

<p style="text-align: center;">Form 5500</p> <p style="font-size: small;">Department of the Treasury Internal Revenue Service</p> <hr/> <p style="font-size: small;">Department of Labor Employee Benefits Security Administration</p> <hr/> <p style="font-size: x-small;">Pension Benefit Guaranty Corporation</p>	<p>Annual Return/Report of Employee Benefit Plan</p> <p style="font-size: x-small;">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).</p> <p style="text-align: center;">▶ Complete all entries in accordance with the instructions to the Form 5500.</p>	<p style="font-size: x-small;">OMB Nos. 1210-0110 1210-0089</p> <hr/> <p style="font-size: large; text-align: center;">2023</p> <hr/> <p style="text-align: center;">This Form is Open to Public Inspection</p>
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Part I Annual Report Identification Information
 For calendar plan year 2023 or fiscal plan year beginning 10/01/2023 and ending 09/30/2024

A This return/report is for: a multiemployer plan a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.)

a single-employer plan a DFE (specify) _____

B This return/report is: the first return/report the final return/report

an amended return/report a short plan year return/report (less than 12 months)

C If the plan is a collectively-bargained plan, check here.

D Check box if filing under: Form 5558 automatic extension the DFVC program

special extension (enter description)

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

Part II Basic Plan Information—enter all requested information

<p>1a Name of plan <u>CENTRAL ELECTRIC POWER ASSOCIATION 401(K) PLAN</u></p>	<p>1b Three-digit plan number (PN) ▶ <u>002</u></p>
<p>2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>CENTRAL ELECTRIC POWER ASSOCIATION</u></p> <p><u>107 EAST MAIN STREET</u> <u>CARTHAGE, MS 39051-4224</u></p>	<p>1c Effective date of plan <u>10/01/1995</u></p> <p>2b Employer Identification Number (EIN) <u>64-0132702</u></p> <p>2c Plan Sponsor's telephone number <u>601-267-5671</u></p> <p>2d Business code (see instructions) <u>221100</u></p>

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	07/14/2025	BRIAN LONG
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address <input checked="" type="checkbox"/> Same as Plan Sponsor	3b Administrator's EIN	
	3c Administrator's telephone number	
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	132
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.....	6a(1)	98
	6a(2)	105
	6b	8
	6c	23
	6d	136
	6e	0
	6f	136
	6g(1)	124
6g(2)	128	
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:
2E 2G 2J

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)	9b Plan benefit arrangement (check all that apply)
(1) <input checked="" type="checkbox"/> Insurance	(1) <input checked="" type="checkbox"/> Insurance
(2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts	(2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts
(3) <input checked="" type="checkbox"/> Trust	(3) <input checked="" type="checkbox"/> Trust
(4) <input type="checkbox"/> General assets of the sponsor	(4) <input type="checkbox"/> General assets of the sponsor

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

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

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

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

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

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

11c Enter the Receipt Confirmation Code for the 2023 Form M-1 annual report. If the plan was not required to file the 2023 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 A
(Form 5500)**

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Insurance 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.**

▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).

OMB No. 1210-0110

2023

This Form is Open to Public Inspection

For calendar plan year 2023 or fiscal plan year beginning **10/01/2023** and ending **09/30/2024**

A Name of plan CENTRAL ELECTRIC POWER ASSOCIATION 401(K) PLAN		B Three-digit plan number (PN) ▶ 002
C Plan sponsor's name as shown on line 2a of Form 5500 CENTRAL ELECTRIC POWER ASSOCIATION		D Employer Identification Number (EIN) 64-0132702

Part I Information Concerning Insurance Contract Coverage, Fees, and Commissions Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.

1 Coverage Information:

(a) Name of insurance carrier
VOYA RETIREMENT INSURANCE AND ANNUITY COMPANY

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
71-0294708	86509	GH2229	133	10/01/2023	09/30/2024

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid 36367	(b) Total amount of fees paid 0
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3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid
LITTLE BRADLEY **24 OLD HICKORY CV JACKSON, TN 35305**

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
36367			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid
LITTLE STEPHEN **24 OLD HICKORY CV JACKSON, TN 38305**

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
0			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

Part II	Investment and Annuity Contract Information	
Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.		
4	Current value of plan's interest under this contract in the general account at year end	5230041
5	Current value of plan's interest under this contract in separate accounts at year end.....	13248613
6	Contracts With Allocated Funds:	
a	State the basis of premium rates ▶	
b	Premiums paid to carrier	6b
c	Premiums due but unpaid at the end of the year.....	6c
d	If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. Specify nature of costs ▶	6d
e	Type of contract: (1) <input type="checkbox"/> individual policies (2) <input type="checkbox"/> group deferred annuity (3) <input type="checkbox"/> other (specify) ▶	
f	If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶ <input type="checkbox"/>	
7	Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)	
a	Type of contract: (1) <input type="checkbox"/> deposit administration (2) <input type="checkbox"/> immediate participation guarantee (3) <input type="checkbox"/> guaranteed investment (4) <input type="checkbox"/> other ▶	
b	Balance at the end of the previous year	7b 5577496
c	Additions: (1) Contributions deposited during the year	7c(1) 140238
	(2) Dividends and credits	7c(2)
	(3) Interest credited during the year	7c(3) 120117
	(4) Transferred from separate account.....	7c(4) 146737
	(5) Other (specify below)	7c(5)
	(6) Total additions	7c(6) 407092
d	Total of balance and additions (add lines 7b and 7c(6))	7d 5984588
e	Deductions:	
	(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1) 746052
	(2) Administration charge made by carrier	7e(2) 8496
	(3) Transferred to separate account.....	7e(3)
	(4) Other (specify below)	7e(4)
(5) Total deductions	7e(5) 754548	
f	Balance at the end of the current year (subtract line 7e(5) from line 7d)	7f 5230040

