

Form 5500

Annual Return/Report of Employee Benefit Plan

OMB Nos. 1210-0110 1210-0089

2024

This Form is Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

Department of Labor Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

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... [X] a single-employer plan [] a DFE... B This return/report is: [] the first return/report [] the final return/report... C If the plan is a collectively-bargained plan, check here... D Check box if filing under: [X] Form 5558 [] automatic extension... 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: SCANA CORPORATION RETIREMENT PLAN
1b Three-digit plan number (PN): 001
1c Effective date of plan: 01/01/1946
2a Plan sponsor's name (employer, if for a single-employer plan): SCANA CORPORATION
2b Employer Identification Number (EIN): 57-0784499
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 entries for plan administrator and employer/plan sponsor.

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

Form 5500 (2024) v. 240311

3a Plan administrator's name and address <input type="checkbox"/> Same as Plan Sponsor DOMINION ENERGY SERVICES, INC. 120 TREDEGAR ST, CLEARINGHOUSE 3FL BENEFITS REPORTING RICHMOND, VA 23219-4306	3b Administrator's EIN 54-1962730																				
	3c Administrator's telephone number 877-947-4636																				
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name	4b EIN																				
	4d PN																				
5 Total number of participants at the beginning of the plan year	5 5914																				
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d). a(1) Total number of active participants at the beginning of the plan year a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits..... c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	<table border="1"> <tr><td>6a(1)</td><td>2655</td></tr> <tr><td>6a(2)</td><td>2058</td></tr> <tr><td>6b</td><td>1544</td></tr> <tr><td>6c</td><td>1262</td></tr> <tr><td>6d</td><td>4864</td></tr> <tr><td>6e</td><td>568</td></tr> <tr><td>6f</td><td>5432</td></tr> <tr><td>6g(1)</td><td></td></tr> <tr><td>6g(2)</td><td></td></tr> <tr><td>6h</td><td>0</td></tr> </table>	6a(1)	2655	6a(2)	2058	6b	1544	6c	1262	6d	4864	6e	568	6f	5432	6g(1)		6g(2)		6h	0
6a(1)	2655																				
6a(2)	2058																				
6b	1544																				
6c	1262																				
6d	4864																				
6e	568																				
6f	5432																				
6g(1)																					
6g(2)																					
6h	0																				
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7																				

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

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

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

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

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

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

11c Enter the Receipt Confirmation Code for the 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 _____

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

A Name of plan <u>SCANA CORPORATION RETIREMENT PLAN</u>	B Three-digit plan number (PN) ▶	<u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF <u>SCANA CORPORATION</u>	D Employer Identification Number (EIN) <u>57-0784499</u>	
E Type of plan: <input checked="" type="checkbox"/> Single <input type="checkbox"/> Multiple-A <input type="checkbox"/> Multiple-B	F 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

1	Enter the valuation date: Month <u>01</u> Day <u>01</u> Year <u>2024</u>		
2	Assets:		
	a Market value	2a	<u>638637578</u>
	b Actuarial value	2b	<u>681872350</u>
3	Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target
	a For retired participants and beneficiaries receiving payment	<u>2097</u>	<u>305455871</u>
	b For terminated vested participants	<u>987</u>	<u>53823852</u>
	c For active participants	<u>2703</u>	<u>353973459</u>
	d Total	<u>5787</u>	<u>713253182</u>
4	If the plan is in at-risk status, check the box and complete lines (a) and (b)..... <input type="checkbox"/>		
	a Funding target disregarding prescribed at-risk assumptions	4a	
	b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b	
5	Effective interest rate	5	<u>5.08 %</u>
6	Target normal cost		
	a Present value of current plan year accruals	6a	<u>13090969</u>
	b Expected plan-related expenses	6b	<u>5800000</u>
	c Target normal cost	6c	<u>18890969</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.

SIGN HERE		
	Signature of actuary	<u>10/09/2025</u> Date
	<u>MICHAEL HOLDERMAN</u> Type or print name of actuary	<u>23-06979</u> Most recent enrollment number
	<u>WILLIS TOWERS WATSON US LLC</u> Firm name	<u>704-620-6480</u> Telephone number (including area code)
	<u>1120 S. TYRON STREET SUITE 650 CHARLOTTE, NC 28203</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

Part II Beginning of Year Carryover and Prefunding Balances		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	2073908	0
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	2073908	
9	Amount remaining (line 7 minus line 8)	0	0
10	Interest on line 9 using prior year's actual return of _____ %	0	0
11	Prior year's excess contributions to be added to prefunding balance:		
a	Present value of excess contributions (line 38a from prior year)		0
b(1)	Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of <u>5.22</u> %		
b(2)	Interest on line 38b from prior year Schedule SB, using prior year's actual return		
c	Total available at beginning of current plan year to add to prefunding balance		0
d	Portion of (c) to be added to prefunding balance		
12	Other reductions in balances due to elections or deemed elections		
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	0

Part III Funding Percentages			
14	Funding target attainment percentage	14	95.48 %
15	Adjusted funding target attainment percentage	15	95.48 %
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	92.55 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and Liquidity Shortfalls		18 Contributions made to the plan for the plan year by employer(s) and employees:					
(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees		
04/12/2024	6380000						
07/12/2024	6380000						
10/15/2024	6380000						
01/15/2025	710000						
09/05/2025	2980000						
			Totals ▶	18(b)	22830000	18(c)	0

19	Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:		
a	Contributions allocated toward unpaid minimum required contributions from prior years	19a	0
b	Contributions made to avoid restrictions adjusted to valuation date	19b	0
c	Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	22058433
20	Quarterly contributions and liquidity shortfalls:		
a	Did the plan have a "funding shortfall" for the prior year?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
b	If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
c	If line 20a is "Yes," see instructions and complete the following table as applicable:		
Liquidity shortfall as of end of quarter of this plan year			
(1) 1st	(2) 2nd	(3) 3rd	(4) 4th
0	0	0	0

Part V Assumptions Used to Determine Funding Target and Target Normal Cost			
21 Discount rate:			
a Segment rates:	1st segment: 4.75 %	2nd segment: 4.87 %	<input type="checkbox"/> N/A, full yield curve used
b Applicable month (enter code)			21b 4
22 Weighted average retirement age			22 63
23 Mortality table(s) (see instructions) <input type="checkbox"/> Prescribed - combined <input checked="" type="checkbox"/> Prescribed - separate <input type="checkbox"/> 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..... <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment..... <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
26 Demographic and benefit information			
a Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
b Is the plan required to provide a projection of expected benefit payments? If "Yes," see instructions regarding required attachment ... <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
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 0
30 Remaining amount of unpaid minimum required contributions (line 28 minus line 29).....			30 0

Part VIII Minimum Required Contribution For Current Year			
31 Target normal cost and excess assets (see instructions):			
a Target normal cost (line 6c)	31a	18890969	
b Excess assets, if applicable, but not greater than line 31a	31b	0	
32 Amortization installments:	Outstanding Balance	Installment	
a Net shortfall amortization installment	32205530	3160121	
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	22051090	
	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement			0
36 Additional cash requirement (line 34 minus line 35)	36	22051090	
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	37	22058433	
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)	38a	7343	
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances.....	38b		
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. <input type="checkbox"/> 2019 <input checked="" type="checkbox"/> 2020 <input type="checkbox"/> 2021			

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

A Name of plan SCANA CORPORATION RETIREMENT PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 SCANA CORPORATION	D Employer Identification Number (EIN) 57-0784499	

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

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

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

PACIFIC INVESTMENT MGMT CO LLC

33-0629048

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	INV MGMT	376992	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

BLACKROCK

94-3112180

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	INV MGMT	138089	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 US LLC

53-0181291

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
11 50	ACTURAL	57957	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

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

BNY MELLON

13-2614959

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
21 51	TRTE-DIR INV MGNT	52359	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)

DOMINION ENERGY SVCS, INC

54-1229715

(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	PLN ADMIN	39901	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	ACCNTG	32710	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

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

MSCI, INC.

13-4038723

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	INV MGMT	11467	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)

MORGAN STANLEY AND CO., LLC, NEW YO

13-2655998

(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?
33 55	BROKGG	0	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	6832	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

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

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
MORGAN STANLEY AND CO., LLC, NEW YO	33 55	6832
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
MORGAN STANLEY AND CO., LLC, NEW YO 13-2655998	FEE CHARGED AS REDUCTION OF RETURN EARNED	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

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

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

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

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

A Name of plan <u>SCANA CORPORATION RETIREMENT PLAN</u>	B Three-digit plan number (PN)	<u>001</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>SCANA CORPORATION</u>	D Employer Identification Number (EIN) <u>57-0784499</u>	

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
---------------	--

a Name of MTIA, CCT, PSA, or 103-12 IE: <u>BNY EB TEMPORARY INVESTMENT FUND</u>	b Name of sponsor of entity listed in (a): <u>BANK OF NEW YORK MELLON</u>	
c EIN-PN <u>01-0618036-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>0</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>CF BLACKROCK LD CORP CREDIT FUND</u>	b Name of sponsor of entity listed in (a): <u>BLACKROCK INSTITUTIONAL TRUST COMPANY, NA</u>	
c EIN-PN <u>06-1543710-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>0</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>COL ALL CNTRY WLD INV MRKT INDEX</u>	b Name of sponsor of entity listed in (a): <u>NORTHERN TRUST INVESTMENTS, INC.</u>	
c EIN-PN <u>45-6138589-125</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>0</u>
a Name of MTIA, CCT, PSA, or 103-12 IE:	b Name of sponsor of entity listed in (a):	
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:	b Name of sponsor of entity listed in (a):	
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:	b Name of sponsor of entity listed in (a):	
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024	
A Name of plan SCANA CORPORATION RETIREMENT PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 SCANA CORPORATION	D Employer Identification Number (EIN) 57-0784499

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

		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		666265747
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	25560000	3690000
(2) Participant contributions	1b(2)		
(3) Other	1b(3)	2883858	42099
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	5665596	
(2) U.S. Government securities	1c(2)	11758540	
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		147980
(B) All other	1c(3)(B)	45162059	1988
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)	455313084	0
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	97675689	0
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)	3197954	0

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	647216780	670147814
Liabilities			
g Benefit claims payable.....	1g		
h Operating payables.....	1h		
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j	7684822	
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	7684822	0
Net Assets			
l Net assets (subtract line 1k from line 1f).....	1l	639531958	670147814

Part II Income and Expense Statement

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

Income		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers.....	2a(1)(A)	22830000	
(B) Participants.....	2a(1)(B)		
(C) Others (including rollovers).....	2a(1)(C)		
(2) Noncash contributions.....	2a(2)		22830000
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)	91011	
(B) U.S. Government securities.....	2b(1)(B)	207366	
(C) Corporate debt instruments.....	2b(1)(C)	2588446	
(D) Loans (other than to participants).....	2b(1)(D)		
(E) Participant loans.....	2b(1)(E)		
(F) Other.....	2b(1)(F)	357414	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		3244237
(2) Dividends:			
(A) Preferred stock.....	2b(2)(A)	19167	
(B) Common stock.....	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	2489904	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		2509071
(3) Rents.....	2b(3)		
(4) Net gain (loss) on sale of assets:			
(A) Aggregate proceeds.....	2b(4)(A)	744700156	
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	746153864	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result.....	2b(4)(C)		-1453708
(5) Unrealized appreciation (depreciation) of assets:			
(A) Real estate.....	2b(5)(A)		
(B) Other.....	2b(5)(B)	-603147	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		-603147

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		56839583
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		
c Other income	2c		172661
d Total income. Add all income amounts in column (b) and enter total	2d		83538697

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	49054432	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		49054432
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)	39901	
(2) Contract administrator fees	2i(2)		
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)	32710	
(5) Investment advisory and investment management fees	2i(5)		
(6) Bank or trust company trustee/custodial fees	2i(6)		
(7) Actuarial fees	2i(7)	57957	
(8) Legal fees	2i(8)	820	
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)	3737021	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		3868409
j Total expenses. Add all expense amounts in column (b) and enter total	2j		52922841

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		30615856
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

(1) 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
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)		X	
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	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)		X	
e Was this plan covered by a fidelity bond?	X		50000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	X		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)			
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			

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

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

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

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

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year 558695.

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

A Name of plan <u>SCANA CORPORATION RETIREMENT PLAN</u>	B Three-digit plan number (PN) ▶	<u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>SCANA CORPORATION</u>	D Employer Identification Number (EIN) <u>57-0784499</u>	

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1	0
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): _____		
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	176

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

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? Yes No N/A
If the plan is a defined benefit plan, go to line 8.

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

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

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

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

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

Part III	Amendments
-----------------	-------------------

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that (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:

a 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).....	14a	
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).....	14b	
c 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).....	14c	

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

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

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

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

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

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

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

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

a Enter the percentage of plan assets held as:
 Public Equity: 0.00 % Private Equity: 0.00 % Investment-Grade Debt and Interest Rate Hedging Assets: 1.00 %
 High-Yield Debt: 0.00 % Real Assets: 0.00 % Cash or Cash Equivalents: 99.00 % Other: 0.00 %

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 _____.

**SCANA CORPORATION
RETIREMENT PLAN**

Employer ID No: 57-0784499
Plan Number: 001

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

SCANA CORPORATION RETIREMENT PLAN

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NOTE: All other 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
SCANA Corporation Retirement Plan

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

We have performed audits of the financial statements of SCANA Corporation Retirement Plan (the "Plan"), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the statements of net assets available for benefits as of December 31, 2024 and 2023, and the related statements of changes in net assets available for benefits for the years then ended, 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 4 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.

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.

Other Matter — Supplemental Schedules Required by ERISA

The supplemental schedule of assets (held at end of year) as of December 31, 2024, and supplemental schedule of reportable transactions for the year ended December 31, 2024, are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedules, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. For information included in the supplemental schedules that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

In forming our opinion on the supplemental schedules, we evaluated whether the supplemental schedules, other than the information agreed to or derived from the certified investment information, including their form and content, are presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion:

- The form and content of the supplemental schedules, other than the information in the supplemental schedules that agreed to or is derived from the certified investment information, are presented, in all

material respects, in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

- The information in the supplemental schedules related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

Deloitte & Touche LLP

October 15, 2025

SCANA CORPORATION RETIREMENT PLAN

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

	2024	2023
ASSETS		
Cash	\$ 666,265,747	\$ —
Investments - at fair value (Note 3)	149,968	618,772,922
Employer contribution receivable	3,690,000	25,560,000
Interest, dividends and other receivables	42,099	2,883,858
Total assets	670,147,814	647,216,780
LIABILITIES		
Pending purchases, due to broker for securities purchased and other payables	—	7,684,822
NET ASSETS AVAILABLE FOR PENSION BENEFITS	\$ 670,147,814	\$ 639,531,958

See notes to financial statements.

