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| <div>Form 5500</div> <div>Department of the Treasury<br/>Internal Revenue Service</div> <div>Department of Labor<br/>Employee Benefits Security<br/>Administration</div> <div>Pension Benefit Guaranty Corporation</div> | <div>Annual Return/Report of Employee Benefit Plan</div> <div>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).</div> <div>▶ Complete all entries in accordance with the instructions to the Form 5500.</div> | <div>OMB Nos. 1210-0110<br/>1210-0089</div> <div>2024</div> <div>This Form is Open to Public Inspection</div> |
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| Part I                                                                                     | Annual Report Identification Information                                                                                                                                                                                                                                                                                                                                                                      |
| For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024 |                                                                                                                                                                                                                                                                                                                                                                                                               |
| A                                                                                          | This return/report is for: <div><div><input type="checkbox"/> a multiemployer plan</div><div><input type="checkbox"/> a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.)</div><div><input checked="" type="checkbox"/> a single-employer plan</div><div><input type="checkbox"/> a DFE (specify) _____</div></div> |
| B                                                                                          | This return/report is: <div><div><input type="checkbox"/> the first return/report</div><div><input type="checkbox"/> the final return/report</div><div><input type="checkbox"/> an amended return/report</div><div><input type="checkbox"/> a short plan year return/report (less than 12 months)</div></div>                                                                                                 |
| C                                                                                          | If the plan is a collectively-bargained plan, check here. .... ▶ <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                     |
| D                                                                                          | Check box if filing under: <div><div><input checked="" type="checkbox"/> Form 5558</div><div><input type="checkbox"/> automatic extension</div><div><input type="checkbox"/> the DFVC program</div><div><input type="checkbox"/> special extension (enter description)</div></div>                                                                                                                            |
| E                                                                                          | If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. .... ▶ <input type="checkbox"/>                                                                                                                                                                                                                                                                                      |

|         |                                                                                                                                                                                                                                                                                                                                                                |
|---------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Part II | Basic Plan Information—enter all requested information                                                                                                                                                                                                                                                                                                         |
| 1a      | Name of plan<br>ATMOS ENERGY CORPORATION PENSION ACCOUNT PLAN                                                                                                                                                                                                                                                                                                  |
| 1b      | Three-digit plan number (PN) ▶ 003                                                                                                                                                                                                                                                                                                                             |
| 1c      | Effective date of plan<br>01/01/1947                                                                                                                                                                                                                                                                                                                           |
| 2a      | Plan sponsor's name (employer, if for a single-employer plan)<br>Mailing address (include room, apt., suite no. and street, or P.O. Box)<br>City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions)<br>ATMOS ENERGY CORPORATION<br><br>5430 LBJ FREEWAY<br>THREE LINCOLN CENTRE, SUITE 160<br>DALLAS, TX 75240 |
| 2b      | Employer Identification Number (EIN)<br>75-1743247                                                                                                                                                                                                                                                                                                             |
| 2c      | Plan Sponsor's telephone number<br>972-855-4026                                                                                                                                                                                                                                                                                                                |
| 2d      | Business code (see instructions)<br>221210                                                                                                                                                                                                                                                                                                                     |

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. | 09/30/2025 | MICHELLE FAULK                                               |
|           | Signature of plan administrator                   | Date       | Enter name of individual signing as plan administrator       |
| SIGN HERE |                                                   |            |                                                              |
|           | Signature of employer/plan sponsor                | Date       | Enter name of individual signing as employer or plan sponsor |
| SIGN HERE |                                                   |            |                                                              |
|           | Signature of DFE                                  | Date       | Enter name of individual signing as DFE                      |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>3a</b> Plan administrator's name and address <input type="checkbox"/> Same as Plan Sponsor<br><br>ATMOS ENERGY CORP. QUALIFIED RETIREMENT PLANS & TRUSTS COMMITTEE<br><br>5430 LBJ FREEWAY<br>THREE LINCOLN CENTRE, STE 160<br>DALLAS, TX 75240                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  | <b>3b</b> Administrator's EIN<br>75-1984576                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  | <b>3c</b> Administrator's telephone number<br>972-855-3324                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| <b>4</b> If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report:<br><b>a</b> Sponsor's name<br><b>c</b> Plan Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  | <b>4b</b> EIN<br><br><b>4d</b> PN                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| <b>5</b> Total number of participants at the beginning of the plan year                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  | <b>5</b> 4310                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| <b>6</b> Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines <b>6a(1)</b> , <b>6a(2)</b> , <b>6b</b> , <b>6c</b> , and <b>6d</b> ).<br><b>a(1)</b> Total number of active participants at the beginning of the plan year .....<br><b>a(2)</b> Total number of active participants at the end of the plan year .....<br><b>b</b> Retired or separated participants receiving benefits .....<br><b>c</b> Other retired or separated participants entitled to future benefits .....<br><b>d</b> Subtotal. Add lines <b>6a(2)</b> , <b>6b</b> , and <b>6c</b> .....<br><b>e</b> Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. ....<br><b>f</b> Total. Add lines <b>6d</b> and <b>6e</b> .....<br><b>g(1)</b> Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) .....<br><b>g(2)</b> Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) .....<br><b>h</b> Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested..... |  | <b>6a(1)</b> 1882<br><b>6a(2)</b> 1717<br><b>6b</b> 1600<br><b>6c</b> 362<br><b>6d</b> 3679<br><b>6e</b> 450<br><b>6f</b> 4129<br><b>6g(1)</b><br><b>6g(2)</b><br><b>6h</b>                                                                                                                                                                                                                                                                                                                                                             |
| <b>7</b> Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item) .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  | <b>7</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| <b>8a</b> If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:<br>1A 1C<br><br><b>b</b> If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| <b>9a</b> Plan funding arrangement (check all that apply)<br>(1) <input type="checkbox"/> Insurance<br>(2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts<br>(3) <input checked="" type="checkbox"/> Trust<br>(4) <input type="checkbox"/> General assets of the sponsor                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  | <b>9b</b> Plan benefit arrangement (check all that apply)<br>(1) <input type="checkbox"/> Insurance<br>(2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts<br>(3) <input checked="" type="checkbox"/> Trust<br>(4) <input type="checkbox"/> General assets of the sponsor                                                                                                                                                                                                                                           |
| <b>10</b> Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| <b>a Pension Schedules</b><br>(1) <input checked="" type="checkbox"/> <b>R</b> (Retirement Plan Information)<br><br>(2) <input type="checkbox"/> <b>MB</b> (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary<br><br>(3) <input checked="" type="checkbox"/> <b>SB</b> (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary<br>(4) <input type="checkbox"/> <b>DCG</b> (Individual Plan Information) – Number Attached _____<br>(5) <input type="checkbox"/> <b>MEP</b> (Multiple-Employer Retirement Plan Information)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  | <b>b General Schedules</b><br>(1) <input checked="" type="checkbox"/> <b>H</b> (Financial Information)<br>(2) <input type="checkbox"/> <b>I</b> (Financial Information – Small Plan)<br>(3) <input type="checkbox"/> <b>A</b> (Insurance Information) – Number Attached <u>0</u><br>(4) <input checked="" type="checkbox"/> <b>C</b> (Service Provider Information)<br>(5) <input checked="" type="checkbox"/> <b>D</b> (DFE/Participating Plan Information)<br>(6) <input type="checkbox"/> <b>G</b> (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 2024 Form M-1 annual report. If the plan was not required to file the 2024 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

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

|                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                   |                                                                                                |
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| <div>SCHEDULE SB<br/>(Form 5500)<br/><br/>Department of the Treasury<br/>Internal Revenue Service<br/><br/>Department of Labor<br/>Employee Benefits Security Administration<br/><br/>Pension Benefit Guaranty Corporation</div> | <div>Single-Employer Defined Benefit Plan<br/>Actuarial Information</div> <div>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).</div> <div>▶ File as an attachment to Form 5500 or 5500-SF.</div> | <div>OMB No. 1210-0110</div> <div>2024</div> <div>This Form is Open to Public Inspection</div> |
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|                                                                                                                                    |                                                                                                                                                  |
|------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------|
| For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024                                         |                                                                                                                                                  |
| ▶ Round off amounts to nearest dollar.                                                                                             |                                                                                                                                                  |
| ▶ Caution: A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.            |                                                                                                                                                  |
| A Name of plan<br>ATMOS ENERGY CORPORATION PENSION ACCOUNT PLAN                                                                    | B Three-digit plan number (PN) ▶ 003                                                                                                             |
| C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF<br>ATMOS ENERGY CORPORATION                                      | D Employer Identification Number (EIN)<br>75-1743247                                                                                             |
| E Type of plan: <input checked="" type="checkbox"/> Single <input type="checkbox"/> Multiple-A <input type="checkbox"/> Multiple-B | F Prior year plan size: <input type="checkbox"/> 100 or fewer <input type="checkbox"/> 101-500 <input checked="" type="checkbox"/> More than 500 |

|        |                                                                                                                                                                                                  |                            |                           |                          |
|--------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|---------------------------|--------------------------|
| Part I | Basic Information                                                                                                                                                                                |                            |                           |                          |
| 1      | Enter the valuation date: Month 01 Day 01 Year 2024                                                                                                                                              |                            |                           |                          |
| 2      | Assets:                                                                                                                                                                                          |                            |                           |                          |
| a      | Market value                                                                                                                                                                                     | 2a                         | 547007730                 |                          |
| b      | Actuarial value                                                                                                                                                                                  | 2b                         | 547007730                 |                          |
| 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                                                                                                                                     | 2041                       | 193925762                 | 193925762                |
| b      | For terminated vested participants                                                                                                                                                               | 405                        | 28599585                  | 28599585                 |
| c      | For active participants                                                                                                                                                                          | 1882                       | 215690493                 | 220598379                |
| d      | Total                                                                                                                                                                                            | 4328                       | 438215840                 | 443123726                |
| 4      | If the plan is in at-risk status, check the box and complete lines (a) and (b). <input type="checkbox"/>                                                                                         |                            |                           |                          |
| a      | Funding target disregarding prescribed at-risk assumptions                                                                                                                                       | 4a                         |                           |                          |
| b      | Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor | 4b                         |                           |                          |
| 5      | Effective interest rate                                                                                                                                                                          | 5                          | 5.08 %                    |                          |
| 6      | Target normal cost                                                                                                                                                                               |                            |                           |                          |
| a      | Present value of current plan year accruals                                                                                                                                                      | 6a                         | 12517521                  |                          |
| b      | Expected plan-related expenses                                                                                                                                                                   | 6b                         | 2876058                   |                          |
| c      | Target normal cost                                                                                                                                                                               | 6c                         | 15393579                  |                          |

**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.

|                          |                                                                                                                                                                                                                                                                   |                                                                                                                                                                              |
|--------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <div>SIGN<br/>HERE</div> | <div>Signature of actuary</div> <div>MERRICK JOHNSON</div> <div>Type or print name of actuary</div> <div>WILLIS TOWERS WATSON US LLC</div> <div>Firm name</div> <div>500 NORTH AKARD STREET, SUITE 4300<br/>DALLAS, TX 75201</div> <div>Address of the firm</div> | <div>09/23/2025</div> <div>Date</div> <div>23-08683</div> <div>Most recent enrollment number</div> <div>214-530-4200</div> <div>Telephone number (including area code)</div> |
|--------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

**Part II Beginning of Year Carryover and Prefunding Balances**

|                                                                                                                                                                      | (a) Carryover balance | (b) Prefunding balance |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|------------------------|
| <b>7</b> Balance at beginning of prior year after applicable adjustments (line 13 from prior year) .....                                                             | 0                     | 0                      |
| <b>8</b> Portion elected for use to offset prior year's funding requirement (line 35 from prior year) .....                                                          | 0                     | 0                      |
| <b>9</b> Amount remaining (line 7 minus line 8) .....                                                                                                                | 0                     | 0                      |
| <b>10</b> Interest on line 9 using prior year's actual return of <u>14.50</u> % .....                                                                                | 0                     | 0                      |
| <b>11</b> Prior year's excess contributions to be added to prefunding balance:                                                                                       |                       |                        |
| <b>a</b> Present value of excess contributions (line 38a from prior year) .....                                                                                      |                       | 4605275                |
| <b>b(1)</b> Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of <u>5.20</u> % ..... |                       | 239474                 |
| <b>b(2)</b> Interest on line 38b from prior year Schedule SB, using prior year's actual return .....                                                                 |                       | 0                      |
| <b>c</b> Total available at beginning of current plan year to add to prefunding balance .....                                                                        |                       | 4844749                |
| <b>d</b> Portion of (c) to be added to prefunding balance .....                                                                                                      |                       | 0                      |
| <b>12</b> Other reductions in balances due to elections or deemed elections .....                                                                                    | 0                     | 0                      |
| <b>13</b> Balance at beginning of current year (line 9 + line 10 + line 11d – line 12) .....                                                                         | 0                     | 0                      |

**Part III Funding Percentages**

|                                                                                                                                                                            |           |          |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------|
| <b>14</b> Funding target attainment percentage .....                                                                                                                       | <b>14</b> | 123.44 % |
| <b>15</b> Adjusted funding target attainment percentage .....                                                                                                              | <b>15</b> | 123.44 % |
| <b>16</b> Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement ..... | <b>16</b> | 114.89 % |
| <b>17</b> If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage .....                                        | <b>17</b> | %        |

**Part IV Contributions and Liquidity Shortfalls****18** Contributions made to the plan for the plan year by employer(s) and employees:

| (a) Date<br>(MM-DD-YYYY) | (b) Amount paid by<br>employer(s) | (c) Amount paid by<br>employees | (a) Date<br>(MM-DD-YYYY) | (b) Amount paid by<br>employer(s) | (c) Amount paid by<br>employees |
|--------------------------|-----------------------------------|---------------------------------|--------------------------|-----------------------------------|---------------------------------|
|                          |                                   |                                 |                          |                                   |                                 |
|                          |                                   |                                 |                          |                                   |                                 |
|                          |                                   |                                 |                          |                                   |                                 |
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|                          |                                   |                                 |                          |                                   |                                 |
|                          |                                   |                                 |                          |                                   |                                 |
|                          |                                   |                                 |                          |                                   |                                 |
| <b>Totals ►</b>          |                                   |                                 | <b>18(b)</b>             | 0                                 | <b>18(c)</b> 0                  |

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

|                                                                                                                         |            |   |
|-------------------------------------------------------------------------------------------------------------------------|------------|---|
| <b>a</b> Contributions allocated toward unpaid minimum required contributions from prior years .....                    | <b>19a</b> | 0 |
| <b>b</b> Contributions made to avoid restrictions adjusted to valuation date .....                                      | <b>19b</b> | 0 |
| <b>c</b> Contributions allocated toward minimum required contribution for current year adjusted to valuation date ..... | <b>19c</b> | 0 |

**20** Quarterly contributions and liquidity shortfalls:

- a** Did the plan have a "funding shortfall" for the prior year? ☐ Yes ☒ No
- b** If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? ☐ Yes ☐ No
- c** If line 20a is "Yes," see instructions and complete the following table as applicable:

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

|               |                                                                            |
|---------------|----------------------------------------------------------------------------|
| <b>Part V</b> | <b>Assumptions Used to Determine Funding Target and Target Normal Cost</b> |
|---------------|----------------------------------------------------------------------------|

|           |                                                                                                                                                                                    |                                                     |                        |                        |
|-----------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|------------------------|------------------------|
| <b>21</b> | Discount rate:                                                                                                                                                                     |                                                     |                        |                        |
| <b>a</b>  | Segment rates:                                                                                                                                                                     | 1st segment:<br>4.75 %                              | 2nd segment:<br>4.87 % | 3rd segment:<br>5.59 % |
|           |                                                                                                                                                                                    | <input type="checkbox"/> N/A, full yield curve used |                        |                        |
| <b>b</b>  | Applicable month (enter code) .....                                                                                                                                                | <b>21b</b>                                          | 4                      |                        |
| <b>22</b> | Weighted average retirement age .....                                                                                                                                              | <b>22</b>                                           | 64                     |                        |
| <b>23</b> | Mortality table(s) (see instructions) <input type="checkbox"/> Prescribed - combined <input checked="" type="checkbox"/> Prescribed - separate <input type="checkbox"/> Substitute |                                                     |                        |                        |

|                |                            |
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| <b>Part VI</b> | <b>Miscellaneous Items</b> |
|----------------|----------------------------|

|           |                                                                                                                                                             |           |                                         |                                        |
|-----------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------------------------------------|----------------------------------------|
| <b>24</b> | Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment..... |           | Yes                                     | <input checked="" type="checkbox"/> No |
| <b>25</b> | Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment.....                                      |           | Yes                                     | <input checked="" type="checkbox"/> No |
| <b>26</b> | Demographic and benefit information                                                                                                                         |           |                                         |                                        |
| <b>a</b>  | Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment. ....                           |           | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No            |
| <b>b</b>  | Is the plan required to provide a projection of expected benefit payments? If "Yes," see instructions regarding required attachment ...                     |           | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No            |
| <b>27</b> | If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment.....                                   | <b>27</b> |                                         |                                        |

|                 |                                                                                |
|-----------------|--------------------------------------------------------------------------------|
| <b>Part VII</b> | <b>Reconciliation of Unpaid Minimum Required Contributions For Prior Years</b> |
|-----------------|--------------------------------------------------------------------------------|

