SRA)

### Eligibility

Participating in the New Plan (East and West Ohio Gas)

### Pay Credits

East Ohio Gas: 2% of compensation beginning January 1, 2002.

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West Ohio Gas: 2% of compensation beginning January 1, 2003.

**Interest Credited to Account Balance**

Credited on a daily basis at a rate annually equivalent to the 30-year Treasury bond rate for the September of the preceding year, subject to a minimum rate of 1.5%.

**Payment Options**

- I. Immediate lump sum – equal to the account balance;
- II. Immediate annuity; or
- III. Deferred annuity – paid in same form and beginning at the same time as the remaining retirement benefit

**Annuity Conversion Basis**

The SRA is converted from an account balance to a single life annuity at benefit commencement age using the section 417(e) applicable mortality table and the 30-year Treasury bond rate used for interest crediting in the year of benefit commencement. All other payment options are converted using the Plan's actuarial equivalence basis for payment options.

**Annuity Options**

Retirement-eligible terminated participant – Same as payment options for remaining retirement benefit.

Deferred vested terminated participant – single life annuity or 50% joint and survivor annuity, if paid as an immediate annuity. Same as payment options for remaining retirement benefit, if paid as a deferred annuity.

## Cash Balance Plan

**Pay Credits**

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

Years of Pension Service	Pay-Based Credits as a % of Compensation
<5	4%
5-14	5%
15-24	6%
25+	7%

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<b>Interest Credit</b>	Interest Credits are credited monthly to the Cash Balance account on a daily basis at a rate annually equivalent to the Applicable Interest Rate for the Plan Year, subject to a minimum rate of 1.5%.
<b>Payment Options</b>	<ol style="list-style-type: none"><li>I. Immediate lump sum – equal to the account balance;</li><li>II. Immediate annuity; or</li><li>III. Deferred annuity – paid in same form and beginning at the same time as the remaining retirement benefit</li></ol>
<b>Applicable Interest Rate</b>	The annual yield on the 30-year Treasury securities for September of the preceding year.
<b>Applicable Mortality Table</b>	The prescribed mortality table as specified under the Internal Revenue Code section 417(e)(3)(B).
<b>Annuity Conversion Basis</b>	One form of benefit shall be the actuarial equivalent value of another form of benefit determined on the basis of the Applicable Interest Rate and Applicable Mortality Table.
<b>Annuity Options</b>	<p>Deferred vested terminated participant – single life annuity or 50% joint and survivor annuity, if paid as an immediate annuity. Same as payment options for remaining retirement benefit, if paid as a deferred annuity.</p> <p>Retirement-eligible terminated participant – Same as payment options for remaining retirement benefit.</p>

## Additional Benefits

<b>Permanent Supplement</b>	All employees who were participants in the legacy plan as of the effective date are eligible to receive the permanent supplement for each year of credited service with completed months of credited service counting as a fraction of a year, payable as an annual benefit, as indicated in the table below:
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Legacy Plan	Supplemental Amount	Effective Date
East Ohio Gas	\$10/month	6/30/2001
West Ohio Gas	\$10/month	12/31/2002
River Gas	\$11/month	3/31/2003

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## Temporary Supplement

Former River Gas participants: For each participant who was an employee as of March 31, 2003 and retires after April 1, 2003 under the age of 62, the participant shall receive a temporary supplemental retirement allowance of \$470 per month until age 62.

East Ohio Gas: For each participant who retires after June 15, 2001 under the age of 62 with at least 15 years of pension service, the participant shall receive a temporary supplemental retirement allowance of \$575 per month until age 62.

West Ohio Gas: Each participant who was an employee as of December 31, 2002 and retires on or after January 1, 2003, provided the participant is under the age of 62, shall receive a temporary supplemental retirement allowance of \$500 per month until age 62.

## Eligibility for Benefits

### Normal retirement

Retirement on NRD

### Early retirement

For participants who terminate before January 1, 2002 for East Ohio Gas (January 1, 2003 for West Ohio Gas), age 55 and 15 years of vesting service.

For participants who terminate after December 31, 2001 for East Ohio Gas (December 31, 2003 for West Ohio Gas), age 55 and 3 years of vesting service.

### Postponed retirement

Retirement after age 65

### Vested termination

For participants who terminate before January 1, 2002 for East Ohio Gas (January 1, 2003 for West Ohio Gas), full vesting after five years of vesting service, or at normal retirement date, if earlier.

For participants who terminate after December 31, 2001 for East Ohio Gas (December 31, 2002 for West Ohio Gas), full vesting after three years of vesting service, or at normal retirement date, if earlier.

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**Preretirement spouse benefit**

Required vested prior to date of death.

**Disability**

For participants who become disabled prior to January 1, 2002 for East Ohio Gas (January 1, 2003 for West Ohio Gas), after 15 years of vesting service if certified as totally and permanently disabled by the System Medical Director or Consultant.

For participants who qualify for benefits under Dominion Energy, Inc.'s long-term disability plan on or after January 1, 2002 for East Ohio Gas (January 1, 2003 for West Ohio Gas) and after completing 5 years of vesting service.

## Benefits Paid Upon the Following Events

**Normal retirement**

Old Plan East Ohio Gas:

The greater of [(a)+(b)] or (c), plus the Permanent Supplement

- a. For service prior to June 16, 1979, in accordance with the Plan as in effect to that date.
- b. For each year of credited service on and after June 16, 1979 and on or before December 31, 2001, 1.7% of Old Plan compensation.
- c. 1.125% of Old Plan final average compensation times years of credited service.

Old Plan (Physical) West Ohio Gas:

The greater of [(a)+(b)] or [(c)(i), plus the excess, if any, of c(ii) over c(iii)] plus the Permanent Supplement

- For service prior to January 1, 1984, in accordance with the Plan as in effect to that date.
- For each year of credited service on and after January 1, 1984 and on or before December 31, 2002, 1.7% of Old Plan compensation.
- - i. Number of years of Pension Service on or before December 31, 2002 multiplied by 1.125% of final average compensation.
  - ii. Benefit accrued under Plan formula in effect prior to January 1, 1984 for years of Pension Service as of January 1, 1985.

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- iii. Number of years of Pension Service as of January 1, 1985 multiplied by 1.125% of final average compensation as of January 1, 1985.