Part III Welfare Benefit Contract Information
 If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

- a** Health (other than dental or vision)
- b** Dental
- c** Vision
- d** Life insurance
- e** Temporary disability (accident and sickness)
- f** Long-term disability
- g** Supplemental unemployment
- h** Prescription drug
- i** Stop loss (large deductible)
- j** HMO contract
- k** PPO contract
- l** Indemnity contract
- m** Other (specify) ▶

9 Experience-rated contracts:

a	Premiums: (1) Amount received	9a(1)		
	(2) Increase (decrease) in amount due but unpaid.....	9a(2)		
	(3) Increase (decrease) in unearned premium reserve	9a(3)		
	(4) Earned ((1) + (2) - (3)).....		9a(4)	0
b	Benefit charges (1) Claims paid.....	9b(1)		
	(2) Increase (decrease) in claim reserves	9b(2)		
	(3) Incurred claims (add (1) and (2)).....		9b(3)	0
	(4) Claims charged		9b(4)	
c	Remainder of premium: (1) Retention charges (on an accrual basis) --			
	(A) Commissions	9c(1)(A)		
	(B) Administrative service or other fees	9c(1)(B)		
	(C) Other specific acquisition costs	9c(1)(C)		
	(D) Other expenses	9c(1)(D)		
	(E) Taxes	9c(1)(E)		
	(F) Charges for risks or other contingencies.....	9c(1)(F)		
	(G) Other retention charges	9c(1)(G)		
	(H) Total retention		9c(1)(H)	0
	(2) Dividends or retroactive rate refunds. (These amounts were <input type="checkbox"/> paid in cash, or <input type="checkbox"/> credited.)		9c(2)	
d	Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement		9d(1)	
	(2) Claim reserves		9d(2)	
	(3) Other reserves.....		9d(3)	
e	Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).)		9e	

10 Nonexperience-rated contracts:

a	Total premiums or subscription charges paid to carrier	10a	
b	If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount	10b	

Specify nature of costs.

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A?..... Yes No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

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> 2023 This Form is Open to Public Inspection.
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For calendar plan year 2023 or fiscal plan year beginning **10/01/2023** and ending **09/30/2024**

A Name of plan CENTRAL ELECTRIC POWER ASSOCIATION 401(K) PLAN	B Three-digit plan number (PN) ▶	002
C Plan sponsor's name as shown on line 2a of Form 5500 CENTRAL ELECTRIC POWER ASSOCIATION	D Employer Identification Number (EIN) 64-0132702	

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)

VOYA RETIREMENT INSURANCE

71-0294708

(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?
27	INVESTMENT ADVISORY	2574	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)

(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"/>

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500) <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.	OMB No. 1210-0110 <hr/> 2023 <hr/> This Form is Open to Public Inspection.
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For calendar plan year 2023 or fiscal plan year beginning 10/01/2023 and ending 09/30/2024

A Name of plan <u>CENTRAL ELECTRIC POWER ASSOCIATION 401(K) PLAN</u>	B Three-digit plan number (PN)	<u>002</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>CENTRAL ELECTRIC POWER ASSOCIATION</u>	D Employer Identification Number (EIN) <u>64-0132702</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)
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a Name of MTIA, CCT, PSA, or 103-12 IE:	<u>CARILLON EAGLE SM CAP GRW R6</u>		
b Name of sponsor of entity listed in (a):	<u>CENTRAL ELECTRIC POWER ASSOCIATION</u>		
c EIN-PN <u>64-0132702-002</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	<u>364</u>
a Name of MTIA, CCT, PSA, or 103-12 IE:	<u>COHEN&STEERS INST RL SHARES</u>		
b Name of sponsor of entity listed in (a):	<u>CENTRAL ELECTRIC POWER ASSOCIATION</u>		
c EIN-PN <u>64-0132702-002</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	<u>249</u>
a Name of MTIA, CCT, PSA, or 103-12 IE:	<u>VANGRD BALANCED INDEX FND ADM</u>		
b Name of sponsor of entity listed in (a):	<u>CENTRAL ELECTRIC POWER ASSOCIATION</u>		
c EIN-PN <u>64-0132702-002</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	<u>418796</u>
a Name of MTIA, CCT, PSA, or 103-12 IE:	<u>VANGRD GROWTH INDEX FUND ADM</u>		
b Name of sponsor of entity listed in (a):	<u>CENTRAL ELECTRIC POWER ASSOCIATION</u>		
c EIN-PN <u>64-0132702-002</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	<u>4630994</u>
a Name of MTIA, CCT, PSA, or 103-12 IE:	<u>VANGRD HEALTH CARE FUND ADM</u>		
b Name of sponsor of entity listed in (a):	<u>CENTRAL ELECTRIC POWER ASSOCIATION</u>		
c EIN-PN <u>64-0132702-002</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	<u>249</u>
a Name of MTIA, CCT, PSA, or 103-12 IE:	<u>VANGRD MD-CAP GRW INDEX FD ADM</u>		
b Name of sponsor of entity listed in (a):	<u>CENTRAL ELECTRIC POWER ASSOCIATION</u>		
c EIN-PN <u>64-0132702-002</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	<u>249</u>
a Name of MTIA, CCT, PSA, or 103-12 IE:	<u>VANGRD TRGT RETIRE 2070 FD</u>		
b Name of sponsor of entity listed in (a):	<u>CENTRAL ELECTRIC POWER ASSOCIATION</u>		
c EIN-PN <u>64-0132702-002</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	<u>4919</u>