SCANA CORPORATION RETIREMENT PLAN

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

	2024	2023
ADDITIONS:		
Net appreciation in fair value of investments	\$ 54,955,389	\$ 71,949,981
Employer contribution	22,830,000	25,560,000
Interest and dividend income	5,753,308	7,774,157
Total net additions	<u>83,538,697</u>	<u>105,284,138</u>
DEDUCTIONS		
Benefit payments to participants or their beneficiaries	49,054,432	44,620,561
Administrative expenses	3,868,409	4,592,909
Total deductions	<u>52,922,841</u>	<u>49,213,470</u>
INCREASE IN NET ASSETS	<u>30,615,856</u>	<u>56,070,668</u>
NET ASSETS AVAILABLE FOR PENSION BENEFITS		
Beginning of year	639,531,958	583,461,290
End of year	<u>\$ 670,147,814</u>	<u>\$ 639,531,958</u>

See notes to financial statements.

SCANA CORPORATION RETIREMENT PLAN

NOTES TO FINANCIAL STATEMENTS

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

1. PLAN INFORMATION

The following description of the SCANA Corporation Retirement Plan (the “Plan”) provides only general information. Participants should refer to the Plan document for a more complete description of the Plan’s provisions.

- a. **General**—Effective January 1, 2019 SCANA Corporation (“SCANA” or the “Company”) became a wholly-owned subsidiary of Dominion Energy, Inc. (“Dominion Energy”), and Dominion Energy Services, Inc. (“DES”), a wholly-owned subsidiary of Dominion Energy, became the plan administrator and the named fiduciary of the Plan. The Plan is a defined benefit plan that covers employees of the Company or its subsidiaries. The Company is the sponsor of the Plan, though the board of directors of Dominion Energy has the authority to terminate the Plan or to adopt such amendments to the Plan as the board considers appropriate. The Plan is administered by the Administrative Benefits Committee of DES. Committee members who are employees of DES, are appointed by the Chief Executive Officer of Dominion Energy. The SCANA Corporation Retirement Plan Trust (the “Trust”) was established to hold the Plan’s assets. 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.

During 2024, Dominion Energy completed the sale of certain natural gas distribution utilities to Enbridge Inc. Upon closing, Public Service Company of North Carolina, Incorporated (PSNC) 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. As a result of the sale, no net assets available for benefits were transferred to Enbridge. The Plan's benefit obligations were reduced by \$327,915.

Effective January 2, 2025 the assets held in the Trust will be transferred to the Dominion Energy Master Trust. As a result, the majority of investments were liquidated to cash as of December 31, 2024.

- b. **Eligibility and Benefits**—The Plan covers all eligible employees who have completed 12 months of continuous service under either a final average pay formula or cash balance formula. Employees are vested after completing three years of service. Employees hired prior to January 1, 2000, and not under a collective bargaining agreement were given a choice to remain covered under the final average pay formula or to elect coverage under the cash balance formula effective on July 1, 2000. Employees covered under the collective bargaining agreement received the same choice of retirement formulas during the year 2001. Employees hired on or after these dates (and before January 1, 2014) who are eligible to participate in the Plan are covered under the cash balance formula.

The final average pay formula provides benefits based on a vested participant’s salary and length of service. Early retirement benefits are available to employees aged 55 to 64 who retire with at least 20 years of service.

Benefits are reduced proportionately for retirees with fewer than 35 years of service. Certain surviving spouse benefits are also provided based on the election made by the participant with spousal consent, if applicable, prior to his or her benefit commencement date.

Under the cash balance formula, the participant's account balance increases by compensation credits on a monthly basis during the term of their employment with the Company. Participant account balances are also increased by interest credits, which are daily effective January 1, 2021. Prior to his or her benefit commencement date, a vested participant may elect with spousal consent, if applicable, to receive his or her retirement benefits in one lump-sum payment or choose from one of several joint and survivor annuity options. Surviving spouse benefits may be available based on the election made. Certain existing participants of the Plan voluntarily elected to cease receiving compensation credits under the Plan's cash balance formula and instead receive Company contributions under the Dominion Energy 401(K) Plan regardless of whether they elect to participate in the Dominion Energy 401(K) Plan.

Prior to January 1, 2005, the Plan permitted employees to make after-tax Voluntary Employee Contributions ("VEC" contributions), which are used in determining monthly benefits to be paid upon retirement. Interest is credited on accumulated VEC contributions at a defined rate, and distributions are made to participants as set forth in the Plan document.

2. SIGNIFICANT ACCOUNTING POLICIES

- a. **Basis of Accounting**—The accompanying financial statements 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, 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 utilizes various investment instruments. Investment instruments, in general, are exposed to various risks, such as interest rate, credit, 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 that such changes could materially affect the amounts reported in the financial statements.
- d. **Investment Valuation and Income Recognition**—Investments are stated at fair value. Fair value of a financial instrument is the amount that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 3 for description of valuation methods.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation (depreciation) includes the Plan's gains and losses on investments bought and sold as well as held during the year.

- e. **Payment of Benefits**—Benefits are recorded when paid.
- f. **Administrative Expenses**—Expenses incurred directly in the administration of the Plan, are recorded when paid by the Plan. Investment-related expenses are included in net appreciation in fair value of investments. Administrative expenses also include payment of any unrelated business income tax (UBIT), net of refunds.
- g. **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 5.

3. FAIR VALUE MEASUREMENTS

Accounting Standards Codification (“ASC”) 820, Fair Value Measurements and Disclosures, provides a framework for measuring fair value that prioritizes the inputs to valuation techniques used to measure fair value. Level 1 refers to fair value measurements using unadjusted quoted prices from active markets for identical assets, Level 2 refers to fair value measurements based on observable market inputs not quoted in the market, and Level 3 refers to fair value measurements using unobservable inputs, including situations in which there is little market activity. Assets and liabilities are classified in their entirety based on the lowest level of input that is significant to the fair value measurement.

Asset Valuation Techniques—Valuation methodologies maximize the use of relevant observable inputs and minimize the use of unobservable inputs. The following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2024 and 2023.

Cash and Cash Equivalents—Investments are held primarily in cash and cash equivalents, which are valued at cost plus accrued interest. 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. Interest bearing cash is classified as Level 1.

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. Therefore, a majority of the corporate debt instruments have been classified as Level 2. During 2024, the Plan had purchases of \$1,988 of corporate debt instruments included in the Level 3 fair value category.

Government and other debt instruments—Investments are valued using pricing models maximizing the use of observable inputs for similar securities. Therefore, government and other debt instruments have been classified as Level 2.

Registered Investment Companies—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.

Common/Collective Trust Funds—Investments in common/collective trust funds are stated at the net asset value (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.

At December 31,	2024				2023			
	Level 1	Level 2	Level 3	Total	Level 1	Level 2	Level 3	Total
Cash and cash equivalents	\$ —	\$ —	\$ —	\$ —	\$ 4,364,323	\$ 1,301,273	\$ —	\$ 5,665,596
Corporate debt instruments	—	147,980	1,988	149,968	—	45,162,059	—	45,162,059
Government and other debt instruments	—	—	—	—	—	14,956,494	—	14,956,494
Registered investment companies	—	—	—	—	—	97,675,689	—	97,675,689
Total recorded at fair value	\$ —	\$ 147,980	\$ 1,988	\$ 149,968	\$ 4,364,323	\$ 159,095,515	\$ —	\$ 163,459,838
Assets recorded at NAV ⁽¹⁾ :								
Common/collective trust funds				—				455,313,084
Total recorded at NAV				\$ —				\$ 455,313,084
Total investments				\$ 149,968				\$ 618,772,922

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

4. 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, included in the Plan's financial statements and supplemental schedules, that was prepared by or derived from information prepared by Bank of New York Mellon and Northern Trust, respectively, and furnished to the plan administrator. The plan administrator has obtained certifications from both Bank of New York Mellon and Northern Trust that such information is complete and accurate:

	2024	2023
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS:		
Investments - at fair value	\$ 149,968	\$ 618,772,922
Interest, dividends and other receivables	42,099	2,883,858
Pending purchases, due to broker for securities purchased and other payables	—	7,684,822
STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS:		
Net appreciation in fair value of investments	\$ 54,955,389	\$ 71,949,981
Interest and dividend income	5,753,308	7,774,157

In addition, the Trustees have certified that all investment balances and investment information included in Note 3 (except for the fair value hierarchy categorization, leveling, unfunded commitments and liquidation periods) and the supplemental schedules are complete and accurate.

5. ACTUARIAL PRESENT VALUE OF ACCUMULATED PLAN BENEFITS

Accumulated plan benefits are those future periodic payments, including lump-sum distributions that are attributable under the Plan's provisions to services rendered by employees 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 the amount that results from applying actuarial assumptions to adjust the accumulated plan benefits to reflect the time value of money (through discounts for interest) and the probability of payment (by means of decrements such as for death, disability, withdrawal, or retirement) between the valuation date and the expected date of payment.

The actuarial present value of accumulated plan benefits presented in the accompanying financial statements at December 31, 2023 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 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, was as follows:

Vested benefits:		
Participants and/or beneficiaries currently receiving benefits	\$	266,257,465
Other participants		343,319,483
Total vested benefits		609,576,948
Non-vested benefits		849,324
Total actuarial present value of accumulated plan benefits	\$	610,426,272

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 - beginning of year	\$	593,396,360
Increase (decrease) during the year attributable to:		
Benefits accumulated		12,498,239
Increase for interest due to the decrease in the discount period		40,850,902
Actuarial gains		7,336,180
Benefits paid		(44,620,561)
Change of assumptions		965,152
Net increase		17,029,912
Actuarial present value of accumulated plan benefits - end of year	\$	610,426,272

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

Retirement age	Average retirement age of 63 for 2024 and 2023
Mortality	For non-disabled participants: PRI-2012 table, blended 70% white collar and 30% blue collar, projected generationally using Scale MP-2020 for 2024 and 2023
Discount	7.00% for 2024 and 2023
Cash balance crediting rate ⁽¹⁾	4.47% for 2024 and 4.00% thereafter
Actuarial method	Unit credit cost method

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.

6. FUNDING POLICY

The Company's funding policy is to make annual contributions to the Plan in amounts such that all participants' benefits will be fully provided for by the time they retire. The Company's contribution is based on the advice and calculation of an independent actuary and is limited to the maximum deductible amount as permitted by law or regulations in Dominion Energy's consolidated federal income tax return. During 2025, \$3,690,000 in contributions were made all of which are related to the year ended December 31, 2024. Additionally, \$44,700,000 contributions were made in 2024, with \$19,140,000 relating to the year ended December 31, 2024 and \$25,560,000 relating to the year ended December 31, 2023.

7. EXEMPT PARTY-IN-INTEREST TRANSACTIONS

In 2024 and 2023, the Plan invested in shares of common/collective trust funds administered by the Northern Trust Company through December 31, 2023 or Bank of New York Mellon beginning January 2024. During 2023 and 2024, Northern Trust and Bank of New York Mellon, respectively, were the trustees as defined by the Plan and, therefore, the related transactions qualify as exempt party-in-interest transactions. Fees paid by the Plan for investment management services are included as a reduction of the return earned on each common/collective trust fund in the net appreciation (depreciation) in fair value of investments.

During 2024 and 2023, the Plan paid \$39,901 and \$48,190, respectively, to DES, the plan administrator, for costs associated with administration of the Plan.

8. PLAN TERMINATION

Although it has not expressed any intention to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions set forth in ERISA. 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"). Generally, if the Plan terminates, the PBGC guarantees most vested normal-age retirement benefits, early retirement benefits, and certain disability and survivors' pensions. 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.

9. FEDERAL INCOME TAX STATUS

The Internal Revenue Service has determined and informed the Company by a letter dated April 9, 2021, that the Plan and the Trust are in compliance with applicable regulations of the Internal Revenue Code ("IRC").

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 continue 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.

10. SUBSEQUENT EVENTS

For the year ended December 31, 2024, subsequent events were evaluated through October 15, 2025, the date the financial statements are available to be issued. Except as noted above, no events occurred that require additional disclosure or adjustments to the Plan's financial statements.

SUPPLEMENTAL SCHEDULES

SCANA CORPORATION RETIREMENT PLAN

Employer ID No: 57-0784499

Plan Number: 001

**FORM 5500, SCHEDULE H, PART IV, LINE 4i—
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
AS OF DECEMBER 31, 2024**

(a)	(b) Identity of Issuer, Borrower, Lessor or Similar Party	(c) Description of Investment, including maturity date, rate of interest, collateral, par, or maturity value	(d) Cost	(e) Current Value
Corporate debt instruments:				
	MNSN HOLDINGS INC	Corporate debt instruments	\$ 1,988	\$ 1,988
	SVB FINANCIAL TRUST PFD 11.000%	Corporate debt instruments	172,140	147,980
			174,128	149,968
		Total investments	\$ 174,128	\$ 149,968

* A party-in-interest as defined by ERISA.
See accompanying Independent Auditor's Report.