## Old Plan (Clerical) West Ohio Gas:

[(a) + (b)], plus the Permanent Supplement

- a. The excess of 1.596% of final average compensation multiplied by years of credited service on or before January 1, 2003 over 1.5% of employee's Social Security Primary Insurance Amount multiplied by years of credited service on or before January 1, 2003, up to a maximum of 40% of the benefit.
- b. If employed prior to July 1, 1973, the excess, if any, of (i) plus (ii) over (iii).

- i. With respect to Participants who were formerly included in the Consolidated Plan, the amount of annual pension credits which were accrued on the various career average formulas in effect from time to time under that plan.
- ii. For each month of credited service while included under this Plan and prior to July 1, 1978, 1.7% of monthly Earnings up to monthly Social Security wage base, plus 2% of monthly Earnings in excess of monthly Social Security wage base.
- iii. The amount of net final pay offset benefit in (a), above, using 1.5% of final average compensation instead of 1.596% and excluding any portion which is applicable to service after June 30, 1978.

## New Plan (East and West Ohio Gas):

- a. 1.80% of New Plan final average compensation times credited service up to 30 years (30-year service cap includes credited service under the Old Plan formula)  
  
less
- b. 1.50% of the participant's age 65 annual Primary Insurance Amount under the Social Security law in effect on the date of determination (assuming no future earnings), times credited service up to 30

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years (30 year service cap includes credited service under the Old Plan formula)

plus

- c. SRA as of normal retirement date payable as an immediate lump sum or immediate annuity taken in the same optional form as the remaining retirement benefit.

West Ohio Gas: All employees who were participants on December 31, 2002 will receive a five-year extension to the service cap in the New Plan formula.

## Cash Balance:

The Cash Balance account as of normal retirement date payable as an immediate lump sum or immediate annuity taken in the normal form of payment or optional forms of retirement income.

## **Early retirement (from active status)**

Old Plan (East and West Ohio Gas): The benefit is determined under the normal retirement formula reduced  $\frac{1}{4}\%$  for each of the first 24 months by which the participant's benefit commencement date precedes age 62 plus  $\frac{1}{3}\%$  for each of the next 24 months by which the participant's benefit commencement date precedes age 60 plus  $\frac{5}{12}\%$  for each month within the next 36 months by which the benefit commencement date precedes age 58. The Permanent Supplement is unreduced for early retirement from active status.

New Plan (East and West Ohio Gas): The benefit is determined under the normal retirement formula with the a) and the b) pieces of the New Plan formula reduced  $\frac{1}{4}\%$  for each of the first 24 months by which the participant's benefit commencement date precedes age 60 plus  $\frac{1}{2}\%$  for each of the next 36 months by which the benefit commencement date precedes age 58. The SRA as of the early retirement date is payable as an immediate lump sum or immediate annuity in the same optional form as the remaining retirement benefit.

Cash Balance: The account balance

## **Postponed retirement**

Normal retirement benefit described above, based on pension service, final average compensation, Primary

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Insurance Amount, SRA compensation and interest credits, and/or cash balance compensation and interest credits as of the late retirement date, as appropriate.

## Vested termination

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

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

Plus,

For participants who have an SRA balance, either:

- SRA determined as of termination date payable as an immediate lump sum or an immediate annuity; or
- SRA determined as of retirement date payable as an annuity in the same form as the remaining retirement benefit.

For participants with Cash Balance formula, the Cash Balance account determined as of the benefit commencement date elected by the participant payable as an immediate lump sum or an immediate annuity.

## Preretirement spouse benefit

For participants who were in the plan on December 31, 2001 for East Ohio Gas or December 31, 2002 for West Ohio Gas and who die while actively employed, the surviving spouse will receive an immediate monthly income payable for life equal to 50% of the participant's accrued benefit at the date of death valued under the 50% joint and survivor option with the Old Plan benefit and the a) and the b) pieces of the New Plan benefit and the Permanent Supplement reduced for early retirement using the active early retirement factors. For benefit commencement before the participant's earliest

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retirement date, this benefit is further reduced for ages below 55 as follows:

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

For employees who become participants on or after January 1, 2002 for East Ohio Gas or January 1, 2003 for West Ohio Gas, the surviving spouse will receive a monthly retirement income payable for life in an amount equal to 50% of the amount the participant would have received if he had survived and elected to commence receiving a retirement income at the earliest date allowed under the plan, payable under the 50% joint and survivor option.

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

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

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

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

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

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The Cash Balance is payable to the Cash Balance participant's beneficiary commencing on a benefit commencement date elected by the beneficiary following the Cash Balance participant's death as an active or terminated vested participant.

- If the beneficiary is the cash balance participant's spouse, the beneficiary may receive the cash balance participant's retirement benefit in either (i) a single sum calculated as of the beneficiary's benefit commencement date or (ii) a single life annuity for the life of the beneficiary that is the actuarial equivalent of the participant's Cash Balance account as of the beneficiary's benefit commencement date.
- If the beneficiary is not the cash balance participant's spouse, the beneficiary may receive the cash balance participant's accrued benefit only as a single sum one-time payment.

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**Preretirement spouse benefit for non-vested participants in active service**

If the participant is not vested, the beneficiary will receive, in a lump sum, the participant's SRA balance.

**Disability**

For participants who become disabled prior to January 1, 2002 for East Ohio Gas (January 1, 2003 for West Ohio Gas), benefit accrued to date of disability without reduction.

For participants who become disabled after December 31, 2001 for East Ohio Gas (December 31, 2002 for West Ohio Gas), the accrued benefit payable at normal retirement date under the Old Plan and New Plan formulas based on final average compensation and Primary Insurance Amount at the date of disability, and credited service accrued to the earlier of recovery from disability and normal retirement date. The SRA is available as an immediate lump sum or an immediate annuity at disability. No further compensation credits are granted after disability. If an immediate lump sum or immediate annuity is not elected, the disabled participant may take a deferred annuity reflecting additional interest credits after disability at the same time and in the same form as the remaining retirement benefit. The Permanent Supplement is also available to disabled participants at normal retirement

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## Other Plan Provisions – Final Average Pay Plan Participants

### Forms of payment

Normal form of payment: For unmarried participants, the normal form of payment is a single life annuity for benefits. For married participants, the normal form is an actuarially equivalent 50% joint and survivor benefit. A five-year certain form of payment may apply to parts of the benefits earned by certain long-service employees.

