

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code). ▶ Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089 2023 This Form is Open to Public Inspection
--	---	---

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) _____ ☐ 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
1a	Name of plan EVERGY, INC. RETIREMENT PLAN
1b	Three-digit plan number (PN) ▶ 001
1c	Effective date of plan 07/01/1956
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) EVERGY, INC. P. O. BOX 418679 KANSAS CITY, MO 64141-9679
2b	Employer Identification Number (EIN) 82-2733395
2c	Plan Sponsor's telephone number 816-556-2200
2d	Business code (see instructions) 221100

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.	07/10/2025	THERESA DODSON, DIRECTOR, BENEFITS
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	07/10/2025	THERESA DODSON, DIRECTOR, BENEFITS
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address ☒ Same as Plan Sponsor	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 6909
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) 2763 6a(2) 2754 6b 2595 6c 1049 6d 6398 6e 449 6f 6847 6g(1) 6g(2) 6h 4
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 1E 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) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
--	--

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

a Pension Schedules

- (1) ☒ **R** (Retirement Plan Information)
- (2) ☐ **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
- (3) ☒ **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary
- (4) ☐ **DCG** (Individual Plan Information) – Number Attached _____
- (5) ☐ **MEP** (Multiple-Employer Retirement Plan Information)

b General Schedules

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

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

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

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

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

11c Enter the Receipt Confirmation Code for the 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 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 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	
▶ 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 EVERGY, INC. 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 EVERGY, INC.	D Employer Identification Number (EIN) 82-2733395
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B	F Prior year plan size: ☐ 100 or fewer ☐ 101-500 ☒ More than 500

Part I	Basic Information			
1	Enter the valuation date: Month 10 Day 01 Year 2023			
2	Assets:			
a	Market value	2a	1043593921	
b	Actuarial value	2b	1111396934	
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	3383	831049805	831049805
b	For terminated vested participants	1153	88041425	88041425
c	For active participants	2763	349216117	384277970
d	Total	7299	1268307347	1303369200
4	If the plan is in at-risk status, check the box and complete lines (a) and (b) ☐			
a	Funding target disregarding prescribed at-risk assumptions	4a		
b	Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b		
5	Effective interest rate	5	5.29 %	
6	Target normal cost			
a	Present value of current plan year accruals	6a	31885641	
b	Expected plan-related expenses	6b	6700000	
c	Target normal cost	6c	38585641	

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 LAUREN BRUNO Type or print name of actuary WILLIS TOWERS WATSON US LLC Firm name 7733 FORSYTH BOULEVARD SUITE 1350 ST. LOUIS, MO 63105 Address of the firm	06/30/2025 Date 23-07647 Most recent enrollment number 314-719-5800 Telephone number (including area code)
--------------------------	--	--

Part II Beginning of Year Carryover and Prefunding Balances		
	(a) Carryover balance	(b) Prefunding balance
7 Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	113876365
8 Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	43269461
9 Amount remaining (line 7 minus line 8)	0	70606904
10 Interest on line 9 using prior year's actual return of <u>10.93</u> %	0	7717335
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>5.45</u> %		0
b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
c Total available at beginning of current plan year to add to prefunding balance		0
d Portion of (c) to be added to prefunding balance		0
12 Other reductions in balances due to elections or deemed elections	0	9622665
13 Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	68701574

Part III Funding Percentages			
14 Funding target attainment percentage	14	80.00	%
15 Adjusted funding target attainment percentage	15	80.12	%
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	87.02	%
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
12/18/2024	20414000	0			
Totals ►			18(b)	20414000	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	19175762
20 Quarterly contributions and liquidity shortfalls:		
a Did the plan have a "funding shortfall" for the prior year?	☒ Yes ☐ No	
b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner?	☒ Yes ☐ No	
c If line 20a is "Yes," see instructions and complete the following table as applicable:		
Liquidity shortfall as of end of quarter of this plan year		
(1) 1st	(2) 2nd	(3) 3rd
0	0	0
		(4) 4th 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: 5.00 %	3rd segment: 5.74 %
			☐ N/A, full yield curve used
b Applicable month (enter code).....			21b 4
22 Weighted average retirement age			22 61
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	38585641
b Excess assets, if applicable, but not greater than line 31a		31b	0
32 Amortization installments:	Outstanding Balance	Installment	
a Net shortfall amortization installment	260673840	25699252	
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	64284893
	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	53726706	53726706
36 Additional cash requirement (line 34 minus line 35).....		36	10558187
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c).....		37	19175762
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)		38a	8617575
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances		38b	8617575
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 C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	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.	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 EVERGY, INC. RETIREMENT PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 EVERGY, INC.	D Employer Identification Number (EIN) 82-2733395	

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
THE BANK OF NEW YORK MELLON
13-5160382

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
SEI INVESTMENTS COMPANY
23-1707341

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
WILLIS TOWERS WATSON US LLC
53-0181291

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
MERCER (US) INC
13-2834414

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

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

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

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

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

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

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

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

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)

SEI INVESTMENT MANAGEMENT CORP

04-2452803

(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 52	INVESTMENT MANAGER	1642262	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

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

MERCER (US) INC

13-2834414

(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?
65 50	NONE	594663	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

J.P.MORGAN INVESTMENT

13-3200244

(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	NONE	400875	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

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 16 50	NONE	351638	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

THE BANK OF NEW YORK MELLON

13-5160382

(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?
18 19 21 51	TRUSTEE	206029	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

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

CBIZ CPAS P.C.

43-1947695

(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	NONE	51250	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

SPENCER FANE BRITT & BROWNE

44-0561981

(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?
29 50	NONE	12810	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

MHM RETIREMENT PLAN SOLUTIONS

34-1874260

(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?
50 99	NONE	5005	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 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 EVERGY, INC. RETIREMENT PLAN	B Three-digit plan number (PN) ▶	001
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 EVERGY, INC.	D Employer Identification Number (EIN) 82-2733395	

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: SEI SPECIAL SITUATIONS FUND

b Name of sponsor of entity listed in (a): SEI TRUST COMPANY

c EIN-PN 27-0977453-038	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 54080725
-------------------------	-----------------	---

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

b Name of sponsor of entity listed in (a): THE BANK OF NEW YORK MELLON

c EIN-PN 25-6078093-023	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 8437586
-------------------------	-----------------	--

a Name of MTIA, CCT, PSA, or 103-12 IE: JPMCB STRATEGIC PROPERTY FUND

b Name of sponsor of entity listed in (a): JPMORGAN CHASE BANK, NA

c EIN-PN 13-6038770-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 38984384
-------------------------	-----------------	---

a Name of MTIA, CCT, PSA, or 103-12 IE: SEI STRUCTURED CREDIT COLLECTIVE

b Name of sponsor of entity listed in (a): SEI TRUST COMPANY

c EIN-PN 75-3251893-024	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 99273041
-------------------------	-----------------	---

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

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

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

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

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

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

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

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

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

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

Part II Information on Participating Plans (to be completed by DFEs, other than DCGs)

(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)

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

SCHEDULE H (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		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 EVERGY, INC. RETIREMENT PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 EVERGY, INC.	D Employer Identification Number (EIN) 82-2733395	

Part I	Asset and Liability Statement		
1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.			
Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	1606000	20414000
(2) Participant contributions	1b(2)		
(3) Other	1b(3)	16590	133110
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	8502	116302
(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)	181456242	200775736
(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)	820776736	906176496
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other.....	1c(15)	39874862	32531572

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	1043738932	1160147216
Liabilities			
g Benefit claims payable	1g		
h Operating payables	1h	993497	1344969
i Acquisition indebtedness	1i		
j Other liabilities	1j		
k Total liabilities (add all amounts in lines 1g through 1j)	1k	993497	1344969
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	1042745435	1158802247

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)	20414000	
(B) Participants	2a(1)(B)		
(C) Others (including rollovers)	2a(1)(C)		
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B), (C), and line 2a(2)	2a(3)		20414000
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	9238	
(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)		9238
(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)	30910801	
(D) Total dividends. Add lines 2b(2)(A) , (B), and (C)	2b(2)(D)		30910801
(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)		
(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)		19943416
(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)		144818481
c Other income	2c		2015959
d Total income. Add all income amounts in column (b) and enter total	2d		218111895

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	93622619	
(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)		93622619
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)		
(3) Recordkeeping fees.....	2i(3)		
(4) IQPA audit fees.....	2i(4)	51250	
(5) Investment advisory and investment management fees	2i(5)	2043137	
(6) Bank or trust company trustee/custodial fees	2i(6)	206029	
(7) Actuarial fees	2i(7)	351638	
(8) Legal fees	2i(8)	12810	
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)	5767600	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		8432464
j Total expenses. Add all expense amounts in column (b) and enter total	2j		102055083

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		116056812
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: **CBIZ CPAS P.C.**

(2) EIN: **43-1947695**

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.)		☒	
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.)		☒	
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.)		☒	
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.)		☒	
e Was this plan covered by a fidelity bond?	☒		15000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		☒	
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?		☒	
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?		☒	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	☒		
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.)	☒		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		☒	
l Has the plan failed to provide any benefit when due under the plan?		☒	
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 540716.

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Retirement Plan Information This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 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 EVERGY, INC. RETIREMENT PLAN		B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 EVERGY, INC.		D Employer Identification Number (EIN) 82-2733395
Part I	Distributions	
All references to distributions relate only to payments of benefits during the plan year.		
1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....		1 0
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): 13-5160382		
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		3 116
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		
For Paperwork Reduction Act Notice, see the Instructions for Form 5500.		
Schedule R (Form 5500) 2023 v. 230707		

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: ☐ last contributing employer ☐ alternative ☐ reasonable approximation (see instructions for required attachment)	14a	
b The plan year immediately preceding the current plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment)	14b	
c The second preceding plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment)	14c	

15 Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:		
a The corresponding number for the plan year immediately preceding the current plan year	15a	
b The corresponding number for the second preceding plan year	15b	

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

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

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

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

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

a Enter the percentage of plan assets held as:

Public Equity: 42.0 % Private Equity: 4.0 % Investment-Grade Debt and Interest Rate Hedging Assets: 29.0 %

High-Yield Debt: 14.0 % Real Assets: 4.0 % Cash or Cash Equivalents: 1.0 % Other: 6.0 %

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 _____.



EVERGY, INC. RETIREMENT PLAN

Employer ID No.: 82-2733395

Plan Number: 001

Financial Statements as of and for the Years Ended
September 30, 2024 and 2023, Supplemental Schedules as
of and for the
Year Ended September 30, 2024, and
Independent Auditors' Report

EVERGY, INC.
RETIREMENT PLAN

TABLE OF CONTENTS

	Page
INDEPENDENT AUDITORS' REPORT – CBIZ CPAs P.C.	1–3
FINANCIAL STATEMENTS:	
Statements of Net Assets Available for Benefits as of September 30, 2024 and 2023	4
Statements of Changes in Net Assets Available for Benefits for the Years Ended September 30, 2024 and 2023	5
Notes to Financial Statements as of and for the Years Ended September 30, 2024 and 2023	6–17
SUPPLEMENTAL SCHEDULES:	
Form 5500 — Schedule H, Part IV, Line 4i — Schedule of Assets (Held at End of Year) as of September 30, 2024	19
Form 5500 — Schedule H, Part IV, Line 4j — Schedule of Reportable Transactions for the Year Ended September 30, 2024	20
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 AUDITORS' REPORT

Participants and Administrative Committee
Eversource Energy, Inc. Retirement Plan

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

We have performed the audits of the financial statements of the Eversource Energy, Inc. 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 September 30, 2024 and 2023, 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 September 30, 2024 and 2023 and for the years then ended, stating that the certified investment information, as described in Note 5 to the financial statements, is complete and accurate.

Opinion

In our opinion, based on our audits and on the procedures performed as described in the Auditors' 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 Auditors' 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 audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

Responsibilities of Management for the 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 within one year after the date that the financial statements are issued or 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 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 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 these 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 certifications, 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 September 30, 2024 and the supplemental schedule of reportable transactions for the year ended September 30, 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).

CBIZ CPAs P.C.

Kansas City, Missouri
July 14, 2025

EVERGY, INC. RETIREMENT PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS AS OF SEPTEMBER 30, 2024 AND 2023

	2024	2023
ASSETS:		
Investments — at fair value:		
Registered investment companies	\$ 906,176,496	\$ 820,776,736
Common/collective trusts	200,775,736	181,456,242
Limited partnership interests	32,531,572	39,874,862
Interest bearing cash	<u>116,302</u>	<u>8,502</u>
Total investments	<u>1,139,600,106</u>	<u>1,042,116,342</u>
RECEIVABLES:		
Employer contributions receivable	20,414,000	1,606,000
Accrued investment income	14,498	16,590
Miscellaneous income receivable	<u>118,612</u>	<u>-</u>
Total receivables	<u>20,547,110</u>	<u>1,622,590</u>
Total assets	<u>1,160,147,216</u>	<u>1,043,738,932</u>
LIABILITIES:		
Accrued administrative expenses	<u>1,344,969</u>	<u>993,497</u>
NET ASSETS AVAILABLE FOR BENEFITS	<u>\$ 1,158,802,247</u>	<u>\$ 1,042,745,435</u>

See notes to financial statements.

**STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
FOR THE YEARS ENDED SEPTEMBER 30, 2024 AND 2023**

	2024	2023
EMPLOYER CONTRIBUTIONS	\$ 20,414,000	\$ 12,636,094
INVESTMENT INCOME:		
Net appreciation in fair value of investments	166,500,204	90,398,573
Dividends	30,910,801	31,221,241
Other income	286,890	271,201
Net investment income	197,697,895	121,891,015
Total additions	218,111,895	134,527,109
DEDUCTIONS:		
Benefits paid directly to participants	93,622,619	270,245,875
Administrative expenses	8,432,464	8,254,544
Total deductions	102,055,083	278,500,419
NET INCREASE (DECREASE) IN NET ASSETS	116,056,812	(143,973,310)
NET ASSETS AVAILABLE FOR BENEFITS:		
Beginning of year	1,042,745,435	1,186,718,745
End of year	\$ 1,158,802,247	\$ 1,042,745,435
See notes to financial statements.		

EVERGY, INC. RETIREMENT PLAN

NOTES TO FINANCIAL STATEMENTS

AS OF AND FOR THE YEARS ENDED SEPTEMBER 30, 2024 AND 2023

1. DESCRIPTION OF THE PLAN

The following description of the Evergy, Inc. Retirement Plan (“the Plan”) provides only general information. Participants should refer to the plan document for more complete information.

General — The Plan is a non-contributory defined benefit pension plan that provides pension, death and disability benefits. The Plan is comprised of three separate plans of benefits: Evergy Metro Plan of Benefits, Evergy Kansas Central, Inc. (“EKC”) Plan of Benefits, and the Wolf Creek Nuclear Operating Corporation (“WCNOC”) Plan of Benefits.

The Evergy Metro Plan of Benefits covers substantially all employees of Evergy Metro, Inc. hired prior to January 1, 2014 and not covered by a collective bargaining agreement. Collective bargaining employees with service prior to January 1, 1967 are also participants in the Plan. Prior to 1967, both salaried and collective bargaining employees of Evergy Metro, Inc. were included in a predecessor plan whose assets were held at MetLife Life and Annuity Company of Connecticut (“MetLife”) under a group annuity contract. Effective January 1, 1967, a separate funding arrangement was established for collective bargaining employees. At the time separate funding of the plans commenced, neither Evergy Metro, Inc. nor MetLife attempted to segregate the assets between the two plans and no such segregation of the assets has subsequently been undertaken. The contract is now fully settled and will no longer be reported as a separate asset or liability under the Plan.

The EKC Plan of Benefits covers substantially all employees hired prior to May 31, 2018. The EKC Plan of Benefits was closed to non-union members hired or rehired on or after May 30, 2018. Effective January 1, 2020, WCNOC employees became employees of EKC, but retained benefits under this plan under the WCNOC plan of benefits.

The Administrative Committee of Evergy controls and manages the operation and administration of the Plan. The Bank of New York Mellon/BNY Mellon, N.A. (“BNYM”) is custodian and trustee of the Plan. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (“ERISA”).

The provisions of the Plan are as follows:

Evergy Metro Pension Plan of Benefits — Old Program formula - Participants hired prior to January 1, 2008 accrue their benefit under the Old Program Formula except for those who chose to move to the New Program formula during a “pension choice” election offering in 2007. Employees with five years of vesting service, as defined by the Plan, are entitled to pension benefits upon retirement. Pension benefits are provided to participants based upon years of service, age, salary and a formula multiplier of 1.67%. Retirement benefits are paid to pensioners or beneficiaries in various forms of joint and survivor annuities, including a lump sum payment option.

New Program formula – Participants hired January 1, 2008 or later and those who elected the New Program formula during the “pension choice” offering in 2007 accrue their benefit based on the New Program formula. Employees with five years of vesting service, as defined by the Plan, are entitled to pension benefits upon retirement. Pension benefits are provided to participants based upon years of service, age, salary and a formula multiplier of 1.25%. Participants in this program receive a higher match in the Evergy, Inc. 401(k) Savings Plan to offset the lower formula multiplier. Retirement benefits are paid to pensioners or beneficiaries in various forms of joint and survivor annuities, including a lump sum payment option that was added effective January 1, 2019. Participants electing the lump sum option must take their entire accrued benefit in the form of a lump sum.

Participants who have a frozen benefit under the former Aquila Retirement Plan and who became active employees of Great Plains Energy upon the date Aquila was acquired receive an additional benefit upon retirement based on their months of service with Great Plains Energy. The additional benefit is equal to 4% of the frozen accrued benefit multiplied by years of service with GPE after July 14, 2008. The additional benefit is prorated for partial years of service.

Metro Death and Disability Retirement Benefits – Retirement death benefits are provided to a fully vested participant's surviving spouse. Retirement benefits for permanent and total disability occurring prior to retirement are provided for those participants with at least five years of service. Death and disability retirement benefits are paid in monthly installments.

EKC Pension Plan of Benefits – Employees are eligible to participate after one year of service which is defined as having worked at least 1,000 hours in a 12 consecutive month period beginning with the date of employment or any calendar year beginning thereafter. Participants are classified as Group B and Group C Members under the EKC Plan of Benefits. Group B Members are those represented by Local 304 and Local 1523 of the International Brotherhood of Electrical Workers. All other participants in the EKC Plan of Benefits are Group C Members. Participants are further classified as Cash Balance Members or Final Average Earnings ("FAE") Members. Effective January 1, 2011, the EKC Plan of Benefits was amended to provide that employees that are represented by Local 304 or Local 1523 of the International Brotherhood of Electrical Workers and were hired after December 31, 2011, are Cash Balance Members whose benefit is calculated using the cash balance component of the EKC Plan of Benefits. Employees that are classified as Group C Members and were hired after December 31, 2001, are also Cash Balance Members whose benefit is calculated using the cash balance component of the EKC Plan of Benefits. All other members participate in the EKC Plan of Benefits as FAE Members. Group B and Group C FAE members are limited to 35 years of credited service in their formula.

Members of the EKC Plan of Benefits vest after five years of service. Effective January 1, 2008, the EKC Plan of Benefits was amended to provide vesting of benefits after three years of service for FAE and Cash Balance Members who are employed on or after January 1, 2008. Effective April 23, 2008, the EKC Plan of Benefits was amended to provide vesting of benefits after three years of service for Cash Balance Members and five years of service for FAE Members.

FAE Members – Members will receive a monthly pension benefit equal to the accrued benefit determined, based on credited service and final average earnings. The accrued benefit for Group B Members is based on the sum of 1.5% of final average earnings as defined in the EKC Plan of Benefits multiplied by the years of credited service under the EKC Plan of Benefits up to 20 years and 1.2% of final average earnings multiplied by the years of credited service in excess of 20 years. The accrued benefit for Group C Members is based on the sum of 1.5% of Final Average Earnings plus 0.4% of final average earnings in excess of covered compensation as defined in the EKC Plan of Benefits multiplied by the years of credited service up to 20 years and 0.8% of final average earnings multiplied by the years of credited service in excess of 20 years, plus an additional amount which is equal to 0.4% of final average earnings in excess of covered compensation as defined in the EKC Plan of Benefits multiplied by the years of credited service in excess of 20 years. Certain Members are subject to accrued benefit definitions under the EKC Plan of Benefits based on provisions phased-in for prior amendment periods.

Normal retirement occurs at age 65 with early retirement options available under the EKC Plan of Benefits with corresponding benefit reductions as provided in the EKC Plan of Benefits. The normal form of benefit under the EKC Plan of Benefits is a life annuity if the retiree is single or a 50% joint and survivor annuity if married. Additionally, the EKC Plan of Benefits recognizes the 75% contingent annuity as the "optional survivor annuity" for a married retiree. The EKC Plan of Benefits provides optional forms of benefit at the election of the Member (with spousal consent) of a 10-year certain annuity, life annuity or 100% joint and survivor annuity. Effective December 1, 2015, the EKC Plan of Benefits was amended to allow eligible FAE Members to receive a lump sum payment option. An eligible FAE Member is any FAE member who is a Group C Member who has terminated employment with the Employer on or after December 1, 2015, and any FAE Member who is a Group B Member who has both (i) transferred

from Group C to Group B membership on or after December 1, 2015, and (ii) terminated employment with the Employer on or after December 1, 2015.

Cash Balance Members – Upon attaining plan participation status, a Cash Balance Member’s notional cash balance account is credited with contribution credits and interest credits. An initial contribution credit is posted for the participant’s prior 12 months. Then contribution credits are added at the end of each calendar month and are the product of the contribution rate and the Member’s earnings for that period. In addition to the contribution credits, interest credits are also credited to the Member’s notional account on a monthly basis. The annual rate is determined by an interest rate formula, specified in the plan document tied to the 30-year Treasury Rate for the previous November. The post-December 30, 2008, contribution rate for Group C Members ranges from 4% to 12% for those under age 30 and age 60 or greater, respectively. As of December 31, 2008, the cash balance account of each actively employed Member accruing cash balance benefits as of that date received a one-time special contribution equal to (1) the contribution credits a Member would have received had the Member been first eligible for the EKC Plan of Benefits as of one year prior to the Member’s initial membership date and (2) the interest credits the Member would have received from the Member’s initial membership date through December 31, 2008, attributable to the additional contribution credit. In addition, all Cash Balance Member accounts of Members who were actively employed on December 31, 2008, and who were accruing cash balance benefits on that date were adjusted retroactively for contribution credits using post-December 30, 2008, rates. Upon retirement, the cash balance account is paid in the form of a monthly annuity over the life of the Member or as a 50% joint and survivor annuity, if married. Additionally, the EKC Plan of Benefits recognizes the 75% contingent annuity as the “optional survivor annuity” for a married retiree. In addition to the other optional forms allowed by the EKC Plan of Benefits, a Cash Balance Member may also elect a lump sum payment option.

EKC Death and Disability Retirement Benefits – Retirement death benefits are provided to a fully vested participant’s surviving spouse. Retirement benefits for permanent and total disability occurring prior to retirement are provided for those participants with at least five years of service. Death and disability retirement benefits are paid in monthly installments.

WCNOC Pension Plan of Benefits – In general, monthly retirement benefits are based upon certain percentages of annual salaries or wages as defined by the WCNOC Plan of Benefits, multiplied by the participant’s years of credited service as defined by the WCNOC Plan of Benefits, subject to certain maximum benefit limitations. Participants are generally fully vested after five years of credited service. Participants receive credit for years of service with the owner utilities (Evergy Kansas South, Inc, formerly known as Kansas Gas and Electric Company, Evergy Metro, Inc. and Kansas Electric Power Cooperative, Inc.), upon transfer of employment to WCNOC. Participants terminating prior to completion of five years of service receive no plan benefits. Normal retirement age is 65, with actuarially reduced benefits available to employees with five years of service who elect early retirement after age 55. Participants may elect to receive benefits as a life annuity, a lifetime annuity with 10 years certain or joint and 50% survivor annuity. Effective December 1, 2008, the WCNOC Plan of Benefits also provides 50% contingent annuity and 75% contingent annuity.

Effective January 1, 2013, the WCNOC Plan of Benefits was amended to provide that new participants not subject to a collective bargaining agreement will become “cash-balance members” whose retirement benefit will be determined on a basis separate from the existing WCNOC Plan of Benefits members. New participants subject to the United Government Security Officers of America collective bargaining agreement became “cash-balance members” January 1, 2015, and new participants subject to the International Brotherhood of Electrical Workers collective bargaining agreement became “cash-balance members” January 1, 2016. A cash-balance member’s retirement benefit is based on a notional cash-balance account which will be credited with contribution credits and interest credits. Contribution credits will be added at the end of each calendar month and are the product of the contribution rate and the member’s earnings for that period. The contribution rate ranges from 4% to 12% for those under age 30 and age 60 or greater, respectively. In addition to the contribution credits, interest credits will also be credited to the member’s notional account on a monthly basis. The effective annual rate of interest used to determine interest credits is 4%. A cash-

balance member will vest after three years of service. Upon retirement, the cash-balance account is paid in the form of a monthly annuity over the life of the member or as a 50% joint and survivor annuity, if married. Additionally, the WCNOC Plan of Benefits recognizes the 75% contingent annuity as the “option survivor annuity” for a married retiree. In addition to the other optional forms allowed by the WCNOC Plan of Benefits, a cash-balance member may also elect a lump sum payment option.

WCNOC Death and Disability Retirement Benefits – Retirement death benefits are provided to a fully vested participant’s surviving spouse. Retirement benefits for permanent and total disability occurring prior to retirement are provided for those participants with at least five years of service. Death and disability retirement benefits are paid in monthly installments.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting — The accompanying financial statements have been prepared in accordance with accounting principles generally accepted in the United States of America (“GAAP”).

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.

Risks and Uncertainties — The Plan utilizes various investment securities. Investment securities, in general, are exposed to various risks, such as interest rate risk, credit risk, and overall market volatility. Market risks include global events which could impact the value of investment securities, such as a pandemic or international conflict. Due to the level of risk associated with certain investment securities, it is reasonably possible that changes in the values of investment securities will occur in the near term and such changes could materially affect the amounts reported in the financial statements. As of September 30, 2024, approximately 30%, of the Plan’s investments were invested in the SEI Institutional Investment Trust-World Equity and SEI Institutional Investment Trust-Large Cap Fund.

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

Investment Valuation and Income Recognition — Investments are reported at fair value. Fair value of a financial instrument 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. Investments in the common/collective trusts are valued at estimated fair value as determined by the issuer of the common/collective trusts based on the underlying investments. The fair values of the registered investment companies are based on the last reported market price on the last business day of the plan year. The fair value of the limited partnerships are valued at the net asset value (“NAV”) of units held by the investment. The NAV is used as a practical expedient to estimate fair value. The NAV is based on the fair value of the underlying investments held by the fund less its liabilities and is determined in accordance with the General Partner’s investment valuation policy. In establishing the partnership investments, the General Partner takes into consideration the information received from those partnerships, including their audited financial statements and other information deemed appropriate.