SCANA CORPORATION RETIREMENT PLAN

Employer ID No: 57-0784499

Plan Number: 001

FORM 5500, SCHEDULE H, PART IV, LINE 4j— SCHEDULE OF REPORTABLE TRANSACTIONS YEAR ENDED DECEMBER 31, 2024

Single Transactions in Excess of 5% of Plan Assets:

Shares/Units	(a) Identity of Party Involved	(b) Description of Asset (include interest rate and maturity in case of a loan)	(c) Purchase Price	(d) Selling Price	(g) Cost of Asset	(i) Net Gain or (Loss)
8,666,531	BLACKROCK CORP CREDIT	COMMON/COLLECTIVE TRUST	\$ 162,000,000	\$ —	\$ 162,000,000	\$ —
9,493,249	BLACKROCK CORP CREDIT	COMMON/COLLECTIVE TRUST	—	173,123,531	176,899,086	(3,775,555)
153,356,339	EB TEMP INV FD*	COMMON/COLLECTIVE TRUST	153,356,339	—	153,356,339	—
149,987,471	EB TEMP INV FD*	COMMON/COLLECTIVE TRUST	—	149,987,471	149,987,471	—
50,000,000	FEDERAL HOME LN BK CONS DISC 10/23/2024	U. S. GOVERNMENT SECURITIES	49,993,417	—	49,993,417	—
37,700,000	FEDERAL HOME LN BK CONS DISC 10/24/2024	U. S. GOVERNMENT SECURITIES	37,695,036	—	37,695,036	—
50,000,000	FEDERAL HOME LN BK CONS DISC 10/24/2024	U. S. GOVERNMENT SECURITIES	49,993,417	—	49,993,417	—
50,000,000	FEDERAL HOME LN BK CONS DISC 10/24/2024	U. S. GOVERNMENT SECURITIES	49,993,417	—	49,993,417	—
33,700,000	FEDERAL HOME LN BK CONS DISC 10/25/2024	U. S. GOVERNMENT SECURITIES	33,695,582	—	33,695,582	—
50,000,000	FEDERAL HOME LN BK CONS DISC 10/25/2024	U. S. GOVERNMENT SECURITIES	49,993,444	—	49,993,444	—
50,000,000	FEDERAL HOME LN BK CONS DISC 10/25/2024	U. S. GOVERNMENT SECURITIES	49,993,444	—	49,993,444	—
50,000,000	FEDERAL HOME LN BK CONS DISC 11/22/2024	U. S. GOVERNMENT SECURITIES	49,818,778	—	49,818,778	—
50,000,000	FEDERAL HOME LN BK CONS DISC 11/22/2024	U. S. GOVERNMENT SECURITIES	49,818,778	—	49,818,778	—
50,000,000	FEDERAL HOME LN BK CONS DISC 11/22/2024	U. S. GOVERNMENT SECURITIES	—	49,844,067	49,844,667	(600)
50,000,000	FEDERAL HOME LN BK CONS DISC 11/22/2024	U. S. GOVERNMENT SECURITIES	—	49,844,067	49,844,667	(600)
50,000,000	FEDERAL HOME LN BK CONS DISC 11/22/2024	U. S. GOVERNMENT SECURITIES	—	49,844,067	49,844,667	(600)
6,781,890	INTERMEDIATE DURATION CORPOR REGISTERED INVESTMENT COMPANIES		—	74,870,485	73,430,465	1,440,020
7,115,637	LONG DURATION CORPORATE CREDIT COMMON/COLLECTIVE TRUST		—	93,285,491	90,949,466	2,336,025
994,003	NORTHERN TRUST COLLECTIVE ALL COMMON/COLLECTIVE TRUST		—	312,950,764	272,473,980	40,476,784
1,191,294	NT COLLECTIVE ALL COUNTRY COMMON/COLLECTIVE TRUST		293,810,244	—	293,810,244	—
1,210,360	NT COLLECTIVE ALL COUNTRY COMMON/COLLECTIVE TRUST		—	320,248,820	297,577,738	22,671,082
7,905,730	PAPS LONG DURATION CREDIT BOND REGISTERED INVESTMENT COMPANIES		—	75,815,947	91,367,434	(15,551,487)

* A party-in-interest as defined by ERISA.

See accompanying Independent Auditor's Report.

SCANA CORPORATION RETIREMENT PLAN
Employer ID No: 57-0784499
Plan Number: 001

**FORM 5500, SCHEDULE H, PART IV, LINE 4j—
SCHEDULE OF REPORTABLE TRANSACTIONS
YEAR ENDED DECEMBER 31, 2024**

Series of Transactions in Excess of 5% of Plan Assets:

Shares/Units	(a) Identity of Party Involved	(b) Description of Asset (include interest rate and maturity in case of a loan)	Number of Transactions	(c) Purchase Price	(d) Selling Price	(g) Cost of Asset	(i) Net Gain or (Loss)
8,733,117	BLACKROCK CORP CREDIT	COMMON/COLLECTIVE TRUST	2	\$ 163,300,000	\$ —	\$ 163,300,000	\$ —
11,091,190	BLACKROCK CORP CREDIT	COMMON/COLLECTIVE TRUST	5	—	203,623,531	206,269,422	(2,645,891)
256,941,209	EB TEMP INV FD*	COMMON/COLLECTIVE TRUST	126	256,941,209	—	256,941,209	—
256,941,209	EB TEMP INV FD*	COMMON/COLLECTIVE TRUST	143	—	256,941,209	256,941,209	—
69,900,000	FEDERAL HOME LN BK CONS DISC 10/23/2024	U. S. GOVERNMENT SECURITIES	2	69,890,797	—	69,890,797	—
137,700,000	FEDERAL HOME LN BK CONS DISC 10/24/2024	U. S. GOVERNMENT SECURITIES	3	137,681,870	—	137,681,870	—
133,700,000	FEDERAL HOME LN BK CONS DISC 10/25/2024	U. S. GOVERNMENT SECURITIES	3	133,682,470	—	133,682,470	—
154,400,000	FEDERAL HOME LN BK CONS DISC 11/22/2024	U. S. GOVERNMENT SECURITIES	4	153,840,386	—	153,840,386	—
154,400,000	FEDERAL HOME LN BK CONS DISC 11/22/2024	U. S. GOVERNMENT SECURITIES	4	—	153,918,478	153,920,331	(1,853)
4,832,377	INTERMEDIATE DURATION CORPOR	REGISTERED INVESTMENT COMPANIES	4	53,680,465	—	53,680,465	—
6,781,890	INTERMEDIATE DURATION CORPOR	REGISTERED INVESTMENT COMPANIES	1	—	74,870,485	73,430,465	1,440,020
3,864,318	LONG DURATION CORPORATE CREDIT	COMMON/COLLECTIVE TRUST	5	50,805,358	—	50,805,358	—
8,786,463	LONG DURATION CORPORATE CREDIT	COMMON/COLLECTIVE TRUST	3	—	115,285,491	112,305,358	2,980,133
1,004,283	NORTHERN TRUST COLLECTIVE ALL	COMMON/COLLECTIVE TRUST	2	—	315,950,764	275,292,067	40,658,697
1,272,819	NT COLLECTIVE ALL COUNTRY	COMMON/COLLECTIVE TRUST	3	312,934,044	—	312,934,044	—
1,272,819	NT COLLECTIVE ALL COUNTRY	COMMON/COLLECTIVE TRUST	6	—	336,255,674	312,934,044	23,321,631
10,352,980	PAPS LONG DURATION CREDIT BOND	REGISTERED INVESTMENT COMPANIES	12	—	99,195,243	119,759,918	(20,564,675)
3,517,886	PIMCO FDS	REGISTERED INVESTMENT COMPANIES	80	35,234,020	—	35,234,020	—
3,553,959	PIMCO FDS	REGISTERED INVESTMENT COMPANIES	51	—	35,595,842	35,595,190	652
100,300,000	U S TREASURY BOND 4.500% 02/15/2044 DD 02/15/24	U. S. GOVERNMENT SECURITIES	37	98,750,447	—	98,750,447	—
100,300,000	U S TREASURY BOND 4.500% 02/15/2044 DD 02/15/24	U. S. GOVERNMENT SECURITIES	34	—	98,812,255	98,750,447	61,808
50,900,000	U S TREASURY BOND 4.625% 05/15/2044 DD 05/15/24	U. S. GOVERNMENT SECURITIES	30	52,220,728	—	52,220,728	—
50,900,000	U S TREASURY BOND 4.625% 05/15/2044 DD 05/15/24	U. S. GOVERNMENT SECURITIES	27	—	52,225,456	52,220,728	4,728
63,900,000	U S TREASURY BOND 4.750% 11/15/2043 DD 11/15/23	U. S. GOVERNMENT SECURITIES	28	66,828,253	—	66,828,253	—
60,000,000	U S TREASURY BOND 4.750% 11/15/2043 DD 11/15/23	U. S. GOVERNMENT SECURITIES	29	—	62,304,107	62,700,086	(395,979)

* A party-in-interest as defined by ERISA.

See accompanying Independent Auditor's Report.

SCANA CORPORATION RETIREMENT PLAN

Employer ID No: 57-0784499

Plan Number: 001

FORM 5500, SCHEDULE H, PART IV, LINE 4j— SCHEDULE OF REPORTABLE TRANSACTIONS YEAR ENDED DECEMBER 31, 2024

Single Transactions in Excess of 5% of Plan Assets:

Shares/Units	(a) Identity of Party Involved	(b) Description of Asset (include interest rate and maturity in case of a loan)	(c) Purchase Price	(d) Selling Price	(g) Cost of Asset	(i) Net Gain or (Loss)
8,666,531	BLACKROCK CORP CREDIT	COMMON/COLLECTIVE TRUST	\$ 162,000,000	\$ —	\$ 162,000,000	\$ —
9,493,249	BLACKROCK CORP CREDIT	COMMON/COLLECTIVE TRUST	—	173,123,531	176,899,086	(3,775,555)
153,356,339	EB TEMP INV FD*	COMMON/COLLECTIVE TRUST	153,356,339	—	153,356,339	—
149,987,471	EB TEMP INV FD*	COMMON/COLLECTIVE TRUST	—	149,987,471	149,987,471	—
50,000,000	FEDERAL HOME LN BK CONS DISC 10/23/2024	U. S. GOVERNMENT SECURITIES	49,993,417	—	49,993,417	—
37,700,000	FEDERAL HOME LN BK CONS DISC 10/24/2024	U. S. GOVERNMENT SECURITIES	37,695,036	—	37,695,036	—
50,000,000	FEDERAL HOME LN BK CONS DISC 10/24/2024	U. S. GOVERNMENT SECURITIES	49,993,417	—	49,993,417	—
50,000,000	FEDERAL HOME LN BK CONS DISC 10/24/2024	U. S. GOVERNMENT SECURITIES	49,993,417	—	49,993,417	—
33,700,000	FEDERAL HOME LN BK CONS DISC 10/25/2024	U. S. GOVERNMENT SECURITIES	33,695,582	—	33,695,582	—
50,000,000	FEDERAL HOME LN BK CONS DISC 10/25/2024	U. S. GOVERNMENT SECURITIES	49,993,444	—	49,993,444	—
50,000,000	FEDERAL HOME LN BK CONS DISC 10/25/2024	U. S. GOVERNMENT SECURITIES	49,993,444	—	49,993,444	—
50,000,000	FEDERAL HOME LN BK CONS DISC 11/22/2024	U. S. GOVERNMENT SECURITIES	49,818,778	—	49,818,778	—
50,000,000	FEDERAL HOME LN BK CONS DISC 11/22/2024	U. S. GOVERNMENT SECURITIES	49,818,778	—	49,818,778	—
50,000,000	FEDERAL HOME LN BK CONS DISC 11/22/2024	U. S. GOVERNMENT SECURITIES	49,818,778	—	49,818,778	—
50,000,000	FEDERAL HOME LN BK CONS DISC 11/22/2024	U. S. GOVERNMENT SECURITIES	—	49,844,067	49,844,667	(600)
50,000,000	FEDERAL HOME LN BK CONS DISC 11/22/2024	U. S. GOVERNMENT SECURITIES	—	49,844,067	49,844,667	(600)
50,000,000	FEDERAL HOME LN BK CONS DISC 11/22/2024	U. S. GOVERNMENT SECURITIES	—	49,844,067	49,844,667	(600)
6,781,890	INTERMEDIATE DURATION CORPOR REGISTERED INVESTMENT COMPANIES		—	74,870,485	73,430,465	1,440,020
7,115,637	LONG DURATION CORPORATE CREDIT	COMMON/COLLECTIVE TRUST	—	93,285,491	90,949,466	2,336,025
994,003	NORTHERN TRUST COLLECTIVE ALL	COMMON/COLLECTIVE TRUST	—	312,950,764	272,473,980	40,476,784
1,191,294	NT COLLECTIVE ALL COUNTRY	COMMON/COLLECTIVE TRUST	293,810,244	—	293,810,244	—
1,210,360	NT COLLECTIVE ALL COUNTRY	COMMON/COLLECTIVE TRUST	—	320,248,820	297,577,738	22,671,082
7,905,730	PAPS LONG DURATION CREDIT BOND REGISTERED INVESTMENT COMPANIES		—	75,815,947	91,367,434	(15,551,487)

* A party-in-interest as defined by ERISA.

See accompanying Independent Auditor's Report.