Optional Forms:

- 50% joint and survivor annuity
- 75% joint and survivor annuity
- 100% joint and survivor annuity
- Social Security leveling option to age 62
- Single life annuity
- Lump sum (SRA only)

### Maximum on benefits and pay

All benefits and pay for any calendar year may not exceed the maximum limitations for that year as defined in the Internal Revenue Code. The plan provides for increasing the dollar limits automatically as such changes become effective.

## Future Plan Changes

No future plan changes were recognized in determining minimum and maximum contributions. Willis Towers Watson is not aware of any future plan changes which are required to be reflected.

## Changes in Benefits Valued Since Prior Year

Changes to the IRS statutory limits on benefits and pay have been reflected.

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

Attained Age	Years of Credited Service																			
	Under 1		1 to 4		5 to 9		10 to 14		15 to 19		20 to 24		25 to 29		30 to 34		35 to 39		40 & Over	
	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.
		Avg. Bal.		Avg. Bal.		Avg. Bal.		Avg. Bal.		Avg. Bal.		Avg. Bal.		Avg. Bal.		Avg. Bal.		Avg. Bal.		Avg. Bal.
Under 25	10		12		2															
25 - 29	22	\$56,476 \$878	33	\$67,239 \$5,245	10															
30 - 34	18		40	\$72,849 \$5,044	50	\$86,509 \$11,395	5													
35 - 39	18		43	\$74,546 \$7,442	56	\$87,778 \$11,745	12		24	\$88,134 \$24,050										
40 - 44	10		31	\$78,679 \$7,440	46	\$88,287 \$11,734	18		35	\$88,897 \$25,352	10									
45 - 49	3		16		25	\$89,036 \$12,910	16		47	\$88,400 \$25,952	16		4							
50 - 54	4		10		25	\$84,955 \$11,850	17		31	\$86,525 \$25,503	17		15		8					
55 - 59	4		11		8		9		15		14		18		48	\$89,845 \$39,674				
60 - 64			2		6		5		14		13		17		74	\$88,090 \$38,569				
65 - 69	1				2		1		1		3		6		16					
70 & Over					1										2					

Plan Name: Dominion Energy Ohio Union Pension Plan  
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# SCHEDULE SB ATTACHMENTS

## Schedule SB, Line 26b Schedule of Projection of Expected Benefit Payments

Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving Payments	Total
2024	2,882,159	1,624,220	24,138,694	28,645,073
2025	4,091,896	474,705	23,291,138	27,857,739
2026	5,001,252	484,480	22,558,580	28,044,312
2027	5,680,311	725,189	21,884,887	28,290,387
2028	6,374,553	974,906	21,232,850	28,582,309
2029	6,784,013	864,426	20,554,879	28,203,318
2030	7,198,507	1,072,122	19,895,688	28,166,317
2031	7,541,035	1,053,943	19,242,939	27,837,917
2032	7,805,389	1,164,400	18,579,536	27,549,325
2033	8,048,019	1,383,399	17,905,500	27,336,918
2034	8,289,072	1,398,570	17,220,610	26,908,252
2035	8,477,744	1,345,174	16,524,500	26,347,418
2036	8,720,099	1,436,153	15,816,731	25,972,983
2037	8,993,307	1,603,747	15,096,921	25,693,975
2038	9,315,734	1,574,141	14,364,885	25,254,760
2039	9,577,634	1,569,390	13,620,755	24,767,779
2040	9,767,588	1,760,137	12,865,190	24,392,915
2041	9,840,846	1,766,164	12,099,542	23,706,552
2042	9,851,331	1,857,994	11,325,889	23,035,214
2043	10,012,147	1,815,403	10,546,939	22,374,489
2044	10,135,105	1,866,719	9,765,937	21,767,761
2045	10,016,713	1,914,851	8,986,742	20,918,306
2046	10,001,517	1,896,861	8,213,869	20,112,247
2047	10,025,392	2,128,059	7,452,516	19,605,967
2048	9,988,252	1,990,313	6,708,434	18,686,999
2049	9,784,484	1,968,568	5,987,685	17,740,737
2050	9,581,589	2,041,293	5,296,398	16,919,280
2051	9,309,188	2,025,441	4,640,402	15,975,031
2052	9,105,593	1,966,537	4,025,026	15,097,156
2053	8,720,619	1,889,392	3,454,781	14,064,792
2054	8,406,778	1,848,521	2,933,091	13,188,390
2055	8,021,309	1,806,227	2,462,180	12,289,716
2056	7,717,855	1,711,369	2,042,975	11,472,199
2057	7,311,487	1,669,779	1,675,157	10,656,423
2058	6,891,763	1,563,739	1,357,175	9,812,677
2059	6,505,268	1,488,583	1,086,382	9,080,233
2060	6,139,933	1,426,205	859,244	8,425,382
2061	5,771,242	1,335,393	671,608	7,778,243
2062	5,383,507	1,258,184	518,956	7,160,647
2063	5,039,225	1,183,040	396,629	6,618,894
2064	4,705,818	1,110,125	300,050	6,115,993
2065	4,386,155	1,039,486	224,894	5,650,535
2066	4,074,604	971,087	167,211	5,212,902
2067	3,781,991	904,820	123,516	4,810,327

Plan Name: Dominion Energy Ohio Union Pension Plan  
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Plan Sponsor: Dominion Energy, Inc.  
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2068	3,503,151	840,546	90,819	4,434,516
2069	3,236,282	778,137	66,611	4,081,030
2070	2,980,259	717,493	48,845	3,746,597
2071	2,736,150	658,572	35,891	3,430,613
2072	2,502,069	601,404	26,480	3,129,953
2073	2,278,477	546,091	19,645	2,844,213

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

See Schedule SB, Part V – Statement of Actuarial Assumptions/Methods for retirement rates. The average retirement age for Line 22 was calculated by determining the average age at retirement for those current active participants expected to reach retirement, based on all current decrements assumed.