Purchases and sales of investments 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.

Expenses — Administrative expenses of the Plan are paid by the Plan, EKC, Evergy Metro, Inc., or WCNOC, as governed by the Plan document and applicable law. Investment-related expenses are included in net appreciation (depreciation) of fair value of investments.

Payment of Benefits — Benefit payments to participants are recorded when paid.

3. FUNDING POLICY

Contributions to provide benefits under the Plan are made solely by EKC, Evergy Metro, Inc., and WCNO. The funding policy of EKC, Evergy Metro, and WCNO is to maintain a balance such that plan resources will fund plan obligations. In implementing this funding policy, the Administrative Committee regularly reviews the Plan's assets and liabilities and takes actions or makes recommendations necessary to ensure that the funding of the Plan meets both the objectives of the funding policy and requirements of Title I of ERISA. The Plan met the minimum funding requirements of ERISA for the years ended September 30, 2024 and 2023.

4. ACCUMULATED PLAN BENEFITS

Accumulated benefits are those future periodic payments, including lump sum distributions, that are attributable under the Plan's provisions to service 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 effect of plan amendments on accumulated plan benefits is recognized during the year in which such amendments are adopted.

Actuarial valuations of accumulated plan benefits were prepared by the actuary as of October 1, 2024 and 2023. Had the valuations been performed as of September 30, 2024 and 2023, there would be no material difference.

The actuarial present value of accumulated plan benefits as of October 1, 2024 and 2023 is as follows:

	2024	2023
Vested benefits:		
Participants and/or beneficiaries		
currently receiving benefits	\$ 709,472,911	\$ 729,228,965
Other participants	<u>409,273,908</u>	<u>384,158,434</u>
Total vested benefits	1,118,746,819	1,113,387,399
Nonvested benefits	<u>31,953,934</u>	<u>30,096,580</u>
Total actuarial present value of accumulated plan benefits	<u>\$ 1,150,700,753</u>	<u>\$ 1,143,483,979</u>

The changes in the actuarial present value of the Plan's accumulated plan benefits for the years ended October 1, 2024 and 2023 are as follows:

	2024	2023
Actuarial present value of accumulated plan benefits at beginning of plan year	\$ 1,143,483,979	\$ 1,224,007,203
Increase (decrease) during the year attributable to:		
Benefits accumulated	27,988,832	27,779,825
Benefits paid	(93,622,619)	(270,247,211)
Interest due to the decrease in the discount period	77,655,518	76,084,220
Actuarial losses	3,821,889	73,837,246
Plan amendments	-	2,662,907
Assumption changes	<u>(8,626,846)</u>	<u>9,359,789</u>
Net increase (decrease)	<u>7,216,774</u>	<u>(80,523,224)</u>
Actuarial present value of accumulated plan benefits at end of plan year	<u>\$ 1,150,700,753</u>	<u>\$ 1,143,483,979</u>

The significant actuarial assumptions used in the October 1, 2024 and 2023, valuations were:

- Mortality 2023 —Pri-2012, utilizing improvement scale of MP-2015 rates for 2007-2009 grading down over 15 years to a long-term rate of 0.75% at age 85, declining to 0.00% at age 115.
- Mortality 2024—Pri-2012, utilizing improvement scale of MP-2021 grading down over 15 years to a long-term rate of 0.75% at age 85, declining to 0.00% at age 115.
- Retirement rates — The average retirement age for 2023 and 2024 was 61 for the Evergy Metro Plan of Benefits, 59 for the EKC Plan of Benefits, and 61 for the WCNOB Plan of Benefits.
- Interest rate assumptions — 6.90% per annum for 2023 and 2024.

Changes in actuarial assumptions and methods resulted in a decrease in accumulated plan benefits of \$8,626,846 for the year ended September 30, 2024. These changes were primarily caused by the following:

- The segment interest rates used to calculate the funding target and target normal cost were updated for the current plan year.
- The mortality tables used to calculate the funding target and target normal cost were updated as required by IRC §430, including the change from using a static projection of mortality improvement to a generational projection.
- The assumption for administrative expenses was updated to reflect expected future experience.

Changes in actuarial assumptions and methods resulted in an increase in accumulated plan benefits of \$9,359,789 for the year ended September 30, 2023. These changes were primarily caused by the following:

- The segment interest rates used to calculate the funding target and target normal cost were updated for the current plan year.
- The required mortality table used to calculate the funding target and target normal cost was updated to include one additional year of projected mortality improvement.

- The termination rate, retirement rate, and the married percentage assumptions were updated to those above in order reflect the results of the 2023 experience study.
- The annuity election rate for Wolf Creek union FAE participants was changed from 100% to 10% to reflect the addition of a lump sum option for these participants with a 90% election rate. A lump sum optional form of payment was added for legacy Wolf Creek union FAE participants.
- The expected future cash balance interest crediting rate for Evergy Kansas Central was updated from 4.00% to 4.25% as a result of changes to market yields since the last measurement date.
- The assumption for administrative expenses was updated to reflect expected future experience.

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.

5. INFORMATION CERTIFIED BY THE CUSTODIAN AND TRUSTEE

The Plan's investments are held by BNYM, the custodian and trustee of the Plan.

The custodian and trustee of the Plan have certified the completeness and accuracy of substantially all investments and related investment activity as of September 30, 2024 and 2023. However, certain investments held by the Plan as of September 30, 2024 and 2023 subject to certifications were previously valued at September 30 using the most recent available information at that time, which may not have been valued as of September 30. To properly report the value these assets, investment amounts provided by the custodian and trustees were increased \$2,877,202 and \$125,949, respectively, as of September 30, 2024 and 2023 in the statements of net assets available for benefits. Investment income amounts provided by the trustees were increased by \$2,877,202 and \$125,949, respectively, for the years ended September 30, 2024 and 2023 in the statements of changes in net assets available for benefits.

The following is a summary of the unaudited information regarding the Plan's investments held by the Plan's custodian and trustees as of September 30, 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 the custodian and trustees of the Plan and furnished to the Plan administrator.

As of September 30:

	2024	2023
Statements of net assets available for benefits:		
Registered investment companies	\$ 906,176,496	\$ 820,776,736
Common/collective trusts	200,775,736	181,456,242
Limited partnership interests	32,531,572	39,874,862
Interest bearing cash	116,302	8,502
Accrued investment income	14,498	16,590
Accrued miscellaneous income	118,612	-

For the Years Ended September 30:

	2024	2023
Statements of changes in net assets available for benefits		
investment income:		
Net appreciation in fair value of investments	\$ 166,500,204	\$ 90,398,573
Dividends	30,910,801	31,221,241
Other Income	286,890	271,201

Notes 6, 7 and supplemental schedules: All investment balances have been certified by the custodian and trustees, except for the classification of investments by level in Note 6.

6. FAIR VALUE OF INVESTMENTS

In accordance with Financial Accounting Standards Board Accounting Standards Codification 820, the Plan classifies its investments into Level 1, which refers to securities valued using quoted prices from active markets for identical assets, Level 2, which refers to securities not traded on an active market but for which observable market inputs are readily available, and Level 3, which refers to securities valued based on significant unobservable inputs. Assets and liabilities are classified in their entirety based on the lowest level of input that is significant to the fair value measurement.

	Total	Quoted Prices in Active	Significant Other
	September 30, 2024	Markets for Identical	Observable Inputs
		Assets	(Level 2)
		(Level 1)	
Registered investment companies	\$ 906,176,496	\$ 906,176,496	-
Total assets in the fair value hierarchy	\$ 906,176,496	\$ 906,176,496	-

Investments measured at NAV

practical expedient ^(a):	
Common/Collective trust funds	200,775,736
Limited partnership interests	32,531,572
Interest bearing cash	116,302
Total investments measured at NAV	233,423,610
practical expedient	233,423,610
Total investments at fair value	\$ 1,139,600,106

	Total	Quoted Prices in Active	Significant Other	Significant
	September 30, 2023	Markets for Identical	Observable Inputs	Unobservable
		Assets	(Level 2)	Inputs
		(Level 1)		(Level 3)
Registered investment companies	\$ 820,776,736	\$ 820,776,736	-	-
Total assets in the fair value hierarchy	\$ 820,776,736	\$ 820,776,736	\$ -	\$ -

Investments measured at NAV

practical expedient ^(a):

Common/Collective trust funds	181,456,242
Limited partnership interests	39,874,862
Interest bearing cash	8,502
Total investments measured at NAV	
practical expedient	221,339,606
Total investments at fair value	\$ 1,042,116,342

(a) In accordance with Subtopic 820-10, certain investments that were measured at fair value using the net asset value per share (or its equivalent) practical expedient have not been classified in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair value hierarchy to the amounts presented in the statements of net assets available for benefits.

The valuation methods described in Note 2 may produce a fair value calculation that may not be indicative of net realizable value or reflective of future values. Furthermore, although the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

7. NET ASSET VALUE (NAV) PER SHARE PRACTICAL EXPEDIENT

The following table for September 30, 2024 and 2023 sets forth a summary of the Plan's investments with a reported NAV.

Investment	Fair Value September 30, 2024*	Fair Value September 30, 2023*	Unfunded Commitment September 30, 2024	Unfunded Commitment September 30, 2023	Redemption Frequency	Other Redemption Restrictions	Redemption Notice Period
EB Temporary Investment Fund of The Bank of New York Mellon	\$ 8,437,586.00	\$ 8,568,567.00	\$ -	\$ -	Immediate	None	None
Cross Creek Capital, LP (a)	-	103,880	412,500	412,500	N/A	Termination of partnership	N/A
Cross Creek Capital Partners, LLC (b)	1,541,376	1,973,523	287,044	287,044	N/A	Termination of partnership	N/A
Cross Creek Capital Partners III, LP (c)	6,681,540	7,353,530	428,094	428,094	N/A	Termination of partnership	N/A
Cross Creek Capital II, LP (d)	7,180,882	13,286,526	423,942	423,942	N/A	Termination of partnership	N/A
Cross Creek Capital Partners IV, LP (e)	6,695,585	7,118,555	875,000	875,000	N/A	Termination of partnership	N/A
Cross Creek Capital Partners V, LP (f)	7,657,221	8,095,858	1,681,375	1,856,375	N/A	Termination of partnership	N/A
Cross Creek Capital Partners VI, LP (g)	2,774,968	1,942,990	2,375,330	2,975,330	N/A	Termination of partnership	N/A
JP Morgan Chase Bank Strategic Property Fund	38,984,384	43,959,752	-	-	Once per quarter	Subject to available cash	N/A
SEI Structured Credit Collective Fund	99,273,041	82,900,067	-	-	Quarterly	10% escrow on total redemption pending	90 days
SEI Special Situations Fund	54,080,725	46,027,856			Semi-annual	10% escrow on total redemption pending annual audit	95 days
BNY Mellon Cash Reserve	<u>116,302</u>	<u>8,502</u>	-	-	Immediate	None	None
	<u>\$ 233,423,610</u>	<u>\$ 221,339,606</u>					

*The fair values of the investments have been estimated using the net asset value of the investment.

- (a) Cross Creek Capital, L.P., a limited partnership (CCC) commenced operations in June 2006 and was formed for the purpose of generating returns for its partners, principally through long-term capital appreciation, by making, holding and disposing of privately negotiated and publicly traded equity and equity-related investments. The original termination date of the fund was May 2016, the tenth anniversary of the initial closing. Pursuant to the partnership agreement, the General Partner has the authority to extend the term of the fund for up to three one-year periods. Pursuant to the partnership agreement, the General Partner had extended the term of the fund to May 2019. During the second quarter of 2019, the Limited Partners agreed to an extension of the fund life to December 31, 2019 with the provision for a one-year extension if needed with the consent of the Fund's Advisory Committee. In December of 2023 the fund was dissolved by the General Partner.

- (b) Cross Creek Capital Partners, LLC., a limited liability company (CCCP) commenced operations in March 2008 and was formed to acquire interests in underlying private equity or venture capital funds directly or through secondary offerings. The fund will continue until the thirteenth anniversary of the initial closing date to investors, which occurred in March 2008, and subject to extensions of up to three one-year periods by the Manager in its sole discretion. Pursuant to the partnership agreement, the General Partner has extended the term of the fund to January 2026.
- (c) Cross Creek Capital Partners III, L.P., a limited partnership (CCCP III) commenced operations in August 2013 and was formed to acquire interests in underlying private equity or venture capital funds directly or through secondary purchases and to make direct investments in privately negotiated and publicly traded equity and equity-related investments. The fund will continue until the fifteenth anniversary of the initial closing date to investors, which occurred in August 2013, and subject to extensions of up to three one-year periods at the discretion of the General Partner.
- (d) Cross Creek Capital II, L.P., a limited partnership (CCC II) commenced operations in June 2014 and was formed to provide a limited number of select investors with the opportunity to realize long-term appreciation from investments, including investments structured as direct or indirect equity and equity-related investments primarily in private companies, but also private investments in public equities (PIPEs) and investments in the public equities of companies. The fund will continue until the tenth anniversary of the initial closing date to investors, which occurred in June 2014, and subject to extensions of up to two one-year periods at the discretion of the General Partner.
- (e) Cross Creek Capital Partners IV, L.P., a limited partnership (CCCP IV) commenced operations in February 2016, and was formed to acquire interests in underlying private equity or venture capital funds, directly or through secondary purchases and to make direct investments in privately negotiated and publicly traded equity and equity-related investments. The fund will continue until the fifteenth anniversary of the initial closing date to investors, which occurred in February 2016, and subject to three one-year extensions at the discretion of the General Partner.
- (f) Cross Creek Capital Partners V, L.P., a limited partnership (CCCP V) commenced operations in April 2018, and was formed to acquire interests in underlying private equity or venture capital funds, directly or through secondary purchases and to make direct investments in privately negotiated and publicly traded equity and equity-related investments. The fund will continue until the fifteenth anniversary of the initial closing date to investors, which occurred in April 2018, and subject to extensions approved by the Advisory Committee.
- (g) Cross Creek Capital Partners VI, L.P., a limited partnership (CCCP VI) commenced operations in April 2020, and was formed to acquire interests in underlying private equity or venture capital funds, directly or through secondary purchases and to make direct investments in privately negotiated and publicly traded equity and equity-related investments. The fund will continue until the fifteenth anniversary of the initial closing date to investors, which occurred in April 2020, and subject to extensions approved by the Advisory Committee.