a Name of MTIA, CCT, PSA, or 103-12 IE: DFA US TARGETED VL PORT INS		
b Name of sponsor of entity listed in (a): CENTRAL ELECTRIC POWER ASSOCIATION		
c EIN-PN 64-0132702-002	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2801
a Name of MTIA, CCT, PSA, or 103-12 IE: VANGRD TRGT RETIRE 2065 FD		
b Name of sponsor of entity listed in (a): CENTRAL ELECTRIC POWER ASSOCIATION		
c EIN-PN 64-0132702-002	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 28295
a Name of MTIA, CCT, PSA, or 103-12 IE: FRANKLIN UTILITIES FUND R6		
b Name of sponsor of entity listed in (a): CENTRAL ELECTRIC POWER ASSOCIATION		
c EIN-PN 64-0132702-002	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 71334
a Name of MTIA, CCT, PSA, or 103-12 IE: VANGRD TRGT RETIRE 2060 FD		
b Name of sponsor of entity listed in (a): CENTRAL ELECTRIC POWER ASSOCIATION		
c EIN-PN 64-0132702-002	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 95389
a Name of MTIA, CCT, PSA, or 103-12 IE: PGIM HIGH YIELD FUND R6		
b Name of sponsor of entity listed in (a): CENTRAL ELECTRIC POWER ASSOCIATION		
c EIN-PN 64-0132702-002	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 75834
a Name of MTIA, CCT, PSA, or 103-12 IE: VANGRD MID-CAP INDEX FUND ADM		
b Name of sponsor of entity listed in (a): CENTRAL ELECTRIC POWER ASSOCIATION		
c EIN-PN 64-0132702-002	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 99305
a Name of MTIA, CCT, PSA, or 103-12 IE: VANGRD MID-CAP VL INDX FND ADM		
b Name of sponsor of entity listed in (a): CENTRAL ELECTRIC POWER ASSOCIATION		
c EIN-PN 64-0132702-002	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 99247
a Name of MTIA, CCT, PSA, or 103-12 IE: VANGRD TRGT RETIRE 2030 FD		
b Name of sponsor of entity listed in (a): CENTRAL ELECTRIC POWER ASSOCIATION		
c EIN-PN 64-0132702-002	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 164130
a Name of MTIA, CCT, PSA, or 103-12 IE: AMERICAN FUNDS EUROPACIFIC R6		
b Name of sponsor of entity listed in (a): CENTRAL ELECTRIC POWER ASSOCIATION		
c EIN-PN 64-0132702-002	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 156348
a Name of MTIA, CCT, PSA, or 103-12 IE: VANGRD TRGT RETIRE 2040 FD		
b Name of sponsor of entity listed in (a): CENTRAL ELECTRIC POWER ASSOCIATION		
c EIN-PN 64-0132702-002	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 192363

a Name of MTIA, CCT, PSA, or 103-12 IE: DFA US LARGE COMP PORT INS		
b Name of sponsor of entity listed in (a): CENTRAL ELECTRIC POWER ASSOCIATION		
c EIN-PN 64-0132702-002	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 207763
a Name of MTIA, CCT, PSA, or 103-12 IE: VANGRD SMALL-CAP INDEX FND ADM		
b Name of sponsor of entity listed in (a): CENTRAL ELECTRIC POWER ASSOCIATION		
c EIN-PN 64-0132702-002	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 191100
a Name of MTIA, CCT, PSA, or 103-12 IE: VANGRD TRGT RETIRE INC FD		
b Name of sponsor of entity listed in (a): CENTRAL ELECTRIC POWER ASSOCIATION		
c EIN-PN 64-0132702-002	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 183950
a Name of MTIA, CCT, PSA, or 103-12 IE: VANGRD TRGT RETIRE 2050 FD		
b Name of sponsor of entity listed in (a): CENTRAL ELECTRIC POWER ASSOCIATION		
c EIN-PN 64-0132702-002	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 307237
a Name of MTIA, CCT, PSA, or 103-12 IE: VANGRD TRGT RETIRE 2055 FD		
b Name of sponsor of entity listed in (a): CENTRAL ELECTRIC POWER ASSOCIATION		
c EIN-PN 64-0132702-002	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 447662
a Name of MTIA, CCT, PSA, or 103-12 IE: VOYA INTERMEDIATE BOND FUND R6		
b Name of sponsor of entity listed in (a): CENTRAL ELECTRIC POWER ASSOCIATION		
c EIN-PN 64-0132702-002	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 545124
a Name of MTIA, CCT, PSA, or 103-12 IE: VANGRD TRGT RETIRE 2025 FD		
b Name of sponsor of entity listed in (a): CENTRAL ELECTRIC POWER ASSOCIATION		
c EIN-PN 64-0132702-002	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 558784
a Name of MTIA, CCT, PSA, or 103-12 IE: AMERICAN FUNDS NW PRSPCTV R6		
b Name of sponsor of entity listed in (a): CENTRAL ELECTRIC POWER ASSOCIATION		
c EIN-PN 64-0132702-002	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 624073
a Name of MTIA, CCT, PSA, or 103-12 IE: VANGRD LARGE-CAP INDEX FD ADM		
b Name of sponsor of entity listed in (a): CENTRAL ELECTRIC POWER ASSOCIATION		
c EIN-PN 64-0132702-002	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 684898
a Name of MTIA, CCT, PSA, or 103-12 IE: VANGRD TRGT RETIRE 2045 FD		
b Name of sponsor of entity listed in (a): CENTRAL ELECTRIC POWER ASSOCIATION		
c EIN-PN 64-0132702-002	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1075303

a Name of MTIA, CCT, PSA, or 103-12 IE: **VANGRD EQUITY INCOME FUND ADM**

b Name of sponsor of entity listed in (a): **CENTRAL ELECTRIC POWER ASSOCIATION**