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## Schedule SB, Line 25 Change in Method

As a result of a spin-off of active employees on March 6, 2024, the 2024 Target Normal Cost (TNC) was determined as the sum of the following:

- 1) Benefit accruals for the full year attributable to the retained population, determined as of the January 1, 2024 valuation; plus
- 2) Benefit accruals for the January 1, 2024 to March 6, 2024 partial year attributable to the spun-off group (representing benefits expected to accrue for the pre-spin period). The partial year TNC for spun-off participants is based on the methods used to determine the full year TNC in the January 1, 2024 valuation, with adjustments to reflect the period of accrual prior to spin-off, timing of salary increases and the effect of the service-based cash balance formula; plus
- 3) Plan expenses for the full year were retained by OUPP.

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## Schedule SB, Line 26b Schedule of Projection of Expected Benefit Payments

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2060	6,139,933	1,426,205	859,244	8,425,382
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2065	4,386,155	1,039,486	224,894	5,650,535
2066	4,074,604	971,087	167,211	5,212,902
2067	3,781,991	904,820	123,516	4,810,327

Plan Name: Dominion Energy Ohio Union Pension Plan  
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2068	3,503,151	840,546	90,819	4,434,516
2069	3,236,282	778,137	66,611	4,081,030
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2071	2,736,150	658,572	35,891	3,430,613
2072	2,502,069	601,404	26,480	3,129,953
2073	2,278,477	546,091	19,645	2,844,213

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Plan Sponsor: Dominion Energy, Inc.  
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## Schedule SB, Line 26a Schedule of Active Participant Data as of January 1, 2024

Attained Age	Years of Credited Service																			
	Under 1		1 to 4		5 to 9		10 to 14		15 to 19		20 to 24		25 to 29		30 to 34		35 to 39		40 & Over	
	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.
		Avg. Bal.		Avg. Bal.		Avg. Bal.		Avg. Bal.		Avg. Bal.		Avg. Bal.		Avg. Bal.		Avg. Bal.		Avg. Bal.		Avg. Bal.
Under 25	10		12		2															
25 - 29	22	\$56,476 \$878	33	\$67,239 \$5,245	10															
30 - 34	18		40	\$72,849 \$5,044	50	\$86,509 \$11,395	5													
35 - 39	18		43	\$74,546 \$7,442	56	\$87,778 \$11,745	12		24	\$88,134 \$24,050										
40 - 44	10		31	\$78,679 \$7,440	46	\$88,287 \$11,734	18		35	\$88,897 \$25,352	10									
45 - 49	3		16		25	\$89,036 \$12,910	16		47	\$88,400 \$25,952	16		4							
50 - 54	4		10		25	\$84,955 \$11,850	17		31	\$86,525 \$25,503	17		15		8					
55 - 59	4		11		8		9		15		14		18		48	\$89,845 \$39,674				
60 - 64			2		6		5		14		13		17		74	\$88,090 \$38,569				
65 - 69	1				2		1		1		3		6		16					
70 & Over					1										2					

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## Schedule SB – Statement by Enrolled Actuary

<b>Plan Sponsor</b>	Dominion Energy, Inc.
<b>EIN/PN</b>	54-1229715/016
<b>Plan Name</b>	Dominion Energy Ohio Union Pension Plan
<b>Valuation Date</b>	January 1, 2024
<b>Enrolled Actuary</b>	Robert D. Winn
<b>Enrollment Number</b>	23-06988

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

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

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## Schedule SB, Part V Summary of Plan Provisions

The Dominion River Gas Division Union Pension Plan (River Gas) was merged into the Dominion Ohio East Gas Union Pension Plan (East Ohio Gas) effective December 31, 2007. The Dominion Ohio West Gas Union Pension Plan (West Ohio Gas) was merged into the Dominion Ohio East Gas Union Pension Plan effective June 30, 2013.

### Plan Provisions

The plan was originally effective July 1, 1973. The most recent amendment reflected in the following plan provisions was effective January 1, 2021.

#### Covered employees

Old Plan East Ohio Gas: Any employee of the Company (excluding leased employees) who is in a job classification represented for collective bargaining purposes by, and is a member of, the Gas Workers Union, Local G555, Utility Worker's Union of America, AFL-CIO. The Old Plan East Ohio Gas closed to new hires effective January 1, 2002.

Old Plan West Ohio Gas: Any employee of the Company (excluding leased employees) who is in a job classification represented for collective bargaining purposes by, and is a member of, Local Union No. 308, The Utility Workers Union of America, AFL-CIO (Physical) or by Local Union No. 308-C, The Utility Workers Union of America, AFL-CIO (Clerical). The Old Plan West Ohio Gas closed to new hires effective January 1, 2003.

New Plan East Ohio Gas: Any employee of the Company (excluding leased employees) who is in a job classification represented for collective bargaining purposes by, and is a member of, the Gas Workers Union, Local G555, Utility Worker's Union of America, AFL-CIO, is eligible to participate in the New Plan as of the later of date of hire and attainment of age 18. All employees who were eligible to participate in the Old Plan as of December 31, 2001 are eligible to participate in the New Plan on January 1, 2002, even if they have not yet attained age 18. The New Plan East Ohio Gas closed to new hires effective January 1, 2019.

New Plan West Ohio Gas: Any employee of the Company (excluding leased employees) who is in a job classification represented for collective bargaining purposes by, and is a member

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# SCHEDULE SB ATTACHMENTS

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of, Local Union No. 308, The Utility Workers Union of America, AFL-CIO or by Local Union No. 308-C, The Utility Workers Union of America, AFL-CIO, All employees who were eligible to participate in the Old Plan West Ohio Gas as of December 31, 2002 are eligible to participate in the New Plan West Ohio Gas on January 1, 2003, even if they have not yet attained age 18. The New Plan West Ohio Gas is closed to new hires effective January 1, 2019.

Cash Balance Plan: Any employee of the Company (excluding leased employees) who is hired or rehired on or after January 1, 2019 and in a job classification represented for collective bargaining purposes by, and is a member of, the Gas Workers Union, Local G555, Utility Worker's Union of America, AFL-CIO.

## Participation date

The later of date of hire and attainment of age 18 for the Cash Balance Plan. Participation in prior plans is closed.

## Definitions

### Vesting service

Based on elapsed time from date of hire

### Pension service

Old Plan (East and West Ohio Gas): Based on elapsed time from date of hire, with 15 or more days worked in a calendar month counting as 1/12 of a year of credited service.