SCANA CORPORATION RETIREMENT PLAN

Employer ID No: 57-0784499

Plan Number: 001

FORM 5500, SCHEDULE H, PART IV, LINE 4j— SCHEDULE OF REPORTABLE TRANSACTIONS YEAR ENDED DECEMBER 31, 2024

Series of Transactions in Excess of 5% of Plan Assets:

Shares/Units	(a) Identity of Party Involved	(b) Description of Asset (include interest rate and maturity in case of a loan)	Number of Transactions	(c) Purchase Price	(d) Selling Price	(g) Cost of Asset	(i) Net Gain or (Loss)
8,733,117	BLACKROCK CORP CREDIT	COMMON/COLLECTIVE TRUST	2	\$ 163,300,000	\$ —	\$ 163,300,000	\$ —
11,091,190	BLACKROCK CORP CREDIT	COMMON/COLLECTIVE TRUST	5	—	203,623,531	206,269,422	(2,645,891)
256,941,209	EB TEMP INV FD*	COMMON/COLLECTIVE TRUST	126	256,941,209	—	256,941,209	—
256,941,209	EB TEMP INV FD*	COMMON/COLLECTIVE TRUST	143	—	256,941,209	256,941,209	—
69,900,000	FEDERAL HOME LN BK CONS DISC 10/23/2024	U. S. GOVERNMENT SECURITIES	2	69,890,797	—	69,890,797	—
137,700,000	FEDERAL HOME LN BK CONS DISC 10/24/2024	U. S. GOVERNMENT SECURITIES	3	137,681,870	—	137,681,870	—
133,700,000	FEDERAL HOME LN BK CONS DISC 10/25/2024	U. S. GOVERNMENT SECURITIES	3	133,682,470	—	133,682,470	—
154,400,000	FEDERAL HOME LN BK CONS DISC 11/22/2024	U. S. GOVERNMENT SECURITIES	4	153,840,386	—	153,840,386	—
154,400,000	FEDERAL HOME LN BK CONS DISC 11/22/2024	U. S. GOVERNMENT SECURITIES	4	—	153,918,478	153,920,331	(1,853)
4,832,377	INTERMEDIATE DURATION CORPOR	REGISTERED INVESTMENT COMPANIES	4	53,680,465	—	53,680,465	—
6,781,890	INTERMEDIATE DURATION CORPOR	REGISTERED INVESTMENT COMPANIES	1	—	74,870,485	73,430,465	1,440,020
3,864,318	LONG DURATION CORPORATE CREDIT	COMMON/COLLECTIVE TRUST	5	50,805,358	—	50,805,358	—
8,786,463	LONG DURATION CORPORATE CREDIT	COMMON/COLLECTIVE TRUST	3	—	115,285,491	112,305,358	2,980,133
1,004,283	NORTHERN TRUST COLLECTIVE ALL	COMMON/COLLECTIVE TRUST	2	—	315,950,764	275,292,067	40,658,697
1,272,819	NT COLLECTIVE ALL COUNTRY	COMMON/COLLECTIVE TRUST	3	312,934,044	—	312,934,044	—
1,272,819	NT COLLECTIVE ALL COUNTRY	COMMON/COLLECTIVE TRUST	6	—	336,255,674	312,934,044	23,321,631
10,352,980	PAPS LONG DURATION CREDIT BOND	REGISTERED INVESTMENT COMPANIES	12	—	99,195,243	119,759,918	(20,564,675)
3,517,886	PIMCO FDS	REGISTERED INVESTMENT COMPANIES	80	35,234,020	—	35,234,020	—
3,553,959	PIMCO FDS	REGISTERED INVESTMENT COMPANIES	51	—	35,595,842	35,595,190	652
100,300,000	U S TREASURY BOND 4.500% 02/15/2044 DD 02/15/24	U. S. GOVERNMENT SECURITIES	37	98,750,447	—	98,750,447	—
100,300,000	U S TREASURY BOND 4.500% 02/15/2044 DD 02/15/24	U. S. GOVERNMENT SECURITIES	34	—	98,812,255	98,750,447	61,808
50,900,000	U S TREASURY BOND 4.625% 05/15/2044 DD 05/15/24	U. S. GOVERNMENT SECURITIES	30	52,220,728	—	52,220,728	—
50,900,000	U S TREASURY BOND 4.625% 05/15/2044 DD 05/15/24	U. S. GOVERNMENT SECURITIES	27	—	52,225,456	52,220,728	4,728
63,900,000	U S TREASURY BOND 4.750% 11/15/2043 DD 11/15/23	U. S. GOVERNMENT SECURITIES	28	66,828,253	—	66,828,253	—
60,000,000	U S TREASURY BOND 4.750% 11/15/2043 DD 11/15/23	U. S. GOVERNMENT SECURITIES	29	—	62,304,107	62,700,086	(395,979)

* A party-in-interest as defined by ERISA.

See accompanying Independent Auditor's Report.

SCHEDULE SB ATTACHMENTS

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

For Cash Balance participants:

Retirement Age (1)	Assumed Rate (2)	Participants At Beginning (3)	Participants Retiring: (2) x (3) (4)	(1) x (4) (5)
55	0.05	1,000.00	50.00	2,750.00
56	0.05	950.00	47.50	2,660.00
57	0.05	902.50	45.13	2,572.13
58	0.05	857.38	42.87	2,486.39
59	0.07	814.51	57.02	3,363.91
60	0.07	757.49	53.02	3,181.46
61	0.07	704.47	49.31	3,008.07
62	0.15	655.15	98.27	6,092.93
63	0.15	556.88	83.53	5,262.52
64	0.10	473.35	47.33	3,029.43
65	0.35	426.01	149.10	9,691.81
66	0.35	276.91	96.92	6,396.60
67	0.50	179.99	90.00	6,029.69
68	0.75	90.00	67.50	4,589.77
69	0.75	22.50	16.87	1,164.32
70	1.00	5.62	5.62	393.73
Average age at retirement				62,672.76
62,672.76 / 1,000 = 63				

Plan Name: SCANA Corporation Retirement Plan
 EIN / PN: 57-0784499/001
 Plan Sponsor: SCANA Corporation
 Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

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

For Final Average Pay participants:

Retirement Age (1)	Assumed Rate (2)	Participants At Beginning (3)	Participants Retiring: (2) x (3) (4)	(1) x (4) (5)
55	0.04	1,000.00	40.00	2,200.00
56	0.04	960.00	38.40	2,150.40
57	0.04	921.60	36.86	2,101.25
58	0.04	884.74	35.39	2,052.59
59	0.04	849.35	33.97	2,004.46
60	0.04	815.37	32.61	1,956.89
61	0.04	782.76	31.31	1,909.93
62	0.10	751.45	75.14	4,658.97
63	0.10	676.30	67.63	4,260.71
64	0.15	608.67	91.30	5,843.26
65	1.00	517.37	517.37	33,629.15
66	1.00	0.00	0.00	0.00
67	1.00	0.00	0.00	0.00
68	1.00	0.00	0.00	0.00
69	1.00	0.00	0.00	0.00
70	1.00	0.00	0.00	0.00
Average age at retirement				62,767.61
62,767.61	/	1,000	=	63

Plan Name: SCANA Corporation Retirement Plan
 EIN / PN: 57-0784499/001
 Plan Sponsor: SCANA Corporation
 Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 24 Change in Actuarial Assumptions

The Voluntary Employee Contributions (VEC) rate was changed from 4.62% to 5.25%.

Plan Name: SCANA Corporation Retirement Plan
EIN / PN: 57-0784499/001
Plan Sponsor: SCANA Corporation
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 25 Change in Method

The method for calculating the Actuarial Value of Assets (AVA) was changed from the one-year average to the two-year average. Specifically, the updated method is now as follows:

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.)

Plan Name: SCANA Corporation Retirement Plan
EIN / PN: 57-0784499/001
Plan Sponsor: SCANA Corporation
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

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

Attained Age		Total Years of Credited Service								
		Under 1	1 to 4	5 to 9	10 to 14	15 to 24	25 to 29	30 to 34	35 to 39	Over 40
Under 25	Count	0	0	0	0	0	0	0	0	0
	Average Earnings									
	Average Cash Balance									
25 to 29	Count	0	0	0	4	0	0	0	0	0
	Average Earnings									
	Average Cash Balance									
30 to 34	Count	0	0	0	72	7	0	0	0	0
	Average Earnings				101,940					
	Average Cash Balance				61,059					
35 to 39	Count	0	0	0	102	105	0	0	0	0
	Average Earnings				91,254	98,165				
	Average Cash Balance				62,132	87,960				
40 to 44	Count	0	0	0	93	224	10	2	0	0
	Average Earnings				94,813	95,317				
	Average Cash Balance				67,113	95,151				
45 to 49	Count	0	0	0	70	237	59	5	0	1
	Average Earnings				94,434	96,211	98,192			
	Average Cash Balance				68,879	107,972	125,505			
50 to 54	Count	0	0	0	65	265	105	78	9	6
	Average Earnings				92,356	95,068	97,966	103,034		
	Average Cash Balance				71,773	112,077	150,122	170,954		
55 to 59	Count	0	0	0	37	190	95	126	112	12
	Average Earnings				107,416	90,691	94,443	99,414	107,596	
	Average Cash Balance				76,364	110,547	147,032	172,083	193,173	
60 to 64	Count	0	0	0	24	115	59	85	111	77
	Average Earnings				92,539	89,388	93,264	99,926	106,470	102,832
	Average Cash Balance				67,019	111,938	151,400	173,361	187,026	374,551
65 to 69	Count	0	0	0	4	28	13	14	11	59
	Average Earnings					85,902				104,047
	Average Cash Balance					105,420				458,794
70 & Over	Count	0	0	0	2	3	1	1	2	3
	Average Earnings									
	Average Cash Balance									

Plan Name: SCANA Corporation Retirement Plan
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 Plan Sponsor: SCANA Corporation
 Valuation Date: January 1, 2024

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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	35,424,216	5,645,829	28,261,874	69,331,919
2025	27,525,150	2,945,345	27,535,079	58,005,574
2026	24,959,085	1,999,474	26,794,489	53,753,048
2027	23,054,597	2,216,763	26,029,111	51,300,471
2028	23,168,981	3,564,604	25,226,708	51,960,293
2029	23,091,034	2,948,483	24,404,927	50,444,444
2030	23,466,412	3,504,359	23,567,046	50,537,817
2031	24,816,976	3,095,401	22,714,255	50,626,632
2032	24,120,627	2,835,353	21,847,886	48,803,866
2033	23,565,335	3,452,243	20,970,160	47,987,738
2034	23,879,577	3,582,691	20,083,562	47,545,830
2035	24,251,290	3,269,054	19,189,622	46,709,966
2036	23,092,786	3,850,566	18,290,417	45,233,769
2037	22,174,991	3,527,476	17,388,121	43,090,588
2038	22,074,124	4,263,749	16,484,991	42,822,864
2039	21,627,689	3,177,027	15,583,209	40,387,925
2040	19,061,089	3,719,253	14,684,897	37,465,239
2041	18,450,663	3,666,002	13,792,128	35,908,793
2042	17,785,490	3,705,979	12,906,894	34,398,363
2043	17,790,498	3,660,129	12,031,089	33,481,716
2044	17,391,563	3,805,665	11,166,595	32,363,823
2045	16,375,643	3,550,799	10,315,332	30,241,774
2046	16,319,619	3,075,464	9,479,343	28,874,426
2047	15,178,811	3,487,877	8,660,979	27,327,667
2048	14,141,584	3,372,259	7,863,024	25,376,867
2049	12,856,819	3,063,473	7,088,746	23,009,038
2050	12,292,184	2,852,127	6,341,901	21,486,212
2051	11,814,749	3,023,373	5,626,695	20,464,817
2052	9,924,639	2,640,689	4,947,602	17,512,930

Plan Name: SCANA Corporation Retirement Plan
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Plan Sponsor: SCANA Corporation
Valuation Date: January 1, 2024

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Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving Payments	Total
2053	9,532,919	1,743,891	4,309,127	15,585,937
2054	8,805,231	2,318,036	3,715,448	14,838,715
2055	6,835,060	1,175,310	3,170,064	11,180,434
2056	6,373,008	1,503,810	2,675,557	10,552,375
2057	5,180,134	1,143,898	2,233,340	8,557,372
2058	4,224,901	913,807	1,843,504	6,982,212
2059	3,960,935	658,849	1,504,874	6,124,658
2060	3,256,602	564,607	1,215,061	5,036,270
2061	2,836,992	482,989	970,696	4,290,677
2062	2,457,691	408,458	767,699	3,633,848
2063	2,107,165	341,432	601,503	3,050,100
2064	1,793,161	282,077	467,360	2,542,598
2065	1,510,868	230,302	360,569	2,101,739
2066	1,260,810	185,808	276,661	1,723,279
2067	1,041,680	148,139	211,538	1,401,357
2068	852,185	116,709	161,566	1,130,460
2069	690,427	90,863	123,600	904,890
2070	554,052	69,912	95,003	718,967
2071	440,427	53,165	73,617	567,209
2072	346,830	39,964	57,705	444,499
2073	270,570	29,699	45,899	346,168

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

Type of Base	Date Established	Initial Amount	Remaining Amortization Period (Years)	Outstanding Balance	Amortization Payment
1. Shortfall	01/01/2024	(19,346,742)	15.00000	(19,346,742)	(1,760,172)
2. Shortfall	01/01/2023	53,726,302	14.00000	51,552,272	4,920,293
Total				32,205,530	3,160,121

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Schedule SB – Statement by Enrolled Actuary

Plan Sponsor SCANA Corporation
EIN/PN 57-0784499/001
Plan Name SCANA Corporation Retirement Plan
Valuation Date January 1, 2024
Enrolled Actuary Michael Holderman
Enrollment Number 23-06979

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.

Plan Name: SCANA Corporation Retirement Plan
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Valuation Date: January 1, 2024

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Schedule SB, Part V Summary of Plan Provisions

Plan Provisions

The most recent amendment and restatement reflected in the following plan provisions was effective January 1, 2024.

Covered employees	An employee becomes a plan participant on the first anniversary of his date of employment. Former employees of Carolina Energies are eligible as of January 1, 1983. Former employees of Peoples Gas Company were eligible as of January 1, 1991. Employees of SCANA Hydrocarbons were eligible as of January 1, 1994. Employees of Public Service Company of North Carolina became participants as of July 1, 2000. Employees of SCANA Communications became participants as of July 1, 2001.
Participation date	An employee becomes a plan participant on the first anniversary of his date of employment. Employees hired after December 31, 2013 are not eligible to participate.
Plan status	The plan was amended effective September 1, 2013 to exclude post-2013 hires from plan entry. Effective January 1, 2021 the formula for cash balance participants was changed to be equal to the current Dominion Energy Plan. The January 1, 2024 restatement reflects a freeze of benefit accruals under the Final Average Pay formula effective December 31, 2023 and allows both Cash Balance and Final Average Pay participants to accrue Cash Balance formula benefits after December 31, 2023.

Definitions

Vesting service	A participant is credited with one year of vesting service for each complete calendar year he works, and fractional years, disregarding partial months, for partial years worked.
Benefit service	A participant is credited with one year of benefit service for each complete calendar year he works, and fractional years, disregarding partial months, for partial years worked. Service with some affiliates prior to the adoption of the Plan by the affiliate may be excluded from benefit service. For Final Average Pay benefits, no service is earned after December 31, 2023.