c EIN-PN 64-0132702-002	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 998732
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a Name of MTIA, CCT, PSA, or 103-12 IE: **VANGRD TRGT RETIRE 2035 FD**

b Name of sponsor of entity listed in (a): **CENTRAL ELECTRIC POWER ASSOCIATION**

c EIN-PN 64-0132702-002	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1383119
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a Name of MTIA, CCT, PSA, or 103-12 IE: **VOYA FIXED PLUS ACCOUNT III**

b Name of sponsor of entity listed in (a): **CENTRAL ELECTRIC POWER ASSOCIATION**

c EIN-PN 64-0132702-002	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 5230041
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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)
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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)
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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)
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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)
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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> 2023 This Form is Open to Public Inspection
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For calendar plan year 2023 or fiscal plan year beginning **10/01/2023** and ending **09/30/2024**

A Name of plan CENTRAL ELECTRIC POWER ASSOCIATION 401(K) PLAN	B Three-digit plan number (PN) ▶	002
C Plan sponsor's name as shown on line 2a of Form 5500 CENTRAL ELECTRIC POWER ASSOCIATION	D Employer Identification Number (EIN) 64-0132702	

Part I	Asset and Liability Statement
---------------	--------------------------------------

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

		(a) Beginning of Year	(b) End of Year
Assets			
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(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)	9848969	13248613
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	5577497	5230041
(15) Other	1c(15)		

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	15426466	18478654
Liabilities			
g Benefit claims payable	1g		
h Operating payables	1h		
i Acquisition indebtedness	1i		
j Other liabilities	1j		
k Total liabilities (add all amounts in lines 1g through 1j)	1k	0	0
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	15426466	18478654

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)	313226	
(B) Participants	2a(1)(B)	474501	
(C) Others (including rollovers)	2a(1)(C)	66870	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A), (B), (C), and line 2a(2)	2a(3)		854597
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		0
(2) Dividends:			
(A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	372134	
(D) Total dividends. Add lines 2b(2)(A), (B), and (C)	2b(2)(D)		372134
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets:			
(A) Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets:			
(A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)	2867469	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts.....	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts.....	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts.....	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities.....	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total	2d		4094200

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	977319	
(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)		977319
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)		
(2) Contract administrator fees.....	2i(2)	64693	
(3) Recordkeeping fees.....	2i(3)		
(4) IQPA audit fees.....	2i(4)		
(5) Investment advisory and investment management fees	2i(5)		
(6) Bank or trust company trustee/custodial fees	2i(6)		
(7) Actuarial fees	2i(7)		
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)		
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		64693
j Total expenses. Add all expense amounts in column (b) and enter total	2j		1042012

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		3052188
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: REA, SHAW, GIFFIN & STUART, LLP

(2) EIN: 64-0295411

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		500000
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.)		X	
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 _____.

**CENTRAL ELECTRIC POWER ASSOCIATION
401(k) PLAN**

FINANCIAL STATEMENTS

September 30, 2024 and 2023

C O N T E N T S

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O. Keith Evans
W. Douglas Coleman
Dena C. Lagendijk
Shawna L. Post
John David Oubre
Noah D. Davis

Of Counsel
George R. Rea
Charles E. Rea
Richard L. James
Joyce C. Graham

REA, SHAW, GIFFIN & STUART, LLP
CERTIFIED PUBLIC ACCOUNTANTS

2415 Ninth Street
P.O. Box 2090
Meridian, MS 39301
(601) 693-2841

611 Spring Street
P.O. Box 562
Waynesboro, MS 39367
(601) 735-2317

Member:
American Institute
Of Certified Public
Accountants,
Division for
CPA Firms

Mississippi Society
of Certified Public
Accountants

INDEPENDENT AUDITORS' REPORT

To the Administrative Committee
Central Electric Power Association 401(k) Plan
Carthage, Mississippi

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

We have performed an audit of the accompanying financial statements of Central Electric Power Association 401(k) 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 September 30, 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 audit of the 2024 and 2023 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 audit 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 a certification from a qualified institution as of and for the years ended September 30, 2024 and 2023, stating that the certified investment information, as described in Note 9 to the financial statements, is complete and accurate.

Opinion

In our opinion, based on our audit and on the procedures performed as described in the Auditors' Responsibilities for the audit of the Financial Statements section —

- the amounts and disclosures in the financial statements referred to above, 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 financial statements referred to above 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 audit in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the Auditors' Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of Central Electric Power Association 401(k) 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 Central Electric Power Association 401(k) Plan's ability to continue as a going concern for one year after the date 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.

Auditors' 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 of the Financial Statements section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors' 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 generally accepted auditing standards 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 generally accepted auditing standards, 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 Central Electric Power Association 401(k) 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 Central Electric Power Association 401(k) Plan's ability to continue as a going concern for a reasonable period of time.

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

The supplemental schedule of assets held at end of the year and schedule of reportable transactions are presented for purposes of additional analysis and is not a required part of the financial statements but is supplemental 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 generally accepted auditing standards. 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 its form and content, is 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, is 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).

Rea, Shaw, Giffin & Stuart

REA, SHAW, GIFFIN & STUART, LLP

**CENTRAL ELECTRIC POWER ASSOCIATION
401(k) PLAN**

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
September 30, 2024 and 2023

	2024	2023
ASSETS		
Investments		
Participant directed investments, at contract value	\$ 5,230,041	\$ 5,577,497
Participant directed investments, at fair value	<u>13,248,613</u>	<u>9,848,969</u>
Total investments	<u>\$ 18,478,654</u>	<u>\$ 15,426,466</u>
Net assets available for benefits	<u>\$ 18,478,654</u>	<u>DFA US Large C</u>

The Notes to Financial Statements are an integral part of these statements.