8. EXEMPT PARTY-IN-INTEREST TRANSACTIONS

BNYM serves as the trustee of the Plan. Plan investments include interest bearing cash and a common/collective trust fund that are currently managed by BNYM, therefore, these transactions qualify as exempt party-in-interest transactions. Fees incurred by the Plan for the investment management services are included in net appreciation in fair value of the investments, as they are paid through revenue sharing, rather than a direct payment. Fees paid directly to BNYM totaled \$206,029 and \$208,088 for 2024 and 2023, respectively.

Certain plan investments are interests in multiple private equity funds, managed by Cross Creek Capital GP, L.P. (an affiliate of Wasatch Advisors, Inc.) and Cross Creek Capital Partners, LLC managed by Wasatch Advisors, Inc. The JP Morgan Chase Bank Strategic Property Fund managed by JP Morgan Investment Management, Inc., and SEI funds managed by SEI Investment Management, Inc., Wasatch Advisors, Inc., JP Morgan Investment Management, Inc.,

and SEI Investment Management, Inc. are investment managers for the Plan, as defined by the Plan, and therefore, these transactions qualify as party-in-interest transactions.

9. FEDERAL INCOME TAX STATUS

The Internal Revenue Service (IRS) has determined and informed the Company by a letter dated December 15, 2020, that the Plan and related trust are designed in accordance with the applicable regulations of the Internal Revenue Code (IRC). It is the intent of the Company and the Plan management that plan operation and any future amendments made to the Plan are in compliance with the applicable requirements of the IRC and the Plan and related trust continue to be tax exempt. Therefore, no provision for income taxes has been included in the Plan's financial statements.

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

10. PLAN TERMINATION

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

Certain benefits under the Plan are insured by the Pension Benefit Guaranty Corporation ("PBGC") if the Plan terminates. Generally, the PBGC guarantees most vested normal age retirement benefits, early retirement benefits, and certain disability and survivor benefits. However, the PBGC does not guarantee all types of benefits under the Plan and the amount of benefit protection 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 existing assets and the PBGC.

11. DEPARTMENT OF LABOR AUDIT

In 2024, the Plan was notified it would be undergoing a review by the U.S. Department of Labor (DOL) for compliance with ERISA. As of the date the financial statements were available to be issued there has not been any additional communication with the DOL. Plan management does not believe that the DOL's inspection will have a material effect on the Plan.

12. SUBSEQUENT EVENTS

For the year ended September 30, 2024, subsequent events were evaluated through July 14, 2025, the date the financial statements were available to be issued.

* * * * *

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 26a - Schedule of Active Participant Data as of October 1, 2023

Number accruing pay-related benefits and average plan compensation limited by IRC §401(a)(17) distributed by attained age and attained years of credited service

Attained Age	Attained Years of Credited Service ¹										Total
	Under 1	1-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40 & Over	
Under 25	0	26	4	0	0	0	0	0	0	0	30
		87,858									92,431
25-29	0	64	57	1	0	0	0	0	0	0	122
		99,482	100,350								99,930
30-34	0	39	162	59	3	0	0	0	0	0	263
		102,521	108,064	114,990							108,815
35-39	0	38	131	157	98	1	0	0	0	0	425
		104,582	108,908	128,968	130,436						120,597
40-44	0	15	105	135	183	50	2	0	0	0	490
			119,473	130,981	128,687	119,595					125,174
45-49	1	11	76	86	190	78	13	0	0	0	455
			112,077	129,415	131,806	140,703					129,254
50-54	0	7	45	66	180	77	21	14	0	0	410
			130,116	130,927	135,112	131,510	138,012				133,074
55-59	0	3	33	61	135	47	20	39	27	0	365
			113,316	122,198	129,363	129,570	121,152	147,973	142,196		128,857
60-64	0	3	20	26	47	18	8	14	11	17	164
			130,655	136,217	123,093						120,118
65-69	1	2	6	7	9	4	1	2	1	4	37
											134,614
70 & over	0	0	0	0	1	0	1	0	0	0	2
Total	2	208	639	598	846	275	66	69	39	21	2,763
		99,328	112,707	128,482	130,419	129,380	129,531	138,397	134,580	128,438	123,322

¹ Age and service for purposes of determining category are based on exact (not rounded) values.

Plan Name: Evergy, Inc. Retirement Plan
 EIN / PN: 82-2733395/001
 Plan Sponsor: Evergy, Inc.
 Valuation Date: October 1, 2023

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 26a - Schedule of Active Participant Data as of October 1, 2023

Number and average Cash balance distributed by attained age and attained years of credited service

Attained Age	Attained Years of Credited Service ²										Total
	Under 1	1-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40 & Over	
Under 25	0	26	4	0	0	0	0	0	0	0	30
		5,972									7,794
25-29	0	63	55	1	0	0	0	0	0	0	119
		9,489	19,884								14,508
30-34	0	39	145	44	0	0	0	0	0	0	228
		11,511	28,255	39,568							27,574
35-39	0	38	110	57	14	0	0	0	0	0	219
		13,100	34,161	54,849							40,217
40-44	0	15	90	34	27	5	0	0	0	0	171
			46,833	66,749	124,682						62,685
45-49	0	11	71	26	20	12	0	0	0	0	140
			55,280	96,071	139,338						81,333
50-54	0	8	34	17	20	2	3	0	0	0	84
			78,634		156,105						102,302
55-59	0	3	26	29	11	3	1	1	0	0	74
			79,472	108,769							116,514
60-64	0	3	17	10	8	3	0	0	0	0	41
											131,007
65-69	0	2	4	4	1	0	0	0	0	1	12
70 & over	0	0	0	0	0	0	0	0	0	0	0
Total	0	208	556	222	101	25	4	1	0	1	1,118
		11,845	43,203	76,141	145,090	175,356					56,982

² Age and service for purposes of determining category are based on exact (not rounded) values.

Plan Name: Evergy, Inc. Retirement Plan

EIN / PN: 82-2733395/001

Plan Sponsor: Evergy, Inc.

Valuation Date: October 1, 2023

SCHEDULE SB ATTACHMENTS

Schedule SB, Part V Statement of Actuarial Assumptions/Methods

Plan Sponsor

Evergy, Inc. ("Evergy")

Economic Assumptions

Interest rate basis:

- Applicable month June 2023
- Interest rate basis ARPA segment Rates from fifth month preceding valuation date

Interest rates:	Reflecting Stabilization	Not Reflecting Stabilization
• First segment rate	4.75%	3.03%
• Second segment rate	5.00%	4.11%
• Third segment rate	5.74%	4.27%
• Effective interest rate	5.29%	4.13%

Annual rates of increase

- Compensation 3.75%
- Future Social Security wage bases 3.50%
- Statutory limits on compensation 3.00%

Plan-related expenses \$6,700,000

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: Evergy, Inc. Retirement Plan
EIN / PN: 82-2733395/001
Plan Sponsor: Evergy, Inc.
Valuation Date: October 1, 2023

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 participants It was assumed there will be no new participants.

Mortality

- **Healthy** Separate rates for non-annuitants (based on RP-2014 “Employees” table without collar or amount adjustments, adjusted backward to 2006 with MP-2014, and then projected forward with generational projection using Scale MP-2021) and annuitants (based on RP-2014 “Healthy Annuitants” table without collar or amount adjustments, adjusted backward to 2006 with MP-2014, and then projected forward with generational projection using Scale MP-2021).

- **Disabled**

Evergy Kansas Central and WNCOC Alternate disabled life mortality tables as defined under Revenue Ruling 96-7.

Evergy Metro None.

- **Lump Sum Mortality** 50/50 blend of the 2023 optional combined male and female mortality tables with generational projection using scale MP-2021.

Benefit commencement dates:

Preretirement death benefit

- **Evergy Kansas Central and WNCOC** The death of the active participant (CB – lump sum) or the date the participant would have attained age 55 (FAE) or age 65 (CB – annuity).

- **Evergy Metro** The later of the death of the active participant or the date the participant would have attained age 55.

Plan Name: Evergy, Inc. Retirement Plan
EIN / PN: 82-2733395/001
Plan Sponsor: Evergy, Inc.
Valuation Date: October 1, 2023

SCHEDULE SB ATTACHMENTS

Deferred vested benefit

- Evergy Kansas Central Lump sum is paid immediately; annuity is deferred until participant attains age 65.
- WCNOOC Lump sum is paid immediately, if available; annuity is deferred until participant attains age 65.
- Evergy Metro Lump sum is paid immediately; annuity is deferred until participant attains age 62.

Disability benefit

- Evergy Kansas Central Age 65.
- WCNOOC Upon disablement.
- Evergy Metro None.

Retirement benefit Upon termination of employment.

Form of payment

- 90% of participants are assumed to elect a lump sum
- 10% of single participants are assumed to elect a life annuity
- 1% of married participants are assumed to elect a life annuity
- 9% of married participants are assumed to elect a 50% J&S

Lump sums were valued using the substitution of annuity form under IRS Regulation §1.430(d) – 1(f)(4) with application of generational mortality.

Percent married

70% of males; 70% of females. These assumptions are used to value pre-retirement surviving spouse benefits and in determining the optional forms expected to be elected at commencement.

Spouse age

Wife three years younger than husband.

Covered Pay

- Evergy Kansas Central Assumed plan compensation for the year beginning on the valuation date was determined as the base rate of pay on the valuation date, plus expected base salary increases during the year, further increased by a target bonus percentage.

Plan Name: Evergy, Inc. Retirement Plan
EIN / PN: 82-2733395/001
Plan Sponsor: Evergy, Inc.
Valuation Date: October 1, 2023

SCHEDULE SB ATTACHMENTS

- **WCNOC** Assumed plan compensation for the year beginning on the valuation date was determined as the base rate of pay on the valuation date, plus expected base pay increases during the year. Plan compensation was further adjusted by individual to reflect incentive and overtime targets, as provided by Evergy.

- **Evergy Metro** Assumed plan compensation for the year beginning on the valuation date was determined as the base salary as of the valuation date, plus expected base salary increases during the year.

Disability rates 1944 RRB Probability of Disability Table

- **Evergy Kansas Central and WNCOC** The representative rates at which participants become disabled by age and gender are shown below:

Percentage assumed to become disabled during the year		
Age	Males	Females
25	0.1200%	0.1800%
30	0.1200%	0.1800%
35	0.1275%	0.1915%
40	0.1470%	0.2205%
45	0.1975%	0.2965%
50	0.3565%	0.5350%
55	0.6810%	1.0215%
60	1.3800%	2.0700%
65	0.0000%	0.0000%

- **Evergy Metro** None.

Termination (not due to disability or retirement) rates Representative termination rates at which participants are assumed to terminate employment by age are shown below:

Plan Name: Evergy, Inc. Retirement Plan
EIN / PN: 82-2733395/001
Plan Sponsor: Evergy, Inc.
Valuation Date: October 1, 2023

SCHEDULE SB ATTACHMENTS

- Everygy Kansas Central Non-Union

Percentage assumed to leave during the year

Age	Rate
20	10.0%
25	10.0%
30	6.0%
35	5.0%
40	4.0%
45	4.0%
50	4.0%

- Everygy Metro Non-Union

Percentage assumed to leave during the year

Age	Rate
20	N/A
25	7.5%
30	7.5%
35	6.0%
40	6.0%
45	4.0%
50	4.0%

- Everygy Kansas Central Union, WCNO, and Everygy Metro Union (Frozen Aquila)

Percentage assumed to leave during the year

Age	Rate
20	10.0%
25	7.5%
30	5.0%
35	4.0%
40	4.0%
45	4.0%
50	4.0%

Retirement

- Everygy Kansas Central Rates at which participants are assumed to retire by age are shown below. The average retirement age is 59.

Percentage assumed to retire during the year

Age	Rate
50 - 57	5.0%
58 - 59	15.0%
60*	15.0% / 25.0%
61**	15.0% / 30.0%
62 - 65	30.0%

Plan Name: Everygy, Inc. Retirement Plan
 EIN / PN: 82-2733395/001
 Plan Sponsor: Everygy, Inc.
 Valuation Date: October 1, 2023

SCHEDULE SB ATTACHMENTS

66 - 69	40.0%
70	100.0%

* The rate is 25% if the employee is eligible for unreduced benefits.