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Pensionable pay	<p>Total base pay received in each calendar year (excludes overtime and bonuses), for Final Average Pay Plan participants.</p> <p>For Cash Balance Plan participants:</p> <ul style="list-style-type: none">• Accruals prior to December 31, 2020: Base pay plus overtime plus bonuses plus other incentives, excluding long-term incentive plan payments.• Accruals after January 1, 2021: base plus merit lump sum payments.
Average earnings	<p>The highest monthly average of compensation during any three consecutive calendar-year period during the five-year period ending on the earliest of termination, early retirement, normal retirement, or postponed retirement dates. In addition, in the participant's final year of employment, it will be assumed that his compensation for the entire year was earned at his final rate of compensation. Annual compensation for any plan year is limited to the maximum compensation under Internal Revenue Code Section 401(a)(17), increasing with future cost-of-living increases. Average earnings used in determining Final Average Pay benefits is based on earnings before December 31, 2023.</p>
Covered compensation	<p>The average of the contribution and benefit bases in effect under Section 230 of the Social Security Act for each year in the 35-year period ending in the year in which the participant reaches Social Security Retirement Age, and divided by 12, except that for the participant who terminates employment before Social Security Retirement Age, Covered Compensation will be determined by assuming no increases in the contribution and benefit bases after the year in which his termination occurs.</p>
Interest crediting rate	<ul style="list-style-type: none">• Balances accrued prior to December 31, 2020: The rate of interest paid on 30-year treasury securities for the month of December of the year preceding the year of the calculation.• Balances accrued after January 1, 2021: The greater of:<ul style="list-style-type: none">■ The rate of interest paid on 30-year treasury securities for the month of September of the year preceding the year of the calculation.■ An annual interest rate of equal to one and one-half percent (1.50%)

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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.
Special average monthly compensation	The highest average of compensation paid during any three consecutive calendar-year period during the five-year period ending on the earliest of termination, early retirement, normal retirement, or postponed retirement date. The compensation considered for each year cannot exceed the contribution and benefit based in effect under Section 230 of the Social Security Act for that year. In addition, Special Average Monthly Compensation may not exceed Covered Compensation.

Eligibility for Benefits

Normal retirement	The first of the month on or next following attainment of age 65
Early retirement	The first of the month on or next following attainment of age 55 and completion of 20 years of Vesting Service. Former CEI employees electing to remain under the prior plan formula are eligible after age 55 and completion of 10 years of Vesting Service. Former Peoples and former PSNC employees are also eligible after age 55 and completion of 10 years of Vesting Service.
Postponed retirement	Retirement after age 65
Vested termination	Termination for reasons other than death or retirement after completing three years of Vesting Service.
Preretirement spouse benefit	Death while eligible for normal, early, postponed, or deferred vested retirement benefits (must have a surviving spouse for Final Average Pay Plan).
Disability	Eligible to receive Company long-term disability benefits.
Voluntary employee contribution benefits	Only those participants who were making voluntary employee contributions as of December 31, 1988 will be eligible to make contributions after such date.
People's 401(k) plan benefits	Former Peoples employees who had balances in the People's 401(k) Plan as of December 30, 1990.

Benefits Paid Upon the Following Events – Final Average Pay Plan Participants

Plan Name:	SCANA Corporation Retirement Plan
EIN / PN:	57-0784499/001
Plan Sponsor:	SCANA Corporation
Valuation Date:	January 1, 2024

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Normal retirement

Pension Benefit (for all except former CEI employees electing to remain under the prior plan formula): The greatest of:

- (i) 1% of Average Monthly Compensation up to his Covered Compensation, plus 1.5% of the excess of his Average Monthly Compensation over his Covered Compensation, multiplied by years of Benefit Service up to 35 years;
- (ii) the prior plan minimum benefit as of December 31, 1988 (December 31, 1990 for former Peoples employees); or
- (iii) the accrued Benefit as of December 31, 1993.

Prior CEI Benefit (for former CEI employees electing to remain under the prior plan formula): The greatest of:

- (i) 60% of Average Monthly Compensation less 50% of his Special Offset, prorated if the participant has less than 30 years of benefit service, plus 1/2% of Average Monthly Compensation times Benefit Service in excess of 30 years;
- (ii) the Normal Retirement Pension Benefit above;
- (iii) the prior plan minimum benefit as of December 31, 1988; or
- (iv) the Accrued Benefit as of December 31, 1993.

Special Offset: The smaller of:

- (i) 50% of the basic benefit as calculated above but substituting Special Average Monthly Compensation for Average Monthly Compensation; or
- (ii) 0.65% of Special Average Monthly Compensation multiplied by years of Benefit Service, limited to 35 years.

Early retirement

Pension Benefit: The participant's Normal Retirement Pension Benefit based on Benefit Service and Average Monthly Compensation at retirement, reduced 1/3% for each month that commencement of payments precedes the participant's normal retirement date. If the participant had at least 35 years of benefit service, the benefit is not reduced.

Furthermore, in the event that a participant retires after completion of 35 years of Benefit Service but before attainment of age 62, his monthly Normal Retirement Pension Benefit will be increased by an additional .033% times the years and fractional years by which his age at retirement precedes age 62, times his Average Monthly Compensation up to his Covered Compensation, multiplied by years of Benefit Service up to 35 years.

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Benefits for former CEI employees electing to remain under the prior plan formula will be the Prior CEI Benefit, except that it will be determined assuming continued service to normal retirement, and multiplied by Benefit Service at retirement and divided by Benefit Service at normal retirement. Benefits will be reduced by 1/3% for each month that commencement of payments precedes the participant's normal retirement date. If the participant has at least 35 years of benefit service, this reduction will not apply.

Benefits for former People's employees will not be less than their minimum People's benefit, reduced 5/12% for each month that benefit commencement precedes normal retirement age.

Postponed retirement

Pension Benefit: Normal Retirement Benefit described above, based on Benefit Service and Average Monthly Compensation at actual retirement date. Payment of benefit commences at actual retirement date.

Deferred vested termination

Vested Pension Benefit (for all except former CEI employees electing to remain under the prior plan formula): Normal Retirement Pension Benefit based on Benefit Service and Average Monthly Compensation at termination, reduced by 1/3% for each month that payments commence before the participant's normal retirement date. (Peoples minimum benefit reduced 5/12% per month prior to normal retirement).

Vested Prior CEI Benefit (for former CEI employees electing to remain under the prior plan formula): Prior CEI Benefit based on Average Monthly Compensation at termination but assuming continued service to normal retirement and multiplied by the ratio of Benefit Service at termination to Benefit Service at normal retirement. This benefit will be reduced as the Vested Pension Benefit above if payments commence before normal retirement.

Preretirement spouse benefit

60% of the participant's accrued benefit at his death. Monthly payments will begin as of the first day of the month following the participant's death and will continue for the spouse's life.

Disability

Disability Benefit (for all except former CEI participants who elected to remain under the prior plan formula): The Normal Retirement Pension Benefit, first payable at normal retirement date and assuming continued service to normal retirement, and based upon Average Monthly compensation as of disability date.

Prior CEI Disability Benefit (for former CEI participants who elected to remain under the prior plan formula): The participant's

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benefit described in the Prior CEI Benefit first payable at normal retirement, and assuming continued service to normal retirement date, and based upon Average Monthly Compensation as of disability date.

Voluntary employee contribution benefits

Participants can contribute 2% of compensation each year subject to a maximum total contribution of \$9,000.

Contributions are accumulated at an annual rate equal to 120% of the midterm applicable federal rate as in effect for the first month of each plan year, and are refundable upon death prior to retirement.

Additional Retirement Benefits: Additional retirement benefits of 37½% of the total voluntary contribution amount, subject to a maximum annual benefit of \$3,375 are payable at normal retirement. Benefits adjusted as in the Early Retirement Benefit are payable for early retirement and actuarially adjusted benefits are payable for late retirement, with unreduced benefits payable if the participant has 35 years of Benefit Service.

In-Service Withdrawals: No participant will be permitted to withdraw any portion of his Voluntary Employee Contribution Account Balance before his Benefit Commencement Date, except that the Participant who is eligible for the Company's long-term disability benefits may at any time withdraw his entire Account Balance.

People's 401(k) plan benefits

Additional Retirement Benefits: People's 401(k) balance as of December 31, 1990 will be accumulated with interest to payment date, and will be payable as a lump sum, or in several alternative forms. Payments may be made upon normal retirement, early retirement (termination after age 55), postponed retirement, termination, disability, or death.

In-Service Withdrawals: In-service withdrawals are permitted after age 59½, with one withdrawal permitted in a 12-month period.

Hardship Withdrawals: Hardship withdrawals are available if certain conditions are met.

Other Plan Provisions – Final Average Pay Plan Participants

Forms of payment

Normal Forms: Unreduced 60% joint and survivor annuity if married on date payments commence; life annuity if single.

Optional Forms: Former CEI participants who elect to remain under the prior plan provisions may choose actuarially equivalent

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(to a life annuity) 10 year certain and continuous, contingent annuitant or lump-sum options. Former Peoples participants may choose to have their Peoples minimum benefits payable as a lump sum, contingent annuity, or certain and continuous annuity.

All participants may choose an actuarially equivalent (to a life annuity) 75% joint and survivor annuity.

Actuarial equivalence basis is 417(e) minimum basis with a 1-month look-back and 1-year stability period. Certain grandfathered benefits use an alternate conversion basis.

Maximum on benefits and pay

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

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Benefits Paid Upon the Following Events – Cash Balance Plan Participants¹

Opening Account Balance – Non-grandfathered participants For eligible participants as of July 1, 2000 who chose the Cash Balance Plan Option, their opening cash balance account as of July 1, 2000 was equal to the present value of benefits accrued as of June 30, 2000 under the Final Average Pay Plan. For eligible IBEW participants who chose the Cash Balance Plan Option, their opening cash balance account as of July 1, 2001, was equal to the present value of benefits accrued as of June 30, 2001 under the Final Average Pay Plan.

Opening Account Balance – Grandfathered participants Certain participants as of June 30, 2000 were eligible for additional transition credits. Grandfathered participants were those meeting the following criteria:

- 20 years of service or
- 10 years of service and age plus service at least equal to 60.

Grandfathered IBEW participants must have also met these conditions as of June 30, 2000.

Transition credits were designed to permit participants to accumulate cash balance accounts approximately equal to the value of their projected Final Average Pay benefit at their first unreduced retirement age.

Compensation credits Prior to December 31, 2020: At the end of each month the participant's Cash Balance Account is increased by credits of 5% of compensation up to the Social Security Wage Base plus 10% of compensation in excess of the Social Security Wage Base.

After January 1, 2021: Credits shall be based on the Cash Balance Participant's Vesting Service as of the last day of the month prior to the monthly crediting period, determined as follows:

Years of Vesting Service	Pay Credits as a Percentage of Compensation
Less than 5 years	4%
5 years to 14 years	5%
15 years to 24 years	6%
25 of more years	7%

¹ Final Average Pay participants accrue benefits under the Cash Balance formula beginning January 1, 2024, starting with an account balance of zero and with compensation credits based on vesting service inclusive of Final Average Pay vesting service.

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Interest credits	<p>Accruals prior to December 31, 2020: Each month the participant's Cash Balance Account, at the beginning of the month, is increased by interest credits based on 1/12 of the annual interest credit rate.</p> <p>Accruals after January 1, 2021: credited on a daily basis based on the value of the Cash Balance account during the prior day.</p>
Normal retirement	<p>Pension Benefit: The participant's Cash Balance Account is payable as a lump sum or as an equivalent monthly benefit.</p>
Early retirement	<p>Pension Benefit: The participant's Cash Balance Account is payable as a lump sum or as an equivalent immediate or deferred annuity. Alternatively, the participant can leave his Cash Balance Account in the Plan until normal retirement. His balance will continue to receive interest credits until he receives a distribution.</p>
Postponed retirement	<p>Pension Benefit: The participant's Cash Balance Account is payable as a lump sum or as an equivalent monthly benefit.</p>
Deferred vested	<p>Pension Benefit: The participant's Cash Balance Account is payable as a lump sum or as an equivalent immediate or deferred annuity. Alternatively, the participant can leave his Cash Balance Account in the Plan until normal retirement. His balance will continue to receive interest credits until he receives a distribution.</p>
Pre-retirement death benefit	<p>If a participant dies after completing at least 3 years of Vesting Service and before benefit distributions have begun, his surviving spouse or designated beneficiary will receive his Cash Balance Account as a lump sum. His surviving spouse may alternatively elect an equivalent immediate or deferred monthly benefit.</p>
Disability	<p>The participant's Cash Balance Account will continue to increase during his disability with compensation credits and interest credits, based on his compensation immediately prior to his disability.</p>
Voluntary employee contribution benefits	<p>Participants choosing the Cash Balance Plan option will not be permitted to make voluntary employee contributions. The value of a participant's voluntary employee contribution account is included in his Opening Cash Balance Account.</p>

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Other Plan Provisions – Cash Balance Plan Participants

Forms of Payment

Normal Forms: Life annuity if single, actuarially equivalent 50% joint and survivor annuity if married.

Optional Forms: In addition to the above, 100% and 75% joint and survivor annuity, 10-year certain and life annuity, lump sum.

Actuarial equivalence basis is 417(e) minimum basis with a 1-month look-back and 1-year stability period.

Future Plan Changes

Dominion Energy will be amending the plan to continue increased benefits originally calculated with earnings above those defined by the plan for certain final average pay annuitants who commenced between January 2022 and May 2024. This amendment will provide that these benefits continue at the current level and provide that prior payments were appropriate. Future final pay annuities will reflect the standard plan definition of earnings. Liabilities shown in this report reflect these pending increases for pre-2024 commencements as benefits without this increase were not available.

No other future plan changes were recognized. WTW is not aware of any other future plan changes which are required to be reflected.

Changes in Benefits Valued Since Prior Year

The plan was amended to allow Cash Balance formula benefits to accrue after December 31, 2023 for all plan participants.

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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: Rates varying by age
- Future Social Security wage bases 3.00%
- Statutory limits on compensation N/A
- Cash balance interest crediting 4.47% for 2024, 4.00% thereafter. 2024 uses the actual 30-year Treasury rate with a September 2023 lookback

Plan-related expenses

Estimated expenses are assumed to be equal to 0.2% of plan assets plus PBGC premiums (rounded) and are included in target normal cost. (\$5,800,000 for 2024)

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.

Rates not reflecting stabilization are used to determine PBGC variable rate premiums if the alternative method is used, and are used to determine the PBGC FTAP and the PBGC 4010 FS.

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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 employees.

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 a 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 described above for Healthy Mortality.

Termination Rates varying by age:

Percentage terminating during the year		
Age	CB Rate	FAP Rate
Under 40	7%	3%
40-44	6%	2%
45-54	6%	1%
55-64	6%	0%
65 and above	0%	0%

Disability None assumed.

Retirement Rates varying by age with average retirement age of 63.