**CENTRAL ELECTRIC POWER ASSOCIATION
401(k) PLAN**

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
For the Years Ended September 30, 2024 and 2023

	2024	2023
ADDITIONS		
Additions to net assets attributed to:		
Investment income:		
Voya fixed account	\$ 111,620	\$ 84,444
Mutual funds	<u>3,119,488</u>	<u>1,466,334</u>
Total investment income	<u>\$ 3,231,108</u>	<u>\$ 1,550,778</u>
Contributions:		
Participants	\$ 474,501	\$ 430,576
Employer	313,226	270,817
Rollovers	<u>66,870</u>	<u>-</u>
Total contributions	<u>\$ 854,597</u>	<u>\$ 701,393</u>
Total additions	<u>\$ 4,085,705</u>	<u>\$ 2,252,171</u>
DEDUCTIONS		
Deductions from net assets attributed to:		
Benefits paid to participants	\$ 977,319	\$ 816,598
Service fees	<u>56,198</u>	<u>49,239</u>
Total deductions	<u>\$ 1,033,517</u>	<u>\$ 865,837</u>
Net increase	<u>\$ 3,052,188</u>	<u>\$ 1,386,334</u>
NET ASSETS AVAILABLE FOR BENEFITS		
Beginning of year	<u>15,426,466</u>	<u>14,040,132</u>
End of year	<u>\$ 18,478,654</u>	<u>\$ 15,426,466</u>

The Notes to Financial Statements are an integral part of these statements.

**CENTRAL ELECTRIC POWER ASSOCIATION
401(k) PLAN**

NOTES TO FINANCIAL STATEMENTS

Note 1. Description of the Plan

The following description of the Central Electric Power Association (“Company”) 401(k) Plan (“Plan”) provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan’s provisions.

General

The Plan is a defined contribution plan covering all full-time employees of the Company who have one year of service. It is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Eligibility

To be eligible for participation, employees must have completed one year of service (with a minimum of 1,000 hours) and be 21 years of age. Employees enter the Plan on the first day of the month coinciding with or next following the date the eligibility requirements are met.

Contributions

Each year, participants may contribute up to 20% of pretax or taxable annual compensation (\$23,000 maximum as of January 1, 2024, \$22,500 maximum as of January 1, 2023), as defined in the Plan. Participants who have attained age 50 before the end of the plan year are eligible to make catch-up contributions of up to \$7,500. Participants may also contribute amounts representing distributions from other qualified defined benefit or contribution plans. The Company contributes 100% of the first 4% of base compensation that a participant contributes to the Plan. Contributions are subject to certain limitations.

Participant accounts

Each participant account is credited with the participant’s contribution, the Company’s contribution, plan earnings (or losses), and charged with an allocation of administrative expenses. Allocations are based on participant earnings or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant’s vested account.

Note 1. Description of the Plan (continued)

Vesting

Participants are immediately vested in their contributions plus actual earnings thereon. Vesting in the Company's contribution portion of their accounts is based on years of continuous service. A participant is 100% vested after five years of credited service.

Investment options

Upon enrollment in the Plan, a participant may direct contributions in up to twenty-nine options. With certain limitations, participants may change their investment options at any time.

Participant loans

The Plan does not allow participant loans.

Insurance

A fidelity bond insures the Plan for \$500,000.

Payment of benefits

On termination of service due to death, disability, or retirement, a participant may elect to receive either a lump-sum amount equal to the value of the participant's vested interest in his or her account, installments over the participants assumed life expectancy or partial withdrawals. Upon termination of employment for reasons other than death, disability or retirement, benefits are generally paid in a lump sum as soon as administratively feasible.

Forfeited accounts

At September 30, 2024 and 2023, forfeited non-vested accounts totaled \$12,465 and \$8,166, respectively. Forfeitures are used to reduce future employer contributions. Forfeitures were \$4,062 and \$915 for the years ended September 30, 2024 and 2023, respectively. No forfeitures were used to offset employer contributions during the year then ended September 30, 2024. Forfeitures used to offset employer contributions were \$12,285 during the year then ended September 30, 2023.

Note 2. Summary of Significant Accounting Policies

Basis of accounting

The financial statements of the Plan are prepared on the accrual basis of accounting.

Investments held by a defined contribution plan are required to be reported at fair value, except for fully benefit-responsive investment contracts. Contract value is the relevant measure for that portion of the net assets available for benefits of a defined contribution plan attributable to fully benefit-responsive investment contracts, because contract value is the amount participants normally would receive if they were to initiate permitted transactions under the terms of the Plan.

Use of estimates

The preparation of financial statements in accordance with accounting principles generally accepted in the United States of America requires the plan administrator to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results may differ from those estimates.

Investment valuation and income recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date.

Fair Value - Mutual funds are valued at quoted market prices, which represent the fair value of shares held by the Plan at year end.

Payment of benefits

Benefits are recorded when paid.

Operating expenses

The Plan's expenses are paid either by the Plan or the sponsor, as provided by the Plan document. Expenses that are paid directly by the sponsor are excluded from these financial statements. Certain expenses incurred in connection with the general administration of the Plan, which are paid by the Plan, are recorded as deductions in the accompanying statements of changes in net assets available for benefits. In addition, certain investment related expenses are included in net change in the fair value of investments presented in the accompanying statements of changes in net assets available for benefits.

Date of management's review

Subsequent events were evaluated through July 11, 2025, which is the date the financial statements were available to be issued.

Note 3. Fair Value Measurements

Except for the fully benefit responsive investment contract, the Plan's investments are reported at fair value in the accompanying statements of net assets available for benefits.