** The rate is 30% if the employee is eligible for unreduced benefits.

- WCNOC

Rates at which participants are assumed to retire by age are shown below. The average retirement age is 61.

Percentage assumed to retire during the year	
Age	Rate
55 - 57	5.0%
58 - 61	15.0%
62 - 65	25.0%
66	30.0%
67 - 69	40.0%
70	100.0%

- Evergy Metro

Rates at which participants are assumed to retire by age are shown below. The average retirement age is 61.

Percentage assumed to retire during the year			
Age	Non-Union	Age	Union
55 - 57	5%	55 - 58*	5%/10%
58 - 61	15%	59 - 61	10%
62 - 65	30%	62 - 64	25%
66 - 67	40%	65	35%
69 - 69	40%	66 - 69	40%
70	100%	70	100%

* The rate is 10% if the employee has 30 years of service.

Additional Assumptions

Cash flow

- 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.
- Amount and timing of contributions: Actual contribution timing is reflected if it is known when the valuation is completed. Otherwise, contributions are assumed to be made throughout the year and no later than the last day required to meet quarterly, minimum funding and regulatory contribution requirements.

Plan Name: Evergy, Inc. Retirement Plan
 EIN / PN: 82-2733395/001
 Plan Sponsor: Evergy, Inc.
 Valuation Date: October 1, 2023

SCHEDULE SB ATTACHMENTS

Methods

Valuation date	October 1, 2023
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.
Actuarial value of assets	Average of the fair market value of assets on the valuation date and the two immediately preceding valuation dates, adjusted for contributions, benefits, administrative expenses and expected earnings (with such expected earnings limited as described in IRS Notice 2009-22). The average asset value must be within 10% of market value, including discounted contributions receivable (discounted using the effective interest rate for the prior plan year). The method of computing the actuarial value of assets complies with rules governing the calculation of such values under the Pension Protection Act of 2006 (PPA). These rules produce smoothed values that reflect the underlying market value of plan assets but fluctuate less than the market value. As a result, the actuarial value of assets will be lower than the market value in some years and greater in other years. However, over the long term under PPA's smoothing rules, the method has a significant bias to produce an actuarial value of assets that is below the market value of assets.
Benefits not valued	All benefits described in the Plan Provisions section of this report were valued. WTW has reviewed the plan provisions with Evergy and, based on that review, is not aware of any significant benefits required to be valued that were not. The plan pays small benefits (with a present value up to \$5,000) in a single lump sum payment. Such lump sums are not explicitly valued; rather, such participants' benefits are valued using the benefit choice assumptions described above.

Sources of Data and Other Information

The plan sponsor furnished participant data as of October 1, 2023. Information on assets, contributions and plan provisions was supplied by the plan sponsor. Data and other information were reviewed for

Plan Name:	Evergy, Inc. Retirement Plan
EIN / PN:	82-2733395/001
Plan Sponsor:	Evergy, Inc.
Valuation Date:	October 1, 2023

SCHEDULE SB ATTACHMENTS

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.

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.
Compensation increases	Assumed increases were chosen by the plan sponsor and represent an estimate of future experience. We believe the assumption does not significantly conflict with what would be reasonable based on the assumed future CPI and GDP growth inherent in the other economic assumptions.

Assumptions Rationale - Significant Demographic Assumptions

Healthy Mortality	Assumptions used for funding purposes are as prescribed by IRC §430(h).
Termination	Termination rates were based on an experience study conducted in 2023, with annual consideration of whether any conditions have changed that would be expected to produce different results in the future. For reasons discussed above, we believe the assumption selected does not significantly conflict with what would be reasonable.
Retirement	Retirement rates were based on an experience study conducted in 2023, with annual consideration of whether any conditions have changed that would be expected to produce different results in the future. Retirement rates differ by eligibility for unreduced retirement benefits, because of the observed effects the availability of these benefits has on retirement rates. For reasons discussed above, we believe the assumption selected does not significantly conflict with what would be reasonable.

Plan Name:	Evergy, Inc. Retirement Plan
EIN / PN:	82-2733395/001
Plan Sponsor:	Evergy, Inc.
Valuation Date:	October 1, 2023

CONCLUSIONS

Source of Prescribed Methods

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

Changes in Assumptions and Methods

The segment interest rates used to calculate the funding target and target normal cost were updated for the current plan year.

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

The termination rate, retirement rate, and the married percentage assumptions were updated to those above in order reflect the results of the 2023 experience study.

The annuity election rate for Wolf Creek union FAE participants was changed from 100% to 10% to reflect the addition of a lump sum option for these participants with a 90% election rate. A lump sum optional form of payment was added for legacy Wolf Creek union FAE participants.

The expected future cash balance interest crediting rate for Everygy Kansas Central was updated from 4.00% to 4.25% as a result of changes to market yields since the last measurement date.

The assumption for administrative expenses was updated to reflect expected future experience.

None.

Plan Name: Everyg, Inc. Retirement Plan
 EIN / PN: 82-2733395/001
 Plan Sponsor: Everyg, Inc.
 Valuation Date: October 1, 2023

SCHEDULE SB ATTACHMENTS

Schedule SB – Statement by Enrolled Actuary

Plan Sponsor	Evergy, Inc.
EIN/PN	82-2733395/001
Plan Name	Evergy, Inc. Retirement Plan
Valuation Date	October 1, 2023
Enrolled Actuary	Lauren Bruno
Enrollment Number	23-07647

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.

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code). ▶ Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089 2023 This Form is Open to Public Inspection
---	--	---

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
	☐ special extension (enter description)	☐ the DFVC program
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 Energys, Inc. Retirement Plan	1b Three-digit plan number (PN) ▶ 001
	1c Effective date of plan 07/01/1956
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) Energys, Inc. P. O. Box 418679 Kansas City MO 64141-9679	2b Employer Identification Number (EIN) 82-2733395 2c Plan Sponsor's telephone number 816-556-2200 2d Business code (see instructions) 221100

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		7/10/25	Theresa Dodson, Director, Benefits
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE		7/10/25	Theresa Dodson, Director, Benefits
	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

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

Form 5500 (2023)
v. 2300728

3a Plan administrator's name and address ☒ 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 6,909
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d).	
a(1) Total number of active participants at the beginning of the plan year	6a(1) 2,763
a(2) Total number of active participants at the end of the plan year	6a(2) 2,754
b Retired or separated participants receiving benefits	6b 2,595
c Other retired or separated participants entitled to future benefits	6c 1,049
d Subtotal. Add lines 6a(2) , 6b , and 6c	6d 6,398
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	6e 449
f Total. Add lines 6d and 6e	6f 6,847
g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item).....	6g(1)
g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item).....	6g(2)
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6h 4
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 1E 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)	9b Plan benefit arrangement (check all that apply)
(1) ☒ Insurance	(1) ☒ Insurance
(2) ☐ Code section 412(e)(3) insurance contracts	(2) ☐ Code section 412(e)(3) insurance contracts
(3) ☒ Trust	(3) ☒ Trust
(4) ☐ General assets of the sponsor	(4) ☐ General assets of the sponsor
10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)	
a Pension Schedules	b General Schedules
(1) ☒ R (Retirement Plan Information)	(1) ☒ H (Financial Information)
(2) ☐ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary	(2) ☐ I (Financial Information – Small Plan)
(3) ☒ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	(3) ☐ A (Insurance Information) – Number Attached _____
(4) ☐ DCG (Individual Plan Information) – Number Attached _____	(4) ☒ C (Service Provider Information)
(5) ☐ MEP (Multiple-Employer Retirement Plan Information)	(5) ☒ D (DFE/Participating Plan Information)
	(6) ☐ G (Financial Transaction Schedules)

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

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

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

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

11c Enter the Receipt Confirmation Code for the 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 _____

EVERGY, INC.
NON-UNION PENSION PLAN
EIN No. 82-2733395, Plan No. 001

FORM 5500 — SCHEDULE H, PART IV, LINE 4j — SCHEDULE OF REPORTABLE TRANSACTIONS
FOR THE YEAR ENDED SEPTEMBER 30, 2024

(a) Identity of Party Involved	(b) Description of Asset	(c) Purchase Price	(d) Selling Price	(e) Cost of Asset	(f) Current Value of Asset on Transaction Date	(g) Net Gain (Loss)
SINGLE TRANSACTIONS						
NO ACTIVITY FOR THIS PERIOD						
SERIES TRANSACTIONS						
EB Temporary Investment Fund VAR RT 12/31/2049 DD 04/02/10	Common/Collective Trust					
	(125 Purchases)	\$ 103,728,985	\$ -	\$ -	\$ 103,728,985	\$ -
	(39 Sales)	-	103,859,967	103,859,967	103,859,967	-

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 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

► 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 EVERGY, INC. 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 EVERGY, INC.	D Employer Identification Number (EIN) 82-2733395
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B	F Prior year plan size: ☐ 100 or fewer ☐ 101-500 ☒ More than 500

Part I	Basic Information
1 Enter the valuation date: Month 10 Day 01 Year 2023	
2 Assets:	
a Market value.....	2a 1,043,593,921
b Actuarial value	2b 1,111,396,934
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	3,383 831,049,805 831,049,805
b For terminated vested participants.....	1,153 88,041,425 88,041,425
c For active participants.....	2,763 349,216,117 384,277,970
d Total	7,299 1,268,307,347 1,303,369,200
4 If the plan is in at-risk status, check the box and complete lines (a) and (b)..... ☐	
a Funding target disregarding prescribed at-risk assumptions.....	4a
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b
5 Effective interest rate.....	5 5.29%
6 Target normal cost	
a Present value of current plan year accruals.....	6a 31,885,641
b Expected plan-related expenses	6b 6,700,000
c Target normal cost.....	6c 38,585,641

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	06/30/2025 Date
LAUREN BRUNO Type or print name of actuary	2307647 Most recent enrollment number
WILLIS TOWERS WATSON US LLC Firm name	314-719-5800 Telephone number (including area code)
7733 FORSYTH BOULEVARD SUITE 1350 ST. LOUIS MO 63105 Address of the firm	

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

Part II		Beginning of Year Carryover and Prefunding Balances	
		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	113,876,365
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	43,269,461
9	Amount remaining (line 7 minus line 8)	0	70,606,904
10	Interest on line 9 using prior year's actual return of <u>10.93</u> %	0	7,717,335
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>5.45</u> %		0
	b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
	c Total available at beginning of current plan year to add to prefunding balance		0
	d Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections	0	9,622,665
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	68,701,574

Part III		Funding Percentages	
14	Funding target attainment percentage	14	80.00 %
15	Adjusted funding target attainment percentage	15	80.12 %
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	87.02 %
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
12/18/2024	20,414,000				
Totals ►			18(b)	20,414,000	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 19,175,762
20 Quarterly contributions and liquidity shortfalls:	
a Did the plan have a "funding shortfall" for the prior year? ☒ Yes ☐ No	
b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? ☒ Yes ☐ No	
c If line 20a is "Yes," see instructions and complete the following table as applicable:	
Liquidity shortfall as of end of quarter of this plan year	
(1) 1st	(2) 2nd
0	0
(3) 3rd	(4) 4th
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: 5.00 %	3rd segment: 5.74 %	☐ N/A, full yield curve used
b Applicable month (enter code).....				21b 4
22 Weighted average retirement age				22 61
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	38,585,641	
b Excess assets, if applicable, but not greater than line 31a	31b	0	
32 Amortization installments:			
a Net shortfall amortization installment	Outstanding Balance	Installment	
	260,673,840	25,699,252	
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	64,284,893	
	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement.....	0	53,726,706	53,726,706
36 Additional cash requirement (line 34 minus line 35)	36	10,558,187	
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	37	19,175,762	
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)	38a	8,617,575	
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	38b	8,617,575	
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, Line 19
Discounted Employer Contributions
as of October 1, 2023

Date	Applicable Plan Year	Contribution	Interest Rate Used to Discount During Timely Contribution Period	Timely Contribution Period	Interest Rate Used to Discount During Late Contribution Period	Late Contribution Period	Interest Adjusted Contribution
12/18/2024	2024	20,414,000	5.29%	1.21389	N/A	N/A	19,175,762
Total		20,414,000					19,175,762

Plan Name: Evergy, Inc. Retirement Plan
EIN / PN: 82-2733395/001
Plan Sponsor: Evergy, Inc.
Valuation Date: October 1, 2023

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 22
Description of Weighted Average Retirement Age
as of October 1, 2023

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

Plan Name:	Evergy, Inc. Retirement Plan
EIN / PN:	82-2733395/001
Plan Sponsor:	Evergy, Inc.
Valuation Date:	October 1, 2023