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

|                  |                                                       |
|------------------|-------------------------------------------------------|
| <b>Part VIII</b> | <b>Minimum Required Contribution For Current Year</b> |
|------------------|-------------------------------------------------------|

|           |                                                                                                                                                                            |                     |               |
|-----------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|---------------|
| <b>31</b> | Target normal cost and excess assets (see instructions):                                                                                                                   |                     |               |
| <b>a</b>  | Target normal cost (line 6c) .....                                                                                                                                         | <b>31a</b>          | 15393579      |
| <b>b</b>  | Excess assets, if applicable, but not greater than line 31a .....                                                                                                          | <b>31b</b>          | 15393579      |
| <b>32</b> | Amortization installments:                                                                                                                                                 | Outstanding Balance | Installment   |
| <b>a</b>  | Net shortfall amortization installment .....                                                                                                                               | 0                   | 0             |
| <b>b</b>  | Waiver amortization installment .....                                                                                                                                      | 0                   | 0             |
| <b>33</b> | 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 ..... | <b>33</b>           |               |
| <b>34</b> | Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33).....                                                          | <b>34</b>           | 0             |
|           | Carryover balance                                                                                                                                                          | Prefunding balance  | Total balance |
| <b>35</b> | Balances elected for use to offset funding requirement .....                                                                                                               | 0                   | 0             |
| <b>36</b> | Additional cash requirement (line 34 minus line 35) .....                                                                                                                  | <b>36</b>           | 0             |
| <b>37</b> | Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c) .....                                                  | <b>37</b>           | 0             |
| <b>38</b> | Present value of excess contributions for current year (see instructions)                                                                                                  |                     |               |
| <b>a</b>  | Total (excess, if any, of line 37 over line 36) .....                                                                                                                      | <b>38a</b>          | 0             |
| <b>b</b>  | Portion included in line 38a attributable to use of prefunding and funding standard carryover balances .....                                                               | <b>38b</b>          | 0             |
| <b>39</b> | Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37) .....                                                                      | <b>39</b>           | 0             |
| <b>40</b> | Unpaid minimum required contributions for all years .....                                                                                                                  | <b>40</b>           | 0             |

|                |                                                                                             |
|----------------|---------------------------------------------------------------------------------------------|
| <b>Part IX</b> | <b>Pension Funding Relief Under the American Rescue Plan Act of 2021 (See Instructions)</b> |
|----------------|---------------------------------------------------------------------------------------------|

|           |                                                                                                                                                                                                                                                                                                        |
|-----------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>41</b> | If an election was made to use the extended amortization rule for a plan year beginning on or before December 31, 2021, check the box to indicate the first plan year for which the rule applies. <input type="checkbox"/> 2019 <input type="checkbox"/> 2020 <input checked="" type="checkbox"/> 2021 |
|-----------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

|                                                                                                                                                                                                                                              |                                                                                                                                                                                                                             |                                         |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|
| <div>SCHEDULE C</div> <div>(Form 5500)</div> <div>Department of the Treasury<br/>Internal Revenue Service</div> <div>Department of Labor<br/>Employee Benefits Security Administration</div> <div>Pension Benefit Guaranty Corporation</div> | <div>Service Provider Information</div> <div>This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).</div> <div>▶ File as an attachment to Form 5500.</div> | OMB No. 1210-0110                       |
|                                                                                                                                                                                                                                              |                                                                                                                                                                                                                             | 2024                                    |
|                                                                                                                                                                                                                                              |                                                                                                                                                                                                                             | This Form is Open to Public Inspection. |

|                                                                                            |                                                      |     |
|--------------------------------------------------------------------------------------------|------------------------------------------------------|-----|
| For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024 |                                                      |     |
| A Name of plan<br>ATMOS ENERGY CORPORATION PENSION ACCOUNT PLAN                            | B Three-digit plan number (PN) ▶                     | 003 |
|                                                                                            |                                                      |     |
| C Plan sponsor's name as shown on line 2a of Form 5500<br>ATMOS ENERGY CORPORATION         | D Employer Identification Number (EIN)<br>75-1743247 |     |

|        |                                                 |
|--------|-------------------------------------------------|
| 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 |
|------------------------------------------------------------------------------------------------------------|

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

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

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

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

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

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

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

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

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

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

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

WILLIS TOWERS WATSON

53-0181291

| (b)<br>Service Code(s) | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>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)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 11 50                  | ACTUARY                                                                                           | 468729                                                                 | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                       |                                                                                                                                                                                 | Yes <input type="checkbox"/> No <input type="checkbox"/>                                     |

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

BROWN ADVISORY

24-4560299

| (b)<br>Service Code(s) | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>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)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 28 50 51 68            | INVESTMENT MANAGER                                                                                | 374914                                                                 | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                                            | 1667                                                                                                                                                                            | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                          |

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

WEDGE CAPITAL

56-1557450

| (b)<br>Service Code(s) | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>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)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 28 50 51 68            | INVESTMENT MANAGER                                                                                | 314921                                                                 | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                                            | 25930                                                                                                                                                                           | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                          |

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

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

STATE STREET RETIREE SERVICES

04-3581074

| (b)<br>Service Code(s) | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>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)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 15                     | RECORDKEEPER                                                                                      | 315376                                                                 | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                       |                                                                                                                                                                                 | Yes <input type="checkbox"/> No <input type="checkbox"/>                                     |

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

SYSTEMATIC FINANCIAL MANAGEMENT

22-3367558

| (b)<br>Service Code(s) | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>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)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 28 50 51 68            | INVESTMENT MANAGER                                                                                | 253654                                                                 | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                                            | 1689                                                                                                                                                                            | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                          |

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

EAGLE ASSET

59-2385219

| (b)<br>Service Code(s) | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>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)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 28 50 51 68            | INVESTMENT MANAGER                                                                                | 218988                                                                 | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                                            | 8076                                                                                                                                                                            | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                          |

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

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

ACADIAN INTL SMALL CAP

20-0075649

| (b)<br>Service Code(s)        | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>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)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|-------------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 15 29 49<br>21 10 28<br>50 51 | INVESTMENT<br>MANAGER                                                                             | 165284                                                                 | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                                            | 19979                                                                                                                                                                           | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                          |

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

AGINCOURT

54-1947440

| (b)<br>Service Code(s) | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>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)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 28 50 51               | INVESTMENT<br>MANAGER                                                                             | 141805                                                                 | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                       |                                                                                                                                                                                 | Yes <input type="checkbox"/> No <input type="checkbox"/>                                     |

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

LCG ASSOCIATES

75-1680350

| (b)<br>Service Code(s) | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>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)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 16 50                  | CONSULTANT                                                                                        | 62315                                                                  | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                       |                                                                                                                                                                                 | Yes <input type="checkbox"/> No <input type="checkbox"/>                                     |

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

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

STATE STREET GLOBAL ADVISORS

04-3581074

| (b)<br>Service Code(s) | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>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)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 18 19                  | CUSTODIAN                                                                                         | 53301                                                                  | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                                            | 291                                                                                                                                                                             | Yes <input type="checkbox"/> No <input type="checkbox"/>                                     |

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

WHITLEY PENN LLP

75-2393478

| (b)<br>Service Code(s) | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>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)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 10 50                  | AUDITOR                                                                                           | 41019                                                                  | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                       |                                                                                                                                                                                 | Yes <input type="checkbox"/> No <input type="checkbox"/>                                     |

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

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

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

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

| (a) Enter service provider name as it appears on line 2             | (b) Service Codes<br>(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<br>(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<br>(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)

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

|                                                                                                                                                                                   |                                                                                                                                                                                                                                   |                                                                                                 |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|
| <div>SCHEDULE D<br/>(Form 5500)<br/><br/>Department of the Treasury<br/>Internal Revenue Service<br/><br/>Department of Labor<br/>Employee Benefits Security Administration</div> | <div>DFE/Participating Plan Information</div> <div>This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).</div> <div>▶ File as an attachment to Form 5500.</div> | <div>OMB No. 1210-0110</div> <div>2024</div> <div>This Form is Open to Public Inspection.</div> |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|

|                                                                                            |                                                      |     |
|--------------------------------------------------------------------------------------------|------------------------------------------------------|-----|
| For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024 |                                                      |     |
| A Name of plan<br>ATMOS ENERGY CORPORATION PENSION ACCOUNT PLAN                            | B Three-digit plan number (PN) ▶                     | 003 |
| C Plan or DFE sponsor's name as shown on line 2a of Form 5500<br>ATMOS ENERGY CORPORATION  | D Employer Identification Number (EIN)<br>75-1743247 |     |

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

|                                                                             |                 |                                                                                                       |
|-----------------------------------------------------------------------------|-----------------|-------------------------------------------------------------------------------------------------------|
| a Name of MTIA, CCT, PSA, or 103-12 IE: RUSSELL 1000 INDEX NL               |                 |                                                                                                       |
| b Name of sponsor of entity listed in (a): STATE STREET BANK & TRUST        |                 |                                                                                                       |
| c EIN-PN 04-0025081-702                                                     | d Entity code C | e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 66158731 |
| a Name of MTIA, CCT, PSA, or 103-12 IE: TS&W INTERNATIONAL LARGE CAP ENTITY |                 |                                                                                                       |
| b Name of sponsor of entity listed in (a): GLOBAL TRUST COMPANY             |                 |                                                                                                       |
| c EIN-PN 26-6773274-003                                                     | d Entity code C | e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 20825593 |
| 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)**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  
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plan sponsor**c** EIN-PN**a** Plan name**b** Name of  
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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

|                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                   |                                        |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|
| <div>SCHEDULE H</div> <div>(Form 5500)</div> <div>Department of the Treasury<br/>Internal Revenue Service</div> <div>Department of Labor<br/>Employee Benefits Security Administration</div> <div>Pension Benefit Guaranty Corporation</div> | <div>Financial Information</div> <div>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).</div> <div>▶ File as an attachment to Form 5500.</div> | OMB No. 1210-0110                      |
|                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                   | 2024                                   |
|                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                   | This Form is Open to Public Inspection |

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

|                                                                                    |                                                      |
|------------------------------------------------------------------------------------|------------------------------------------------------|
| A Name of plan<br>ATMOS ENERGY CORPORATION PENSION ACCOUNT PLAN                    | B Three-digit plan number (PN) ▶ 003                 |
| C Plan sponsor's name as shown on line 2a of Form 5500<br>ATMOS ENERGY CORPORATION | D Employer Identification Number (EIN)<br>75-1743247 |

| Part I                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Asset and Liability Statement |                       |                 |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|-----------------------|-----------------|
| <b>1</b> 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. <b>Round off amounts to the nearest dollar.</b> 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 |
| <b>a</b> Total noninterest-bearing cash .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <b>1a</b>                     |                       |                 |
| <b>b</b> Receivables (less allowance for doubtful accounts):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                               |                       |                 |
| <b>(1)</b> Employer contributions .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <b>1b(1)</b>                  | 5000000               | 0               |
| <b>(2)</b> Participant contributions.....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>1b(2)</b>                  |                       |                 |
| <b>(3)</b> Other .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <b>1b(3)</b>                  | 789316                | 656669          |
| <b>c</b> General investments:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                               |                       |                 |
| <b>(1)</b> Interest-bearing cash (include money market accounts & certificates of deposit) .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <b>1c(1)</b>                  | 21196209              | 38441853        |
| <b>(2)</b> U.S. Government securities .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <b>1c(2)</b>                  | 27833400              | 34216825        |
| <b>(3)</b> Corporate debt instruments (other than employer securities):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                               |                       |                 |
| <b>(A)</b> Preferred .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <b>1c(3)(A)</b>               |                       | 13061407        |
| <b>(B)</b> All other .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <b>1c(3)(B)</b>               | 24964848              | 15671812        |
| <b>(4)</b> Corporate stocks (other than employer securities):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                               |                       |                 |
| <b>(A)</b> Preferred .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <b>1c(4)(A)</b>               |                       |                 |
| <b>(B)</b> Common .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <b>1c(4)(B)</b>               | 189595252             | 189910014       |
| <b>(5)</b> Partnership/joint venture interests .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <b>1c(5)</b>                  | 22467226              | 22105565        |
| <b>(6)</b> Real estate (other than employer real property) .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <b>1c(6)</b>                  |                       |                 |
| <b>(7)</b> Loans (other than to participants) .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <b>1c(7)</b>                  |                       |                 |
| <b>(8)</b> Participant loans .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <b>1c(8)</b>                  |                       |                 |
| <b>(9)</b> Value of interest in common/collective trusts .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <b>1c(9)</b>                  | 97093297              | 86984324        |
| <b>(10)</b> Value of interest in pooled separate accounts .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <b>1c(10)</b>                 |                       |                 |
| <b>(11)</b> Value of interest in master trust investment accounts .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <b>1c(11)</b>                 |                       |                 |
| <b>(12)</b> Value of interest in 103-12 investment entities .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <b>1c(12)</b>                 |                       |                 |
| <b>(13)</b> Value of interest in registered investment companies (e.g., mutual funds) .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <b>1c(13)</b>                 | 75157903              | 108865959       |
| <b>(14)</b> Value of funds held in insurance company general account (unallocated contracts).....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <b>1c(14)</b>                 |                       |                 |
| <b>(15)</b> Other.....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <b>1c(15)</b>                 |                       |                 |

| <b>1d</b> Employer-related investments:                                   |              | (a) Beginning of Year | (b) End of Year |
|---------------------------------------------------------------------------|--------------|-----------------------|-----------------|
| (1) Employer securities .....                                             | <b>1d(1)</b> | 83065530              | 70568109        |
| (2) Employer real property .....                                          | <b>1d(2)</b> |                       |                 |
| <b>e</b> Buildings and other property used in plan operation .....        | <b>1e</b>    |                       |                 |
| <b>f</b> Total assets (add all amounts in lines 1a through 1e) .....      | <b>1f</b>    | 547162981             | 580482537       |
| <b>Liabilities</b>                                                        |              |                       |                 |
| <b>g</b> Benefit claims payable .....                                     | <b>1g</b>    | 0                     | 445612          |
| <b>h</b> Operating payables .....                                         | <b>1h</b>    | 428780                | 517974          |
| <b>i</b> Acquisition indebtedness .....                                   | <b>1i</b>    |                       |                 |
| <b>j</b> Other liabilities .....                                          | <b>1j</b>    | 0                     | 0               |
| <b>k</b> Total liabilities (add all amounts in lines 1g through 1j) ..... | <b>1k</b>    | 428780                | 963586          |
| <b>Net Assets</b>                                                         |              |                       |                 |
| <b>l</b> Net assets (subtract line 1k from line 1f) .....                 | <b>1l</b>    | 546734201             | 579518951       |

**Part II Income and Expense Statement**

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

| <b>Income</b>                                                                                              |                 | (a) Amount | (b) Total |
|------------------------------------------------------------------------------------------------------------|-----------------|------------|-----------|
| <b>a Contributions:</b>                                                                                    |                 |            |           |
| (1) Received or receivable in cash from: <b>(A)</b> Employers .....                                        | <b>2a(1)(A)</b> |            |           |
| <b>(B)</b> Participants .....                                                                              | <b>2a(1)(B)</b> |            |           |
| <b>(C)</b> Others (including rollovers) .....                                                              | <b>2a(1)(C)</b> |            |           |
| (2) Noncash contributions .....                                                                            | <b>2a(2)</b>    |            |           |
| (3) Total contributions. Add lines <b>2a(1)(A)</b> , <b>(B)</b> , <b>(C)</b> , and line <b>2a(2)</b> ..... | <b>2a(3)</b>    |            | 0         |
| <b>b Earnings on investments:</b>                                                                          |                 |            |           |
| <b>(1) Interest:</b>                                                                                       |                 |            |           |
| <b>(A)</b> Interest-bearing cash (including money market accounts and certificates of deposit) .....       | <b>2b(1)(A)</b> | 861538     |           |
| <b>(B)</b> U.S. Government securities .....                                                                | <b>2b(1)(B)</b> | 1084055    |           |
| <b>(C)</b> Corporate debt instruments .....                                                                | <b>2b(1)(C)</b> | 1280716    |           |
| <b>(D)</b> Loans (other than to participants) .....                                                        | <b>2b(1)(D)</b> |            |           |
| <b>(E)</b> Participant loans .....                                                                         | <b>2b(1)(E)</b> |            |           |
| <b>(F)</b> Other .....                                                                                     | <b>2b(1)(F)</b> |            |           |
| <b>(G)</b> Total interest. Add lines <b>2b(1)(A)</b> through <b>(F)</b> .....                              | <b>2b(1)(G)</b> |            | 3226309   |
| <b>(2) Dividends:</b>                                                                                      |                 |            |           |
| <b>(A)</b> Preferred stock .....                                                                           | <b>2b(2)(A)</b> |            |           |
| <b>(B)</b> Common stock .....                                                                              | <b>2b(2)(B)</b> | 4438105    |           |
| <b>(C)</b> Registered investment company shares (e.g. mutual funds) .....                                  | <b>2b(2)(C)</b> | 4688435    |           |
| <b>(D)</b> Total dividends. Add lines <b>2b(2)(A)</b> , <b>(B)</b> , and <b>(C)</b> .....                  | <b>2b(2)(D)</b> |            | 9126540   |
| (3) Rents .....                                                                                            | <b>2b(3)</b>    |            |           |
| <b>(4) Net gain (loss) on sale of assets:</b>                                                              |                 |            |           |
| <b>(A)</b> Aggregate proceeds .....                                                                        | <b>2b(4)(A)</b> | 202420463  |           |
| <b>(B)</b> Aggregate carrying amount (see instructions) .....                                              | <b>2b(4)(B)</b> | 147860436  |           |
| <b>(C)</b> Subtract line <b>2b(4)(B)</b> from line <b>2b(4)(A)</b> and enter result .....                  | <b>2b(4)(C)</b> |            | 54560027  |
| <b>(5) Unrealized appreciation (depreciation) of assets:</b>                                               |                 |            |           |
| <b>(A)</b> Real estate .....                                                                               | <b>2b(5)(A)</b> |            |           |
| <b>(B)</b> Other .....                                                                                     | <b>2b(5)(B)</b> | -4566533   |           |
| <b>(C)</b> Total unrealized appreciation of assets. Add lines <b>2b(5)(A)</b> and <b>(B)</b> .....         | <b>2b(5)(C)</b> |            |           |

|                                                                                                 |               | (a) Amount | (b) Total |
|-------------------------------------------------------------------------------------------------|---------------|------------|-----------|
| (6) Net investment gain (loss) from common/collective trusts .....                              | <b>2b(6)</b>  |            | 14373292  |
| (7) Net investment gain (loss) from pooled separate accounts .....                              | <b>2b(7)</b>  |            |           |
| (8) Net investment gain (loss) from master trust investment accounts .....                      | <b>2b(8)</b>  |            |           |
| (9) Net investment gain (loss) from 103-12 investment entities .....                            | <b>2b(9)</b>  |            |           |
| (10) Net investment gain (loss) from registered investment companies (e.g., mutual funds) ..... | <b>2b(10)</b> |            | -1811759  |
| <b>c</b> Other income .....                                                                     | <b>2c</b>     |            |           |
| <b>d</b> Total income. Add all <b>income</b> amounts in column (b) and enter total .....        | <b>2d</b>     |            | 74907876  |