ASC 820, *Fair Value Measurements*, establishes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The three levels of the fair value hierarchy under ASC 820 are described as follows:

Level 1 – valuations are based on quoted prices in active markets for identical assets or liabilities,

Level 2 – valuations are based on observable inputs (assumptions obtained from independent sources) for the asset or liability, either directly or indirectly, and

Level 3 – valuations are based on unobservable inputs (assumptions based on the best information available) that are significant to the fair value of the assets or liabilities.

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

The Plan's investments in mutual funds are valued at the daily closing price, a Level 1 fair value. Mutual funds held by the Plan are open-end mutual funds that are registered with the SEC. These funds are required to publish their daily net asset value and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded. The investment in the Voya Fixed Plus Account III is reported at contract value and is therefore excluded from the fair value hierarchy.

The following table set forth, by level within the fair value hierarchy, the Plan's investments at fair value as of September 30, 2024:

	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
<u>September 30, 2024</u>				
Mutual funds at fair value				
Target date funds	\$ 4,441,400	\$ -	\$ -	\$ 4,441,400
Balanced funds	418,796	-	-	418,796
Bond funds	545,124	-	-	545,124
International funds	780,420	-	-	780,420
Large cap funds	6,522,388	-	-	6,522,388
Mid cap funds	348,771	-	-	348,771
Small cap funds	191,464	-	-	191,464
Real estate fund	<u>250</u>	<u>-</u>	<u>-</u>	<u>250</u>
Total assets at fair value	<u>\$ 13,248,613</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 13,248,613</u>

Note 3. Fair Value Measurements (continued)

The following table set forth, by level within the fair value hierarchy, the Plan's investments at fair value as of September 30, 2023:

	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
<u>September 30, 2023</u>				
Mutual funds at fair value				
Target date funds	\$ 3,644,031	\$ -	\$ -	\$ 3,644,031
Balanced funds	44,235	-	-	44,235
Bond funds	450,138	-	-	450,138
International funds	586,205	-	-	586,205
Large cap funds	4,668,287	-	-	4,668,287
Mid cap funds	253,484	-	-	253,484
Small cap funds	<u>202,589</u>	<u>-</u>	<u>-</u>	<u>202,589</u>
Total assets at fair value	<u>\$ 9,848,969</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 9,848,969</u>

Note 4. Contract with Insurance Company and Related Fees

The Plan entered into a contract with VRIAC to manage the Plan assets. VRIAC maintains the contributions in individual participant accounts. The accounts are credited with earnings on the underlying investments and reduced for plan withdrawals and administrative expenses charged by VRIAC. The Plan, through deductions from individual participant accounts, paid VRIAC \$47,823 and \$41,641 in fees and commissions in 2024 and 2023, respectively. These fees are considered party-in-interest transactions.

In addition to fees paid to VRIAC, the Plan holds investments in the Voya fixed account and several mutual funds managed by Voya. Voya is considered a party-in-interest and transactions in these investments are considered party-in-interest transactions. As of September 30, 2024 and 2023, investments totaling \$5,775,164 and \$6,027,635, respectively, were held in such investments.

Note 5. Fixed Return Investment Option

As of September 30, 2024 and 2023, the Plan maintained a guaranteed investment contract (GIC) related investment option, the Voya Fixed Plus Account III issued by VRIAC (a party-in-interest). The contracts underlying these investment options are considered to be fully benefit responsive in accordance with ASC Topic 962, "Plan Accounting - Defined Contribution Pension Plans." As of September 30, 2024 and 2023, the contract value of the investments in these fixed return accounts was \$5,230,041 and \$5,577,497 respectively.

Note 5. Fixed Return Investment Option (continued)

The Voya fixed investment options guarantee principal and a minimum guaranteed interest rate for the life of the product. The crediting interest rate to participants for the contract for the years then ended September 30, 2024 and 2023 was 2.10%. The guaranteed minimum crediting interest rate for the contract for the years then ended September 30, 2024 and 2023 was 1.35%. VRIAC makes this guarantee, and although VRIAC may credit a higher interest rate, the credited rate will not fall below the guaranteed minimum. Amounts allocated to the fixed investment options are held in the general account of VRIAC. The safety of the interest rate guaranteed under the contract is dependent on VRIAC's claims paying ability.

VRIAC's determination of credited interest rates reflect a number of factors, including mortality and expense risks, interest rate guarantees, the investment income earned on invested assets, and the amortization of any capital gains and/or losses realized on the sale of invested assets. A market value adjustment may apply to amounts withdrawn at the request of the contract holder.

Certain events limit the ability of the Plan to transact at contract value with the issuer. Such events include the following: (i) amendments to the plan documents (including complete or partial plan termination or merger with another plan) (ii) changes to Plan's prohibition on competing investment options or deletion of equity wash provisions; or (iii) the failure of the trust to qualify for exemption from federal income taxes or any required prohibited transaction exemption under ERISA. The plan administrator does not believe that the occurrence of any such event which would limit the Plan's ability to transact at contract value with participants is probable.

VRIAC has the option, with certain restrictions, to payout 100% of the current value of the contract after completion of five contract years.

Note 6. Plan Termination

Although it has not expressed any intent 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 of ERISA. In the event of plan termination, participants will become 100% vested in their accounts.

Note 7. Income Tax Status

The Plan was restated as of January 1, 2022 and the new plan document is based upon the FIS Business Systems LLC Non-Standardized Pre-Approved Profit Sharing / Money Purchase / CODA Plan, a prototype plan. This prototype plan received an opinion letter dated June 2020 in which the IRS stated that it was in compliance with the applicable requirements of the Internal Revenue Code (Code). In addition, the opinion letter stated that an employer who adopts this prototype plan may rely on the prototype plan's opinion letter with respect to the qualification of its plan under the Code.