Percentage retiring during the year		
Age	CB Rate	FAP Rate
55 - 58	5%	4%
59 - 61	7%	4%
62 - 63	15%	10%
64	10%	15%
65	35%	100%
66	35%	100%

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67	50%	100%
68 - 69	75%	100%
70	100%	100%

Benefit commencement date:

- Preretirement death benefit
Cash Balance: Upon Death
Final Average Pay: The later of the date of death or the date the participant would have attained age 55
- Deferred vested benefit
Cash Balance: 50% upon termination; 50% normal retirement date
Final Average Pay: Normal retirement date
- Disability benefit
Normal retirement date
- Retirement benefit
Cash Balance: 50% upon termination; 50% normal retirement date
Final Average Pay: Upon termination

Form of payment

Cash Balance: Lump sum

Final Average Pay: Unreduced 60% joint and survivor annuity if married on date payments begin; life annuity if single

Percent married

100%

Spouse age

Wife three years younger than husband

Covered pay

Cash Balance Plan participants:

- Accruals prior to December 31, 2020: Base pay plus overtime plus bonuses plus other incentives, excluding long-term incentive plan payments
- Accruals between January 1, 2021 and December 31, 2023: base plus merit lump sum payments.

Final Average Pay: Annualized base salary.

Loads

None

Plan Name: SCANA Corporation Retirement Plan
EIN / PN: 57-0784499/001
Plan Sponsor: SCANA Corporation
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

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 60% joint and survivor for the FAP plan and lump sum for the cash balance plan.

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.

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

Plan Name: SCANA Corporation Retirement Plan
EIN / PN: 57-0784499/001
Plan Sponsor: SCANA Corporation
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

described in IRS Notice 2009-22). The average asset value must be within 10% of market value, including discounted contributions receivable (discounted using the effective interest rate for the prior plan year.)

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

Benefits not valued

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

Sources of Data and Other Information

The plan sponsor 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. For specific adjustments, please refer to the Data Process report to be delivered in September 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.

Assumptions Rationale – Significant Economic Assumptions

Discount rate

The basis chosen was selected by the plan sponsor from among choices prescribed by law, all of which are based on observed market data over certain periods of time. Specifically, segment rates are based on average bond yields for the 24 months ending with the fourth month preceding the valuation date (September), adjusted as required for ARPA corridors.

Plan Name: SCANA Corporation Retirement Plan
EIN / PN: 57-0784499/001
Plan Sponsor: SCANA Corporation
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Expected return on plan assets

We understand that the expected return on assets assumption reflects the plan sponsor's estimate of future experience for trust asset returns, reflecting the plan's current asset allocation and any expected changes during the current plan year, current market conditions and the plan sponsor's expectations for future market conditions. The analysis was informed by analysis of historical data, recent trends for CPI, GDP growth, and real returns on the various classes of assets held by the trust. Please note the expected long-term return on asset assumption is limited to the third segment rate based on the selected discount rate as described above. No guidance in selecting this assumption was provided by Willis Towers Watson.

Cash balance interest crediting rate

The plan credits interest to cash balance accounts using the blended rate of interest based on 30-year Treasury securities and the applicable segment rates determined pursuant to Code Section 417(e)(3)(D) calculated using a look-back to the rate in effect for the month of September immediately preceding the start of the Plan Year, compounded monthly.

Dominion Energy has selected an expected future 30-year Treasury rate of 4.00% for years after the valuation year. After examining historical variability in this rate, we believe that the selected assumption does not significantly conflict with what would be reasonable based on a combination of market conditions at the measurement date and future expectations consistent with other economic assumptions used, other than the discount rate.

Future compensation increases

Assumed increases were chosen by the plan sponsor and, as required by U.S. GAAP they represent an estimate of future experience.

Assumptions Rationale – Significant Demographic Assumptions

Mortality

Assumptions used for funding purposes are as prescribed by IRC §430(h).

Termination

Termination rates were based on an experience study conducted in 2020, with annual consideration of whether

Plan Name: SCANA Corporation Retirement Plan
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SCHEDULE SB ATTACHMENTS

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

Retirement

Retirement rates were based on an experience study conducted in 2020, with annual consideration of whether any conditions have changed that would be expected to produce different results in the future.

Benefit commencement date for deferred benefits

Preretirement death benefit: Surviving spouses are assumed to begin benefits at the earliest permitted commencement date because ERISA requires benefits to start then unless the spouse elects to defer. If the spouse elects to defer, actuarial increases from the earliest commencement date must be given, so that a later commencement date is expected to be of approximately equal value, and experience indicates that most spouses do take the benefit as soon as it is available.

Deferred vested benefit: For the Cash Balance plan, 50% of deferred vested participants are assumed to commence their benefits upon termination. The other 50% are assumed to begin benefits at age 65 (or current age if later). For the Final Average Pay plan, deferred vested participants are assumed to begin benefits at age 65 (or current age if later). Deferred vested early commencement factors are not subsidized so that the difference between this approach and using assumed commencement rates at multiple ages is not expected to be significant. Deferred vested commencement dates were reviewed during the experience study conducted in 2014.

Form of payment

Cash Balance participants are assumed to choose a lump sum form of payment. The percentage of retiring participants assumed to take a lump sum is based on observed experience.

Final Average Pay (FAP) participants are assumed to choose the unreduced 60% joint and survivor annuity if married. Single FAP participants are assumed to choose a life annuity. The 60% joint and survivor annuity is fully subsidized. The only other joint and survivor offered to FAP participants is the unsubsidized 75% joint and survivor annuity. The percentage of retiring participants

Plan Name: SCANA Corporation Retirement Plan
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SCHEDULE SB ATTACHMENTS

assumed to take the 60% joint and survivor annuity is based on observed experience.

Prescribed Methods

Funding methods

The methods used for funding purposes as described in this Appendix, 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.

The segment rates used for actuarial equivalence were updated from an applicable month of September 2022 to September 2023 and the mortality table was updated from the 2023 417(e) mortality table to the 2024 417(e) mortality table.

The VEC rate was changed from 4.62% to 5.25%.

The assumed plan-related expenses added to the target normal cost were changed from \$5,600,000 for the prior valuation to \$5,800,000 for the current valuation to account for higher expected expenses to be paid from the trust.

Change in methods since prior valuation

The plan sponsor elected to change the asset method from a 1-year (2 point) averaging to a 2-year (3-point) averaging for the AVA. The change in asset method met the requirements of Revenue Procedure 2017-56 for automatic approval.

There have been no other changes in methods since prior valuation

Plan Name: SCANA Corporation Retirement Plan
EIN / PN: 57-0784499/001
Plan Sponsor: SCANA Corporation
Valuation Date: January 1, 2024

**SCHEDULE SB
(Form 5500)**

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

**Single-Employer Defined Benefit Plan
Actuarial Information**

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

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

OMB No. 1210-0110

2024

This Form is Open to Public Inspection

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

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

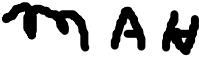
▶ **Caution:** A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan SCANA CORPORATION RETIREMENT PLAN		B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF SCANA CORPORATION		D Employer Identification Number (EIN) 57-0784499	
E Type of plan: <input checked="" type="checkbox"/> Single <input type="checkbox"/> Multiple-A <input type="checkbox"/> Multiple-B		F 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		
1	Enter the valuation date: Month <u>01</u> Day <u>01</u> Year <u>2024</u>			
2	Assets:			
	a Market value	2a	638,637,578	
	b Actuarial value	2b	681,872,350	
3	Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
	a For retired participants and beneficiaries receiving payment	2,097	305,455,871	305,455,871
	b For terminated vested participants	987	53,823,852	53,823,852
	c For active participants	2,703	353,973,459	354,798,157
	d Total	5,787	713,253,182	714,077,880
4	If the plan is in at-risk status, check the box and complete lines (a) and (b)	<input type="checkbox"/>		
	a Funding target disregarding prescribed at-risk assumptions	4a		
	b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b		
5	Effective interest rate	5	5.08%	
6	Target normal cost			
	a Present value of current plan year accruals	6a	13,090,969	
	b Expected plan-related expenses	6b	5,800,000	
	c Target normal cost	6c	18,890,969	

Statement by Enrolled Actuary

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

SIGN HERE	Michael Holderman 	October 9, 2025
	Signature of actuary	Date
	Michael Holderman	2306979
	Type or print name of actuary	Most recent enrollment number
	Willis Towers Watson US LLC	704-620-6480
	Firm name	Telephone number (including area code)
	1120 S. Tyron Street Suite 650 Charlotte NC 28203	
	Address of the firm	

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

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

21 Discount rate:

a 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** 63

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

Part VI Miscellaneous Items

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

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

26 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	0
29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a).....	29	0
30 Remaining amount of unpaid minimum required contributions (line 28 minus line 29)	30	0

Part VIII Minimum Required Contribution For Current Year

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

a Target normal cost (line 6c).....	31a	18,890,969
b Excess assets, if applicable, but not greater than line 31a	31b	0

32 Amortization installments:	Outstanding Balance	Installment
a Net shortfall amortization installment	32,205,530	3,160,121
b Waiver amortization installment	0	0

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

34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)....	34	22,051,090
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	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	0	0

36 Additional cash requirement (line 34 minus line 35).....	36	22,051,090
--	-----------	------------

37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c).....	37	22,058,433
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38 Present value of excess contributions for current year (see instructions)

a Total (excess, if any, of line 37 over line 36)	38a	7,343
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	38b	0

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

Part IX Pension Funding Relief Under 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

SCHEDULE SB ATTACHMENTS

Schedule SB – Statement by Enrolled Actuary

Plan Sponsor	SCANA Corporation
EIN/PN	57-0784499/001
Plan Name	SCANA Corporation Retirement Plan
Valuation Date	January 1, 2024
Enrolled Actuary	Michael Holderman
Enrollment Number	23-06979

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.

Plan Name:	SCANA Corporation Retirement Plan
EIN / PN:	57-0784499/001
Plan Sponsor:	SCANA Corporation
Valuation Date:	January 1, 2024

SCHEDULE SB ATTACHMENTS

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

For Cash Balance participants:

Retirement Age (1)	Assumed Rate (2)	Participants At Beginning (3)	Participants Retiring: (2) x (3) (4)	(1) x (4) (5)
55	0.05	1,000.00	50.00	2,750.00
56	0.05	950.00	47.50	2,660.00
57	0.05	902.50	45.13	2,572.13
58	0.05	857.38	42.87	2,486.39
59	0.07	814.51	57.02	3,363.91
60	0.07	757.49	53.02	3,181.46
61	0.07	704.47	49.31	3,008.07
62	0.15	655.15	98.27	6,092.93
63	0.15	556.88	83.53	5,262.52
64	0.10	473.35	47.33	3,029.43
65	0.35	426.01	149.10	9,691.81
66	0.35	276.91	96.92	6,396.60
67	0.50	179.99	90.00	6,029.69
68	0.75	90.00	67.50	4,589.77
69	0.75	22.50	16.87	1,164.32
70	1.00	5.62	5.62	393.73
Average age at retirement				62,672.76
62,672.76	/	1,000	=	63

Plan Name: SCANA Corporation Retirement Plan
 EIN / PN: 57-0784499/001
 Plan Sponsor: SCANA Corporation
 Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

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

For Final Average Pay participants:

Retirement Age (1)	Assumed Rate (2)	Participants At Beginning (3)	Participants Retiring: (2) x (3) (4)	(1) x (4) (5)
55	0.04	1,000.00	40.00	2,200.00
56	0.04	960.00	38.40	2,150.40
57	0.04	921.60	36.86	2,101.25
58	0.04	884.74	35.39	2,052.59
59	0.04	849.35	33.97	2,004.46
60	0.04	815.37	32.61	1,956.89
61	0.04	782.76	31.31	1,909.93
62	0.10	751.45	75.14	4,658.97
63	0.10	676.30	67.63	4,260.71
64	0.15	608.67	91.30	5,843.26
65	1.00	517.37	517.37	33,629.15
66	1.00	0.00	0.00	0.00
67	1.00	0.00	0.00	0.00
68	1.00	0.00	0.00	0.00
69	1.00	0.00	0.00	0.00
70	1.00	0.00	0.00	0.00
Average age at retirement				62,767.61

$$62,767.61 \quad / \quad 1,000 \quad = \quad 63$$

Plan Name: SCANA Corporation Retirement Plan
 EIN / PN: 57-0784499/001
 Plan Sponsor: SCANA Corporation
 Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Schedule SB, Part V Statement of Actuarial Assumptions/Methods

Economic Assumptions

Interest rate basis:

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

Interest rates:

	Reflecting Stabilization	Not Reflecting Stabilization
--	--------------------------	------------------------------

Annual rates of increase:

- Compensation: Rates varying by age
- Future Social Security wage bases 3.00%
- Statutory limits on compensation N/A
- Cash balance interest crediting 4.47% for 2024, 4.00% thereafter. 2024 uses the actual 30-year Treasury rate with a September 2023 lookback

Plan-related expenses

Estimated expenses are assumed to be equal to 0.2% of plan assets plus PBGC premiums (rounded) and are included in target normal cost. (\$5,800,000 for 2024)

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.

Rates not reflecting stabilization are used to determine PBGC variable rate premiums if the alternative method is used, and are used to determine the PBGC FTAP and the PBGC 4010 FS.

Plan Name: SCANA Corporation Retirement Plan
EIN / PN: 57-0784499/001
Plan Sponsor: SCANA Corporation
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

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 employees.

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 a 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 described above for Healthy Mortality.

Termination Rates varying by age:

Percentage terminating during the year		
Age	CB Rate	FAP Rate
Under 40	7%	3%
40-44	6%	2%
45-54	6%	1%
55-64	6%	0%
65 and above	0%	0%

Disability None assumed.

Retirement Rates varying by age with average retirement age of 63.