**Expenses**

|                                                                                             |               |          |          |
|---------------------------------------------------------------------------------------------|---------------|----------|----------|
| <b>e</b> Benefit payment and payments to provide benefits:                                  |               |          |          |
| (1) Directly to participants or beneficiaries, including direct rollovers .....             | <b>2e(1)</b>  | 39274402 |          |
| (2) To insurance carriers for the provision of benefits .....                               | <b>2e(2)</b>  |          |          |
| (3) Other .....                                                                             | <b>2e(3)</b>  |          |          |
| (4) Total benefit payments. Add lines <b>2e(1)</b> through <b>(3)</b> .....                 | <b>2e(4)</b>  |          | 39274402 |
| <b>f</b> Corrective distributions (see instructions) .....                                  | <b>2f</b>     |          |          |
| <b>g</b> Certain deemed distributions of participant loans (see instructions) .....         | <b>2g</b>     |          |          |
| <b>h</b> Interest expense .....                                                             | <b>2h</b>     |          |          |
| <b>i</b> Administrative expenses:                                                           |               |          |          |
| (1) Salaries and allowances .....                                                           | <b>2i(1)</b>  |          |          |
| (2) Contract administrator fees .....                                                       | <b>2i(2)</b>  |          |          |
| (3) Recordkeeping fees .....                                                                | <b>2i(3)</b>  | 315376   |          |
| (4) IQPA audit fees .....                                                                   | <b>2i(4)</b>  | 41019    |          |
| (5) Investment advisory and investment management fees .....                                | <b>2i(5)</b>  | 1522868  |          |
| (6) Bank or trust company trustee/custodial fees .....                                      | <b>2i(6)</b>  |          |          |
| (7) Actuarial fees .....                                                                    | <b>2i(7)</b>  | 468729   |          |
| (8) Legal fees .....                                                                        | <b>2i(8)</b>  |          |          |
| (9) Valuation/appraisal fees .....                                                          | <b>2i(9)</b>  |          |          |
| (10) Other trustee fees and expenses .....                                                  | <b>2i(10)</b> |          |          |
| (11) Other expenses .....                                                                   | <b>2i(11)</b> | 500732   |          |
| (12) Total administrative expenses. Add lines <b>2i(1)</b> through <b>(11)</b> .....        | <b>2i(12)</b> |          | 2848724  |
| <b>j</b> Total expenses. Add all <b>expense</b> amounts in column (b) and enter total ..... | <b>2j</b>     |          | 42123126 |

**Net Income and Reconciliation**

|                                                                               |              |  |          |
|-------------------------------------------------------------------------------|--------------|--|----------|
| <b>k</b> Net income (loss). Subtract line <b>2j</b> from line <b>2d</b> ..... | <b>2k</b>    |  | 32784750 |
| <b>l</b> Transfers of assets:                                                 |              |  |          |
| (1) To this plan .....                                                        | <b>2l(1)</b> |  |          |
| (2) From this plan .....                                                      | <b>2l(2)</b> |  |          |

**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: **WHITLEY PENN LLP**

(2) EIN: **75-2393478**

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

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

**Part IV Compliance Questions**

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

During the plan year:

|                                                                                                                                                                                                                                                                                                            | Yes                                 | No                                  | Amount  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|---------|
| <b>a</b> Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)                 |                                     | <input checked="" type="checkbox"/> |         |
| <b>b</b> Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.) |                                     | <input checked="" type="checkbox"/> |         |
| <b>c</b> Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)                                                                                                                             |                                     | <input checked="" type="checkbox"/> |         |
| <b>d</b> Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)                                                                                                                  |                                     | <input checked="" type="checkbox"/> |         |
| <b>e</b> Was this plan covered by a fidelity bond?                                                                                                                                                                                                                                                         | <input checked="" type="checkbox"/> |                                     | 1000000 |
| <b>f</b> Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?                                                                                                                                                                          |                                     | <input checked="" type="checkbox"/> |         |
| <b>g</b> Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?                                                                                                                                       |                                     | <input checked="" type="checkbox"/> |         |
| <b>h</b> Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?                                                                                                                             |                                     | <input checked="" type="checkbox"/> |         |
| <b>i</b> Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)                                                                                                                                                   | <input checked="" type="checkbox"/> |                                     |         |
| <b>j</b> Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)                                                                                     | <input checked="" type="checkbox"/> |                                     |         |
| <b>k</b> Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?                                                                                                                                              |                                     | <input checked="" type="checkbox"/> |         |
| <b>l</b> Has the plan failed to provide any benefit when due under the plan?                                                                                                                                                                                                                               |                                     | <input checked="" type="checkbox"/> |         |
| <b>m</b> If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)                                                                                                                                                                                     |                                     | <input checked="" type="checkbox"/> |         |
| <b>n</b> If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.                                                                                                                        |                                     |                                     |         |

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

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

| <b>5b(1)</b> Name of plan(s) | <b>5b(2)</b> EIN(s) | <b>5b(3)</b> PN(s) |
|------------------------------|---------------------|--------------------|
|                              |                     |                    |
|                              |                     |                    |
|                              |                     |                    |
|                              |                     |                    |

**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 553716.

|                                                                                                                                                                                                                                                                                                                                                                       |  |                                                                                                                                                                                                                                                                                                  |  |                                                                                                 |     |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------------|-----|
| <div>SCHEDULE R<br/>(Form 5500)<br/><div>Department of the Treasury<br/>Internal Revenue Service</div><div>Department of Labor<br/>Employee Benefits Security Administration</div><div>Pension Benefit Guaranty Corporation</div></div>                                                                                                                               |  | <div>Retirement Plan Information</div> <div>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).</div> <div>▶ File as an attachment to Form 5500.</div> |  | <div>OMB No. 1210-0110</div> <div>2024</div> <div>This Form is Open to Public Inspection.</div> |     |
| For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024                                                                                                                                                                                                                                                                            |  |                                                                                                                                                                                                                                                                                                  |  |                                                                                                 |     |
| A Name of plan<br>ATMOS ENERGY CORPORATION PENSION ACCOUNT PLAN                                                                                                                                                                                                                                                                                                       |  |                                                                                                                                                                                                                                                                                                  |  | B Three-digit plan number (PN) ▶                                                                | 003 |
| C Plan sponsor's name as shown on line 2a of Form 5500<br>ATMOS ENERGY CORPORATION                                                                                                                                                                                                                                                                                    |  |                                                                                                                                                                                                                                                                                                  |  | D Employer Identification Number (EIN)<br>75-1743247                                            |     |
| 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):<br>EIN(s): 04-3581074                                                                                                                      |  |                                                                                                                                                                                                                                                                                                  |  |                                                                                                 |     |
| 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                                                                                               | 103 |
| 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)? ..... <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A<br>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 _____<br>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? ..... <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> 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? ..... <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> 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..... <input type="checkbox"/> Increase <input type="checkbox"/> Decrease <input type="checkbox"/> Both <input checked="" type="checkbox"/> 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? ..... <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                             |  |                                                                                                                                                                                                                                                                                                  |  |                                                                                                 |     |
| 11 a Does the ESOP hold any preferred stock? ..... <input type="checkbox"/> Yes <input type="checkbox"/> 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.) ..... <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                        |  |                                                                                                                                                                                                                                                                                                  |  |                                                                                                 |     |
| 12 Does the ESOP hold any stock that is not readily tradable on an established securities market? ..... <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                                                      |  |                                                                                                                                                                                                                                                                                                  |  |                                                                                                 |     |
| For Paperwork Reduction Act Notice, see the Instructions for Form 5500.                                                                                                                                                                                                                                                                                               |  |                                                                                                                                                                                                                                                                                                  |  | Schedule R (Form 5500) 2024 v. 240311                                                           |     |

**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: 76.0 % Private Equity: 0.0 % Investment-Grade Debt and Interest Rate Hedging Assets: 14.0 %

High-Yield Debt: 0.0 % Real Assets: 0.0 % Cash or Cash Equivalents: \_\_\_\_\_ % Other: 10.0 %

**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\_\_\_\_\_.

## REPORT OF INDEPENDENT AUDITORS

To the Participants and the Qualified Retirement Plans and Trusts Committee of the  
Atmos Energy Corporation Pension Account Plan

### Opinion

We have audited the financial statements of the Atmos Energy Corporation Pension Account Plan (the “Plan”), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (“ERISA”), which comprise the statements of net assets available for benefits as of December 31, 2024 and 2023, and the related statement of changes in net assets available for benefits for the year ended December 31, 2024, and the related notes to the financial statements.

In our opinion, the accompanying financial statements present fairly, in all material respects, the net assets available for benefits of the Plan as of December 31, 2024 and 2023, and the changes in net assets available for benefits for the year ended December 31, 2024, in accordance with accounting principles generally accepted in the United States of America.

### Basis for Opinion

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

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

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

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

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

In performing an audit in accordance with GAAS, we:

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

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**

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedules of Form 5500, Schedule H, Line 4i – Schedule of Assets (Held at End of Year) and Form 5500, Schedule H, Line 4j – Schedule of Reportable Transactions, 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 has been subjected to the auditing procedures applied in the audits 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.

In forming our opinion on the supplemental schedules, we evaluated whether the supplemental schedules, 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 information in the accompanying schedules is fairly stated, in all material respects, in relation to the financial statements as a whole, and the form and content are presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

*Whitley Penn LLP*

Plano, Texas  
September 30, 2025

# SCHEDULE SB ATTACHMENTS

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

| Attained Age | Attained Years of Credited Service <sup>1</sup> |     |     |         |         |         |         |         |         |           | Total   |
|--------------|-------------------------------------------------|-----|-----|---------|---------|---------|---------|---------|---------|-----------|---------|
|              | Under 1                                         | 1-4 | 5-9 | 10-14   | 15-19   | 20-24   | 25-29   | 30-34   | 35-39   | 40 & Over |         |
| Under 25     | 0                                               | 0   | 0   | 0       | 0       | 0       | 0       | 0       | 0       | 0         | 0       |
|              | -                                               | -   | -   | -       | -       | -       | -       | -       | -       | -         | -       |
| 25-29        | 0                                               | 0   | 0   | 0       | 0       | 0       | 0       | 0       | 0       | 0         | 0       |
|              | -                                               | -   | -   | -       | -       | -       | -       | -       | -       | -         | -       |
| 30-34        | 0                                               | 0   | 1   | 23      | 5       | 0       | 0       | 0       | 0       | 0         | 29      |
|              | -                                               | -   | -   | 88,965  | -       | -       | -       | -       | -       | -         | 90,610  |
| 35-39        | 0                                               | 0   | 0   | 44      | 90      | 3       | 0       | 0       | 0       | 0         | 137     |
|              | -                                               | -   | -   | 91,704  | 95,809  | -       | -       | -       | -       | -         | 94,648  |
| 40-44        | 0                                               | 0   | 1   | 36      | 138     | 25      | 1       | 0       | 0       | 0         | 201     |
|              | -                                               | -   | -   | 99,707  | 98,666  | 106,112 | -       | -       | -       | -         | 99,829  |
| 45-49        | 0                                               | 0   | 0   | 29      | 105     | 41      | 26      | 3       | 0       | 0         | 204     |
|              | -                                               | -   | -   | 106,977 | 102,415 | 107,316 | 110,665 | -       | -       | -         | 105,233 |
| 50-54        | 0                                               | 0   | 0   | 26      | 87      | 59      | 56      | 43      | 4       | 0         | 275     |
|              | -                                               | -   | -   | 107,203 | 101,917 | 108,718 | 108,933 | 108,763 | -       | -         | 106,336 |
| 55-59        | 0                                               | 0   | 0   | 21      | 78      | 68      | 62      | 96      | 88      | 7         | 420     |
|              | -                                               | -   | -   | 119,657 | 94,547  | 98,486  | 109,401 | 112,678 | 111,627 | -         | 106,951 |
| 60-64        | 0                                               | 0   | 0   | 15      | 60      | 69      | 35      | 61      | 92      | 104       | 436     |
|              | -                                               | -   | -   | -       | 94,423  | 97,697  | 101,813 | 111,103 | 106,536 | 106,852   | 103,175 |
| 65-69        | 0                                               | 0   | 0   | 6       | 24      | 9       | 15      | 13      | 29      | 54        | 150     |
|              | -                                               | -   | -   | -       | 84,918  | -       | -       | -       | 105,687 | 106,456   | 98,143  |
| 70 & over    | 0                                               | 0   | 0   | 1       | 4       | 3       | 2       | 1       | 2       | 17        | 30      |
|              | -                                               | -   | -   | -       | -       | -       | -       | -       | -       | -         | 99,549  |
| Total        | 0                                               | 0   | 2   | 201     | 591     | 277     | 197     | 217     | 215     | 182       | 1,882   |
|              | -                                               | -   | -   | 99,662  | 97,658  | 102,066 | 105,379 | 110,426 | 108,214 | 108,451   | 103,072 |

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

Plan Name: Atmos Energy Corporation Pension Account Plan  
 EIN / PN: 75-1743247/003  
 Plan Sponsor: Atmos Energy Corporation  
 Valuation Date: January 1, 2024

# SCHEDULE SB ATTACHMENTS

## Schedule SB, Line 26a

### Schedule of Active Participant Data for Cash Balance Plans as of January 1, 2024

| Attained Age | Attained Years of Credited Service <sup>2</sup> |     |     |        |        |         |         |         |         |           | Total   |
|--------------|-------------------------------------------------|-----|-----|--------|--------|---------|---------|---------|---------|-----------|---------|
|              | Under 1                                         | 1-4 | 5-9 | 10-14  | 15-19  | 20-24   | 25-29   | 30-34   | 35-39   | 40 & Over |         |
| Under 25     | 0                                               | 0   | 0   | 0      | 0      | 0       | 0       | 0       | 0       | 0         | 0       |
|              | -                                               | -   | -   | -      | -      | -       | -       | -       | -       | -         | -       |
| 25-29        | 0                                               | 0   | 0   | 0      | 0      | 0       | 0       | 0       | 0       | 0         | 0       |
|              | -                                               | -   | -   | -      | -      | -       | -       | -       | -       | -         | -       |
| 30-34        | 0                                               | 0   | 1   | 23     | 5      | 0       | 0       | 0       | 0       | 0         | 29      |
|              | -                                               | -   | -   | 24,228 | -      | -       | -       | -       | -       | -         | 24,136  |
| 35-39        | 0                                               | 0   | 0   | 44     | 90     | 3       | 0       | 0       | 0       | 0         | 137     |
|              | -                                               | -   | -   | 26,466 | 34,493 | -       | -       | -       | -       | -         | 31,901  |
| 40-44        | 0                                               | 0   | 1   | 36     | 138    | 25      | 1       | 0       | 0       | 0         | 201     |
|              | -                                               | -   | -   | 29,762 | 44,243 | 63,035  | -       | -       | -       | -         | 44,077  |
| 45-49        | 0                                               | 0   | 0   | 29     | 105    | 41      | 26      | 3       | 0       | 0         | 204     |
|              | -                                               | -   | -   | 42,076 | 55,063 | 75,566  | 97,481  | -       | -       | -         | 63,649  |
| 50-54        | 0                                               | 0   | 0   | 26     | 87     | 59      | 56      | 43      | 4       | 0         | 275     |
|              | -                                               | -   | -   | 39,182 | 63,302 | 99,203  | 117,231 | 136,549 | -       | -         | 92,016  |
| 55-59        | 0                                               | 0   | 0   | 21     | 78     | 68      | 61      | 96      | 88      | 7         | 419     |
|              | -                                               | -   | -   | 65,577 | 70,704 | 109,909 | 149,070 | 173,029 | 179,750 | -         | 136,447 |
| 60-64        | 0                                               | 0   | 0   | 15     | 60     | 69      | 35      | 61      | 92      | 104       | 436     |
|              | -                                               | -   | -   | -      | 76,096 | 118,900 | 161,998 | 220,312 | 215,022 | 220,591   | 173,242 |
| 65-69        | 0                                               | 0   | 0   | 6      | 24     | 9       | 15      | 13      | 29      | 54        | 150     |
|              | -                                               | -   | -   | -      | 87,320 | -       | -       | -       | 219,113 | 251,629   | 193,441 |
| 70 & over    | 0                                               | 0   | 0   | 1      | 4      | 3       | 2       | 1       | 2       | 17        | 30      |
|              | -                                               | -   | -   | -      | -      | -       | -       | -       | -       | -         | 231,846 |
| Total        | 0                                               | 0   | 2   | 201    | 591    | 277     | 196     | 217     | 215     | 182       | 1,881   |
|              | -                                               | -   | -   | 38,777 | 56,148 | 100,528 | 136,011 | 181,553 | 198,922 | 237,298   | 117,435 |

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

Plan Name: Atmos Energy Corporation Pension Account Plan  
 EIN / PN: 75-1743247/003  
 Plan Sponsor: Atmos Energy Corporation  
 Valuation Date: January 1, 2024

# SCHEDULE SB ATTACHMENTS

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

### Economic Assumptions

#### Interest rate basis

- Applicable month September 2023
- Interest rate basis Segment Rates from Fourth Month Preceding Valuation Date

| Interest rates            | Reflecting Stabilization | Not Reflecting Stabilization |
|---------------------------|--------------------------|------------------------------|
| • First segment rate      | 4.75%                    | 3.62%                        |
| • Second segment rate     | 4.87%                    | 4.46%                        |
| • Third segment rate      | 5.59%                    | 4.52%                        |
| • Effective interest rate | 5.08%                    |                              |

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

#### Annual rates of increase

- Compensation: 3.50%
- Future Social Security wage bases 3.50%
- CPI 3.00%
- Interest crediting rate on cash balance account 4.69%

#### Plan-related expenses

Average of expenses paid from the trust for the prior two years, adjusted for expected PBGC Variable Rate Premiums. For 2024, this amount is \$2,876,058.

Plan Name: Atmos Energy Corporation Pension Account Plan  
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Valuation Date: January 1, 2024

# SCHEDULE SB ATTACHMENTS

## Demographic Assumptions

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

**New or rehired employees** The plan was amended and closed to employees hired on or after October 1, 2010.

### Mortality

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

- **Disabled** Alternative disabled life mortality tables as defined under Revenue Ruling 96-7.