New Plan (East and West Ohio Gas): Based on elapsed time from date of hire. Service is awarded for each calendar month in which at least one hour of service is worked.

Cash Balance Plan (East and West Ohio Gas): Based on elapsed time from date of hire. Service is awarded for each calendar month in which at least one hour of service is worked.

### Compensation

Old Plan East Ohio Gas: Wage or salary, excluding bonuses, but including overtime payments made on and after June 16, 1997, commissions, workers' compensation payments, disability benefits, and other specified amounts, subject to IRC 401(a)(17) compensation limits.

Old Plan West Ohio Gas: Wage or salary, excluding bonuses, but including overtime payments, commissions, workers' compensation payments, disability benefits, and other specified amounts, subject to IRC 401(a)(17) compensation limits.

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New Plan East Ohio Gas: Base pay actually paid plus any amounts deferred under Section 125 or Section 401(k) plans plus merit lump sum payments, and other specified amounts, subject to IRC 401(a)(17) compensation limits.

New Plan West Ohio Gas: Base pay actually paid plus any amounts deferred under Section 125 or Section 401(k) plans subject to IRC 401(a)(17) compensation limits.

Cash Balance Plan (East and West Ohio Gas): Base pay actually paid plus any amounts deferred under Section 125 or Section 401(k) plans plus merit lump sum payments, and other specified amounts, subject to IRC 401(a)(17) compensation limits.

## Final average compensation

Old Plan (East and West Ohio Gas): The annual average of Old Plan compensation in the 60 highest consecutive months during the last 120 months of employment.

New Plan (East and West Ohio Gas): The annual average of New Plan compensation in the 60 highest consecutive months during the last 120 months of employment.

## Social Security wage base

The contribution and benefit base in effect under Section 230 of the Social Security Act for the year of the calculation.

## Normal Retirement Date (NRD)

For participants who retired prior to January 1, 2002 for East Ohio Gas (January 1, 2003 for West Ohio Gas), first of month in which 65th birthday occurs. Benefits of female employees, credited in earlier years on the basis of younger normal retirement ages, are increased to actuarial equivalent amounts in the event of retirement after such ages.

For participants who retire after December 31, 2001 for East Ohio Gas (December 31, 2002 for West Ohio Gas), first of month coincident with or next following attainment of age 65.

## Special Retirement Account (SRA)

### Eligibility

Participating in the New Plan (East and West Ohio Gas)

### Pay Credits

East Ohio Gas: 2% of compensation beginning January 1, 2002.

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West Ohio Gas: 2% of compensation beginning January 1, 2003.

**Interest Credited to Account Balance**

Credited on a daily basis at a rate annually equivalent to the 30-year Treasury bond rate for the September of the preceding year, subject to a minimum rate of 1.5%.

**Payment Options**

- I. Immediate lump sum – equal to the account balance;
- II. Immediate annuity; or
- III. Deferred annuity – paid in same form and beginning at the same time as the remaining retirement benefit

**Annuity Conversion Basis**

The SRA is converted from an account balance to a single life annuity at benefit commencement age using the section 417(e) applicable mortality table and the 30-year Treasury bond rate used for interest crediting in the year of benefit commencement. All other payment options are converted using the Plan's actuarial equivalence basis for payment options.

**Annuity Options**

Retirement-eligible terminated participant – Same as payment options for remaining retirement benefit.

Deferred vested terminated participant – single life annuity or 50% joint and survivor annuity, if paid as an immediate annuity. Same as payment options for remaining retirement benefit, if paid as a deferred annuity.

## Cash Balance Plan

**Pay Credits**

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

Years of Pension Service	Pay-Based Credits as a % of Compensation
<5	4%
5-14	5%
15-24	6%
25+	7%

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**Interest Credit** Interest Credits are credited monthly to the Cash Balance account on a daily basis at a rate annually equivalent to the Applicable Interest Rate for the Plan Year, subject to a minimum rate of 1.5%.

**Payment Options**

- I. Immediate lump sum – equal to the account balance;
- II. Immediate annuity; or
- III. Deferred annuity – paid in same form and beginning at the same time as the remaining retirement benefit

**Applicable Interest Rate** The annual yield on the 30-year Treasury securities for September of the preceding year.

**Applicable Mortality Table** The prescribed mortality table as specified under the Internal Revenue Code section 417(e)(3)(B).

**Annuity Conversion Basis** One form of benefit shall be the actuarial equivalent value of another form of benefit determined on the basis of the Applicable Interest Rate and Applicable Mortality Table.

**Annuity Options**

Deferred vested terminated participant – single life annuity or 50% joint and survivor annuity, if paid as an immediate annuity. Same as payment options for remaining retirement benefit, if paid as a deferred annuity.

Retirement-eligible terminated participant – Same as payment options for remaining retirement benefit.

## Additional Benefits

**Permanent Supplement** All employees who were participants in the legacy plan as of the effective date are eligible to receive the permanent supplement for each year of credited service with completed months of credited service counting as a fraction of a year, payable as an annual benefit, as indicated in the table below:

Legacy Plan	Supplemental Amount	Effective Date
East Ohio Gas	\$10/month	6/30/2001
West Ohio Gas	\$10/month	12/31/2002
River Gas	\$11/month	3/31/2003

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## Temporary Supplement

Former River Gas participants: For each participant who was an employee as of March 31, 2003 and retires after April 1, 2003 under the age of 62, the participant shall receive a temporary supplemental retirement allowance of \$470 per month until age 62.

East Ohio Gas: For each participant who retires after June 15, 2001 under the age of 62 with at least 15 years of pension service, the participant shall receive a temporary supplemental retirement allowance of \$575 per month until age 62.

West Ohio Gas: Each participant who was an employee as of December 31, 2002 and retires on or after January 1, 2003, provided the participant is under the age of 62, shall receive a temporary supplemental retirement allowance of \$500 per month until age 62.

## Eligibility for Benefits

### Normal retirement

Retirement on NRD

### Early retirement

For participants who terminate before January 1, 2002 for East Ohio Gas (January 1, 2003 for West Ohio Gas), age 55 and 15 years of vesting service.

For participants who terminate after December 31, 2001 for East Ohio Gas (December 31, 2003 for West Ohio Gas), age 55 and 3 years of vesting service.