Note 7. Income Tax Status (continued)

Accounting principles generally accepted in the United States of America require Plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the Internal Revenue Service. The plan administrator has analyzed the tax positions taken by the Plan and has concluded that as of September 30, 2024 and 2023, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The plan administrator believes it is no longer subject to income tax examinations for years prior to 2021.

Note 8. Information Certified by the Trustee

The Plan's investments are held by Voya Institutional Trust Company (a subsidiary of Voya Retirement Insurance and Annuity Company). The Plan's financial information, including investment values, investment income, and fees is included in the financial statements and supplemental schedule based on information certified by the trustees as complete and accurate in accordance with Section 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

The account balances stated at fair value and contract value and certified by the trustee as of September 30, 2024 and 2023 were \$18,478,654 and \$15,426,466, respectively.

Note 9. Other Operating Expenses

The Company paid administrative expenses of \$0 and audit fees of \$11,485 during Plan year 2024. The Company paid administrative expenses of \$0 and audit fees of \$11,393 during Plan year 2023. Audit fees are paid to Rea, Shaw, Giffin & Stuart, LLP, a party-in-interest.

In addition to fees paid by the Company, other parties-in-interest are paid directly by the Plan, or indirectly by VRIAC, for other services provided to the Plan. Alexander Thompson & Arnold ("ATA") is directly compensated for the preparation of the Form 5500 and compliance testing. The Plan paid ATA \$8,435 and \$7,598 for these services for the years ended September 30, 2024 and 2023, respectively. Central Service Association is indirectly compensated for Plan contract negotiation.

Note 10. Operational Errors

In fiscal 2021 and 2022, the Plan had terminated employees on which vesting was incorrectly calculated resulting in incorrect forfeitures. In fiscal 2021, there was one participant who erroneously forfeited \$3,266 and in fiscal 2022, there were two participants who erroneously forfeited \$12,285. Plan management has reviewed and corrected historical vesting information for all participants and the erroneous forfeitures were fully distributed to these participants in fiscal 2023. The distributions were made from the forfeiture account.

Note 11. Claims Payable

The Plan does not record liabilities for benefit claims payable for payments requested prior to but paid after fiscal year end. There were \$992,560 and \$0 of claims requested but unpaid as of September 30, 2024 and 2023, respectively. Additionally, as of September 30, 2023, there was \$15,551 due to terminated participants due to errors in the calculation of the participants' vesting.

Note 12. Risks and Uncertainties

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

SUPPLEMENTAL INFORMATION

**CENTRAL ELECTRIC POWER ASSOCIATION
401(k) PLAN**

**SCHEDULE OF ASSETS (HELD AT END OF YEAR)
September 30, 2024**

Attachment to Schedule H (Form 5500)
EI # 64-0132702 Plan # 002
Item 4i

(a)	(b) Identity of issuer, borrower, lessor or similar party	(c) Description of instrument including maturity date, rate of interest, collateral, par, or maturity value	(d) Cost**	(e) Current value
*	Voya Retirement Insurance and Annuity Co.	Voya Fixed Plus Account III ***	\$ -	\$ 5,230,041
	American Funds	American Funds EuroPacific R6	-	156,347
	American Funds	American Funds New Perspectives R6	-	624,073
	Dimensional Fund Advisors	DFA US Large Company Portfolio Ins	-	207,764
	Dimensional Fund Advisors	DFA US Targeted VI Portfolio Ins	-	2,800
	Franklin Utilities	Franklin Utilities Fund R6	-	71,334
	PGIM Investments	PGIM High Yield Fund R6	-	75,834
	Carillon Eagle	Carrillon Eagle Small Cap Growth Fund R6	-	364
	Cohen & Steers	Cohen & Steers Institutional Realty Shares, Inc.	-	250
	Vanguard	Vanguard Balanced Index Fund Adm	-	418,796
	Vanguard	Vanguard Growth Index Fund Adm	-	4,630,994
	Vanguard	Vanguard Health Care Fund Adm	-	250
	Vanguard	Vanguard Mid-Cap Growth Index Fund Adm	-	250
	Vanguard	Vanguard Equity Income Fund Adm	-	998,732
	Vanguard	Vanguard Large-Cap Index Fund Adm	-	684,898
	Vanguard	Vanguard Mid-Cap Index Fund Adm	-	99,305
	Vanguard	Vanguard Mid-Cap VI Index Fund Adm	-	99,247
	Vanguard	Vanguard Small-Cap Index Fund Adm	-	191,100
*	Voya Retirement Insurance and Annuity Co.	Voya Intermediate Bond Fund R6	-	545,124

**CENTRAL ELECTRIC POWER ASSOCIATION
401(k) PLAN**

SCHEDULE OF ASSETS (HELD AT END OF YEAR) (continued)
September 30, 2024

(a)	(b) Identity of issuer, borrower, lessor or similar party	(c) Description of instrument including maturity date, rate of interest, collateral, par, or maturity value	(d) Cost**	(e) Current value
	Vanguard	Vanguard Target Retirement 2025 Fund	\$ -	\$ 558,784
	Vanguard	Vanguard Target Retirement 2030 Fund	-	164,130
	Vanguard	Vanguard Target Retirement 2035 Fund	-	1,383,119
	Vanguard	Vanguard Target Retirement 2040 Fund	-	192,363
	Vanguard	Vanguard Target Retirement 2045 Fund	-	1,075,303
	Vanguard	Vanguard Target Retirement 2050 Fund	-	307,237
	Vanguard	Vanguard Target Retirement 2055 Fund	-	447,662
	Vanguard	Vanguard Target Retirement 2060 Fund	-	95,389
	Vanguard	Vanguard Target Retirement 2065 Fund	-	28,295
	Vanguard	Vanguard Target Retirement 2070 Fund	-	4,919
	Vanguard	Vanguard Target Retirement Inc Fund	-	183,950
	Total investments		<u>\$ -</u>	<u>\$ 18,478,654</u>