**Termination** Rates varying by age

### Representative Termination Rates

| Percentage leaving during the year |       |
|------------------------------------|-------|
| Attained Age                       |       |
| 20-24                              | 10.0% |
| 25-29                              | 7.5%  |
| 30-34                              | 5.0%  |
| 35-39                              | 4.0%  |
| 40-44                              | 3.0%  |
| 45-49                              | 2.5%  |
| 50+                                | 2.0%  |

**Disability** 1965-1969 Inter-Company Table

| Percentage becoming disabled during the year |       |
|----------------------------------------------|-------|
| Age                                          |       |
| 25                                           | 0.06% |
| 40                                           | 0.10% |
| 55                                           | 0.69% |

Plan Name: Atmos Energy Corporation Pension Account Plan  
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# SCHEDULE SB ATTACHMENTS

## Retirement

Rates varying by age

| Percentage retiring during the year |      |
|-------------------------------------|------|
| Age                                 |      |
| 55-59                               | 3%   |
| 60-61                               | 6%   |
| 62-64                               | 14%  |
| 65-67                               | 25%  |
| 68-69                               | 30%  |
| 70                                  | 100% |

### Benefit commencement date:

- Preretirement death benefit The later of the death of the active participant or the date the participant would have attained age 55
- Deferred vested benefit The later of age 65 or termination of employment
- Disability benefit Upon disablement
- Retirement benefit Upon termination of employment

### Form of payment

65% of participants are assumed to elect a lump sum and 35% are assumed to elect an annuity.

### Percent married

100% of males

### Spouse age

Wife two years younger than husband

### Covered pay

Assumed plan compensation for the year beginning on the valuation date was determined as pensionable earnings during the prior year provided by the employer, increased with a year's assumed salary increase

### At-risk assumptions

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

### Timing of benefit payments

Annuity payments are payable monthly and lump sum payments are payable on date of decrement.

Plan Name: Atmos Energy Corporation Pension Account Plan  
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Plan Sponsor: Atmos Energy Corporation  
Valuation Date: January 1, 2024

# SCHEDULE SB ATTACHMENTS

## Methods

|                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|----------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Valuation date</b>            | First day of plan year                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| <b>Funding target</b>            | Present value of accrued benefits as required by regulations under IRC §430.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| <b>Target normal cost</b>        | 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.                                                                                                                                                                                                                                                                                                                                                                                    |
| <b>Decrement timing</b>          | The approach used is called rounded middle of year (rounded MOY) decrement timing. Most events are assumed to occur at the middle of year during which the eligibility condition will be met or the start/end date will occur. For death and disability decrements, the rate applied is based on the participant's rounded age (nearest integer age) at the beginning of the year, to align with the methodology generally used to create those rate tables. For retirement and withdrawal decrements: the age is generally the participant's rounded age at the middle of the year. |
| <b>Actuarial value of assets</b> | The actuarial value of assets is equal to the market value of assets as of the valuation date plus the discounted present value of contributions made after the valuation date for the prior plan year, discounted using the effective interest rate for the prior plan year.                                                                                                                                                                                                                                                                                                        |
| <b>Benefits not valued</b>       | All benefits described in the Plan Provisions section of this report were valued. WTW has reviewed the plan provisions with Atmos Energy and, based on that review, is not aware of any significant benefits required to be valued that were not.                                                                                                                                                                                                                                                                                                                                    |

## Sources of Data and Other Information

The plan sponsor furnished participant data as of 1/1/2024. Information on assets, contributions and plan provisions was supplied by the plan sponsor. Data and other information were reviewed for reasonableness and consistency, but no audit was performed. Based on discussions with the plan sponsor, assumptions or estimates were made when data were not available, and the data was adjusted to reflect any significant events that occurred between the date the data was collected and the measurement date. We are not aware of any errors or omissions in the data that would have a significant effect on the results of our calculations.

|                 |                                               |
|-----------------|-----------------------------------------------|
| Plan Name:      | Atmos Energy Corporation Pension Account Plan |
| EIN / PN:       | 75-1743247/003                                |
| Plan Sponsor:   | Atmos Energy Corporation                      |
| Valuation Date: | January 1, 2024                               |

# SCHEDULE SB ATTACHMENTS

## Assumptions Rationale - Significant Economic Assumptions

|                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
|-------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Discount rate</b>                                              | The basis chosen was selected by the plan sponsor from among choices prescribed by law, all of which are based on observed market data over certain periods of time.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| <b>Cash Balance Interest crediting rate</b>                       | <p>The plan credits interest to cash balance accounts using the 30-year Treasury rate in effect for the November preceding the first day of the plan year, but with a minimum interest credit rate of 4.69% and a maximum interest credit rate of 7.00%. We believe that the selected assumption does not significantly conflict with what would be reasonable based on future expectations consistent with other economic assumptions used, other than the discount rate.</p> <p>Our long term estimate of the 30-year Treasury rate is below 4.69%, based on a combination of current conditions, past history, including relationships to other assumptions such as CPI, and future economic expectations.</p> |
| <b>Lump sum conversion rate</b>                                   | As required by IRC §430, lump sum benefits are valued using “annuity substitution”, so that the interest rates assumed are effectively the same as described above for the discount rate.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| <b>Plan-related expenses</b>                                      | As required by regulations, plan-related expenses are calculated by estimating the expenses to be paid from the trust during the coming year (including, for example, expected PBGC premiums and actuarial, accounting, legal, administration and trustee fees to be paid from the trust).                                                                                                                                                                                                                                                                                                                                                                                                                        |
| <b>Rates of increase in:</b>                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| • Compensation                                                    | Assumed compensation increases are based on plan sponsor expectations                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| • National average wages (NAW) (e.g., Social Security wage bases) | The assumed NAW is based on assumed CPI as shown below, plus assumed increases in real wages (the portion of GDP increases that becomes part of wages). Such assumed future increases in real wages are based on plan sponsor expectations.                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |

|                 |                                               |
|-----------------|-----------------------------------------------|
| Plan Name:      | Atmos Energy Corporation Pension Account Plan |
| EIN / PN:       | 75-1743247/003                                |
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# SCHEDULE SB ATTACHMENTS

- Increases in statutory limits (CPI)

The assumed CPI increases are based on plan sponsor expectations.

## Assumptions Rationale - Significant Demographic Assumptions

### Healthy Mortality

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

### Disabled Mortality

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

### Termination

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

### Disability

Disability rates were based on a published table for pension participants believed to have reasonably similar characteristics participating in pension plans with similar disability provisions.

### Retirement

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

### Benefit commencement date for deferred benefits:

- Preretirement death benefit

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

- Deferred vested benefit

Deferred vested participants' assumed commencement age is age 65.

Plan Name: Atmos Energy Corporation Pension Account Plan  
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## SCHEDULE SB ATTACHMENTS

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|                        |                                                                                                                                                                                                                                                          |
|------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Form of payment</b> | The percentage of retiring participants assumed to take lump sums is based on an experience study conducted in 2020, with annual consideration of whether any conditions have changed that would be expected to produce different results in the future. |
| <b>Percent married</b> | The assumed percentage married is based on general population statistics on the marital status of individuals of retirement age.                                                                                                                         |
| <b>Spouse age</b>      | The assumed age difference for spouses is based on the age difference observed in the Atmos Energy population.                                                                                                                                           |

### Prescribed Methods

|                        |                                                                                                                                                                                                                                                                                                                                                |
|------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Funding methods</b> | 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

|                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                |
|----------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Change in assumptions since prior valuation</b> | <p>The segment interest rates used to calculate the funding target and target normal cost were updated to the current valuation date as required by IRC §430.</p> <p>The mortality table used to calculate the funding target and target normal cost was updated as required by guidance issued by the IRS under IRC §430, including from using a static projection of mortality improvement to a generational projection.</p> |
| <b>Change in methods since prior valuation</b>     | None.                                                                                                                                                                                                                                                                                                                                                                                                                          |

|                 |                                               |
|-----------------|-----------------------------------------------|
| Plan Name:      | Atmos Energy Corporation Pension Account Plan |
| EIN / PN:       | 75-1743247/003                                |
| Plan Sponsor:   | Atmos Energy Corporation                      |
| Valuation Date: | January 1, 2024                               |

# SCHEDULE SB ATTACHMENTS

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## Schedule SB – Statement by Enrolled Actuary

|                          |                                               |
|--------------------------|-----------------------------------------------|
| <b>Plan Sponsor</b>      | Atmos Energy Corporation                      |
| <b>EIN/PN</b>            | 75-1743247/003                                |
| <b>Plan Name</b>         | Atmos Energy Corporation Pension Account Plan |
| <b>Valuation Date</b>    | January 1, 2024                               |
| <b>Enrolled Actuary</b>  | Merrick Johnson                               |
| <b>Enrollment Number</b> | 23-08683                                      |

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.

|                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                               |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
| <div>Form 5500</div> <div>Department of the Treasury<br/>Internal Revenue Service</div> <div>Department of Labor<br/>Employee Benefits Security<br/>Administration</div> <div>Pension Benefit Guaranty Corporation</div> | <div>Annual Return/Report of Employee Benefit Plan</div> <div>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).</div> <div>▶ Complete all entries in accordance with the instructions to the Form 5500.</div> | <div>OMB Nos. 1210-0110<br/>1210-0089</div> <div>2024</div> <div>This Form Is Open to Public Inspection</div> |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|

|                                                                                                        |                                                                                                                                                                                                                      |
|--------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Part I Annual Report Identification Information</b>                                                 |                                                                                                                                                                                                                      |
| For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024             |                                                                                                                                                                                                                      |
| <b>A</b> This return/report is for:                                                                    | <input type="checkbox"/> a multiemployer plan <input type="checkbox"/> a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.) |
|                                                                                                        | <input checked="" type="checkbox"/> a single-employer plan <input type="checkbox"/> a DFE (specify) _____                                                                                                            |
| <b>B</b> This return/report is:                                                                        | <input type="checkbox"/> the first return/report <input type="checkbox"/> the final return/report                                                                                                                    |
|                                                                                                        | <input type="checkbox"/> an amended return/report <input type="checkbox"/> a short plan year return/report (less than 12 months)                                                                                     |
| <b>C</b> If the plan is a collectively-bargained plan, check here. ....                                | <input type="checkbox"/>                                                                                                                                                                                             |
| <b>D</b> Check box if filing under:                                                                    | <input checked="" type="checkbox"/> Form 5558 <input type="checkbox"/> automatic extension <input type="checkbox"/> the DFVC program                                                                                 |
|                                                                                                        | <input type="checkbox"/> special extension (enter description) _____                                                                                                                                                 |
| <b>E</b> If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. .... | <input type="checkbox"/>                                                                                                                                                                                             |

|                                                                                                                                                                                                                                                                                                                                                                             |                                                              |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|
| <b>Part II Basic Plan Information—enter all requested information</b>                                                                                                                                                                                                                                                                                                       |                                                              |
| <b>1a</b> Name of plan<br>ATMOS ENERGY CORPORATION PENSION ACCOUNT PLAN                                                                                                                                                                                                                                                                                                     | <b>1b</b> Three-digit plan number (PN) ▶ 003                 |
|                                                                                                                                                                                                                                                                                                                                                                             | <b>1c</b> Effective date of plan<br>01/01/1947               |
| <b>2a</b> Plan sponsor's name (employer, if for a single-employer plan)<br>Mailing address (include room, apt., suite no. and street, or P.O. Box)<br>City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions)<br><br>ATMOS ENERGY CORPORATION<br><br>5430 LBJ FREEWAY<br>THREE LINCOLN CENTRE, SUITE 160<br>DALLAS TX 75240 | <b>2b</b> Employer Identification Number (EIN)<br>75-1743247 |
|                                                                                                                                                                                                                                                                                                                                                                             | <b>2c</b> Plan Sponsor's telephone number<br>972-855-4026    |
|                                                                                                                                                                                                                                                                                                                                                                             | <b>2d</b> Business code (see instructions)<br>221210         |

**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<br>HERE |  | 9/27/2025 | Matt Robbins                                                 |
|              | Signature of plan administrator                                                     | Date      | Enter name of individual signing as plan administrator       |
| SIGN<br>HERE |                                                                                     |           |                                                              |
|              | Signature of employer/plan sponsor                                                  | Date      | Enter name of individual signing as employer or plan sponsor |
| SIGN<br>HERE |                                                                                     |           |                                                              |
|              | Signature of DFE                                                                    | Date      | Enter name of individual signing as DFE                      |

# Atmos Energy Corporation Pension Account Plan

## Schedule H, Line 4j – Schedule of Reportable Transactions

EIN: 75-1743247 Plan #: 003

Year ended December 31, 2024

| (a)<br>Identity<br>of Party<br>Involved                                                          | (b)<br>Description<br>of Asset              | (c)<br>Purchase<br>Price | (d)<br>Selling<br>Price | (g)<br>Cost of<br>Asset | (h)<br>Current<br>Value of<br>Asset on<br>Transaction<br>Date | (i)<br>Net Gain<br>or (Loss) |
|--------------------------------------------------------------------------------------------------|---------------------------------------------|--------------------------|-------------------------|-------------------------|---------------------------------------------------------------|------------------------------|
| <u>Category (iii) - Series of transactions in excess of 5% of beginning of year Plan assets:</u> |                                             |                          |                         |                         |                                                               |                              |
| State Street<br>Bank and Trust<br>Company, N.A. *                                                | State Street Bank and                       | \$ 154,343,614           | \$ —                    | \$ 154,343,614          | \$ 154,343,614                                                | \$ —                         |
|                                                                                                  | Trust Company                               | —                        | 137,171,183             | 137,171,183             | 137,171,183                                                   | —                            |
|                                                                                                  | Short Term<br>Investment Fund<br>25 BPS     |                          |                         |                         |                                                               |                              |
| State Street<br>Bank and Trust<br>Company, N.A. *                                                | Atmos Energy<br>Corporation<br>Common Stock | —                        | 29,759,022              | 5,163,900               | 29,759,022                                                    | 24,595,122                   |

\* Indicates party-in-interest to the Plan.

There were no category (i), (ii), or (iv) reportable transactions during the year ended December 31, 2024.

Columns (e) and (f) are not applicable.

|                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                 |                                                                                                |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------|
| <div>SCHEDULE SB<br/>(Form 5500)<br/><br/>Department of the Treasury<br/>Internal Revenue Service<br/><br/>Department of Labor<br/>Employee Benefits Security Administration<br/><br/>Pension Benefit Guaranty Corporation</div> | <div>Single-Employer Defined Benefit Plan<br/>Actuarial Information</div> <div>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).</div> <div>File as an attachment to Form 5500 or 5500-SF.</div> | <div>OMB No. 1210-0110</div> <div>2024</div> <div>This Form is Open to Public Inspection</div> |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------|

|                                                                                                                                    |                                                                                                                                                  |
|------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------|
| For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024                                         |                                                                                                                                                  |
| Round off amounts to nearest dollar.                                                                                               |                                                                                                                                                  |
| Caution: A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.              |                                                                                                                                                  |
| A Name of plan<br>ATMOS ENERGY CORPORATION PENSION ACCOUNT PLAN                                                                    | B Three-digit plan number (PN) 003                                                                                                               |
| C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF<br>ATMOS ENERGY CORPORATION                                      | D Employer Identification Number (EIN)<br>75-1743247                                                                                             |
| E Type of plan: <input checked="" type="checkbox"/> Single <input type="checkbox"/> Multiple-A <input type="checkbox"/> Multiple-B | F Prior year plan size: <input type="checkbox"/> 100 or fewer <input type="checkbox"/> 101-500 <input checked="" type="checkbox"/> More than 500 |

|                                                                                                                                                                                                    |                            |                           |                          |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|---------------------------|--------------------------|
| Part I Basic Information                                                                                                                                                                           |                            |                           |                          |
| 1 Enter the valuation date: Month 01 Day 01 Year 2024                                                                                                                                              |                            |                           |                          |
| 2 Assets:                                                                                                                                                                                          |                            |                           |                          |
| a Market value                                                                                                                                                                                     |                            | 2a                        | 547,007,730              |
| b Actuarial value                                                                                                                                                                                  |                            | 2b                        | 547,007,730              |
| 3 Funding target/participant count breakdown                                                                                                                                                       | (1) Number of participants | (2) Vested Funding Target | (3) Total Funding Target |
| a For retired participants and beneficiaries receiving payment                                                                                                                                     | 2,041                      | 193,925,762               | 193,925,762              |
| b For terminated vested participants                                                                                                                                                               | 405                        | 28,599,585                | 28,599,585               |
| c For active participants                                                                                                                                                                          | 1,882                      | 215,690,493               | 220,598,379              |
| d Total                                                                                                                                                                                            | 4,328                      | 438,215,840               | 443,123,726              |
| 4 If the plan is in at-risk status, check the box and complete lines (a) and (b) <input type="checkbox"/>                                                                                          |                            |                           |                          |
| a Funding target disregarding prescribed at-risk assumptions                                                                                                                                       |                            | 4a                        |                          |
| b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor |                            | 4b                        |                          |
| 5 Effective interest rate                                                                                                                                                                          | 5                          |                           | 5.08%                    |
| 6 Target normal cost                                                                                                                                                                               |                            |                           |                          |
| a Present value of current plan year accruals                                                                                                                                                      | 6a                         |                           | 12,517,521               |
| b Expected plan-related expenses                                                                                                                                                                   | 6b                         |                           | 2,876,058                |
| c Target normal cost                                                                                                                                                                               | 6c                         |                           | 15,393,579               |

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.

|                                    |                                                                |                                        |
|------------------------------------|----------------------------------------------------------------|----------------------------------------|
| <div>SIGN HERE</div>               | <div>Merrick Johnson MKJ</div> <div>Signature of actuary</div> | <div>9/23/2025</div> <div>Date</div>   |
| Merrick Johnson                    | Type or print name of actuary                                  | 2308683                                |
| Willis Towers Watson US LLC        | Firm name                                                      | Most recent enrollment number          |
| 500 NORTH AKARD STREET, SUITE 4300 |                                                                | 214-530-4200                           |
| DALLAS TX 75201                    | Address of the firm                                            | Telephone number (including area code) |