### Postponed retirement

Retirement after age 65

### Vested termination

For participants who terminate before January 1, 2002 for East Ohio Gas (January 1, 2003 for West Ohio Gas), full vesting after five years of vesting service, or at normal retirement date, if earlier.

For participants who terminate after December 31, 2001 for East Ohio Gas (December 31, 2002 for West Ohio Gas), full vesting after three years of vesting service, or at normal retirement date, if earlier.

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**Preretirement spouse benefit**

Required vested prior to date of death.

**Disability**

For participants who become disabled prior to January 1, 2002 for East Ohio Gas (January 1, 2003 for West Ohio Gas), after 15 years of vesting service if certified as totally and permanently disabled by the System Medical Director or Consultant.

For participants who qualify for benefits under Dominion Energy, Inc.'s long-term disability plan on or after January 1, 2002 for East Ohio Gas (January 1, 2003 for West Ohio Gas) and after completing 5 years of vesting service.

## Benefits Paid Upon the Following Events

**Normal retirement**

Old Plan East Ohio Gas:

The greater of [(a)+(b)] or (c), plus the Permanent Supplement

- a. For service prior to June 16, 1979, in accordance with the Plan as in effect to that date.
- b. For each year of credited service on and after June 16, 1979 and on or before December 31, 2001, 1.7% of Old Plan compensation.
- c. 1.125% of Old Plan final average compensation times years of credited service.

Old Plan (Physical) West Ohio Gas:

The greater of [(a)+(b)] or [(c)(i), plus the excess, if any, of c(ii) over c(iii)] plus the Permanent Supplement

- For service prior to January 1, 1984, in accordance with the Plan as in effect to that date.
- For each year of credited service on and after January 1, 1984 and on or before December 31, 2002, 1.7% of Old Plan compensation.
- - i. Number of years of Pension Service on or before December 31, 2002 multiplied by 1.125% of final average compensation.
  - ii. Benefit accrued under Plan formula in effect prior to January 1, 1984 for years of Pension Service as of January 1, 1985.

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- iii. Number of years of Pension Service as of January 1, 1985 multiplied by 1.125% of final average compensation as of January 1, 1985.

## Old Plan (Clerical) West Ohio Gas:

[(a) + (b)], plus the Permanent Supplement

- a. The excess of 1.596% of final average compensation multiplied by years of credited service on or before January 1, 2003 over 1.5% of employee's Social Security Primary Insurance Amount multiplied by years of credited service on or before January 1, 2003, up to a maximum of 40% of the benefit.
- b. If employed prior to July 1, 1973, the excess, if any, of (i) plus (ii) over (iii).

- i. With respect to Participants who were formerly included in the Consolidated Plan, the amount of annual pension credits which were accrued on the various career average formulas in effect from time to time under that plan.
- ii. For each month of credited service while included under this Plan and prior to July 1, 1978, 1.7% of monthly Earnings up to monthly Social Security wage base, plus 2% of monthly Earnings in excess of monthly Social Security wage base.
- iii. The amount of net final pay offset benefit in (a), above, using 1.5% of final average compensation instead of 1.596% and excluding any portion which is applicable to service after June 30, 1978.

## New Plan (East and West Ohio Gas):

- a. 1.80% of New Plan final average compensation times credited service up to 30 years (30-year service cap includes credited service under the Old Plan formula)  
  
less
- b. 1.50% of the participant's age 65 annual Primary Insurance Amount under the Social Security law in effect on the date of determination (assuming no future earnings), times credited service up to 30

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years (30 year service cap includes credited service under the Old Plan formula)

plus

- c. SRA as of normal retirement date payable as an immediate lump sum or immediate annuity taken in the same optional form as the remaining retirement benefit.

West Ohio Gas: All employees who were participants on December 31, 2002 will receive a five-year extension to the service cap in the New Plan formula.

## Cash Balance:

The Cash Balance account as of normal retirement date payable as an immediate lump sum or immediate annuity taken in the normal form of payment or optional forms of retirement income.

## **Early retirement (from active status)**

Old Plan (East and West Ohio Gas): The benefit is determined under the normal retirement formula reduced  $\frac{1}{4}\%$  for each of the first 24 months by which the participant's benefit commencement date precedes age 62 plus  $\frac{1}{3}\%$  for each of the next 24 months by which the participant's benefit commencement date precedes age 60 plus  $\frac{5}{12}\%$  for each month within the next 36 months by which the benefit commencement date precedes age 58. The Permanent Supplement is unreduced for early retirement from active status.

New Plan (East and West Ohio Gas): The benefit is determined under the normal retirement formula with the a) and the b) pieces of the New Plan formula reduced  $\frac{1}{4}\%$  for each of the first 24 months by which the participant's benefit commencement date precedes age 60 plus  $\frac{1}{2}\%$  for each of the next 36 months by which the benefit commencement date precedes age 58. The SRA as of the early retirement date is payable as an immediate lump sum or immediate annuity in the same optional form as the remaining retirement benefit.

Cash Balance: The account balance

## **Postponed retirement**

Normal retirement benefit described above, based on pension service, final average compensation, Primary

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Insurance Amount, SRA compensation and interest credits, and/or cash balance compensation and interest credits as of the late retirement date, as appropriate.

## **Vested termination**

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

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

Plus,

For participants who have an SRA balance, either:

- SRA determined as of termination date payable as an immediate lump sum or an immediate annuity; or
- SRA determined as of retirement date payable as an annuity in the same form as the remaining retirement benefit.

For participants with Cash Balance formula, the Cash Balance account determined as of the benefit commencement date elected by the participant payable as an immediate lump sum or an immediate annuity.

## **Preretirement spouse benefit**

For participants who were in the plan on December 31, 2001 for East Ohio Gas or December 31, 2002 for West Ohio Gas and who die while actively employed, the surviving spouse will receive an immediate monthly income payable for life equal to 50% of the participant's accrued benefit at the date of death valued under the 50% joint and survivor option with the Old Plan benefit and the a) and the b) pieces of the New Plan benefit and the Permanent Supplement reduced for early retirement using the active early retirement factors. For benefit commencement before the participant's earliest

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retirement date, this benefit is further reduced for ages below 55 as follows:

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

For employees who become participants on or after January 1, 2002 for East Ohio Gas or January 1, 2003 for West Ohio Gas, the surviving spouse will receive a monthly retirement income payable for life in an amount equal to 50% of the amount the participant would have received if he had survived and elected to commence receiving a retirement income at the earliest date allowed under the plan, payable under the 50% joint and survivor option.