* Party-in-interest

** Information in column (d) is omitted as all investments are participant directed

*** Market value was \$5,230,041

**CENTRAL ELECTRIC POWER ASSOCIATION
401(k) PLAN**

**SCHEDULE OF REPORTABLE TRANSACTIONS
For the Year Ended September 30, 2024**

Attachment to Schedule H (Form 5500)

EI # 64-0132702 Plan # 002

Item 4j

(a) Identity of party involved	(b) Description of asset	(c) Purchase Price	(d) Selling Price	(e) Lease Rental	(f) Expense Incurred with Transaction	(g) Cost of Asset	(h) Current Value of Asset	(i) Net Gain or Loss
<i>Sales</i>								
MFS Investment Management	MFS Growth Fund R6	\$ -	\$ 2,230,952	\$ -	\$ -	\$ 2,230,952	\$ -	\$ -
Vanguard	Vanguard US Growth Fund Adm	-	2,353,916	-	-	2,353,916	-	-
	DFA US Large Company Portfolio Ins							
<i>Purchases</i>								
Vanguard	Vanguard Growth Index Fund Adm	\$ 4,584,868	\$ -	\$ -	\$ -	\$ 4,584,868	\$ 4,630,994	\$ -

**CENTRAL ELECTRIC POWER ASSOCIATION
401(k) PLAN**

SCHEDULE OF REPORTABLE TRANSACTIONS
For the Year Ended September 30, 2024

Attachment to Schedule H (Form 5500)
EI # 64-0132702 Plan # 002
Item 4j

(a) Identity of party involved	(b) Description of asset	(c) Purchase Price	(d) Selling Price	(e) Lease Rental	(f) Expense Incurred with Transaction	(g) Cost of Asset	(h) Current Value of Asset	(i) Net Gain or Loss
<i>Sales</i>								
MFS Investment Management	MFS Growth Fund R6	\$ -	\$ 2,230,952	\$ -	\$ -	\$ 2,230,952	\$ -	\$ -
Vanguard	Vanguard US Growth Fund Adm	-	2,353,916	-	-	2,353,916	-	-
	DFA US Large Company Portfolio Ins							
<i>Purchases</i>								
Vanguard	Vanguard Growth Index Fund Adm	\$ 4,584,868	\$ -	\$ -	\$ -	\$ 4,584,868	\$ 4,630,994	\$ -

Schedule H, Line 4i
Schedule of Assets (Held At End of Year)

Name of Plan:

▶ Central Electric Power Association 401(k) Plan

Employer Identification Number: ▶ 64-0132702

For plan year (beginning/ending): ▶ 10/1/2023 - 09/30/2024

Plan number: ▶ 002

(a)	(b) Identity of issue, 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
X	Voya	Carillon Eagle Sm Cap Grw R6		363.56
X	Voya	Cohen&Steers Inst RI Shares		249.33
X	Voya	Vangrd Balanced Index Fnd Adm		418796.39
X	Voya	Vangrd Growth Index Fund Adm		4630994.14
X	Voya	Vangrd Health Care Fund Adm		249.32
X	Voya	Vangrd Md-Cap Grw Index Fd Adm		249.33
X	Voya	Vangrd Trgt Retire 2070 Fd		4919.4
X	Voya	DFA US Targeted VI Port Ins		2800.8
X	Voya	Vangrd Trgt Retire 2065 Fd		28294.84
X	Voya	Franklin Utilities Fund R6		71334.44
X	Voya	American Funds Wash Mutual R6		0
X	Voya	American Funds Am Balanced R6		0
X	Voya	Vangrd Trgt Retire 2060 Fd		95389.17
X	Voya	Neuberg Berm Sm Cp Grw Fnd R6		0
X	Voya	PGIM High Yield Fund R6		75834.3
X	Voya	Vangrd Mid-Cap Index Fund Adm		99304.82
X	Voya	Vangrd Mid-Cap VI Indx Fnd Adm		99247.49
X	Voya	Vangrd Trgt Retire 2030 Fd		164130
X	Voya	American Funds EuroPacific R6		156347.61
X	Voya	Vangrd Trgt Retire 2040 Fd		192363.41
X	Voya	DFA US Large Comp Port Ins		207762.95
X	Voya	Vangrd Small-Cap Index Fnd Adm		191100.36
X	Voya	Vangrd Trgt Retire Inc Fd		183950.25
X	Voya	Vangrd Trgt Retire 2050 Fd		307236.8
X	Voya	Vangrd Wellesley Inc Fnd Adm		0
X	Voya	Vangrd Trgt Retire 2055 Fd		447661.56
X	Voya	Voya Intermediate Bond Fund R6		545123.52
X	Voya	Vangrd Trgt Retire 2025 Fd		558784.34
X	Voya	American Funds Nw Prspctv R6		624072.68
X	Voya	Vangrd Large-Cap Index Fd Adm		684898.44
X	Voya	Vangrd Trgt Retire 2045 Fd		1075302.61
X	Voya	Vangrd Equity Income Fund Adm		998732.21
X	Voya	Vangrd Trgt Retire 2035 Fd		1383118.85
X	Voya	Vangrd U.S. Growth Fund Adm		0
X	Voya	MFS Growth Fund R6		0
X	Voya	Voya Fixed Plus Account III		5230040.75