FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, [| D.C. 20549 |
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | |
|--------------------------|-----|--|--|--|--|--|--|--|
| OMB Number: 3235-0287 | | | | | | | | |
| Estimated average burden | | | | | | | | |
| hours per response: | 0.5 | | | | | | | |

| | tion 1(b). | nuc. occ | | Filed | | | | | | | rities Exchang | | f 1934 | | | lno | ours per r | esponse: | | 0.5 |
|--|-------------------------|---|--------------|----------------------------|----------------|---|---|---|-------|-------------------------|---|--|--------------|--|-------------|---|---|----------|------------|--|
| 1. Name and Address of Reporting Person* DAY DIANA L | | | | | 2. lss | or Section 30(h) of the Investment Company Act of 1940 2. Issuer Name and Ticker or Trading Symbol SEMPRA [SRE] | | | | | | | | 5. Relationship of Reporting Person(s) to Is (Check all applicable) Director 10% Of V Officer (give title Other (| | | | | o Ow | ner |
| (Last) 488 8TH | (Fi AVENUE | irst) (Middle) | | | | 3. Date of Earliest Transaction (Month/Day/Year) 01/02/2024 | | | | | | | | X | below | r) `` | | | elow) | |
| (Street) SAN DII | reet) AN DIEGO CA 92101 | | | | 4. If <i>i</i> | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | |
| (City) | l., | Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. | | | | | | | | | | | | | | | | | | |
| | | Table | l - I | Non-Deriva | tive \$ | Secu | rities | Ac | quire | d, D | isposed of | f, or B | enefic | ially | / Owne | ed | | | | |
| 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye | | | ear) i | Execution Date, | | | 3. Transaction Disposed Of (D) (Instr. 3, 4 Securities Acquired (A) of Code (Instr. 3, 4 Securities Acquired (A | | | d (A) or r. 3, 4 and | 5. Amount of Securities Beneficially Owned Following Reported | | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | |
| | | | | | | | | | Code | v | Amount | (A) or (D) | Price | Turing a settle m/ | | | | | (111501.4) | |
| Common | Stock | | | 01/02/202 | 24 | | | | F | | 1,110.85 | D | \$75.8 | 32 | 12,89 | 4.12 | D | | | |
| Common | Stock | | | 01/02/202 | 24 | | | | Α | | 3,588 | A | \$0 | | 16,482.12 D | | | | | |
| Common | Stock | | | | | | | | | | | | | | 418. | 61 Pla | | rings | | |
| | | Та | ble I | II - Derivati (e.g., ρι | | | | | | | posed of, , convertib | | | | Owned | k | | | | |
| Derivative Conversion Date Security Or Exercise (Month/Day/Year) | | | Exe if ar | | | 5. Number of Derivative Securitie Acquired (A) or Disposed of (D) (Instr. 3, and 5) | | vative urities uired or osed)) r. 3, 4 | Expi | ration | ercisable and Date y/Year) | 7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4) | | | | 9. Numb derivati Securiti Benefic Owned Followin Reporte Transac (Instr. 4) | ve Owners es Form: ally Direct (or Indir ng (I) (Insti | | D) ect | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | | | | | | | | or Number | | | | | | | |

Explanation of Responses:

DIANA L. DAY BY: James M. Spira, Associate General Counsel of Sempra Energy and Attorney-In-Fact

Title Shares

01/03/2024

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.

^{*} If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

^{**} Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).