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

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

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

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

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

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The Cash Balance is payable to the Cash Balance participant's beneficiary commencing on a benefit commencement date elected by the beneficiary following the Cash Balance participant's death as an active or terminated vested participant.

- If the beneficiary is the cash balance participant's spouse, the beneficiary may receive the cash balance participant's retirement benefit in either (i) a single sum calculated as of the beneficiary's benefit commencement date or (ii) a single life annuity for the life of the beneficiary that is the actuarial equivalent of the participant's Cash Balance account as of the beneficiary's benefit commencement date.
- If the beneficiary is not the cash balance participant's spouse, the beneficiary may receive the cash balance participant's accrued benefit only as a single sum one-time payment.

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**Preretirement spouse benefit for non-vested participants in active service**

If the participant is not vested, the beneficiary will receive, in a lump sum, the participant's SRA balance.

**Disability**

For participants who become disabled prior to January 1, 2002 for East Ohio Gas (January 1, 2003 for West Ohio Gas), benefit accrued to date of disability without reduction.

For participants who become disabled after December 31, 2001 for East Ohio Gas (December 31, 2002 for West Ohio Gas), the accrued benefit payable at normal retirement date under the Old Plan and New Plan formulas based on final average compensation and Primary Insurance Amount at the date of disability, and credited service accrued to the earlier of recovery from disability and normal retirement date. The SRA is available as an immediate lump sum or an immediate annuity at disability. No further compensation credits are granted after disability. If an immediate lump sum or immediate annuity is not elected, the disabled participant may take a deferred annuity reflecting additional interest credits after disability at the same time and in the same form as the remaining retirement benefit. The Permanent Supplement is also available to disabled participants at normal retirement

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## Other Plan Provisions – Final Average Pay Plan Participants

### Forms of payment

Normal form of payment: For unmarried participants, the normal form of payment is a single life annuity for benefits. For married participants, the normal form is an actuarially equivalent 50% joint and survivor benefit. A five-year certain form of payment may apply to parts of the benefits earned by certain long-service employees.

Optional Forms:

- 50% joint and survivor annuity
- 75% joint and survivor annuity
- 100% joint and survivor annuity
- Social Security leveling option to age 62
- Single life annuity
- Lump sum (SRA only)

### Maximum on benefits and pay

All benefits and pay for any calendar year may not exceed the maximum limitations for that year as defined in the Internal Revenue Code. The plan provides for increasing the dollar limits automatically as such changes become effective.

## Future Plan Changes

No future plan changes were recognized in determining minimum and maximum contributions. Willis Towers Watson is not aware of any future plan changes which are required to be reflected.

## Changes in Benefits Valued Since Prior Year

Changes to the IRS statutory limits on benefits and pay have been reflected.

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

### Economic Assumptions

#### Interest rate basis

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

#### Interest rates

	Reflecting Stabilization	Not Reflecting Stabilization
• First segment rate	4.75%	3.62%
• Second segment rate	4.87%	4.46%
• Third segment rate	5.59%	4.52%
• Effective interest rate	5.17%	4.44%

#### Annual rates of increase

- Compensation:

Service (Years)	Current Valuation Average
0-4	9.9%
5-9	6.1%
10-14	3.8%
15-19	3.2%
20-24	3.2%
25-29	2.9%
30-34	2.8%
35 and up	2.7%

- Future Social Security wage bases 3.50%
- Statutory limits on compensation 2.50%
- Cash balance interest crediting rate 4.47% for 2024; 4.00% thereafter. 2024 uses the actual 30-year Treasury rate with a September 2023 lookback

#### Plan-related expenses

Assume 0.2% of market value of assets, not including any receivable contributions, as of the first day of the plan year. The amount included this year for plan-related expenses is \$2,791,005.

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As permitted by law, rates reflecting stabilization are used to determine the funding target and target normal cost, and thus the minimum required contribution under IRC §430 for the plan. Because these assumptions are subject to a corridor based on average interest rates over a 25-year period, they may differ from (and currently are higher than) current market interest rates, and may be inconsistent with other economic assumptions used in the valuation.

## Demographic Assumptions

**Inclusion date** The valuation date coincident with or next following the date on which the employee becomes a participant.

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

**Mortality**

- **Healthy** Separate rates for non-annuitants and annuitants based on Pri-2012 “Employees” and “Healthy Annuitants” (participants and beneficiaries combined) tables, respectively, without collar or amount adjustments and then projected forward with generational projection as specified in the regulations under §1.430(h)(3)-1 using the IRS adjusted Scale MP-2021 (i.e., MP-2021 with no mortality improvement for 2020-2023 and future mortality improvement capped at 0.78% for years after 2024).

- **Disabled** Same as Healthy mortality

**Termination** Representative Rates

Attained Age	Gas Union Participants	
	Service < 3 Years	Service >= 3 Years
25	5.3%	3.3%
30	4.8%	2.8%
35	4.2%	2.2%
40	3.7%	1.7%
45	3.1%	1.1%
50	3.1%	1.1%
55 and over	3.1%	1.1%

Preretirement termination benefits are assumed to commence at age 65.

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## Disability

Rates of disablement are assumed to equal 30% of female rates from the 1987 GLTD Incidence Table for 6-month elimination periods.

## Retirement

Age	Service <30 years	Service >=30 years
55	4.0%	4.0%
56	4.0%	4.0%
57	4.0%	4.0%
58	4.0%	25.0%
59	6.0%	20.0%
60	13.0%	23.0%
61	14.0%	23.0%
62	20.0%	26.0%
63	18.0%	30.0%
64	12.0%	20.0%
65	35.0%	35.0%
66 and over	35.0%	35.0%

All participants are assumed to retire by age 70, or immediately if older.

## Benefit commencement date

- Preretirement death benefit

Cash Balance and SRA: Upon Death

Old Plan and New Plan: The later of the date of death or the date the participant would have attained age 65
- Deferred vested benefit<sup>1</sup>

Cash Balance and SRA: 65% upon termination; 35% at age 62

Old Plan and New Plan: Normal Retirement Date
- Disability benefit

Cash Balance and SRA: Upon Disablement

Old Plan and New Plan: Normal Retirement Date
- Retirement benefit

Cash Balance and SRA: Upon retirement

Old Plan and New Plan: Upon retirement

## Form of payment

Cash Balance and SRA: Lump sum

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<sup>1</sup> Participants who transferred out of the plan with a vested benefit are assumed to commence at age 65.