SCHEDULE SB ATTACHMENTS

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

Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving Payments	Total
2023	6,126,585	1,899,434	75,493,848	83,519,867
2024	8,400,460	2,424,624	73,987,305	84,812,389
2025	10,562,010	3,041,964	72,499,354	86,103,328
2026	12,700,654	3,471,991	70,994,299	87,166,944
2027	14,768,630	4,051,582	69,383,951	88,204,163
2028	16,495,091	5,071,601	67,663,742	89,230,434
2029	18,261,367	4,699,237	65,855,954	88,816,558
2030	19,894,061	4,751,300	63,946,425	88,591,786
2031	21,404,185	5,309,044	61,921,024	88,634,253
2032	22,807,697	5,659,645	59,786,515	88,253,857
2033	24,205,409	5,875,730	57,544,596	87,625,735
2034	25,257,790	6,107,829	55,191,198	86,556,817
2035	26,498,332	6,296,904	52,727,995	85,523,231
2036	27,715,379	7,029,265	50,156,423	84,901,067
2037	28,637,143	6,888,475	47,486,435	83,012,053
2038	29,603,418	7,110,488	44,727,845	81,441,751
2039	30,743,605	6,838,249	41,893,945	79,475,799
2040	31,409,561	7,140,070	38,993,244	77,542,875
2041	32,044,749	7,719,210	36,052,504	75,816,463
2042	32,793,109	7,463,289	33,108,213	73,364,611
2043	33,143,748	6,939,716	30,174,640	70,258,104
2044	33,565,002	7,083,481	27,279,767	67,928,250
2045	33,864,293	7,173,618	24,452,639	65,490,550
2046	33,723,816	6,974,647	21,722,121	62,420,584
2047	33,894,095	7,188,324	19,115,575	60,197,994
2048	33,752,136	7,130,143	16,657,651	57,539,930
2049	33,358,087	6,708,874	14,369,147	54,436,108
2050	32,875,272	6,445,299	12,266,082	51,586,653
2051	32,301,811	6,561,388	10,359,126	49,222,325
2052	31,362,509	5,668,905	8,653,412	45,684,826
2053	30,288,942	6,069,633	7,148,711	43,507,286
2054	29,008,976	5,290,842	5,839,845	40,139,663
2055	27,812,580	4,852,704	4,717,321	37,382,605
2056	26,356,838	4,686,803	3,768,219	34,811,860
2057	25,115,702	3,746,177	2,977,054	31,838,933
2058	23,746,212	3,840,140	2,326,752	29,913,104
2059	22,136,989	3,051,976	1,799,653	26,988,618
2060	20,754,643	2,956,190	1,378,264	25,089,097
2061	19,436,612	2,491,434	1,045,828	22,973,874
2062	18,097,517	2,391,322	786,909	21,275,748
2063	16,738,335	1,996,804	587,684	19,322,823
2064	15,483,277	1,720,640	436,111	17,640,028
2065	14,240,030	1,523,649	321,962	16,085,641
2066	13,037,668	1,342,235	236,769	14,616,672
2067	11,881,657	1,176,015	173,662	13,231,334
2068	10,773,310	1,024,478	127,189	11,924,977
2069	9,714,824	887,018	93,119	10,694,961
2070	8,709,851	762,954	68,222	9,541,027
2071	7,758,739	651,586	50,069	8,460,394
2072	6,863,970	552,193	36,850	7,453,013

Plan Name: Evergy, Inc. Retirement Plan
 EIN / PN: 82-2733395/001
 Plan Sponsor: Evergy, Inc.
 Valuation Date: October 1, 2023

SCHEDULE SB ATTACHMENTS

Schedule SB, Part V Summary of Plan Provisions

B.1a Summary of Plan Provisions for FAE Members of Evergy Kansas Central Plan of Benefits

Plan Provisions

The most recent amendment reflected in the following plan provisions was signed November 9, 2022 and effective as of October 1, 2022.

Covered employees	All employees except non-union employees hired on or after January 1, 2002, and Electric Union members hired or rehired on or after January 1, 2012.
Participation date	The first day of the calendar month following completion of one year of service.

Definitions

Electric Union member	Employees represented by IBEW Local 304 and Local 1523.
Non-union member	Non-union participants.
Vesting service	One year for each 1,000-hour calendar year of employment by Evergy Kansas Central.
Pension service	The number of calendar years during which the employee completes 1,000 hours of service, prorating partial years with hours less than 1,000, not to exceed 35 years. For Electric union members disabled after July 1, 1993, credited service shall be earned each year during the disability period.

Plan Name:	Evergy, Inc. Retirement Plan
EIN / PN:	82-2733395/001
Plan Sponsor:	Evergy, Inc.
Valuation Date:	October 1, 2023

SCHEDULE SB ATTACHMENTS

Pensionable pay	Base earnings, including any pre-tax deferrals to a savings plan or cafeteria plan of qualified transportation, fringes, excluding overtime and amounts deferred under the company's Deferred Compensation Plan, and: (a) including merit recognition awards, short-term incentive payments, and commissions for non-union members, and (b) excluding bonuses and commissions for Electric union members
Average earnings	The average of the highest sixty consecutive months of pensionable pay during the 120-month period ending on the earlier of the participant's termination date or retirement date.
Covered compensation	The average of the Social Security taxable wage bases in effect for each calendar year during the 35-year period ending with the last day of the calendar year in which the participant attains Social Security Retirement Age (as defined in Section 415(b)(8) of the Internal Revenue Code.
Normal retirement date (NRD)	First of month coinciding with or next following the attainment of age 65.
Monthly pension benefit	Monthly Pension Benefit shall mean a benefit determined in accordance with (a) or (b), whichever is applicable, based on the member's Credited Service and Final Average Earnings as of the date of termination or retirement date. (a) For Electric Union members the sum of (i) and (ii): (i) 1.2% times Final Average Earnings, multiplied by Credited Service. (ii) .3% times Final Average Earnings multiplied by Credited Service (maximum 20 years). (b) For Non-Union members the sum of (i) and (ii): (i) .8% times Final Average Earnings plus .4% times Final Average Earnings in excess of Covered Compensation, multiplied by Credited Service. (ii) .7% times Final Average Earnings multiplied by Credited Service (maximum 20 years).

Plan Name:	Evergy, Inc. Retirement Plan
EIN / PN:	82-2733395/001
Plan Sponsor:	Evergy, Inc.
Valuation Date:	October 1, 2023

SCHEDULE SB ATTACHMENTS

For employees with 10 years of service as of April 30, 1992, the monthly pension benefit will not be less than the monthly pension benefit determined in accordance with the provisions then in effect increased by 6% of average earnings as of April 30, 1992.

For employees age 55 with 5 years of service as of July 1, 1995, the monthly benefit will not be less than that earned if they would have elected to retire under the window on July 1, 1995.

Eligibility for Benefits

Normal retirement	Retirement on NRD.
Early retirement	Electric Union members: Retire before NRD and on or after both attaining age 55 and completing five years of service. Non-Union members: Retire before NRD and on or after both attaining age 50 and completing five years of service.
Postponed retirement	Retirement after NRD.
Vested termination	Termination for reasons other than death or retirement after completing five years of vesting service or after completing three years of vesting service for any employee who was an active participant at any time between January 1, 2008 and April 23, 2008.
Disability	Electric Union member that participates in and qualifies for benefits under a long-term disability plan maintained by the company. (Disability is treated as termination for non-union members).
Preretirement death benefit	Death while eligible for normal, early, postponed, or deferred vested retirement benefits, with a surviving spouse.

Benefits Paid Upon the Following Events

Normal retirement	Monthly pension benefit determined as of NRD.
Early retirement	Monthly pension benefit determined as of early retirement date, reduced 3% each year between age 62 and age 60, and 5% for each year between age 60 and age 50. Reduced 5% per year from age 60 with 35 years of service.

Plan Name:	Evergy, Inc. Retirement Plan
EIN / PN:	82-2733395/001
Plan Sponsor:	Evergy, Inc.
Valuation Date:	October 1, 2023

SCHEDULE SB ATTACHMENTS

Postponed retirement	Monthly pension benefit determined as of actual retirement date.
Vested termination	Monthly pension benefit determined as of termination date, payable at NRD.
Disablement	Electric Union members: Monthly pension benefit based on credited service projected to age the annuity starting date and wages just prior to disability. Non-Union members: Monthly pension benefit determined as of the disability date, payable at NRD.
Preretirement death	Electric Union members: If not eligible for early retirement at the time of death, 50% of the monthly pension benefit reduced for the 50% contingent annuity option and for payment as early as the member's 55th birthday. If eligible for early retirement at the time of death, the monthly pension benefit as if the member had elected immediate payment of the 50% contingent annuity option at death. Non-Union members: The greater of 55% of the monthly pension benefit payable immediately or the 100% contingent annuity benefit reduced for form of payment and early commencement.

Other Plan Provisions

Forms of payment	Preretirement death benefits are payable only as described above. Monthly pension benefits are paid as described above as a life annuity, if the participant has no spouse as of the date payments begin, or if the participant so elects. Otherwise, benefits are paid in the form of 50% joint and survivor annuity option or, if the participant elects and the spouse consents, another actuarially equivalent optional form offered by the plan. Optional forms are a 75% or 100% joint and survivor annuity, a ten-year certain and life annuity, a level income life annuity, a level income 50% Joint and Survivor annuity (if married) or a lump sum. Actuarial equivalence is based on 6% interest and the PPA 202 Unisex Optional Combined mortality table. Actuarial equivalence for the lump sum form and the level income options are determined using the mortality as defined under Section
-------------------------	--

Plan Name:	Evergy, Inc. Retirement Plan
EIN / PN:	82-2733395/001
Plan Sponsor:	Evergy, Inc.
Valuation Date:	October 1, 2023

SCHEDULE SB ATTACHMENTS

417(e) as well as the 417(e) interest rates for May of the prior calendar year.

Pension Increases

None.

Plan participants' contributions

None.

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. Increases in the dollar limits are assumed for determining pension cost but not for determining contributions.

Benefits under Enhanced Retirement Program

A selected group of participants were offered an voluntary Enhanced Retirement Program (ERP) in 2022. Each participant that retired under the ERP had their pension benefit determined as if they were three years older and had an additional three years of service

Future Plan Changes

No future plan changes were recognized in determining pension cost or in determining minimum and maximum contributions. WTW is not aware of any future plan changes which are required to be reflected.

Changes in Benefits Valued Since Prior Measurement

None.

Plan Name: Evergy, Inc. Retirement Plan
EIN / PN: 82-2733395/001
Plan Sponsor: Evergy, Inc.
Valuation Date: October 1, 2023

SCHEDULE SB ATTACHMENTS

B.1b Summary of Plan Provisions for Cash Balance Members of Evergy Kansas Central Plan of Benefits

Plan Provisions

The most recent amendment reflected in the following plan provisions was signed November 9, 2022 and effective as of October 1, 2022.

Covered employees	All non-union employees hired or rehired after January 1, 2002 but hired or rehired before May 31, 2018, and Electric Union members hired or rehired on or after January 1, 2012.
Participation date	The first day of the calendar month following completion of one year of service.

Definitions

Cash Balance member	Employee who is not represented by a Union and is hired on or after January 1, 2002 but before May 31, 2018, and Electric Union members hired or rehired on or after January 1, 2012.
Vesting service	One year for each 1,000-hour calendar year of employment by Evergy Kansas Central.
Pensionable pay	Base earnings, including any pre-tax deferrals to a savings plan or cafeteria plan or qualified transportation fringes, excluding overtime and amounts deferred under the company's Deferred Compensation Plan, and including merit recognition awards, short-term incentive payments and commissions.
Normal retirement date (NRD)	First of month coinciding with or next following age 65.

Plan Name:	Evergy, Inc. Retirement Plan
EIN / PN:	82-2733395/001
Plan Sponsor:	Evergy, Inc.
Valuation Date:	October 1, 2023

SCHEDULE SB ATTACHMENTS

Contribution credits

Credited to cash balance member's cash balance account at the end of each calendar month that participant is an active employee. The amount equals the product of the cash balance member's earnings and their contribution rate (shown below).

Age	Contribution Rate
Under 30	4.00%
30 - 34	5.00%
35 - 39	6.00%
40 - 44	7.00%
45 - 49	8.00%
50 - 54	9.00%
55 - 59	10.00%
60+	12.00%

Interest credits

Credited at the end of each calendar month, prior to applying contribution credits, until the participant's commencement date. If the participant terminates prior to becoming vested, interest credits cease at termination.

The account is credited at an effective rate equal to the average yield on one-year Treasury Constant Maturities for the month of November immediately preceding the plan year plus 1% (subject to a minimum of 5% and a maximum of 10%, but in no event greater than the yield on 30-year Treasury Constant Maturities). The minimum interest credit for any year will be 3%.

Eligibility for Benefits

Normal retirement

Retirement at any time on or after NRD, or at any time after completing three years of vesting service.

Vested termination

Termination for reasons other than death or retirement after completing three years of vesting service or attaining age 65.

Disability

Member participates in and qualifies for benefits under a long-term disability plan maintained by the company.

Preretirement death benefit

Death during active employment, or following retirement or termination after completing three years of vesting service, but prior to the annuity starting date.

Plan Name: Everygy, Inc. Retirement Plan
EIN / PN: 82-2733395/001
Plan Sponsor: Everygy, Inc.
Valuation Date: October 1, 2023

SCHEDULE SB ATTACHMENTS

Benefits Paid Upon the Following Events

Retirement or termination	Lump sum equal to the cash balance account, or an actuarially equivalent monthly pension determined as of annuity starting date.
Disablement	Cash balance account continues to accrue interest credits and contribution credits until the annuity starting date (but not beyond NRD) based on the rate of earnings in the month prior to disability. Payable as a lump sum or an actuarially equivalent monthly pension.
Preretirement death	Lump sum equal to the cash balance account. If the beneficiary is the surviving spouse, an actuarially equivalent monthly pension determined as of the annuity starting date is also available.