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

|                                                 |                                                                                                                                              |                        |                        |                                                     |
|-------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|------------------------|------------------------|-----------------------------------------------------|
| <b>21</b> Discount rate:                        |                                                                                                                                              |                        |                        |                                                     |
| <b>a</b> Segment rates:                         | 1st segment:<br>4.75 %                                                                                                                       | 2nd segment:<br>4.87 % | 3rd segment:<br>5.59 % | <input type="checkbox"/> N/A, full yield curve used |
| <b>b</b> Applicable month (enter code).....     |                                                                                                                                              |                        |                        | <b>21b</b> 4                                        |
| <b>22</b> Weighted average retirement age ..... |                                                                                                                                              |                        |                        | <b>22</b> 64                                        |
| <b>23</b> Mortality table(s) (see instructions) | <input type="checkbox"/> Prescribed - combined <input checked="" type="checkbox"/> Prescribed - separate <input type="checkbox"/> Substitute |                        |                        |                                                     |

**Part VI Miscellaneous Items**

|                                                                                                                                                                        |                                                                     |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|
| <b>24</b> Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment. .... | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| <b>25</b> Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment. ....                                      | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| <b>26</b> Demographic and benefit information                                                                                                                          |                                                                     |
| <b>a</b> Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment. ....                             | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| <b>b</b> Is the plan required to provide a projection of expected benefit payments? If "Yes," see instructions regarding required attachment ...                       | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| <b>27</b> If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment.....                                    | <b>27</b>                                                           |

**Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years**

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

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

|                                                                                                                                                                                      |                     |                    |               |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|--------------------|---------------|
| <b>31</b> Target normal cost and excess assets (see instructions):                                                                                                                   |                     |                    |               |
| <b>a</b> Target normal cost (line 6c).....                                                                                                                                           | <b>31a</b>          | 15,393,579         |               |
| <b>b</b> Excess assets, if applicable, but not greater than line 31a .....                                                                                                           | <b>31b</b>          | 15,393,579         |               |
| <b>32</b> Amortization installments:                                                                                                                                                 | Outstanding Balance | Installment        |               |
| <b>a</b> Net shortfall amortization installment .....                                                                                                                                | 0                   | 0                  |               |
| <b>b</b> Waiver amortization installment .....                                                                                                                                       | 0                   | 0                  |               |
| <b>33</b> 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 ..... | <b>33</b>           |                    |               |
| <b>34</b> Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33).....                                                          | <b>34</b>           | 0                  |               |
|                                                                                                                                                                                      | Carryover balance   | Prefunding balance | Total balance |
| <b>35</b> Balances elected for use to offset funding requirement .....                                                                                                               | 0                   | 0                  | 0             |
| <b>36</b> Additional cash requirement (line 34 minus line 35).....                                                                                                                   | <b>36</b>           | 0                  |               |
| <b>37</b> Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c).....                                                   | <b>37</b>           | 0                  |               |
| <b>38</b> Present value of excess contributions for current year (see instructions)                                                                                                  |                     |                    |               |
| <b>a</b> Total (excess, if any, of line 37 over line 36)                                                                                                                             | <b>38a</b>          | 0                  |               |
| <b>b</b> Portion included in line 38a attributable to use of prefunding and funding standard carryover balances .....                                                                | <b>38b</b>          | 0                  |               |
| <b>39</b> Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37).....                                                                       | <b>39</b>           | 0                  |               |
| <b>40</b> Unpaid minimum required contributions for all years .....                                                                                                                  | <b>40</b>           | 0                  |               |

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

|                                                                                                                                                                                                                                                                                                                  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>41</b> If an election was made to use the extended amortization rule for a plan year beginning on or before December 31, 2021, check the box to indicate the first plan year for which the rule applies. <input type="checkbox"/> 2019 <input type="checkbox"/> 2020 <input checked="" type="checkbox"/> 2021 |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

ATMOS ENERGY CORPORATION  
PENSION ACCOUNT PLAN

FINANCIAL STATEMENTS  
AND SUPPLEMENTAL SCHEDULES

As of December 31, 2024 and 2023, and  
for the Year ended December 31, 2024  
with Report of Independent Auditors

# Atmos Energy Corporation Pension Account Plan

## Financial Statements and Supplemental Schedules

As of December 31, 2024 and 2023, and  
for the Year ended December 31, 2024

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# Atmos Energy Corporation Pension Account Plan

## Statements of Net Assets Available for Benefits

|                                   | <b>December 31</b> |                |
|-----------------------------------|--------------------|----------------|
|                                   | <b>2024</b>        | <b>2023</b>    |
| <b>Assets</b>                     |                    |                |
| Investments, at fair value:       |                    |                |
| Common stocks                     | \$ 260,478,123     | \$ 272,660,782 |
| Money market funds                | 38,441,853         | 21,196,209     |
| Registered investment companies   | 108,865,959        | 75,157,903     |
| Common/collective trusts          | 86,984,324         | 97,093,297     |
| Government securities             | 34,216,825         | 27,833,400     |
| Corporate bonds                   | 28,243,525         | 24,964,848     |
| Limited partnerships              | 22,105,565         | 22,467,226     |
| Asset-backed securities           | 489,694            | —              |
| Total investments                 | 579,825,868        | 541,373,665    |
| Receivables:                      |                    |                |
| Accrued interest receivable       | 656,669            | 656,271        |
| Due from broker                   | —                  | 133,045        |
| Employer contribution receivable  | —                  | 5,000,000      |
| Total receivables                 | 656,669            | 5,789,316      |
| Total assets                      | 580,482,537        | 547,162,981    |
| <b>Liabilities</b>                |                    |                |
| Administrative expenses payable   | 517,974            | 428,780        |
| Benefits payable                  | 445,612            | —              |
| Total liabilities                 | 963,586            | 428,780        |
| Net assets available for benefits | \$ 579,518,951     | \$ 546,734,201 |

*See accompanying notes.*

# Atmos Energy Corporation Pension Account Plan

## Statement of Changes in Net Assets Available for Benefits

Year ended December 31, 2024

### **Additions to Net Assets**

#### Investment income:

|                                               |                   |
|-----------------------------------------------|-------------------|
| Net appreciation in fair value of investments | \$ 62,555,027     |
| Dividends on common stocks                    | 4,438,105         |
| Dividends on registered investment companies  | 4,688,435         |
| Interest on government securities             | 1,084,055         |
| Interest on corporate bonds                   | 1,276,452         |
| Interest on asset-backed securities           | 4,264             |
| Interest on money market funds                | 861,538           |
| Total additions to net assets                 | <u>74,907,876</u> |

### **Deductions from Net Assets**

|                                  |                   |
|----------------------------------|-------------------|
| Benefit payments                 | 39,274,402        |
| Administrative expenses          | <u>2,848,724</u>  |
| Total deductions from net assets | <u>42,123,126</u> |

|                                                        |                              |
|--------------------------------------------------------|------------------------------|
| Net increase in net assets available for benefits      | 32,784,750                   |
| Net assets available for benefits at beginning of year | <u>546,734,201</u>           |
| Net assets available for benefits at end of year       | <u><u>\$ 579,518,951</u></u> |

*See accompanying notes.*

# Atmos Energy Corporation Pension Account Plan

## Notes to Financial Statements

December 31, 2024

### **1. Description of the Plan**

The following brief description of the Atmos Energy Corporation Pension Account Plan (the Plan) is provided for general information purposes only. The Plan is administered by the Qualified Retirement Plans and Trusts Committee (the Committee), which is appointed by the Board of Directors of Atmos Energy Corporation (Atmos Energy, the Company or Employer). Information about the plan document, the vesting and benefit provisions, and the Pension Benefit Guaranty Corporation's benefit guarantee is contained in the Summary Plan Description. Copies of the Summary Plan Description are available from the Committee.

#### **General**

The Plan is a noncontributory defined benefit plan that provides retirement and death benefits for participating employees that were eligible to participate prior to October 1, 2010, at which time the Plan was closed to new participants. The Plan is a trustee plan and is subject to the Employee Retirement Income Security Act of 1974 (ERISA).

The Plan maintains a notional account (Cash Balance Account) for each participant. The Cash Balance Account is credited with amounts determined annually by an actuary which is a percentage of eligible annual earnings based upon a participant's age and years of service and also includes interest earned on existing balances. The Cash Balance Account provisions of the Plan apply only to an eligible employee who terminated employment with the Company on or after January 1, 1999. If a participant terminated employment prior to January 1, 1999, his or her benefits were determined in accordance with the provisions of the plan in effect prior to the establishment of the Cash Balance Account provisions.

The Plan's trustee is State Street Bank and Trust Company, N.A. (State Street or the Trustee). LCG Associates serves as the Plan's investment advisor. The Plan's actuary is Willis Towers Watson.

#### **Contributions**

The Company makes contributions, as determined on an actuarial basis, sufficient to meet the benefits to be paid under provisions of the Plan. Currently, the Plan does not allow employee contributions. The funding policy is to contribute annually to the Plan an

# Atmos Energy Corporation Pension Account Plan

## Notes to Financial Statements (continued)

amount at least equal to the minimum required contribution for a qualified retirement plan and the Company may also voluntarily contribute to the Plan additional amounts, provided that the total contribution does not exceed the maximum tax deductible contribution.

During the 2024 plan year, we were not required to make any contributions to the Plan to satisfy the minimum funding requirements and meet the Pension Protection Act of 2006 (PPA) funding threshold. Additionally, we did not make any voluntary contributions to the Plan for the 2024 plan year. Under the PPA, plan sponsors are required to achieve and maintain a 100 percent funding target over time as determined by the PPA.

During the 2023 plan year, we were not required to make any contributions to the Plan to satisfy the minimum funding requirements and meet the PPA funding threshold. However, in August 2024, the Company made a voluntary contribution of \$5,000,000 to the Plan for the 2023 plan year, which did not exceed the maximum tax deductibility and achieved the desired level of funding.

### **Benefits**

Employees with three or more years of credited service are entitled to either a lump-sum benefit or monthly pension benefit beginning at the normal retirement age of 65. The Plan permits early retirement beginning at age 55, with three years of vesting service, through age 65. However, if an employee retires early, he or she may also elect to defer his or her retirement income. Employees terminating employment after completing three years of service but prior to retirement age may receive benefits beginning the first day of the month after leaving the Company or they may postpone receiving benefits until they reach early or normal retirement age. Participants who reached age 50 on or before certain specified dates, and who also participated in another plan that was merged with the Plan (prior plan) are covered by special “grandfather” rules, whereby benefits will be calculated under the Plan’s benefit formula and the applicable prior plan formula. The results will be compared, and the larger benefit will be paid. Benefits payable from trust assets are paid by the Trustee directly to the participant entitled to receive such benefits.

In addition, the Plan provides for certain death benefits. The death benefit shall be paid to a beneficiary as a single lump sum or as a life annuity, as the beneficiary elects in writing. If the beneficiary is the participant’s spouse, the normal form of payment, in the absence of any written election to the contrary, is a life annuity. The annuity shall be payable to the beneficiary only on a monthly basis beginning on any date up to the date

# Atmos Energy Corporation Pension Account Plan

## Notes to Financial Statements (continued)

the participant would have reached age 65 if the beneficiary is the participant's spouse or, if the beneficiary is not the participant's spouse, beginning on any date within one year following the participant's death. A lump sum payable to a beneficiary who is not the participant's spouse must be paid within five years of the participant's death.

Should an employee suffer a disability, as defined by the Plan, prior to retirement, then that employee shall continue to accrue benefits in the Plan as though he or she were still actively employed. The participant's Cash Balance Account shall continue to be credited with amounts determined annually which is a percentage of pre-disability annual base salary based upon that participant's age and years of service and also includes interest earned on existing balances. The participant will continue to earn years of service during the period of disability until such time that the participant is no longer disabled or reaches the normal retirement age of 65.

## **2. Summary of Significant Accounting Policies**

### **Basis of Accounting**

The financial statements of the Plan have been prepared on the accrual basis of accounting. Benefits are recorded when paid. Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis and dividend income is recorded on the ex-dividend date.

### **Use of Estimates**

The preparation of financial statements in conformity with accounting principles generally accepted in the United States requires management to make estimates and assumptions that affect the amounts reported in the financial statements and accompanying notes. The most significant estimates include actuarial assumptions and fair value measurements. Actual results could differ from those estimates.

### **Valuation of Investments**

The fair value of investments held by the Trustee at December 31, 2024 and 2023 is determined in various ways. Investments in common stocks and certain U.S. government securities are stated at fair value based on quoted market prices on the last business day of the plan year. Investments in corporate bonds, certain other U.S. government securities, and asset-backed securities are stated at fair value based on other observable

# Atmos Energy Corporation Pension Account Plan

## Notes to Financial Statements (continued)

market prices on the last business day of the plan year. Shares of registered investment companies are valued at published market prices, which represent the net asset value of shares held by the Plan at year-end. Money market funds are valued at cost, which approximates fair value.

Investments in common/collective trusts and limited partnerships are valued at the net asset value of the units in the investment. The net asset value is based on the underlying net assets owned by the trusts and partnerships and is used as a practical expedient to estimate fair value. The practical expedient would not be used if it is determined to be probable that the common/collective trusts or limited partnerships would sell the investment for an amount different from the reported net asset value.

The fair value methods used by the Plan may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while 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 assets or liabilities could result in a different fair value measurement at the measurement date.

### **Administration**

Substantially all expenses incurred relating directly to the operation of the Plan were paid by the Plan.

### **Accumulated Plan Benefits**

Accumulated plan benefits are those estimated future periodic payments, including lump-sum distributions, which are attributable under the Plan's provisions to services rendered by participants up to the valuation date. Accumulated plan benefits include benefits expected to be paid to (a) retired or terminated participants or their beneficiaries and (b) present participants or their beneficiaries. Retirement and death benefits are based on service rendered and compensation earned prior to the benefit valuation date as specifically defined in the plan document or clearly implied by plan provisions.

# Atmos Energy Corporation Pension Account Plan

## Notes to Financial Statements (continued)

### Subsequent Events

We have evaluated subsequent events from the December 31, 2024 statement of net assets available for benefits date through September 30, 2025, the date these financial statements were issued. No events occurred subsequent to the statement of net assets available for benefits date that would require recognition or disclosure in the financial statements.

### 3. Actuarial Present Value of Accumulated Plan Benefits

The actuarial present value of accumulated plan benefits is determined by the Plan's actuary and is that amount which results from applying actuarial assumptions to adjust the accumulated plan benefits earned by the participants to reflect the time value of money (through discounts for interest) and the probability of payment (by means of decrements such as for death, disability, withdrawal, or retirement) between the valuation date and the expected date of payment.

The actuarial present value of accumulated plan benefits as of December 31, 2024 and 2023 was determined using the following significant actuarial assumptions:

|                      |                                                                                                                                                                                                     |
|----------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Rate of return       | 6.50% and 6.25% per annum in 2024 and 2023                                                                                                                                                          |
| Retirement age       | Early retirement beginning at age 55 with three years of vesting service, through age 65, with average retirement age being 65 in 2024 and 2023                                                     |
| Mortality rates      | Pri-2012 Private Retirement Plans (no collar) Mortality Table projected generationally with Scale MP-2021 in 2024 and 2023                                                                          |
| Lump sum basis rates | 2025 Section 417(e)(3) Mortality Table with January 2025 segment rates fully phased in for 2024 and 2024 Section 417(e)(3) Mortality Table with January 2024 segment rates fully phased in for 2023 |

# Atmos Energy Corporation Pension Account Plan

## Notes to Financial Statements (continued)

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

|                                           | <b>2024</b>           | <b>2023</b>           |
|-------------------------------------------|-----------------------|-----------------------|
| Vested benefits:                          |                       |                       |
| Participants currently receiving payments | \$ 178,081,033        | \$ 177,835,687        |
| Other participants                        | 211,752,243           | 222,219,468           |
|                                           | <u>389,833,276</u>    | <u>400,055,155</u>    |
| Non-vested benefits                       | 4,147,832             | 4,112,207             |
|                                           | <u>\$ 393,981,108</u> | <u>\$ 404,167,362</u> |

The changes in the actuarial present value of accumulated plan benefits for the year ended December 31, 2024, are as follows:

|                                                                            |                       |
|----------------------------------------------------------------------------|-----------------------|
| Actuarial present value of accumulated plan benefits,<br>beginning of year | \$ 404,167,362        |
| Increase (decrease) during the year attributable to:                       |                       |
| Benefits accumulated                                                       | 11,262,130            |
| Benefits paid                                                              | (39,274,402)          |
| Increase due to a decrease in discount period                              | 24,737,018            |
| Actuarial (gains)/losses                                                   | 341,780               |
| Changes in actuarial assumptions                                           | <u>(7,252,780)</u>    |
| Actuarial present value of accumulated plan benefits,<br>end of year       | <u>\$ 393,981,108</u> |

During 2024, the majority of the changes in actuarial assumptions were due to changes in the discount rate, the lump sum basis rates, retirement and termination rates, terminated vested commencement age, and annuity and lump sum form of payment election percentages. The foregoing actuarial assumptions are based on the presumption that the Plan will continue. Were the Plan to terminate, different actuarial assumptions and other factors might be applicable in determining the actuarial present value of accumulated plan benefits.

# Atmos Energy Corporation Pension Account Plan

## Notes to Financial Statements (continued)

### **4. Plan Termination**

Although it has not expressed any intent to do so, the Employer has the right under the Plan to change or terminate the Plan at any time, subject to the provisions of ERISA. In the event of a termination of the Plan:

- (a) The net assets then remaining in the trust shall be allocated for payment of plan benefits to the participants and beneficiaries of the Plan in the order specified by the plan document and in accordance with ERISA and its applicable regulations. Any remainder shall be returned to the Employer.
- (b) To the extent there are unfunded vested benefits other than benefits becoming vested by virtue of termination of the Plan, ERISA provides that such benefits are payable to participants by the Pension Benefit Guaranty Corporation (PBGC), subject to certain specified limits. Generally, the PBGC guarantees most vested, normal age retirement benefits, early retirement benefits, and certain disability and survivor's pensions. However, the PBGC does not guarantee all types of benefits under the Plan, and the amount of benefit protection is subject to certain limitations. Vested benefits under the Plan are guaranteed at the level in effect on the date of the Plan's termination, subject to a statutory ceiling on the amount of an individual's monthly benefit.

Whether or not all participants receive their benefits should the Plan terminate 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 guarantee, while other benefits may not be provided for at all.