Percentage retiring during the year		
Age	CB Rate	FAP Rate
55 - 58	5%	4%
59 - 61	7%	4%
62 - 63	15%	10%
64	10%	15%
65	35%	100%
66	35%	100%

Plan Name: SCANA Corporation Retirement Plan
EIN / PN: 57-0784499/001
Plan Sponsor: SCANA Corporation
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

67	50%	100%
68 - 69	75%	100%
70	100%	100%

Benefit commencement date:

- Preretirement death benefit
Cash Balance: Upon Death
Final Average Pay: The later of the date of death or the date the participant would have attained age 55
- Deferred vested benefit
Cash Balance: 50% upon termination; 50% normal retirement date
Final Average Pay: Normal retirement date
- Disability benefit
Normal retirement date
- Retirement benefit
Cash Balance: 50% upon termination; 50% normal retirement date
Final Average Pay: Upon termination

Form of payment

Cash Balance: Lump sum

Final Average Pay: Unreduced 60% joint and survivor annuity if married on date payments begin; life annuity if single

Percent married

100%

Spouse age

Wife three years younger than husband

Covered pay

Cash Balance Plan participants:

- Accruals prior to December 31, 2020: Base pay plus overtime plus bonuses plus other incentives, excluding long-term incentive plan payments
- Accruals between January 1, 2021 and December 31, 2023: base plus merit lump sum payments.

Final Average Pay: Annualized base salary.

Loads

None

Plan Name: SCANA Corporation Retirement Plan
EIN / PN: 57-0784499/001
Plan Sponsor: SCANA Corporation
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

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 60% joint and survivor for the FAP plan and lump sum for the cash balance plan.

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.

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

Plan Name: SCANA Corporation Retirement Plan
EIN / PN: 57-0784499/001
Plan Sponsor: SCANA Corporation
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

described in IRS Notice 2009-22). The average asset value must be within 10% of market value, including discounted contributions receivable (discounted using the effective interest rate for the prior plan year.)

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

Benefits not valued

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

Sources of Data and Other Information

The plan sponsor 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. For specific adjustments, please refer to the Data Process report to be delivered in September 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.

Assumptions Rationale – Significant Economic Assumptions

Discount rate

The basis chosen was selected by the plan sponsor from among choices prescribed by law, all of which are based on observed market data over certain periods of time. Specifically, segment rates are based on average bond yields for the 24 months ending with the fourth month preceding the valuation date (September), adjusted as required for ARPA corridors.

Plan Name: SCANA Corporation Retirement Plan
EIN / PN: 57-0784499/001
Plan Sponsor: SCANA Corporation
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Expected return on plan assets

We understand that the expected return on assets assumption reflects the plan sponsor's estimate of future experience for trust asset returns, reflecting the plan's current asset allocation and any expected changes during the current plan year, current market conditions and the plan sponsor's expectations for future market conditions. The analysis was informed by analysis of historical data, recent trends for CPI, GDP growth, and real returns on the various classes of assets held by the trust. Please note the expected long-term return on asset assumption is limited to the third segment rate based on the selected discount rate as described above. No guidance in selecting this assumption was provided by Willis Towers Watson.

Cash balance interest crediting rate

The plan credits interest to cash balance accounts using the blended rate of interest based on 30-year Treasury securities and the applicable segment rates determined pursuant to Code Section 417(e)(3)(D) calculated using a look-back to the rate in effect for the month of September immediately preceding the start of the Plan Year, compounded monthly.

Dominion Energy has selected an expected future 30-year Treasury rate of 4.00% for years after the valuation year. After examining historical variability in this rate, we believe that the selected assumption does not significantly conflict with what would be reasonable based on a combination of market conditions at the measurement date and future expectations consistent with other economic assumptions used, other than the discount rate.

Future compensation increases

Assumed increases were chosen by the plan sponsor and, as required by U.S. GAAP they represent an estimate of future experience.

Assumptions Rationale – Significant Demographic Assumptions

Mortality

Assumptions used for funding purposes are as prescribed by IRC §430(h).

Termination

Termination rates were based on an experience study conducted in 2020, with annual consideration of whether

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

Retirement

Retirement rates were based on an experience study conducted in 2020, with annual consideration of whether any conditions have changed that would be expected to produce different results in the future.

Benefit commencement date for deferred benefits

Preretirement death benefit: Surviving spouses are assumed to begin benefits at the earliest permitted commencement date because ERISA requires benefits to start then unless the spouse elects to defer. If the spouse elects to defer, actuarial increases from the earliest commencement date must be given, so that a later commencement date is expected to be of approximately equal value, and experience indicates that most spouses do take the benefit as soon as it is available.

Deferred vested benefit: For the Cash Balance plan, 50% of deferred vested participants are assumed to commence their benefits upon termination. The other 50% are assumed to begin benefits at age 65 (or current age if later). For the Final Average Pay plan, deferred vested participants are assumed to begin benefits at age 65 (or current age if later). Deferred vested early commencement factors are not subsidized so that the difference between this approach and using assumed commencement rates at multiple ages is not expected to be significant. Deferred vested commencement dates were reviewed during the experience study conducted in 2014.

Form of payment

Cash Balance participants are assumed to choose a lump sum form of payment. The percentage of retiring participants assumed to take a lump sum is based on observed experience.

Final Average Pay (FAP) participants are assumed to choose the unreduced 60% joint and survivor annuity if married. Single FAP participants are assumed to choose a life annuity. The 60% joint and survivor annuity is fully subsidized. The only other joint and survivor offered to FAP participants is the unsubsidized 75% joint and survivor annuity. The percentage of retiring participants

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assumed to take the 60% joint and survivor annuity is based on observed experience.

Prescribed Methods

Funding methods

The methods used for funding purposes as described in this Appendix, 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.

The segment rates used for actuarial equivalence were updated from an applicable month of September 2022 to September 2023 and the mortality table was updated from the 2023 417(e) mortality table to the 2024 417(e) mortality table.

The VEC rate was changed from 4.62% to 5.25%.

The assumed plan-related expenses added to the target normal cost were changed from \$5,600,000 for the prior valuation to \$5,800,000 for the current valuation to account for higher expected expenses to be paid from the trust.

Change in methods since prior valuation

The plan sponsor elected to change the asset method from a 1-year (2 point) averaging to a 2-year (3-point) averaging for the AVA. The change in asset method met the requirements of Revenue Procedure 2017-56 for automatic approval.

There have been no other changes in methods since prior valuation

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Schedule SB, Line 24 Change in Actuarial Assumptions

The Voluntary Employee Contributions (VEC) rate was changed from 4.62% to 5.25%.

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Schedule SB, Line 25 Change in Method

The method for calculating the Actuarial Value of Assets (AVA) was changed from the one-year average to the two-year average. Specifically, the updated method is now as follows:

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.)

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Schedule SB, Part V Summary of Plan Provisions

Plan Provisions

The most recent amendment and restatement reflected in the following plan provisions was effective January 1, 2024.

Covered employees	An employee becomes a plan participant on the first anniversary of his date of employment. Former employees of Carolina Energies are eligible as of January 1, 1983. Former employees of Peoples Gas Company were eligible as of January 1, 1991. Employees of SCANA Hydrocarbons were eligible as of January 1, 1994. Employees of Public Service Company of North Carolina became participants as of July 1, 2000. Employees of SCANA Communications became participants as of July 1, 2001.
Participation date	An employee becomes a plan participant on the first anniversary of his date of employment. Employees hired after December 31, 2013 are not eligible to participate.
Plan status	The plan was amended effective September 1, 2013 to exclude post-2013 hires from plan entry. Effective January 1, 2021 the formula for cash balance participants was changed to be equal to the current Dominion Energy Plan. The January 1, 2024 restatement reflects a freeze of benefit accruals under the Final Average Pay formula effective December 31, 2023 and allows both Cash Balance and Final Average Pay participants to accrue Cash Balance formula benefits after December 31, 2023.

Definitions

Vesting service	A participant is credited with one year of vesting service for each complete calendar year he works, and fractional years, disregarding partial months, for partial years worked.
Benefit service	A participant is credited with one year of benefit service for each complete calendar year he works, and fractional years, disregarding partial months, for partial years worked. Service with some affiliates prior to the adoption of the Plan by the affiliate may be excluded from benefit service. For Final Average Pay benefits, no service is earned after December 31, 2023.

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Pensionable pay Total base pay received in each calendar year (excludes overtime and bonuses), for Final Average Pay Plan participants.

For Cash Balance Plan participants:

- Accruals prior to December 31, 2020: Base pay plus overtime plus bonuses plus other incentives, excluding long-term incentive plan payments.
- Accruals after January 1, 2021: base plus merit lump sum payments.

Average earnings The highest monthly average of compensation during any three consecutive calendar-year period during the five-year period ending on the earliest of termination, early retirement, normal retirement, or postponed retirement dates. In addition, in the participant's final year of employment, it will be assumed that his compensation for the entire year was earned at his final rate of compensation. Annual compensation for any plan year is limited to the maximum compensation under Internal Revenue Code Section 401(a)(17), increasing with future cost-of-living increases. Average earnings used in determining Final Average Pay benefits is based on earnings before December 31, 2023.

Covered compensation The average of the contribution and benefit bases in effect under Section 230 of the Social Security Act for each year in the 35-year period ending in the year in which the participant reaches Social Security Retirement Age, and divided by 12, except that for the participant who terminates employment before Social Security Retirement Age, Covered Compensation will be determined by assuming no increases in the contribution and benefit bases after the year in which his termination occurs.

Interest crediting rate

- Balances accrued prior to December 31, 2020: The rate of interest paid on 30-year treasury securities for the month of December of the year preceding the year of the calculation.
- Balances accrued after January 1, 2021:
The greater of:
 - The rate of interest paid on 30-year treasury securities for the month of September of the year preceding the year of the calculation.
 - An annual interest rate of equal to one and one-half percent (1.50%)

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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.
Special average monthly compensation	The highest average of compensation paid during any three consecutive calendar-year period during the five-year period ending on the earliest of termination, early retirement, normal retirement, or postponed retirement date. The compensation considered for each year cannot exceed the contribution and benefit based in effect under Section 230 of the Social Security Act for that year. In addition, Special Average Monthly Compensation may not exceed Covered Compensation.

Eligibility for Benefits

Normal retirement	The first of the month on or next following attainment of age 65
Early retirement	The first of the month on or next following attainment of age 55 and completion of 20 years of Vesting Service. Former CEI employees electing to remain under the prior plan formula are eligible after age 55 and completion of 10 years of Vesting Service. Former Peoples and former PSNC employees are also eligible after age 55 and completion of 10 years of Vesting Service.
Postponed retirement	Retirement after age 65
Vested termination	Termination for reasons other than death or retirement after completing three years of Vesting Service.
Preretirement spouse benefit	Death while eligible for normal, early, postponed, or deferred vested retirement benefits (must have a surviving spouse for Final Average Pay Plan).
Disability	Eligible to receive Company long-term disability benefits.
Voluntary employee contribution benefits	Only those participants who were making voluntary employee contributions as of December 31, 1988 will be eligible to make contributions after such date.
People's 401(k) plan benefits	Former Peoples employees who had balances in the People's 401(k) Plan as of December 30, 1990.

Benefits Paid Upon the Following Events – Final Average Pay Plan Participants

Plan Name:	SCANA Corporation Retirement Plan
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Normal retirement

Pension Benefit (for all except former CEI employees electing to remain under the prior plan formula): The greatest of:

- (i) 1% of Average Monthly Compensation up to his Covered Compensation, plus 1.5% of the excess of his Average Monthly Compensation over his Covered Compensation, multiplied by years of Benefit Service up to 35 years;
- (ii) the prior plan minimum benefit as of December 31, 1988 (December 31, 1990 for former Peoples employees); or
- (iii) the accrued Benefit as of December 31, 1993.

Prior CEI Benefit (for former CEI employees electing to remain under the prior plan formula): The greatest of:

- (i) 60% of Average Monthly Compensation less 50% of his Special Offset, prorated if the participant has less than 30 years of benefit service, plus 1/2% of Average Monthly Compensation times Benefit Service in excess of 30 years;
- (ii) the Normal Retirement Pension Benefit above;
- (iii) the prior plan minimum benefit as of December 31, 1988; or
- (iv) the Accrued Benefit as of December 31, 1993.

Special Offset: The smaller of:

- (i) 50% of the basic benefit as calculated above but substituting Special Average Monthly Compensation for Average Monthly Compensation; or
- (ii) 0.65% of Special Average Monthly Compensation multiplied by years of Benefit Service, limited to 35 years.

Early retirement

Pension Benefit: The participant's Normal Retirement Pension Benefit based on Benefit Service and Average Monthly Compensation at retirement, reduced 1/3% for each month that commencement of payments precedes the participant's normal retirement date. If the participant had at least 35 years of benefit service, the benefit is not reduced.

Furthermore, in the event that a participant retires after completion of 35 years of Benefit Service but before attainment of age 62, his monthly Normal Retirement Pension Benefit will be increased by an additional .033% times the years and fractional years by which his age at retirement precedes age 62, times his Average Monthly Compensation up to his Covered Compensation, multiplied by years of Benefit Service up to 35 years.

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Benefits for former CEI employees electing to remain under the prior plan formula will be the Prior CEI Benefit, except that it will be determined assuming continued service to normal retirement, and multiplied by Benefit Service at retirement and divided by Benefit Service at normal retirement. Benefits will be reduced by 1/3% for each month that commencement of payments precedes the participant's normal retirement date. If the participant has at least 35 years of benefit service, this reduction will not apply.

Benefits for former People's employees will not be less than their minimum People's benefit, reduced 5/12% for each month that benefit commencement precedes normal retirement age.

Postponed retirement

Pension Benefit: Normal Retirement Benefit described above, based on Benefit Service and Average Monthly Compensation at actual retirement date. Payment of benefit commences at actual retirement date.

Deferred vested termination

Vested Pension Benefit (for all except former CEI employees electing to remain under the prior plan formula): Normal Retirement Pension Benefit based on Benefit Service and Average Monthly Compensation at termination, reduced by 1/3% for each month that payments commence before the participant's normal retirement date. (Peoples minimum benefit reduced 5/12% per month prior to normal retirement).

Vested Prior CEI Benefit (for former CEI employees electing to remain under the prior plan formula): Prior CEI Benefit based on Average Monthly Compensation at termination but assuming continued service to normal retirement and multiplied by the ratio of Benefit Service at termination to Benefit Service at normal retirement. This benefit will be reduced as the Vested Pension Benefit above if payments commence before normal retirement.

Preretirement spouse benefit

60% of the participant's accrued benefit at his death. Monthly payments will begin as of the first day of the month following the participant's death and will continue for the spouse's life.