Other Plan Provisions

Forms of payment	Basic form of payment is a lump sum. Optional forms are a life annuity, a 50%, 75%, or 100% joint and survivor annuity, a ten-year certain and life annuity, a level income life annuity, or level income 50% joint and survivor annuity (if married). Actuarial equivalence is based on the Applicable Mortality Table and an effective annual rate of interest equal to the average yield on thirty-year Treasury Constant Maturities during the month of November preceding the plan year.
Pension Increases	None.
Plan participants' contributions	None.
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. Increases in the dollar limits are assumed for determining pension cost but not for determining contributions.
Benefits under Enhanced Retirement Program	A selected group of participants were offered an voluntary Enhanced Retirement Program (ERP) in 2022. Each participant that retired under the ERP had their pension benefit

Plan Name:	Evergy, Inc. Retirement Plan
EIN / PN:	82-2733395/001
Plan Sponsor:	Evergy, Inc.
Valuation Date:	October 1, 2023

SCHEDULE SB ATTACHMENTS

determined as if they were three years older and had an additional three years of service

Future Plan Changes

No future plan changes were recognized in determining pension cost or in determining minimum and maximum contributions. WTW is not aware of any future plan changes which are required to be reflected.

Changes in Benefits Valued Since Prior Measurement

None.

Plan Name: Everygy, Inc. Retirement Plan
EIN / PN: 82-2733395/001
Plan Sponsor: Everygy, Inc.
Valuation Date: October 1, 2023

SCHEDULE SB ATTACHMENTS

B.2a Summary of Plan Provisions for FAE Members of WCNOC Plan of Benefits

Plan Provisions

The most recent amendment reflected in the following plan provisions was signed November 9, 2022 and effective as of December 31, 2022.

Covered employees All employees, excluding leased employees and independent contractors, except non-bargaining employees hired on or after January 1, 2013 and bargaining employees hired after the date specified in a collective bargaining agreement that calls for their participation as a Cash Balance Member.

Participation date First day of month following of one year of eligibility service and attainment of age 21.

Definitions

Vesting service One year for each 1,000-hour plan year of employment by Wolf Creek Nuclear Operating Corporation, excluding plan years prior to age 18.

Pension service Years of vesting service after becoming eligible to participate including service with an employer from which the employee transferred.

Pensionable pay Total remuneration plus any amounts deferred under Section 401(k), Section 125, or Section 132(f)(4) of the Internal Revenue Code.

Average earnings The annual average of the highest sixty consecutive months of pensionable pay during the 120-month period, ending on the earlier of the participant's termination date or retirement date.

Covered compensation The average of the Social Security taxable wage bases in effect for each calendar year during the 35-year period ending with the last day of the calendar year in which the participant attains Social Security Retirement Age (as defined in Section 415(b)(8) of the Internal Revenue Code).

Normal retirement date (NRD) First of month coinciding with or next following the attainment of age 65.

Plan Name: Evergy, Inc. Retirement Plan
EIN / PN: 82-2733395/001
Plan Sponsor: Evergy, Inc.
Valuation Date: October 1, 2023

SCHEDULE SB ATTACHMENTS

Monthly pension benefit	One-twelfth of the total of 1.3% of average earnings up to Covered Compensation plus 1.65% of average earnings in excess of Covered Compensation multiplied by pension service not in excess of 40 years.
Monthly preretirement death benefit	50% of the monthly pension benefit as of the date of death, reduced for the 50% joint and survivor election and reduced for payment as early as the participant's 55th birthday.
Plan year	The twelve-month period beginning on any October 1.

Eligibility for Benefits

Normal retirement	Retirement on NRD.
Early retirement	Retirement before NRD and on or after both attaining age 55 and completing five years of vesting service.
Postponed retirement	Retirement after NRD.
Vested termination	Termination for reasons other than death, disability or retirement after completing five years of vesting service.
Disability	Permanent and total disability prior to NRD after completing five years of vesting service and participant qualifies as disabled under the provisions of the Social Security Act.
Preretirement death benefit	Death while eligible for normal, early, postponed, or deferred vested retirement benefits, with a surviving spouse.

Benefits Paid Upon the Following Events

Normal retirement	Monthly pension benefit determined as of NRD.
Early retirement	Monthly pension benefit determined as of early retirement date, reduced 3.0% for each year of payment before age 62.
Postponed retirement	Monthly pension benefit determined as of actual retirement date.

Plan Name:	Evergy, Inc. Retirement Plan
EIN / PN:	82-2733395/001
Plan Sponsor:	Evergy, Inc.
Valuation Date:	October 1, 2023

SCHEDULE SB ATTACHMENTS

Vested termination	Monthly pension benefit determined as of termination date, payable at NRD.
Disablement	Monthly pension benefit determined as of the date of disablement, payable immediately without reduction for early commencement.
Preretirement death	Monthly preretirement death benefit payable on behalf of an active employee is reduced by 3.0% for each year that payment precedes the date the participant would have been 62 years old. The benefit is payable as early as the participant's 55 th birthday.

Other Plan Provisions

Forms of payment	Preretirement death benefits are payable only as described above. Monthly pension benefits are paid as described above as a life annuity, if the participant has no spouse as of the date payments begin, or if the participant so elects. Otherwise, benefits are paid in the form of 50% joint and survivor annuity option or, if the participant elects and the spouse consents, another actuarially equivalent optional form offered by the plan. Optional forms are a 75% joint and survivor annuity, a ten-year certain and life annuity, a Social Security adjustment option, or a lump sum. Actuarial equivalence is based on the applicable mortality table and applicable interest rate for the Social Security adjustment option, and 6% interest and the PPA 2020 Unisex Optional Combined mortality table for all other optional forms. Actuarial equivalence for the lump sum form and the level income options are determined using the mortality as defined under Section 417(e) as well as the 417(e) interest rates for May of the prior calendar year.
Limitations on benefits and pay	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.
Benefits under Enhanced Retirement Program	A selected group of participants were offered an voluntary Enhanced Retirement Program (ERP) in 2022. Each participant that retired under the ERP had their pension benefit

Plan Name:	Evergy, Inc. Retirement Plan
EIN / PN:	82-2733395/001
Plan Sponsor:	Evergy, Inc.
Valuation Date:	October 1, 2023

SCHEDULE SB ATTACHMENTS

determined as if they were three years older and had an additional three years of service.

Future Plan Changes

No future plan changes were recognized in determining pension cost or in determining minimum and maximum contributions. WTW is not aware of any future plan changes which are required to be reflected.

Changes in Benefits Valued Since Prior Measurement

A lump sum option form of payment was added for union FAE participants effective for payments on or after January 1, 2023.

Plan Name:	Evergy, Inc. Retirement Plan
EIN / PN:	82-2733395/001
Plan Sponsor:	Evergy, Inc.
Valuation Date:	October 1, 2023

SCHEDULE SB ATTACHMENTS

B.2b Summary of Plan Provisions for Cash Balance Members of WCNOG Plan of Benefits

Plan Provisions

The most recent amendment reflected in the following plan provisions was signed November 9, 2022 and effective as of October 1, 2022.

Covered employees	All non-bargaining employees hired after January 1, 2013 but hired or rehired before January 1, 2019 and bargaining employees hired after the date specified in a collective bargaining agreement that calls for their participation as a Cash Balance Member.
Participation date	The first day of the calendar month following completion of one year of eligibility service.

Definitions

Vesting service	One year for each 1,000-hour plan year of employment by Wolf Creek Nuclear Operating Corporation, excluding plan years prior to age 18.
Pensionable pay	Total remuneration plus any amounts deferred under Section 401(k), Section 125, or Section 132(f)(4) of the Internal Revenue Code.
Normal retirement date (NRD)	First of month coinciding with or next following age 65.
Contribution credits	Credited to cash balance member's cash balance account at the end of each calendar month that participant is an active employee. The amount equals the product of the cash balance member's earnings and their contribution rate (shown below).

Age	Contribution Rate
Under 30	4.00%
30 - 34	5.00%
35 - 39	6.00%
40 - 44	7.00%
45 - 49	8.00%
50 - 54	9.00%
55 - 59	10.00%
60+	12.00%

Plan Name: Evergy, Inc. Retirement Plan
EIN / PN: 82-2733395/001
Plan Sponsor: Evergy, Inc.
Valuation Date: October 1, 2023

SCHEDULE SB ATTACHMENTS

Interest credits	Credited at the end of each calendar month, prior to applying contribution credits, until the participant's commencement date. If the participant terminates prior to becoming vested, interest credits cease at termination. The account is credited at an effective rate of 4% per annum.
-------------------------	--

Eligibility for Benefits

Normal retirement	Retirement at any time on or after NRD, or at any time after completing three years of vesting service.
Vested termination	Termination for reasons other than death or retirement after completing three years of vesting service or attaining age 65.
Disability	Member participates in and qualifies for benefits under a long-term disability plan maintained by the company.
Preretirement death benefit	Death during active employment, or following retirement or termination after completing three years of vesting service, but prior to the annuity starting date.

Benefits Paid Upon the Following Events

Retirement or termination	Lump sum equal to the cash balance account, or an actuarially equivalent monthly pension determined as of annuity starting date.
Disablement	Cash balance account continues to accrue interest credits until the annuity starting date. Payable as a lump sum or an actuarially equivalent monthly pension.
Preretirement death	Lump sum equal to the cash balance account. If the beneficiary is the surviving spouse, an actuarially equivalent monthly pension determined as of the annuity starting date is also available.

Other Plan Provisions

Forms of payment	Basic form of payment is a lump sum. Optional forms are a life annuity, a 50%, or 75% joint and survivor annuity, a ten-year certain and life annuity or a social security adjustment option. Actuarial equivalence is based on the applicable mortality table prescribed by the IRS and applicable interest rate for the Social Security adjustment
-------------------------	--

Plan Name:	Evergy, Inc. Retirement Plan
EIN / PN:	82-2733395/001
Plan Sponsor:	Evergy, Inc.
Valuation Date:	October 1, 2023

SCHEDULE SB ATTACHMENTS

option, and 6% interest and the PPA 2020 Unisex Optional Combined mortality table for all other optional forms.

Pension Increases

None.

Plan participants' contributions

None.

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. Increases in the dollar limits are assumed for determining pension cost but not for determining contributions.

Benefits under Enhanced Retirement Program

A selected group of participants were offered an voluntary Enhanced Retirement Program (ERP) in 2022. Each participant that retired under the ERP had their pension benefit determined as if they were three years older and had an additional three years of service.

Future Plan Changes

No future plan changes were recognized in determining pension cost or in determining minimum and maximum contributions. WTW not aware of any future plan changes which are required to be reflected.

Changes in Benefits Valued Since Prior Measurement

None.

Plan Name: Evergy, Inc. Retirement Plan
EIN / PN: 82-2733395/001
Plan Sponsor: Evergy, Inc.
Valuation Date: October 1, 2023

SCHEDULE SB ATTACHMENTS

B.3 Summary of Plan Evergy Metro Plan of Benefits

Plan Provisions for Old Choice Program

The most recent amendment reflected in the following plan provisions was signed November 9, 2022 and effective as of October 1, 2022.

Covered employees	Employees hired prior to September 1, 2007 who are not covered by a collective bargaining agreement and who did not elect to participate in the New Choice Program. An employee whose date of hire is on or after January 1, 2014 shall not be a Covered Employee.
Participation date	First day of the month coincident with or next following the completion of six months of continuous service.

Definitions

Pension service	One year for each 1,000-hour calendar year of employment by Evergy Metro service equal to one-half year is accrued for a plan year in which the employee accrues more than 500 hours but less than 1,000 hours of service. In the initial plan year, pension service for calculating accrued benefits begins from the employee's participation date.								
Pensionable pay	Base compensation.								
Average earnings	Average pension earnings paid during the period of consecutive months preceding the earlier of the participant's termination date or retirement date and during which such average was highest, based on the following averaging periods: <table><tr><th>Retirement/Termination Age</th><th>Averaging Period</th></tr><tr><td>Pre-62</td><td>60</td></tr><tr><td>62 – 64</td><td>48</td></tr><tr><td>65+ (or Rule of 85)</td><td>36</td></tr></table>	Retirement/Termination Age	Averaging Period	Pre-62	60	62 – 64	48	65+ (or Rule of 85)	36
Retirement/Termination Age	Averaging Period								
Pre-62	60								
62 – 64	48								
65+ (or Rule of 85)	36								
Normal retirement date (NRD)	Age 65.								

Plan Name:	Evergy, Inc. Retirement Plan
EIN / PN:	82-2733395/001
Plan Sponsor:	Evergy, Inc.
Valuation Date:	October 1, 2023

SCHEDULE SB ATTACHMENTS

Monthly pension benefit	As of any date, 1⅔% of average earnings times years of pension service (maximum 30 years).
Monthly preretirement death benefit	50% of the monthly pension benefit as of the date of death, reduced for the 50% joint and survivor election and early payment.

Eligibility for Benefits

Normal retirement	Retirement on NRD.
Early retirement	Retirement before NRD and on or after both attaining age 55 and completing five years of pension service, or age ≥ 52 and age + service ≥ 85.
Postponed retirement	Retirement after NRD.
Deferred vested termination	Termination for reasons other than death or retirement after completing five years of vesting service.
Monthly preretirement death benefit	Death while eligible for normal, early, postponed, or deferred vested retirement benefits, with a surviving beneficiary.

Benefits Paid Upon the Following Events

Normal retirement	The monthly pension benefit determined as of NRD.
Early retirement	The monthly pension benefit determined as of the early retirement date, reduced 3.0% for each year that payment precedes age 62. No reduction if age ≥ 52 and age + service ≥ 85.
Postponed retirement	The monthly pension benefit determined as of the actual retirement date, but not less than actuarially increased benefit determined at NRD.
Deferred vested termination	The monthly pension benefit determined as of the termination date. Early retirement benefit may commence on or after age 55, reduced 3% for each year that payment precedes age 62.