### **5. Fair Value Measurements**

Authoritative accounting literature establishes a fair value hierarchy that prioritizes the inputs used to measure fair value based on observable and unobservable data. The hierarchy categorizes the inputs into three levels, with the highest priority given to unadjusted quoted prices in active markets for identical assets and liabilities (Level 1) and the lowest priority given to unobservable inputs (Level 3). The asset's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. The levels of the hierarchy are described below:

# Atmos Energy Corporation Pension Account Plan

## Notes to Financial Statements (continued)

Level 1 – Unadjusted quoted prices in active markets for identical assets or liabilities. An active market for the asset or liability is defined as a market in which transactions for the asset or liability occur with sufficient frequency and volume to provide pricing information on an ongoing basis. The Plan's Level 1 measurements consist of common stocks, registered investment companies, and U.S. Treasury securities.

Level 2 – Pricing inputs other than quoted prices included in Level 1 that are either directly or indirectly observable for the asset or liability as of the measurement date. These inputs are derived principally from, or corroborated by, observable market data. The Plan's Level 2 measurements consist of money market funds, Federal Home Loan Mortgage Corporation mortgage-backed securities, Federal National Mortgage Association mortgage-backed securities, Government National Mortgage Association mortgage-backed securities, asset-backed securities, and corporate bonds.

Level 3 – Unobservable inputs that are supported by little if any market activity and are significant to the fair value of the asset or liability as of the measurement date. The Plan had no Level 3 investments at December 31, 2024 and 2023.

The following tables set forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2024 and 2023.

| Assets at Fair Value as of December 31, 2024           |                       |                      |             |                              |
|--------------------------------------------------------|-----------------------|----------------------|-------------|------------------------------|
|                                                        | Level 1               | Level 2              | Level 3     | Total                        |
| <b>Investments:</b>                                    |                       |                      |             |                              |
| Common stocks                                          | \$ 260,478,123        | \$ -                 | \$ -        | \$ 260,478,123               |
| Money market funds                                     | -                     | 38,441,853           | -           | 38,441,853                   |
| Registered investment companies                        | 108,865,959           | -                    | -           | 108,865,959                  |
| Government securities:                                 |                       |                      |             |                              |
| Mortgage-backed securities                             | -                     | 24,822,358           | -           | 24,822,358                   |
| U.S. treasuries/other                                  | 9,367,906             | 26,561               | -           | 9,394,467                    |
| Corporate bonds                                        | -                     | 28,243,525           | -           | 28,243,525                   |
| Asset-backed securities                                | -                     | 489,694              | -           | 489,694                      |
| Total assets in the fair value hierarchy               | <u>\$ 378,711,988</u> | <u>\$ 92,023,991</u> | <u>\$ -</u> | <u>470,735,979</u>           |
| Investments measured at net asset value <sup>(1)</sup> |                       |                      |             | <u>109,089,889</u>           |
| Investments at fair value                              |                       |                      |             | <u><u>\$ 579,825,868</u></u> |

# Atmos Energy Corporation Pension Account Plan

## Notes to Financial Statements (continued)

| Assets at Fair Value as of December 31, 2023           |                       |                      |             |                       |
|--------------------------------------------------------|-----------------------|----------------------|-------------|-----------------------|
|                                                        | Level 1               | Level 2              | Level 3     | Total                 |
| <b>Investments:</b>                                    |                       |                      |             |                       |
| Common stocks                                          | \$ 272,660,782        | \$ -                 | \$ -        | \$ 272,660,782        |
| Money market funds                                     | -                     | 21,196,209           | -           | 21,196,209            |
| Registered investment companies                        | 75,157,903            | -                    | -           | 75,157,903            |
| Government securities:                                 |                       |                      |             |                       |
| Mortgage-backed securities                             | -                     | 19,246,508           | -           | 19,246,508            |
| U.S. treasuries/other                                  | 8,559,507             | 27,385               | -           | 8,586,892             |
| Corporate bonds                                        | -                     | 24,964,848           | -           | 24,964,848            |
| Total assets in the fair value hierarchy               | <u>\$ 356,378,192</u> | <u>\$ 65,434,950</u> | <u>\$ -</u> | 421,813,142           |
| Investments measured at net asset value <sup>(1)</sup> |                       |                      |             | 119,560,523           |
| Investments at fair value                              |                       |                      |             | <u>\$ 541,373,665</u> |

- <sup>(1)</sup> Investments in our common/collective trusts and limited partnerships that are measured at net asset value per share equivalent are not classified in the fair value hierarchy. The fair value amounts presented are intended to reconcile the fair value hierarchy to the line items presented in the statement of net assets available for benefits.

The following table summarizes investments for which fair value is measured using the net asset value per share practical expedient as of December 31, 2024 and 2023. There are no redemption restrictions for these investments.

# Atmos Energy Corporation Pension Account Plan

## Notes to Financial Statements (continued)

| <b>December 31, 2024</b>                     | <b>Fair Value</b>     | <b>Unfunded<br/>Commitments</b> | <b>Redemption<br/>Frequency (if<br/>Currently<br/>Eligible)</b> | <b>Redemption<br/>Notice<br/>Period</b> |
|----------------------------------------------|-----------------------|---------------------------------|-----------------------------------------------------------------|-----------------------------------------|
| Russell 1000 Index Non<br>Lending Fund       | \$ 66,158,731         | n/a                             | Daily                                                           | n/a                                     |
| TS&W International Large<br>Cap Equity Trust | 20,825,593            | n/a                             | Daily                                                           | n/a                                     |
| Acadian International Small<br>Cap Fund      | 22,105,565            | n/a                             | Daily                                                           | n/a                                     |
| Total                                        | <u>\$ 109,089,889</u> |                                 |                                                                 |                                         |

| <b>December 31, 2023</b>                     | <b>Fair Value</b>     | <b>Unfunded<br/>Commitments</b> | <b>Redemption<br/>Frequency (if<br/>Currently<br/>Eligible)</b> | <b>Redemption<br/>Notice<br/>Period</b> |
|----------------------------------------------|-----------------------|---------------------------------|-----------------------------------------------------------------|-----------------------------------------|
| Russell 1000 Index Non<br>Lending Fund       | \$ 53,143,093         | n/a                             | Daily                                                           | n/a                                     |
| TS&W International Large<br>Cap Equity Trust | 23,024,873            | n/a                             | Daily                                                           | n/a                                     |
| Sands Capital Emerging<br>Markets Growth CIT | 20,925,331            | n/a                             | Daily                                                           | n/a                                     |
| Acadian International Small<br>Cap Fund      | 22,467,226            | n/a                             | Daily                                                           | n/a                                     |
| Total                                        | <u>\$ 119,560,523</u> |                                 |                                                                 |                                         |

# Atmos Energy Corporation Pension Account Plan

## Notes to Financial Statements (continued)

### **6. Income Tax Status**

The Plan has received a determination letter from the Internal Revenue Service (IRS) dated August 3, 2020, stating that the Plan is qualified under Section 401(a) of the Internal Revenue Code (the Code) and, therefore, the related trust is exempt from taxation. Once qualified, the Plan is required to operate in conformity with the Code to maintain its qualification. The Committee believes the Plan is being operated in compliance with the applicable requirements of the Code and, therefore, believes that the Plan is qualified and the related trust is tax-exempt.

### **7. Risks and Uncertainties**

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

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 processes, it is at least reasonably possible that changes in these estimates and assumptions in the near term could materially affect the amounts reported and disclosed in the financial statements.

## Atmos Energy Corporation Pension Account Plan

### Notes to Financial Statements (continued)

#### **8. Party-In-Interest Transactions**

Certain investments in common/collective trusts and money market funds are managed by State Street. State Street is the trustee of these assets; therefore, these transactions qualify as party-in-interest transactions. Additionally, a portion of the Plan's assets are invested in the Company's common stock. Because the Company is the Plan sponsor, transactions involving the Company's common stock qualify as party-in-interest transactions. The value of the Company's common stock was \$70,568,109 and \$83,065,530, or 12.2% and 15.2% of net assets available for benefits, at December 31, 2024 and 2023. All of these transactions are exempt from the prohibited transaction rules.

## Supplemental Schedules

# SCHEDULE SB ATTACHMENTS

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

| Plan Year | Active Participants | Terminated Vested Participants | Retired Participants and Beneficiaries Receiving Payments | Total      |
|-----------|---------------------|--------------------------------|-----------------------------------------------------------|------------|
| 2024      | 21,457,644          | 570,606                        | 19,371,049                                                | 41,399,299 |
| 2025      | 17,687,402          | 1,197,626                      | 18,768,020                                                | 37,653,048 |
| 2026      | 17,872,632          | 1,404,526                      | 18,131,268                                                | 37,408,426 |
| 2027      | 17,907,683          | 1,637,437                      | 17,469,947                                                | 37,015,067 |
| 2028      | 17,456,977          | 1,785,454                      | 16,790,092                                                | 36,032,523 |
| 2029      | 17,147,985          | 1,872,288                      | 16,090,157                                                | 35,110,430 |
| 2030      | 16,936,318          | 1,959,665                      | 15,385,102                                                | 34,281,085 |
| 2031      | 15,618,026          | 2,033,737                      | 14,684,027                                                | 32,335,790 |
| 2032      | 14,897,915          | 2,091,047                      | 13,981,434                                                | 30,970,396 |
| 2033      | 14,235,755          | 2,123,568                      | 13,273,842                                                | 29,633,165 |
| 2034      | 13,647,646          | 2,110,316                      | 12,569,056                                                | 28,327,018 |
| 2035      | 12,539,789          | 2,113,775                      | 11,877,646                                                | 26,531,210 |
| 2036      | 12,172,939          | 2,119,409                      | 11,192,022                                                | 25,484,370 |
| 2037      | 11,185,644          | 2,099,819                      | 10,513,482                                                | 23,798,945 |
| 2038      | 10,895,439          | 2,078,583                      | 9,843,303                                                 | 22,817,325 |
| 2039      | 10,611,139          | 2,040,319                      | 9,182,798                                                 | 21,834,256 |
| 2040      | 9,942,852           | 1,998,976                      | 8,533,405                                                 | 20,475,233 |
| 2041      | 10,048,745          | 1,964,343                      | 7,896,745                                                 | 19,909,833 |
| 2042      | 9,402,230           | 1,928,758                      | 7,274,604                                                 | 18,605,592 |
| 2043      | 9,152,614           | 1,878,768                      | 6,668,883                                                 | 17,700,265 |
| 2044      | 9,111,816           | 1,820,666                      | 6,081,572                                                 | 17,014,054 |
| 2045      | 8,595,401           | 1,762,606                      | 5,514,747                                                 | 15,872,754 |
| 2046      | 8,452,432           | 1,699,747                      | 4,970,516                                                 | 15,122,695 |
| 2047      | 7,948,120           | 1,640,757                      | 4,450,984                                                 | 14,039,861 |
| 2048      | 7,691,829           | 1,571,153                      | 3,958,291                                                 | 13,221,273 |
| 2049      | 7,306,341           | 1,494,363                      | 3,494,503                                                 | 12,295,207 |
| 2050      | 6,993,003           | 1,423,375                      | 3,061,522                                                 | 11,477,900 |
| 2051      | 6,533,111           | 1,346,473                      | 2,661,010                                                 | 10,540,594 |
| 2052      | 6,132,634           | 1,281,070                      | 2,294,252                                                 | 9,707,956  |

Plan Name: Atmos Energy Corporation Pension Account Plan  
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Plan Sponsor: Atmos Energy Corporation  
Valuation Date: January 1, 2024

## SCHEDULE SB ATTACHMENTS

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| Plan Year | Active<br>Participants | Terminated<br>Vested<br>Participants | Retired<br>Participants and<br>Beneficiaries<br>Receiving<br>Payments | Total     |
|-----------|------------------------|--------------------------------------|-----------------------------------------------------------------------|-----------|
| 2053      | 5,723,366              | 1,210,649                            | 1,962,038                                                             | 8,896,053 |
| 2054      | 5,217,440              | 1,121,953                            | 1,664,596                                                             | 8,003,989 |
| 2055      | 4,862,839              | 1,033,316                            | 1,401,488                                                             | 7,297,643 |
| 2056      | 4,429,379              | 948,946                              | 1,171,617                                                             | 6,549,942 |
| 2057      | 4,028,506              | 875,009                              | 973,287                                                               | 5,876,802 |
| 2058      | 3,664,035              | 805,050                              | 804,266                                                               | 5,273,351 |
| 2059      | 3,333,770              | 735,217                              | 661,956                                                               | 4,730,943 |
| 2060      | 3,040,354              | 670,781                              | 543,515                                                               | 4,254,650 |
| 2061      | 2,775,277              | 611,553                              | 446,003                                                               | 3,832,833 |
| 2062      | 2,520,094              | 557,260                              | 366,510                                                               | 3,443,864 |
| 2063      | 2,301,076              | 507,560                              | 302,251                                                               | 3,110,887 |
| 2064      | 2,096,660              | 462,068                              | 250,651                                                               | 2,809,379 |
| 2065      | 1,906,295              | 420,369                              | 209,394                                                               | 2,536,058 |
| 2066      | 1,729,273              | 382,059                              | 176,449                                                               | 2,287,781 |
| 2067      | 1,564,793              | 346,768                              | 150,079                                                               | 2,061,640 |
| 2068      | 1,412,024              | 314,154                              | 128,842                                                               | 1,855,020 |
| 2069      | 1,270,153              | 283,913                              | 111,565                                                               | 1,665,631 |
| 2070      | 1,138,431              | 255,788                              | 97,314                                                                | 1,491,533 |
| 2071      | 1,016,198              | 229,574                              | 85,361                                                                | 1,331,133 |
| 2072      | 902,880                | 205,119                              | 75,148                                                                | 1,183,147 |
| 2073      | 797,993                | 182,304                              | 66,251                                                                | 1,046,548 |

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# SCHEDULE SB ATTACHMENTS

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

| x                         | $q_x^r$ | $l_x$ | ${}_{x-55}p_{55} = l_x / l_{55}$ | $q_x^r * l_x / l_{55}$ | $x * q_x^r * l_x / l_{55}$ |
|---------------------------|---------|-------|----------------------------------|------------------------|----------------------------|
| 55                        | 0.03    | 1,000 | 1.000000                         | 0.030000               | 1.650000                   |
| 56                        | 0.03    | 970   | 0.970000                         | 0.029100               | 1.629600                   |
| 57                        | 0.03    | 941   | 0.940900                         | 0.028227               | 1.608939                   |
| 58                        | 0.03    | 913   | 0.912673                         | 0.027380               | 1.588051                   |
| 59                        | 0.03    | 885   | 0.885293                         | 0.026559               | 1.566968                   |
| 60                        | 0.06    | 859   | 0.858734                         | 0.051524               | 3.091442                   |
| 61                        | 0.06    | 807   | 0.807210                         | 0.048433               | 2.954389                   |
| 62                        | 0.14    | 759   | 0.758777                         | 0.106229               | 6.586188                   |
| 63                        | 0.14    | 653   | 0.652549                         | 0.091357               | 5.755478                   |
| 64                        | 0.14    | 561   | 0.561192                         | 0.078567               | 5.028278                   |
| 65                        | 0.25    | 483   | 0.482625                         | 0.120656               | 7.842655                   |
| 66                        | 0.25    | 362   | 0.361969                         | 0.090492               | 5.972483                   |
| 67                        | 0.25    | 271   | 0.271477                         | 0.067869               | 4.547232                   |
| 68                        | 0.30    | 204   | 0.203607                         | 0.061082               | 4.153591                   |
| 69                        | 0.30    | 143   | 0.142525                         | 0.042758               | 2.950271                   |
| 70                        | 1.00    | 100   | 0.099768                         | 0.099768               | 6.983733                   |
| Average age at retirement |         |       |                                  |                        | 63.909298                  |

The average retirement age for Line 22 was calculated by creating a hypothetical life table with retirement as the only decrement, and then computing the average retirement age for the table.