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Old Plan and New Plan: 50% of participants are assumed to elect a single life annuity and 50% of participants are assumed to elect a 100% joint and survivor annuity.

**Percent married**

It is assumed that 75% of active male participants and 50% of active female participants are married to an eligible spouse.

**Spouse age**

Wife 2 years younger than husband

**Covered pay**

Compensation assumed paid in the current year beginning on the valuation date is the current annual rate of pay

**At-risk assumptions**

For at-risk calculations, all participants eligible to elect benefits during the current and subsequent ten plan years are assumed to commence benefits at the earliest possible date under the plan, but not before the end of the current plan year, except in accordance with the regular valuation assumptions. In addition, all participants (not just those eligible to begin benefits within the next 11 years) are assumed to elect the most valuable form of benefit under the plan, which is usually the 100% Joint and Survivor form of payment for the Final Average Pay benefits and lump sum form of payment for the Cash Balance benefits.

**Timing of benefit payments**

Annuity payments are payable monthly at the beginning of the month and lump sum payments are payable on date of decrement.

## Methods

**Valuation date**

First day of plan year

**Funding target**

Present value of accrued benefits as required by regulations under IRC §430.

**Target normal cost**

Present value of benefits expected to accrue during the plan year plus plan-related expenses expected to be paid from plan assets during the plan year as required by regulations under IRC §430.

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## **Decrement timing**

The approach used is called rounded middle of year (rounded MOY) decrement timing. Most events are assumed to occur at the middle of year during which the eligibility condition will be met or the start/end date will occur. For death and disability decrements, the rate applied is based on the participant's rounded age (nearest integer age) at the beginning of the year, to align with the methodology generally used to create those rate tables. For retirement and withdrawal decrements: the age is generally the participant's rounded age at the middle of the year.

## **Actuarial value of assets**

Average of the fair market value of assets on the valuation date and 12 and 24 months preceding the valuation date, adjusted for contributions, benefits, administrative expenses and expected earnings (with such expected earnings limited as described in IRS Notice 2009-22). The average asset value must be within 10% of market value, including discounted contributions receivable (discounted using the effective interest rate for the prior plan year.)

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

## **Benefits not valued**

All benefits described in the Plan Provisions section of this report were valued based on discussions with Dominion Energy, Inc. regarding the likelihood that these benefits will be paid. WTW has reviewed the plan provisions with Dominion Energy, Inc. and, based on that review, is not aware of any significant benefits required to be valued that were not.

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## Sources of Data and Other Information

The plan sponsor, through its third party administrator Alight Solutions, furnished participant data as of 1/1/2024. Information on assets, contributions and plan provisions was supplied by the plan sponsor. Data and other information were reviewed for reasonableness and consistency, but no audit was performed. Based on discussions with the plan sponsor, assumptions or estimates were made when data were not available, and the data was adjusted to reflect any significant events that occurred between the date the data was collected and the measurement date. In consultation with the plan sponsor, assumptions were made for missing or apparently inconsistent data elements as documented in the data question deliverables dated June 14, 2024.

We are not aware of any errors or omissions in the data that would have a significant effect on the results of our calculations.

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## Assumptions Rationale - Significant Economic Assumptions

<b>Discount rate</b>	For plan funding purposes, the basis chosen was selected by the plan sponsor from among choices prescribed by law, all of which are based on observed market data over certain periods of time.
<b>Cash Balance Interest crediting rate</b>	<p>The plan credits interest to cash balance accounts using the 30-year Treasury rate for September of the previous year. The long term estimate of the 30-year Treasury bond rate is 4.00%, based on a combination of current conditions and future economic expectations.</p> <p>For the reasons discussed above, we believe the assumptions selected do not significantly conflict with what would be reasonable.</p>
<b>Plan-related expenses</b>	As required by regulations, plan-related expenses are calculated by estimating the expenses to be paid from the trust during the coming year (including, for example, expected PBGC premiums and actuarial, accounting, legal, administration and trustee fees to be paid from the trust).
<b>Assumed return for asset smoothing</b>	The assumed return of 5.74% used for asset smoothing is the third segment rate. Although we have not explicitly determined an expected return on assets, based on an analysis of the plan sponsor's investment policy we believe the rate to be above the third segment rate.

## Assumptions Rationale - Significant Demographic Assumptions

<b>Healthy Mortality</b>	Assumptions used for funding purposes are as prescribed by IRC §430(h).
<b>Disabled Mortality</b>	Assumptions used for funding purposes are as prescribed by IRC §430(h).
<b>Termination</b>	Termination rates were based on an experience study conducted in 2021, with annual consideration of whether any

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Plan Sponsor: Dominion Energy, Inc.  
Valuation Date: January 1, 2024

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conditions have changed that would be expected to produce different results in the future.

We believe the assumption does not significantly conflict with what would be reasonable because it reflects recent experience.

## Retirement

Retirement rates were based on an experience study conducted in 2021, with annual consideration of whether any conditions have changed that would be expected to produce different results in the future.

We believe the assumption does not significantly conflict with what would be reasonable because it reflects recent experience.

## Prescribed Methods

### Funding methods

The methods used for funding purposes as described in Appendix A, including the method of determining plan assets, are “prescribed methods set by law”, as defined in the actuarial standards of practice (ASOPs). These methods are required by IRC §430, or were selected by the plan sponsor from a range of methods permitted by IRC §430.

## Changes in Assumptions and Methods

### Change in assumptions since prior valuation

The segment interest rates used to calculate the funding target and target normal cost were updated to the current valuation date as required by IRC §430.

The mortality table used to calculate the funding target and target normal cost was updated to reflect the latest mortality improvement scale, as required by guidance issued by IRS under IRC §430. The mortality table was updated to include one additional year of projected mortality improvement as required by guidance issued by IRS under IRC §430.

### Change in methods since prior valuation

The target normal cost for the year was adjusted to reflect the effects of a spin-off of active employees to Enbridge.

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