Plan Name:	Evergy, Inc. Retirement Plan
EIN / PN:	82-2733395/001
Plan Sponsor:	Evergy, Inc.
Valuation Date:	October 1, 2023

SCHEDULE SB ATTACHMENTS

Preretirement death benefit The monthly preretirement death benefit payable as a life annuity to the surviving beneficiary.

Plan Name: Evergy, Inc. Retirement Plan
EIN / PN: 82-2733395/001
Plan Sponsor: Evergy, Inc.
Valuation Date: October 1, 2023

SCHEDULE SB ATTACHMENTS

Plan Provisions for New Choice Program

Covered employees	Employees hired on or after September 1, 2007 who are not covered by a collective bargaining agreement. Includes participants hired prior to September 1, 2007, who elected to participate in the New Choice Program effective January 1, 2008. An employee whose date of hire is on or after January 1, 2014 shall not be a Covered Employee.
Participation date	First day of the month coincident with or next following the completion of six months of continuous employment.

Definitions

Pension service	One year for each 1,000-hour calendar year of employment by Evergy Metro. In the initial plan year, pension service for calculating accrued benefits begins from the employee's participation date.
Pensionable pay	Base compensation.
Average earnings	Average pension earnings paid during the period of 48 consecutive months preceding the earlier of the participant's termination date or retirement date and during which such average was highest.
Normal retirement date (NRD)	First of month coinciding with or next following the attainment of age 65 with five years of pension service.
Monthly pension benefit	As of any date the sum of (i) and (ii), but not less than (iii): (i) The frozen benefit under the Old Choice Program as of December 31, 2007. (ii) 1¼% of average earnings multiplied by full years of pension service after December 31, 2007. (iii) 1¼% of average earnings multiplied by full years of pension service.
Monthly preretirement death benefit	50% of the monthly pension benefit as of the date of death, reduced for the 50% joint and survivor election and early payment.

Plan Name:	Evergy, Inc. Retirement Plan
EIN / PN:	82-2733395/001
Plan Sponsor:	Evergy, Inc.
Valuation Date:	October 1, 2023

SCHEDULE SB ATTACHMENTS

Eligibility for Benefits

Normal retirement	Retirement on NRD.
Early retirement	Retirement before NRD and on or after both attaining age 55 and completing five years of pension service, or age ≥ 52 and age + service ≥ 85 for employees hired before September 1, 2007.
Postponed retirement	Retirement after NRD.
Deferred vested termination	Termination for reasons other than death or retirement after completing five years of vesting service.
Monthly preretirement death benefit	Death while eligible for normal, early, postponed, or deferred vested retirement benefits, with a surviving beneficiary.

Benefits Paid Upon the Following Events

Normal retirement	The monthly pension benefit determined as of NRD.
Early retirement	With respect to the frozen benefit under the Old Choice Program accrued before January 1, 2008, the monthly pension benefit determined at the early retirement date, reduced 3.0% for each year that payment precedes age 62. No reduction if age ≥ 52 and age + service ≥ 85 for employees hired before September 1, 2007. With respect to the portion of the benefit accrued under the New Choice Program after December 31, 2007, the monthly pension benefit determined at the early retirement date, reduced 5.0% for each year that payment precedes age 62.
Postponed retirement	The monthly pension benefit determined as of actual retirement date, but not less than actuarially increased benefit determined at NRD.
Deferred vested termination	The monthly pension benefit determined as of the termination date, reduced for each year of payment before the age 62.
Preretirement death benefit	The monthly preretirement death benefit payable as a life annuity to the surviving beneficiary.

Plan Name:	Evergy, Inc. Retirement Plan
EIN / PN:	82-2733395/001
Plan Sponsor:	Evergy, Inc.
Valuation Date:	October 1, 2023

SCHEDULE SB ATTACHMENTS

Other Plan Provisions – Old Choice and New Choice Programs

Forms of payment	Preretirement spouse death benefit is paid only as described above. Other monthly pension benefits are paid as described above if the participant has no spouse as of the date payments begin, or in another optional form if the participant so elects. Otherwise, benefits are paid in the form of the 50% contingent annuitant option or, if the participant elects and the spouse consents, another optional form offered by the plan. Optional forms include: level income annuity; term certain and life annuity with a term certain of 5, 10, 15 or 20 years; joint and survivor annuity with 25%, 50%, 75% or 100% continuance to the contingent annuitant after the retiree's death; and a lump sum. All optional forms are the actuarial equivalent of a life annuity, with actuarial equivalence based on: • For lump sums, the segment interest rates published by the IRS for the month of May preceding the plan year in which the annuity starting date occurs and the prescribed mortality table for the year. • For other optional forms of payment, 6% interest and the PPA 2020 Unisex Optional Combined mortality table for all other optional forms.
Pension increases	None.
Plan participant contributions	None.
Maximum limits 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 take effect. Increases in the dollar limits are assumed for determining pension cost.
Benefits under Enhanced Retirement Program	A selected group of participants were offered an voluntary Enhanced Retirement Program (ERP) in 2022. Each participant that retired under the ERP had their pension benefit determined as if they were three years older and had an additional three years of service

Plan Name:	Evergy, Inc. Retirement Plan
EIN / PN:	82-2733395/001
Plan Sponsor:	Evergy, Inc.
Valuation Date:	October 1, 2023

SCHEDULE SB ATTACHMENTS

Plan Provisions for Transferred Aquila Participants

Covered employees Means an individual who (i) was employed by Aquila, Inc. on the day before the Closing Date, (ii) was an "Active Affected Employee", as that term is defined in the Agreement, and (iii) is an employee as of the Closing Date; or, as of the Merger Date, (iv) was receiving payment of monthly pension benefits from the Aquila Retirement Income Plan and was entitled to continuation of such payments for any period after the Merger Date or (v) previously terminated employment from Aquila, Inc., with the vested right to a benefit under the Aquila Retirement Income Plan, but had not yet begun to receive payment of that benefit.

Definitions

Aquila plan Aquila, Inc. Restated Retirement Income Plan, as in effect on the Closing Date.

Frozen Aquila benefit Means a Transferred Aquila Employee's "Accrued Benefit" (as that term is defined in the Aquila Plan) under the Aquila Plan as of the day immediately prior to the Closing Date, computed as a single life annuity commencing as of the Aquila Plan's normal retirement age (age 62).

Minimum benefit Each Transferred Aquila Participant shall, if this Plan is terminated, receive a benefit as of the merger date that is equal to or greater than the benefit that he or she would have been entitled to receive under the Aquila Plan before the merger date, had the Aquila Plan then terminated.

Increase in Frozen Aquila benefit Transferred Aquila Employees who are vested will receive an increase in their Frozen Aquila Benefit equal to one-third of one percent for each month after the Closing Date in which they are credited with at least one hour of service under the Evergy, Inc. Non-Union Pension Plan or the Evergy, Inc. Joint Trusteed Retirement Plan.

Merger date December 31, 2008

Additional Plan Provisions

Vesting Because active participants in the Aquila Plan became fully vested in their benefits at age 55 (regardless of their years of service), any Transferred Aquila Employee who is an employee as of the date he or

Plan Name: Evergy, Inc. Retirement Plan
EIN / PN: 82-2733395/001
Plan Sponsor: Evergy, Inc.
Valuation Date: October 1, 2023

SCHEDULE SB ATTACHMENTS

she attains such age shall be fully vested in his or her Frozen Aquila Benefit as of that date.

Early retirement

Retirement on or after age 55. "Frozen Aquila Benefits" are payable in full at age 62 and are reduced by 6% if termed pre-merger, and reduced 5% if termed post-merger, for each year that benefit commencement precedes age 62. "Increase in Frozen Aquila Benefits" are payable in full at age 65 and are reduced by 5% for each year that benefit commencement precedes age 62.

Forms of payment

The basic form of payment is a life annuity. Other forms of payment, available on an actuarially equivalent basis, are the same as those available to Old and New Choice Program participants. For purposes of paying the Frozen Aquila Benefit, actuarial equivalence is determined based on the factors and assumptions in the Aquila Plan.

Maximum limits on benefits and pay

Benefits and compensation 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.

Benefits under Enhanced Retirement Program

A selected group of participants were offered an voluntary Enhanced Retirement Program (ERP) in 2022. Each participant that retired under the ERP had their pension benefit determined as if they were three years older and had an additional three years of service.

Plan participant contributions

None.

Future Plan Changes

No future plan changes were recognized in determining pension cost or in determining minimum and maximum contributions. WTW is not aware of any future plan changes which are required to be reflected.

Changes in Benefits Valued Since Prior Measurement

None.

Plan Name: Evergy, Inc. Retirement Plan
EIN / PN: 82-2733395/001
Plan Sponsor: Evergy, Inc.
Valuation Date: October 1, 2023

SUPPLEMENTAL SCHEDULES

EVERGY, INC.
NON-UNION PENSION PLAN
EIN No. 82-2733395, Plan No. 001

FORM 5500 — SCHEDULE H, PART IV, LINE 4i — SCHEDULE OF ASSETS (HELD AT END OF YEAR)
AS OF SEPTEMBER 30, 2024

(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
INTEREST BEARING CASH:				
* BNY Mellon Cash Reserve	Interest Bearing Cash		\$ 116,302	\$ 116,302
REGISTERED INVESTMENT COMPANIES:				
* SEI Institutional Investment Trust-Large Cap	Registered Investment Company		170,526,801	171,498,534
* SEI Institutional Investment Trust-Core Fixed Income	Registered Investment Company		175,611,805	154,450,218
* SEI Institutional Investment Trust-World Equity ex-US	Registered Investment Company		189,078,474	173,539,385
* SEI Institutional Investment Trust-Intermediate Duration Cr	Registered Investment Company		183,468,018	159,827,870
* SEI Institutional Investment Trust-High Yield	Registered Investment Company		63,019,219	53,779,173
* SEI Institutional Investment Trust-Emerging Markets Debt	Registered Investment Company		46,165,026	42,869,915
* SEI Institutional Investment Trust-Emerging Markets Equity	Registered Investment Company		47,017,285	43,487,028
* SEI Institutional Investment Trust-Dynamic Asset Allocation	Registered Investment Company		55,156,986	53,300,139
* SEI Institutional Investment Trust - Extended Market Index	Registered Investment Company		58,251,284	53,424,234
TOTAL REGISTERED INVESTMENT COMPANIES			988,294,898	906,176,496
COMMON COLLECTIVE TRUSTS:				
* SEI Institutional Investment Trust-Structured Credit	Common/Collective Trust		71,373,757	99,273,041
* JPMCB Strategic Property Fund	Common/Collective Trust		45,623,132	38,984,384
* EB Temporary Investment Fund of the Bank of New York Mellon	Common/Collective Trust		8,437,586	8,437,586
* SEI Special Situations Collective Fund	Common/Collective Trust		43,900,000	54,080,725
TOTAL COMMON COLLECTIVE TRUSTS			169,334,475	200,775,736
LIMITED PARTNERSHIPS:				
* Cross Creek Capital Partners III LP	Limited Partnership		9,287,006	6,681,540
* Cross Creek Capital II LP	Limited Partnership		22,540,522	7,180,882
* Cross Creek Capital Partners IV LP	Limited Partnership		8,499,190	6,695,585
* Cross Creek Capital Partners V LP	Limited Partnership		8,401,181	7,657,221
* Cross Creek Capital Partners LLC	Limited Partnership		2,867,622	1,541,376
* Cross Creek Capital LP	Limited Partnership		750,256	-
* Cross Creek Capital VI LP	Limited Partnership		2,624,670	2,774,968
TOTAL LIMITED PARTNERSHIPS			54,970,447	32,531,572
			\$ 1,212,716,122	\$ 1,139,600,106

* Represents party-in-interest to the Plan

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 32
Schedule of Amortization Bases
as of October 1, 2023

Type of Base	Date Established	Initial Amount	Remaining Amortization Period (Years)	Outstanding Balance	Amortization Payment
1. Shortfall	10/01/2023	90,044,122	15.00000	90,044,122	8,246,305
2. Shortfall	10/01/2022	121,915,383	14.00000	117,330,979	11,266,377
3. Shortfall	10/01/2021	0	13.00000	0	0
4. Shortfall	10/01/2020	(14,334,153)	12.00000	(12,552,281)	(1,345,786)
5. Shortfall	10/01/2019	76,668,613	11.00000	65,851,020	7,532,356
Total				260,673,840	25,699,252

Plan Name: Evergy, Inc. Retirement Plan
EIN / PN: 82-2733395/001
Plan Sponsor: Evergy, Inc.
Valuation Date: October 1, 2023

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 24 Change in Actuarial Assumptions

The termination rate, retirement rate, and the married percentage assumptions were updated to those above in order to reflect the results of the 2023 experience study.

The annuity election rate for Wolf Creek union FAE participants was changed from 100% to 10% to reflect the addition of a lump sum option for these participants with a 90% election rate. A lump sum optional form of payment was added for legacy Wolf Creek union FAE participants.

The expected future cash balance interest crediting rate for Evergy Kansas Central was updated from 4.00% to 4.25% as a result of changes to market yields since the last measurement date.

The assumption for administrative expenses was updated to reflect expected future experience.

Plan Name:	Evergy, Inc. Retirement Plan
EIN / PN:	82-2733395/001
Plan Sponsor:	Evergy, Inc.
Valuation Date:	October 1, 2023