Plan Name: Atmos Energy Corporation Pension Account Plan  
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 Plan Sponsor: Atmos Energy Corporation  
 Valuation Date: January 1, 2024

# SCHEDULE SB ATTACHMENTS

## Schedule SB, Part V Summary of Plan Provisions

### Plan Provisions

The most recent amendment reflected in the following plan provisions is effective on January 1, 2024.

|                    |                                                                                                                                                                                                                                                                                    |
|--------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Covered Employees  | All employees on the payroll of the Atmos Energy Corporation hired prior to October 1, 2010 including leased employees, and excluding independent contractors. Effective January 1, 2015, employees formerly participating in the MVG Union plan entered the Pension Account Plan. |
| Participation Date | First day of the month coincident with or next following the date the employee completes 1000 hours during a 12-month period.                                                                                                                                                      |

### Definitions

|                       |                                                                                                                                                                                                           |            |                              |
|-----------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|------------------------------|
| Vesting service       | Total years of service from date of employment measured on an elapsed time basis.                                                                                                                         |            |                              |
| Benefit service       | Total years of service from date of employment measured on an elapsed time basis.                                                                                                                         |            |                              |
| Merger Date           | January 1, 1999 for Atmos Energy, Greeley, UCG, and WKG; June 1, 2000 for ANG/Southwestern Energy; June 30, 2003 for MVG; October 1, 2004 for TXU Gas; January 1, 2015 for former MVG Union participants. |            |                              |
| Pay credits           | For all participants:                                                                                                                                                                                     |            |                              |
|                       | Age + Service on<br>Merger Date                                                                                                                                                                           | On all Pay | On Pay over<br>the Wage Base |
|                       | <35                                                                                                                                                                                                       | 2.35%      | 2.35%                        |
|                       | 35 - 49                                                                                                                                                                                                   | 3.25%      | 3.25%                        |
|                       | 50 - 64                                                                                                                                                                                                   | 4.50%      | 4.50%                        |
|                       | 65 - 79                                                                                                                                                                                                   | 6.25%      | 5.00%                        |
|                       | 80 - 94                                                                                                                                                                                                   | 8.50%      | 5.00%                        |
|                       | 95+                                                                                                                                                                                                       | 10.50%     | 5.00%                        |
| Actuarial Equivalence | IRC 417(e)(3) mortality and a 5.85% interest rate                                                                                                                                                         |            |                              |

|                 |                                               |
|-----------------|-----------------------------------------------|
| Plan Name:      | Atmos Energy Corporation Pension Account Plan |
| EIN / PN:       | 75-1743247/003                                |
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| Valuation Date: | January 1, 2024                               |

# SCHEDULE SB ATTACHMENTS

|                                                   |                                                                                                                                                                                                                                                                                                                                                                                |            |                              |
|---------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|------------------------------|
| Additional pay credits                            | For MVG participants and MVG decertified union members the Credits below are granted through December 31, 2024:                                                                                                                                                                                                                                                                |            |                              |
|                                                   | Age on<br>Merger Date                                                                                                                                                                                                                                                                                                                                                          | On all Pay | On Pay over<br>the Wage Base |
|                                                   | <30                                                                                                                                                                                                                                                                                                                                                                            | 0%         | 0%                           |
|                                                   | 30 - 34                                                                                                                                                                                                                                                                                                                                                                        | 1%         | 1%                           |
|                                                   | 35 - 39                                                                                                                                                                                                                                                                                                                                                                        | 2%         | 2%                           |
|                                                   | 40 - 44                                                                                                                                                                                                                                                                                                                                                                        | 3%         | 3%                           |
|                                                   | 45+                                                                                                                                                                                                                                                                                                                                                                            | 5%         | 5%                           |
| Cash balance credits                              | The sum of:<br>(i) the pay credits<br>(ii) the additional pay credits                                                                                                                                                                                                                                                                                                          |            |                              |
| Interest credits                                  | Interest on the account balance at the beginning of each year at the equal to the 30-year Treasury bond rate in effect for the November preceding the first day of the plan year. In no event will the interest rate be less than 4.69% or more than 7.0%.                                                                                                                     |            |                              |
| Opening balance                                   | The age-62 benefit under the old final average pay plans multiplied by a deferred annuity factor using a 7.0% interest rate and the 1983 Group Annuity Mortality table blended 50% for males and 50% for females.                                                                                                                                                              |            |                              |
| Annuity conversion rate for hybrid plans          | The cash balance account is converted to an annuity using IRC 417(e)(3) mortality and a 5.85% interest rate. For participants commencing after age 65, the cash balance is converted to an annuity based on an age 65 conversion factor.                                                                                                                                       |            |                              |
| Opening balance for former MVG Union participants | The age-65 benefit under the former MVG Union plan multiplied by a deferred annuity factor using the 417(e) interest rate for September 2014 and the 2015 417(e) mortality table.                                                                                                                                                                                              |            |                              |
| Account balance                                   | The sum of the opening balance and the cash balance credits both accumulated with interest credits to a point in time.                                                                                                                                                                                                                                                         |            |                              |
| Disability benefit                                | Disabled participants continue to accrue benefit service and vesting service, as well as cash balance credits (based on rate of pay prior to disability) until the later of age 65 or the date benefits are terminated under the Atmos Energy LTD plan.                                                                                                                        |            |                              |
| Grandfathered benefit                             | Participants age 50 on Merger Date are eligible to receive a benefit based on the sum of: <ul style="list-style-type: none"> <li>▶ the accrued benefit as of the Merger Date adjusted for pay raises for ten years after Merger Date, and</li> <li>▶ the accrued benefit for service after the Merger Date based on the Atmos Energy Corporation prior plan formula</li> </ul> |            |                              |
| Grandfathered benefit (decertified MVG Union)     | Decertified MVG Union participants age 50 on Merger Date are eligible to receive a benefit based on the prior plan formula, based solely on employment completed before January 1, 2025.                                                                                                                                                                                       |            |                              |
| Annual pension benefit                            | The greatest of:                                                                                                                                                                                                                                                                                                                                                               |            |                              |

Plan Name: Atmos Energy Corporation Pension Account Plan  
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 Plan Sponsor: Atmos Energy Corporation  
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## SCHEDULE SB ATTACHMENTS

|                              |                                                                                                                                               |
|------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|
|                              | (i) the Account balance divided by an actuarial equivalent life annuity factor using 5.85% and the 417(e) Prescribed Mortality Table          |
|                              | (ii) the single life annuity optional form of the Grandfathered benefit                                                                       |
|                              | (iii) the single life annuity optional form of the benefit accrued through the Merger Date based on the prior plan final average pay formulas |
| Earnings                     | W-2 earnings plus 401(k) deferrals and section 125 salary reduction. Earnings do not include expense reimbursements or variable compensation. |
| Normal retirement date (NRD) | First of month next following the attainment of age 65 on the third anniversary of employment date.                                           |
| Preretirement death benefit  | Account balance as of date of death.                                                                                                          |

### Eligibility for Benefits

|                             |                                                                                                                    |
|-----------------------------|--------------------------------------------------------------------------------------------------------------------|
| Normal retirement           | Retirement on NRD                                                                                                  |
| Early retirement            | Retirement before NRD and on or after both attaining age 55 and completing three years of eligibility service      |
| Postponed retirement        | Retirement after NRD                                                                                               |
| Vested termination          | Termination for reasons other than death or retirement after completing three years of eligibility service         |
| 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    | Annual pension benefit determined as of NRD.                                                                                                                                                                                                                                                                                                                                                                                                                        |
| Early retirement     | Annual pension benefit determined as of early retirement date.                                                                                                                                                                                                                                                                                                                                                                                                      |
| Postponed retirement | Annual pension benefit determined as of actual retirement date.                                                                                                                                                                                                                                                                                                                                                                                                     |
| Vested termination   | Account balance determined as of termination date, accumulated with interest credits to retirement age, and then divided by an actuarial equivalent life annuity factor using 5.85% and the 417(e) Prescribed Mortality Table but not less than:<br><br>(i) the single life annuity optional form of the Grandfathered benefit<br>(ii) the single life annuity optional form of benefit accrued through the Merger Date based on the old final average pay formulas |
| Preretirement death  | Preretirement death benefit is payable as a lump sum or as a life annuity.                                                                                                                                                                                                                                                                                                                                                                                          |

### Other Plan Provisions

|                 |                                               |
|-----------------|-----------------------------------------------|
| Plan Name:      | Atmos Energy Corporation Pension Account Plan |
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| Plan Sponsor:   | Atmos Energy Corporation                      |
| Valuation Date: | January 1, 2024                               |

# SCHEDULE SB ATTACHMENTS

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|                             |                                                                                                                                                                                                                                                                                                        |
|-----------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Forms of payment            | Single life annuity, 5 years certain and life, 10 years certain and life, joint and survivor with 50%, 67%, 75%, or 100% continued to the spouse upon the participant's death. All optional annuity forms of payment are actuarially equivalent. In addition, a participant may also elect a lump sum. |
| Maximum on benefits and pay | All benefits and pay for any calendar year may not exceed the maximum limitations for that year as defined in the Internal Revenue Code. The plan provides for increasing the dollar limits automatically as such changes become effective.                                                            |

Future Plan Changes

None.

Changes in Benefits Valued Since Prior Year

None.

|                 |                                               |
|-----------------|-----------------------------------------------|
| Plan Name:      | Atmos Energy Corporation Pension Account Plan |
| EIN / PN:       | 75-1743247/003                                |
| Plan Sponsor:   | Atmos Energy Corporation                      |
| Valuation Date: | January 1, 2024                               |

# Atmos Energy Corporation Pension Account Plan

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

EIN: 75-1743247 Plan #: 003

December 31, 2024

| (a) | (b)<br>Identity of Issue,<br>Borrower, Lessor,<br>or Similar Party | (c)<br>Description of Investment,<br>Including Maturity Date,<br>Rate of Interest, Collateral,<br>Par, or Maturity Value | (d)<br>Cost    | (e)<br>Current<br>Value |
|-----|--------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------|----------------|-------------------------|
| *   | State Street<br>Bank and Trust<br>Company, N.A.                    | +                                                                                                                        | \$ 404,305,900 | \$ 579,825,868          |

\* Indicates party-in-interest to the Plan.

+ Detailed schedule attached.

Atmos Energy Corporation Pension Account Plan  
Schedule H, Line 4i - Schedule of Assets (Held At End of Year)

December 31, 2024

EIN: 75-1743247 Plan #003

| Identity of Issue, Borrower, Lessor or Similar Party | Description of Investment      | Cost       | Current Value |
|------------------------------------------------------|--------------------------------|------------|---------------|
| ENTERPRISE FLEET FINANCING LLC                       | \$165,000; 4.69%; 20 Jul 2027  | \$ 164,976 | \$ 165,200    |
| ENTERPRISE FLEET FINANCING LLC                       | \$130,000; 5.5%; 22 Apr 2030   | 132,854    | 131,853       |
| GLS AUTO RECEIVABLES TRUST                           | \$105,000; 2.48%; 15 Oct 2027  | 102,182    | 102,746       |
| SANTANDER DRIVE AUTO RECEIVABL                       | \$90,000; 4.62%; 15 Nov 2028   | 89,997     | 89,895        |
| WELLS FARGO                                          | \$220,000; 3.584%; 15 May 2062 | 211,350    | 200,724       |
| WELLS FARGO COMMERCIAL MORTGAG                       | \$75,000; 3.729%; 15 May 2052  | 71,569     | 70,439        |
| WELLS FARGO                                          | \$335,000; 1%; 15 Nov 2061     | 333,817    | 326,957       |
| WELLS FARGO                                          | \$500,000; 1%; 15 Aug 2061     | 477,832    | 484,588       |
| WELLS FARGO                                          | \$100,000; 1%; 15 May 2061     | 95,145     | 97,397        |
| WELLS FARGO COMMERCIAL MORTGAG                       | \$390,000; 1%; 15 Jul 2058     | 403,286    | 386,702       |
| WELLS FARGO                                          | \$115,000; 4.005%; 15 Feb 2052 | 110,211    | 109,974       |
| AZENTA INC                                           | Common Stock                   | 132,035    | 155,000       |
| CROSS COUNTRY HEALTHCARE INC                         | Common Stock                   | 68,831     | 115,316       |
| PIPER SANDLER COS                                    | Common Stock                   | 119,293    | 472,421       |
| ANGIODYNAMICS INC                                    | Common Stock                   | 189,953    | 136,026       |
| GIBRALTAR INDUSTRIES INC                             | Common Stock                   | 67,873     | 67,735        |
| NORTHWESTERN ENERGY GROUP IN                         | Common Stock                   | 540,008    | 457,083       |
| HUNTSMAN CORP                                        | Common Stock                   | 108,771    | 83,840        |
| SILICOM LTD                                          | Common Stock                   | 182,998    | 87,258        |
| HELIX ENERGY SOLUTIONS GROUP                         | Common Stock                   | 109,426    | 198,516       |
| PORTLAND GENERAL ELECTRIC CO                         | Common Stock                   | 187,704    | 185,385       |
| KAISER ALUMINUM CORP                                 | Common Stock                   | 200,696    | 140,540       |
| ICF INTERNATIONAL INC                                | Common Stock                   | 148,374    | 226,499       |
| OWENS CORNING                                        | Common Stock                   | 109,737    | 306,576       |
| KBR INC                                              | Common Stock                   | 173,218    | 353,373       |
| IPG PHOTONICS CORP                                   | Common Stock                   | 87,156     | 58,176        |
| AMERICAN PUBLIC EDUCATION                            | Common Stock                   | 12,099     | 10,785        |
| QUANEX BUILDING PRODUCTS                             | Common Stock                   | 132,407    | 197,556       |
| DOUGLAS DYNAMICS INC                                 | Common Stock                   | 81,761     | 47,260        |
| VISTEON CORP                                         | Common Stock                   | 171,994    | 181,876       |
| MAGNACHIP SEMICONDUCTOR CORP                         | Common Stock                   | 158,000    | 60,300        |
| UNITED COMMUNITY BANKS/GA                            | Common Stock                   | 189,534    | 240,710       |
| JAZZ PHARMACEUTICALS PLC                             | Common Stock                   | 344,939    | 338,663       |
| UNITED FIRE GROUP INC                                | Common Stock                   | 119,150    | 119,490       |
| SUPERNUS PHARMACEUTICALS INC                         | Common Stock                   | 31,454     | 30,736        |
| TOWER SEMICONDUCTOR LTD                              | Common Stock                   | 127,221    | 291,031       |
| BLOOMIN BRANDS INC                                   | Common Stock                   | 118,062    | 61,660        |
| BRP INC/CA SUB VOTING                                | Common Stock                   | 120,418    | 89,022        |
| SCIENCE APPLICATIONS INTE                            | Common Stock                   | 157,117    | 195,615       |
| LEIDOS HOLDINGS INC                                  | Common Stock                   | 112,907    | 187,278       |
| PERRIGO CO PLC                                       | Common Stock                   | 318,745    | 244,245       |
| METALLUS INC                                         | Common Stock                   | 130,257    | 128,583       |
| AMPHASTAR PHARMACEUTICALS IN                         | Common Stock                   | 73,927     | 63,121        |
| V2X INC                                              | Common Stock                   | 128,219    | 131,533       |
| NOMAD FOODS LTD                                      | Common Stock                   | 217,051    | 187,936       |
| GOLDEN ENTERTAINMENT INC                             | Common Stock                   | 87,019     | 83,740        |
| MADISON SQUARE GARDEN SPORTS                         | Common Stock                   | 170,626    | 225,680       |
| INNOVIVA INC                                         | Common Stock                   | 215,462    | 268,925       |
| SELECT WATER SOLUTIONS INC                           | Common Stock                   | 64,854     | 114,526       |
| DELEK US HOLDINGS INC                                | Common Stock                   | 189,508    | 129,500       |
| TAPESTRY INC                                         | Common Stock                   | 120,550    | 218,855       |
| ENCOMPASS HEALTH CORP                                | Common Stock                   | 172,268    | 300,137       |
| NEWMARK GROUP INC CLASS A                            | Common Stock                   | 88,503     | 112,087       |
| ASGN INC                                             | Common Stock                   | 116,602    | 154,179       |

Atmos Energy Corporation Pension Account Plan  
Schedule H, Line 4i - Schedule of Assets (Held At End of Year)

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| Identity of Issue, Borrower, Lessor or Similar Party | Description of Investment | Cost    | Current Value |
|------------------------------------------------------|---------------------------|---------|---------------|
| SPECTRUM BRANDS HOLDINGS INC                         | Common Stock              | 145,511 | 207,000       |
| MAGNOLIA OIL + GAS CORP A                            | Common Stock              | 341,395 | 541,247       |
| SONOS INC                                            | Common Stock              | 156,957 | 115,056       |
| PERION NETWORK LTD                                   | Common Stock              | 105,536 | 35,574        |
| MASTERCRAFT BOAT HOLDINGS IN                         | Common Stock              | 117,038 | 147,793       |
| ATLANTIC UNION BANKSHARES CO                         | Common Stock              | 137,134 | 143,944       |
| INMODE LTD                                           | Common Stock              | 184,416 | 127,755       |
| ONTO INNOVATION INC                                  | Common Stock              | 41,512  | 200,004       |
| OVINTIV INC                                          | Common Stock              | 181,458 | 218,700       |
| SPHERE ENTERTAINMENT CO                              | Common Stock              | 112,331 | 116,928       |
| ACADEMY SPORTS + OUTDOORS IN                         | Common Stock              | 42,154  | 83,419        |
| EASTERN BANKSHARES INC                               | Common Stock              | 228,716 | 252,713       |
| STRIDE INC                                           | Common Stock              | 73,311  | 311,790       |
| MARAVAI LIFESCIENCES HLDGS A                         | Common Stock              | 137,524 | 53,955        |
| DIME COMMUNITY BANCSHARES IN                         | Common Stock              | 249,540 | 281,225       |
| HAYWARD HOLDINGS INC                                 | Common Stock              | 108,950 | 175,835       |
| TRUSTCO BANK CORP NY                                 | Common Stock              | 324,347 | 308,117       |
| LUCKY STRIKE ENTERTAINMENT C                         | Common Stock              | 72,159  | 71,071        |
| SEADRILL LIMITED                                     | Common Stock              | 140,266 | 122,629       |
| QUIDELORTHO CORP                                     | Common Stock              | 74,444  | 40,095        |
| ENHABIT INC                                          | Common Stock              | 235,652 | 102,311       |
| COHERENT CORP                                        | Common Stock              | 60,334  | 156,305       |
| NOBLE CORP PLC                                       | Common Stock              | 183,919 | 130,310       |
| ADEIA INC                                            | Common Stock              | 158,477 | 232,068       |
| U HAUL HOLDING CO NON VOTING                         | Common Stock              | 76,515  | 128,100       |
| PRINCETON BANCORP INC                                | Common Stock              | 88,126  | 101,569       |
| MADISON SQUARE GARDEN ENTERT                         | Common Stock              | 272,489 | 252,760       |
| COMMUNITY WEST BANCSHARES                            | Common Stock              | 1,457   | 1,937         |
| TEEKAY TANKERS LTD CLASS A                           | Common Stock              | 68,234  | 65,654        |
| RAMBUS INC                                           | Common Stock              | 473,156 | 434,404       |
| QUAKER CHEMICAL CORPORATION                          | Common Stock              | 248,323 | 438,467       |
| APPLIED INDUSTRIAL TECH INC                          | Common Stock              | 209,870 | 251,922       |
| BADGER METER INC                                     | Common Stock              | 142,738 | 198,756       |
| ITRON INC                                            | Common Stock              | 310,044 | 363,852       |
| MERIT MEDICAL SYSTEMS INC                            | Common Stock              | 410,500 | 523,255       |
| PENN ENTERTAINMENT INC                               | Common Stock              | 192,805 | 159,036       |
| POWELL INDUSTRIES INC                                | Common Stock              | 129,494 | 207,243       |
| SELECTIVE INSURANCE GROUP                            | Common Stock              | 316,100 | 322,270       |
| WOODWARD INC                                         | Common Stock              | 180,163 | 426,368       |
| AAON INC                                             | Common Stock              | 290,121 | 419,882       |
| HAEMONETICS CORP/MASS                                | Common Stock              | 144,388 | 136,562       |
| LANDSTAR SYSTEM INC                                  | Common Stock              | 365,793 | 484,989       |
| COGNEX CORP                                          | Common Stock              | 205,579 | 191,492       |
| DYCOM INDUSTRIES INC                                 | Common Stock              | 385,357 | 354,908       |
| LATTICE SEMICONDUCTOR CORP                           | Common Stock              | 181,675 | 422,496       |
| ATI INC                                              | Common Stock              | 247,267 | 239,974       |
| FEDERAL SIGNAL CORP                                  | Common Stock              | 197,639 | 305,441       |
| ABERCROMBIE + FITCH CO CL A                          | Common Stock              | 228,427 | 316,129       |
| MODINE MANUFACTURING CO                              | Common Stock              | 175,782 | 152,100       |
| RADNET INC                                           | Common Stock              | 255,515 | 340,051       |
| AEROVIRONMENT INC                                    | Common Stock              | 240,924 | 366,720       |
| ENSIGN GROUP INC/THE                                 | Common Stock              | 333,090 | 402,300       |
| FABRINET                                             | Common Stock              | 146,382 | 137,205       |
| INSMED INC                                           | Common Stock              | 118,180 | 322,072       |