Disability

Disability Benefit (for all except former CEI participants who elected to remain under the prior plan formula): The Normal Retirement Pension Benefit, first payable at normal retirement date and assuming continued service to normal retirement, and based upon Average Monthly compensation as of disability date.

Prior CEI Disability Benefit (for former CEI participants who elected to remain under the prior plan formula): The participant's

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benefit described in the Prior CEI Benefit first payable at normal retirement, and assuming continued service to normal retirement date, and based upon Average Monthly Compensation as of disability date.

Voluntary employee contribution benefits

Participants can contribute 2% of compensation each year subject to a maximum total contribution of \$9,000.

Contributions are accumulated at an annual rate equal to 120% of the midterm applicable federal rate as in effect for the first month of each plan year, and are refundable upon death prior to retirement.

Additional Retirement Benefits: Additional retirement benefits of 37½% of the total voluntary contribution amount, subject to a maximum annual benefit of \$3,375 are payable at normal retirement. Benefits adjusted as in the Early Retirement Benefit are payable for early retirement and actuarially adjusted benefits are payable for late retirement, with unreduced benefits payable if the participant has 35 years of Benefit Service.

In-Service Withdrawals: No participant will be permitted to withdraw any portion of his Voluntary Employee Contribution Account Balance before his Benefit Commencement Date, except that the Participant who is eligible for the Company's long-term disability benefits may at any time withdraw his entire Account Balance.

People's 401(k) plan benefits

Additional Retirement Benefits: People's 401(k) balance as of December 31, 1990 will be accumulated with interest to payment date, and will be payable as a lump sum, or in several alternative forms. Payments may be made upon normal retirement, early retirement (termination after age 55), postponed retirement, termination, disability, or death.

In-Service Withdrawals: In-service withdrawals are permitted after age 59½, with one withdrawal permitted in a 12-month period.

Hardship Withdrawals: Hardship withdrawals are available if certain conditions are met.

Other Plan Provisions – Final Average Pay Plan Participants

Forms of payment

Normal Forms: Unreduced 60% joint and survivor annuity if married on date payments commence; life annuity if single.

Optional Forms: Former CEI participants who elect to remain under the prior plan provisions may choose actuarially equivalent

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(to a life annuity) 10 year certain and continuous, contingent annuitant or lump-sum options. Former Peoples participants may choose to have their Peoples minimum benefits payable as a lump sum, contingent annuity, or certain and continuous annuity.

All participants may choose an actuarially equivalent (to a life annuity) 75% joint and survivor annuity.

Actuarial equivalence basis is 417(e) minimum basis with a 1-month look-back and 1-year stability period. Certain grandfathered benefits use an alternate conversion basis.

Maximum on benefits and pay

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

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Benefits Paid Upon the Following Events – Cash Balance Plan Participants¹

Opening Account Balance – Non-grandfathered participants For eligible participants as of July 1, 2000 who chose the Cash Balance Plan Option, their opening cash balance account as of July 1, 2000 was equal to the present value of benefits accrued as of June 30, 2000 under the Final Average Pay Plan. For eligible IBEW participants who chose the Cash Balance Plan Option, their opening cash balance account as of July 1, 2001, was equal to the present value of benefits accrued as of June 30, 2001 under the Final Average Pay Plan.

Opening Account Balance – Grandfathered participants Certain participants as of June 30, 2000 were eligible for additional transition credits. Grandfathered participants were those meeting the following criteria:

- 20 years of service or
- 10 years of service and age plus service at least equal to 60.

Grandfathered IBEW participants must have also met these conditions as of June 30, 2000.

Transition credits were designed to permit participants to accumulate cash balance accounts approximately equal to the value of their projected Final Average Pay benefit at their first unreduced retirement age.

Compensation credits Prior to December 31, 2020: At the end of each month the participant's Cash Balance Account is increased by credits of 5% of compensation up to the Social Security Wage Base plus 10% of compensation in excess of the Social Security Wage Base.

After January 1, 2021: Credits shall be based on the Cash Balance Participant's Vesting Service as of the last day of the month prior to the monthly crediting period, determined as follows:

Years of Vesting Service	Pay Credits as a Percentage of Compensation
Less than 5 years	4%
5 years to 14 years	5%
15 years to 24 years	6%
25 of more years	7%

¹ Final Average Pay participants accrue benefits under the Cash Balance formula beginning January 1, 2024, starting with an account balance of zero and with compensation credits based on vesting service inclusive of Final Average Pay vesting service.

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Interest credits	<p>Accruals prior to December 31, 2020: Each month the participant's Cash Balance Account, at the beginning of the month, is increased by interest credits based on 1/12 of the annual interest credit rate.</p> <p>Accruals after January 1, 2021: credited on a daily basis based on the value of the Cash Balance account during the prior day.</p>
Normal retirement	<p>Pension Benefit: The participant's Cash Balance Account is payable as a lump sum or as an equivalent monthly benefit.</p>
Early retirement	<p>Pension Benefit: The participant's Cash Balance Account is payable as a lump sum or as an equivalent immediate or deferred annuity. Alternatively, the participant can leave his Cash Balance Account in the Plan until normal retirement. His balance will continue to receive interest credits until he receives a distribution.</p>
Postponed retirement	<p>Pension Benefit: The participant's Cash Balance Account is payable as a lump sum or as an equivalent monthly benefit.</p>
Deferred vested	<p>Pension Benefit: The participant's Cash Balance Account is payable as a lump sum or as an equivalent immediate or deferred annuity. Alternatively, the participant can leave his Cash Balance Account in the Plan until normal retirement. His balance will continue to receive interest credits until he receives a distribution.</p>
Pre-retirement death benefit	<p>If a participant dies after completing at least 3 years of Vesting Service and before benefit distributions have begun, his surviving spouse or designated beneficiary will receive his Cash Balance Account as a lump sum. His surviving spouse may alternatively elect an equivalent immediate or deferred monthly benefit.</p>
Disability	<p>The participant's Cash Balance Account will continue to increase during his disability with compensation credits and interest credits, based on his compensation immediately prior to his disability.</p>
Voluntary employee contribution benefits	<p>Participants choosing the Cash Balance Plan option will not be permitted to make voluntary employee contributions. The value of a participant's voluntary employee contribution account is included in his Opening Cash Balance Account.</p>

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Other Plan Provisions – Cash Balance Plan Participants

Forms of Payment

Normal Forms: Life annuity if single, actuarially equivalent 50% joint and survivor annuity if married.

Optional Forms: In addition to the above, 100% and 75% joint and survivor annuity, 10-year certain and life annuity, lump sum.

Actuarial equivalence basis is 417(e) minimum basis with a 1-month look-back and 1-year stability period.

Future Plan Changes

Dominion Energy will be amending the plan to continue increased benefits originally calculated with earnings above those defined by the plan for certain final average pay annuitants who commenced between January 2022 and May 2024. This amendment will provide that these benefits continue at the current level and provide that prior payments were appropriate. Future final pay annuities will reflect the standard plan definition of earnings. Liabilities shown in this report reflect these pending increases for pre-2024 commencements as benefits without this increase were not available.

No other future plan changes were recognized. WTW is not aware of any other future plan changes which are required to be reflected.

Changes in Benefits Valued Since Prior Year

The plan was amended to allow Cash Balance formula benefits to accrue after December 31, 2023 for all plan participants.

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

Attained Age	Total Years of Credited Service									
	Under 1	1 to 4	5 to 9	10 to 14	15 to 24	25 to 29	30 to 34	35 to 39	Over 40	
Under 25	Count Average Earnings Average Cash Balance	0 0 0	0 0 0	0 0 0	0 0 0	0 0 0	0 0 0	0 0 0	0 0 0	0 0 0
25 to 29	Count Average Earnings Average Cash Balance	0 0 0	0 0 0	0 0 0	4 4 4	0 0 0	0 0 0	0 0 0	0 0 0	0 0 0
30 to 34	Count Average Earnings Average Cash Balance	0 0 0	0 0 0	0 0 0	72 101,940 61,059	7 7 7	0 0 0	0 0 0	0 0 0	0 0 0
35 to 39	Count Average Earnings Average Cash Balance	0 0 0	0 0 0	0 0 0	102 91,254 62,132	105 98,165 87,960	0 0 0	0 0 0	0 0 0	0 0 0
40 to 44	Count Average Earnings Average Cash Balance	0 0 0	0 0 0	0 0 0	93 94,813 67,113	224 95,317 95,161	10 10 10	2 2 2	0 0 0	0 0 0
45 to 49	Count Average Earnings Average Cash Balance	0 0 0	0 0 0	0 0 0	70 94,434 68,879	237 96,211 107,972	59 98,192 125,505	5 5 5	0 0 0	1 1 1
50 to 54	Count Average Earnings Average Cash Balance	0 0 0	0 0 0	0 0 0	65 92,356 71,773	265 95,068 112,077	105 97,966 150,122	78 103,034 170,954	9 9 9	6 6 6
55 to 59	Count Average Earnings Average Cash Balance	0 0 0	0 0 0	0 0 0	37 107,416 76,364	190 90,591 110,547	95 94,443 147,032	126 93,414 172,083	112 107,596 193,173	12 12 12
60 to 64	Count Average Earnings Average Cash Balance	0 0 0	0 0 0	0 0 0	24 92,539 67,019	115 89,388 111,938	59 93,264 151,400	85 99,926 173,361	111 106,470 187,026	77 102,832 374,561
65 to 69	Count Average Earnings Average Cash Balance	0 0 0	0 0 0	0 0 0	4 85,902 105,420	28 85,902 105,420	13 13 13	14 14 14	11 11 11	59 104,047 458,794
70 & Over	Count Average Earnings Average Cash Balance	0 0 0	0 0 0	0 0 0	2 2 2	3 3 3	1 1 1	1 1 1	2 2 2	3 3 3

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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	35,424,216	5,645,829	28,261,874	69,331,919
2025	27,525,150	2,945,345	27,535,079	58,005,574
2026	24,959,085	1,999,474	26,794,489	53,753,048
2027	23,054,597	2,216,763	26,029,111	51,300,471
2028	23,168,981	3,564,604	25,226,708	51,960,293
2029	23,091,034	2,948,483	24,404,927	50,444,444
2030	23,466,412	3,504,359	23,567,046	50,537,817
2031	24,816,976	3,095,401	22,714,255	50,626,632
2032	24,120,627	2,835,353	21,847,886	48,803,866
2033	23,565,335	3,452,243	20,970,160	47,987,738
2034	23,879,577	3,582,691	20,083,562	47,545,830
2035	24,251,290	3,269,054	19,189,622	46,709,966
2036	23,092,786	3,850,566	18,290,417	45,233,769
2037	22,174,991	3,527,476	17,388,121	43,090,588
2038	22,074,124	4,263,749	16,484,991	42,822,864
2039	21,627,689	3,177,027	15,583,209	40,387,925
2040	19,061,089	3,719,253	14,684,897	37,465,239
2041	18,450,663	3,666,002	13,792,128	35,908,793
2042	17,785,490	3,705,979	12,906,894	34,398,363
2043	17,790,498	3,660,129	12,031,089	33,481,716
2044	17,391,563	3,805,665	11,166,595	32,363,823
2045	16,375,643	3,550,799	10,315,332	30,241,774
2046	16,319,619	3,075,464	9,479,343	28,874,426
2047	15,178,811	3,487,877	8,660,979	27,327,667
2048	14,141,584	3,372,259	7,863,024	25,376,867
2049	12,856,819	3,063,473	7,088,746	23,009,038
2050	12,292,184	2,852,127	6,341,901	21,486,212
2051	11,814,749	3,023,373	5,626,695	20,464,817
2052	9,924,639	2,640,689	4,947,602	17,512,930

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Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving Payments	Total
2053	9,532,919	1,743,891	4,309,127	15,585,937
2054	8,805,231	2,318,036	3,715,448	14,838,715
2055	6,835,060	1,175,310	3,170,064	11,180,434
2056	6,373,008	1,503,810	2,675,557	10,552,375
2057	5,180,134	1,143,898	2,233,340	8,557,372
2058	4,224,901	913,807	1,843,504	6,982,212
2059	3,960,935	658,849	1,504,874	6,124,658
2060	3,256,602	564,607	1,215,061	5,036,270
2061	2,836,992	482,989	970,696	4,290,677
2062	2,457,691	408,458	767,699	3,633,848
2063	2,107,165	341,432	601,503	3,050,100
2064	1,793,161	282,077	467,360	2,542,598
2065	1,510,868	230,302	360,569	2,101,739
2066	1,260,810	185,808	276,661	1,723,279
2067	1,041,680	148,139	211,538	1,401,357
2068	852,185	116,709	161,566	1,130,460
2069	690,427	90,863	123,600	904,890
2070	554,052	69,912	95,003	718,967
2071	440,427	53,165	73,617	567,209
2072	346,830	39,964	57,705	444,499
2073	270,570	29,699	45,899	346,168

Plan Name: SCANA Corporation Retirement Plan
EIN / PN: 57-0784499/001
Plan Sponsor: SCANA Corporation
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

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

Type of Base	Date Established	Initial Amount	Remaining Amortization Period (Years)	Outstanding Balance	Amortization Payment
1. Shortfall	01/01/2024	(19,346,742)	15.00000	(19,346,742)	(1,760,172)
2. Shortfall	01/01/2023	53,726,302	14.00000	51,552,272	4,920,293
Total				32,205,530	3,160,121

Plan Name: SCANA Corporation Retirement Plan
EIN / PN: 57-0784499/001
Plan Sponsor: SCANA Corporation
Valuation Date: January 1, 2024

SCANA CORPORATION RETIREMENT PLAN

Employer ID No: 57-0784499

Plan Number: 001

**FORM 5500, SCHEDULE H, PART IV, LINE 4i—
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
AS OF DECEMBER 31, 2024**

(a)	(b) Identity of Issuer, Borrower, Lessor or Similar Party	(c) Description of Investment, including maturity date, rate of interest, collateral, par, or maturity value	(d) Cost	(e) Current Value
Corporate debt instruments:				
	MNSN HOLDINGS INC	Corporate debt instruments	\$ 1,988	\$ 1,988
	SVB FINANCIAL TRUST PFD 11.000%	Corporate debt instruments	172,140	147,980
			<u>174,128</u>	<u>149,968</u>
		Total investments	\$ 174,128	\$ 149,968

* A party-in-interest as defined by ERISA.
See