Atmos Energy Corporation Pension Account Plan  
Schedule H, Line 4i - Schedule of Assets (Held At End of Year)

December 31, 2024

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| Identity of Issue, Borrower, Lessor or Similar Party | Description of Investment | Cost    | Current Value |
|------------------------------------------------------|---------------------------|---------|---------------|
| ALKERMES PLC                                         | Common Stock              | 175,693 | 200,083       |
| TG THERAPEUTICS INC                                  | Common Stock              | 75,672  | 91,263        |
| LPL FINANCIAL HOLDINGS INC                           | Common Stock              | 104,884 | 307,572       |
| UNITED PARKS + RESORTS INC                           | Common Stock              | 473,725 | 437,776       |
| ANTERO RESOURCES CORP                                | Common Stock              | 238,519 | 279,944       |
| INTRA CELLULAR THERAPIES INC                         | Common Stock              | 225,642 | 326,396       |
| VARONIS SYSTEMS INC                                  | Common Stock              | 291,394 | 320,740       |
| MSA SAFETY INC                                       | Common Stock              | 241,733 | 504,438       |
| FIVE9 INC                                            | Common Stock              | 153,367 | 189,545       |
| ALDEYRA THERAPEUTICS INC                             | Common Stock              | 107,023 | 57,280        |
| HEALTH EQUITY INC                                    | Common Stock              | 202,144 | 243,905       |
| BOOT BARN HOLDINGS INC                               | Common Stock              | 243,435 | 381,827       |
| FRESHPET INC                                         | Common Stock              | 167,785 | 348,355       |
| SHAKE SHACK INC CLASS A                              | Common Stock              | 353,197 | 430,287       |
| BLUEPRINT MEDICINES CORP                             | Common Stock              | 185,790 | 240,117       |
| WINGSTOP INC                                         | Common Stock              | 76,636  | 204,340       |
| GLAUKOS CORP                                         | Common Stock              | 155,377 | 208,866       |
| LANTHEUS HOLDINGS INC                                | Common Stock              | 232,465 | 269,543       |
| APPFOLIO INC A                                       | Common Stock              | 227,551 | 488,506       |
| RAPID7 INC                                           | Common Stock              | 397,864 | 168,604       |
| ARCHROCK INC                                         | Common Stock              | 415,419 | 491,702       |
| PJT PARTNERS INC A                                   | Common Stock              | 300,865 | 721,665       |
| AXSOME THERAPEUTICS INC                              | Common Stock              | 130,012 | 123,531       |
| IMPINJ INC                                           | Common Stock              | 145,664 | 204,236       |
| MADRIGAL PHARMACEUTICALS INC                         | Common Stock              | 220,335 | 189,153       |
| PROTAGONIST THERAPEUTICS INC                         | Common Stock              | 132,484 | 202,882       |
| MEDPACE HOLDINGS INC                                 | Common Stock              | 88,151  | 117,942       |
| IRHYTHM TECHNOLOGIES INC                             | Common Stock              | 202,761 | 169,610       |
| IOVANCE BIOTHERAPEUTICS INC                          | Common Stock              | 150,266 | 133,977       |
| KRYSTAL BIOTECH INC                                  | Common Stock              | 205,821 | 178,279       |
| I3 VERTICALS INC CLASS A                             | Common Stock              | 147,288 | 147,226       |
| BLOOM ENERGY CORP A                                  | Common Stock              | 178,903 | 204,532       |
| ESTABLISHMENT LABS HOLDINGS                          | Common Stock              | 110,544 | 97,162        |
| CUSHMAN + WAKEFIELD PLC                              | Common Stock              | 244,100 | 237,441       |
| ONESP WORLD HOLDINGS LTD                             | Common Stock              | 247,298 | 421,999       |
| PARSONS CORP                                         | Common Stock              | 216,554 | 316,879       |
| SPRINGWORKS THERAPEUTICS INC                         | Common Stock              | 177,984 | 176,748       |
| ONTO INNOVATION INC                                  | Common Stock              | 305,423 | 385,008       |
| BILL HOLDINGS INC                                    | Common Stock              | 213,001 | 276,239       |
| REVOLUTION MEDICINES INC                             | Common Stock              | 57,671  | 56,250        |
| ZOOMINFO TECHNOLOGIES INC                            | Common Stock              | 151,029 | 149,999       |
| VAXCYTE INC                                          | Common Stock              | 151,411 | 254,912       |
| STEPSTONE GROUP INC CLASS A                          | Common Stock              | 286,393 | 409,906       |
| CHORD ENERGY CORP                                    | Common Stock              | 254,230 | 203,324       |
| VIRIDIAN THERAPEUTICS INC                            | Common Stock              | 159,137 | 106,183       |
| HIMS + HERS HEALTH INC                               | Common Stock              | 116,883 | 88,523        |
| GENIUS SPORTS LTD                                    | Common Stock              | 164,199 | 211,518       |
| PROCORE TECHNOLOGIES INC                             | Common Stock              | 192,207 | 233,931       |
| FIGS INC CLASS A                                     | Common Stock              | 195,468 | 202,487       |
| FLYWIRE CORP VOTING                                  | Common Stock              | 346,332 | 343,117       |
| MONDAY.COM LTD                                       | Common Stock              | 243,825 | 415,787       |
| ZETA GLOBAL HOLDINGS CORP A                          | Common Stock              | 90,829  | 129,294       |
| PERELLA WEINBERG PARTNERS                            | Common Stock              | 215,352 | 317,120       |
| CORE + MAIN INC CLASS A                              | Common Stock              | 260,068 | 288,151       |

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| Identity of Issue, Borrower, Lessor or Similar Party | Description of Investment | Cost      | Current Value |
|------------------------------------------------------|---------------------------|-----------|---------------|
| NUVALENT INC A                                       | Common Stock              | 199,958   | 183,254       |
| CELLEBRITE DI LTD                                    | Common Stock              | 151,275   | 162,471       |
| FRESHWORKS INC CL A                                  | Common Stock              | 308,006   | 340,750       |
| ZURN ELKAY WATER SOLUTIONS C                         | Common Stock              | 342,447   | 458,044       |
| WARBY PARKER INC CLASS A                             | Common Stock              | 140,531   | 135,818       |
| ARIS WATER SOLUTIONS INC A                           | Common Stock              | 186,163   | 272,886       |
| FIRSTCASH HOLDINGS INC                               | Common Stock              | 228,474   | 290,080       |
| CREDO TECHNOLOGY GROUP HOLDI                         | Common Stock              | 158,337   | 162,581       |
| BELLRING BRANDS INC                                  | Common Stock              | 199,685   | 272,203       |
| ESAB CORP                                            | Common Stock              | 269,400   | 645,637       |
| SPX TECHNOLOGIES INC                                 | Common Stock              | 260,701   | 262,518       |
| ARCELLX INC                                          | Common Stock              | 122,658   | 166,801       |
| COHERENT CORP                                        | Common Stock              | 245,833   | 346,049       |
| DISC MEDICINE INC                                    | Common Stock              | 93,314    | 90,155        |
| RB GLOBAL INC                                        | Common Stock              | 331,484   | 670,441       |
| ATMUS FILTRATION TECHNOLOGIE                         | Common Stock              | 365,006   | 408,373       |
| VIPER ENERGY INC                                     | Common Stock              | 242,993   | 430,295       |
| BRIGHTSPRING HEALTH SERVICES                         | Common Stock              | 214,756   | 274,847       |
| TECHTARGET INC                                       | Common Stock              | 262,927   | 112,161       |
| MERITAGE HOMES CORP                                  | Common Stock              | 794,963   | 650,351       |
| AUTOLIV INC                                          | Common Stock              | 128,568   | 162,632       |
| GARTNER INC                                          | Common Stock              | 636,020   | 979,114       |
| F5 INC                                               | Common Stock              | 884,444   | 1,029,518     |
| INTUIT INC                                           | Common Stock              | 720,220   | 970,404       |
| UNITED THERAPEUTICS CORP                             | Common Stock              | 283,161   | 411,764       |
| PACKAGING CORP OF AMERICA                            | Common Stock              | 53,289    | 97,931        |
| ROYAL CARIBBEAN CRUISES LTD                          | Common Stock              | 312,033   | 731,518       |
| MCKESSON CORP                                        | Common Stock              | 216,137   | 403,496       |
| BORGWARNER INC                                       | Common Stock              | 179,498   | 168,900       |
| OGE ENERGY CORP                                      | Common Stock              | 160,053   | 184,346       |
| PINNACLE WEST CAPITAL                                | Common Stock              | 159,450   | 178,186       |
| UNUM GROUP                                           | Common Stock              | 336,354   | 628,058       |
| CASEY S GENERAL STORES INC                           | Common Stock              | 420,915   | 669,629       |
| COMMERCIAL METALS CO                                 | Common Stock              | 76,192    | 86,155        |
| AGCO CORP                                            | Common Stock              | 144,503   | 163,403       |
| CSX CORP                                             | Common Stock              | 185,991   | 175,839       |
| CUMMINS INC                                          | Common Stock              | 75,817    | 168,374       |
| DOMINION ENERGY INC                                  | Common Stock              | 183,880   | 188,133       |
| EASTMAN CHEMICAL CO                                  | Common Stock              | 79,243    | 89,585        |
| FIRSTENERGY CORP                                     | Common Stock              | 191,404   | 183,664       |
| LOCKHEED MARTIN CORP                                 | Common Stock              | 1,081,854 | 1,009,783     |
| LOUISIANA PACIFIC CORP                               | Common Stock              | 72,947    | 88,225        |
| NORTHROP GRUMMAN CORP                                | Common Stock              | 1,055,965 | 963,922       |
| P G + E CORP                                         | Common Stock              | 192,696   | 184,607       |
| PPL CORP                                             | Common Stock              | 163,076   | 183,756       |
| RYDER SYSTEM INC                                     | Common Stock              | 97,561    | 171,448       |
| TIMKEN CO                                            | Common Stock              | 183,381   | 160,939       |
| UNITED RENTALS INC                                   | Common Stock              | 47,726    | 159,203       |
| BIO RAD LABORATORIES A                               | Common Stock              | 436,405   | 438,889       |
| DECKERS OUTDOOR CORP                                 | Common Stock              | 303,395   | 706,347       |
| EMCOR GROUP INC                                      | Common Stock              | 17,977    | 159,319       |
| HOLOGIC INC                                          | Common Stock              | 422,839   | 416,103       |
| OSHKOSH CORP                                         | Common Stock              | 172,330   | 160,668       |
| QUEST DIAGNOSTICS INC                                | Common Stock              | 423,624   | 449,563       |

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| Identity of Issue, Borrower, Lessor or Similar Party | Description of Investment | Cost      | Current Value |
|------------------------------------------------------|---------------------------|-----------|---------------|
| RELIANCE INC                                         | Common Stock              | 49,437    | 96,395        |
| GENTEX CORP                                          | Common Stock              | 126,418   | 164,594       |
| LITHIA MOTORS INC                                    | Common Stock              | 717,539   | 703,422       |
| STEEL DYNAMICS INC                                   | Common Stock              | 50,225    | 92,967        |
| UGI CORP                                             | Common Stock              | 181,241   | 189,084       |
| AMPHENOL CORP CL A                                   | Common Stock              | 858,648   | 940,492       |
| GILEAD SCIENCES INC                                  | Common Stock              | 341,012   | 422,500       |
| MUELLER INDUSTRIES INC                               | Common Stock              | 79,423    | 162,529       |
| APPLE INC                                            | Common Stock              | 479,072   | 1,000,678     |
| CISCO SYSTEMS INC                                    | Common Stock              | 954,999   | 995,744       |
| MICROSOFT CORP                                       | Common Stock              | 919,633   | 951,325       |
| PFIZER INC                                           | Common Stock              | 457,746   | 432,784       |
| WELLS FARGO + CO                                     | Common Stock              | 345,505   | 602,449       |
| H+R BLOCK INC                                        | Common Stock              | 799,478   | 656,590       |
| GENUINE PARTS CO                                     | Common Stock              | 168,059   | 154,707       |
| MASCO CORP                                           | Common Stock              | 80,819    | 153,123       |
| EMERSON ELECTRIC CO                                  | Common Stock              | 86,572    | 168,669       |
| SONOCO PRODUCTS CO                                   | Common Stock              | 108,124   | 93,401        |
| BRISTOL MYERS SQUIBB CO                              | Common Stock              | 357,045   | 421,824       |
| NUCOR CORP                                           | Common Stock              | 71,540    | 85,548        |
| CADENCE DESIGN SYS INC                               | Common Stock              | 305,018   | 970,486       |
| STATE STREET CORP                                    | Common Stock              | 434,401   | 585,563       |
| CARDINAL HEALTH INC                                  | Common Stock              | 403,319   | 425,535       |
| UNITED PARCEL SERVICE CL B                           | Common Stock              | 177,369   | 173,135       |
| SNAP ON INC                                          | Common Stock              | 100,885   | 164,648       |
| ZIONS BANCORP NA                                     | Common Stock              | 422,646   | 587,039       |
| GOLDMAN SACHS GROUP INC                              | Common Stock              | 362,940   | 568,039       |
| PAYCHEX INC                                          | Common Stock              | 871,906   | 1,040,292     |
| DOVER CORP                                           | Common Stock              | 78,066    | 173,530       |
| HALLIBURTON CO                                       | Common Stock              | 402,076   | 288,839       |
| KLA CORP                                             | Common Stock              | 792,262   | 1,017,644     |
| HARTFORD INSURANCE GROUP INC                         | Common Stock              | 333,297   | 540,764       |
| BRINKER INTERNATIONAL INC                            | Common Stock              | 738,053   | 790,962       |
| METLIFE INC                                          | Common Stock              | 379,662   | 527,635       |
| MURPHY OIL CORP                                      | Common Stock              | 363,484   | 298,333       |
| ABERCROMBIE + FITCH CO CL A                          | Common Stock              | 607,412   | 765,884       |
| CARLISLE COS INC                                     | Common Stock              | 58,628    | 143,479       |
| PARKER HANNIFIN CORP                                 | Common Stock              | 39,371    | 161,552       |
| AMDOCS LTD                                           | Common Stock              | 1,027,298 | 1,023,979     |
| VERIZON COMMUNICATIONS INC                           | Common Stock              | 191,698   | 178,075       |
| XCEL ENERGY INC                                      | Common Stock              | 174,506   | 185,815       |
| DAVITA INC                                           | Common Stock              | 271,880   | 417,693       |
| KB HOME                                              | Common Stock              | 603,193   | 601,207       |
| CENCORA INC                                          | Common Stock              | 238,904   | 445,765       |
| ACUITY BRANDS INC                                    | Common Stock              | 73,217    | 171,772       |
| CENTENE CORP                                         | Common Stock              | 539,539   | 429,997       |
| 3M CO                                                | Common Stock              | 153,077   | 171,690       |
| DICK S SPORTING GOODS INC                            | Common Stock              | 560,426   | 812,611       |
| CARNIVAL CORP                                        | Common Stock              | 745,711   | 747,126       |
| BIOGEN INC                                           | Common Stock              | 653,518   | 406,767       |
| PRUDENTIAL FINANCIAL INC                             | Common Stock              | 468,041   | 512,050       |
| MOLINA HEALTHCARE INC                                | Common Stock              | 461,458   | 408,925       |
| NRG ENERGY INC                                       | Common Stock              | 109,530   | 186,304       |
| REGIONS FINANCIAL CORP                               | Common Stock              | 393,463   | 521,156       |

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| Identity of Issue, Borrower, Lessor or Similar Party | Description of Investment | Cost      | Current Value |
|------------------------------------------------------|---------------------------|-----------|---------------|
| WESTLAKE CORP                                        | Common Stock              | 61,439    | 84,956        |
| MOLSON COORS BEVERAGE CO B                           | Common Stock              | 436,377   | 403,934       |
| BUILDERS FIRSTSOURCE INC                             | Common Stock              | 62,612    | 87,902        |
| AMERIPRISE FINANCIAL INC                             | Common Stock              | 261,963   | 563,843       |
| WESTERN UNION CO                                     | Common Stock              | 464,413   | 401,411       |
| CF INDUSTRIES HOLDINGS INC                           | Common Stock              | 91,043    | 95,644        |
| OWENS CORNING                                        | Common Stock              | 46,151    | 85,501        |
| AERCAP HOLDINGS NV                                   | Common Stock              | 560,264   | 556,974       |
| PHILIP MORRIS INTERNATIONAL                          | Common Stock              | 333,792   | 440,240       |
| NETAPP INC                                           | Common Stock              | 756,974   | 937,578       |
| LEAR CORP                                            | Common Stock              | 227,093   | 174,532       |
| FORTINET INC                                         | Common Stock              | 605,112   | 1,016,227     |
| LYONDELLBASELL INDU CL A                             | Common Stock              | 108,232   | 97,071        |
| SM ENERGY CO                                         | Common Stock              | 275,373   | 272,134       |
| FABRINET                                             | Common Stock              | 1,056,535 | 959,117       |
| BOOZ ALLEN HAMILTON HOLDINGS                         | Common Stock              | 913,102   | 999,098       |
| HCA HEALTHCARE INC                                   | Common Stock              | 369,689   | 389,595       |
| CITIGROUP INC                                        | Common Stock              | 423,294   | 607,606       |
| JAZZ PHARMACEUTICALS PLC                             | Common Stock              | 416,732   | 456,640       |
| POST HOLDINGS INC                                    | Common Stock              | 319,677   | 407,020       |
| ALLISON TRANSMISSION HOLDING                         | Common Stock              | 61,900    | 161,874       |
| GARMIN LTD                                           | Common Stock              | 617,064   | 724,179       |
| META PLATFORMS INC CLASS A                           | Common Stock              | 849,739   | 981,315       |
| INGREDION INC                                        | Common Stock              | 68,477    | 95,054        |
| MATSON INC                                           | Common Stock              | 176,962   | 146,976       |
| BERRY GLOBAL GROUP INC                               | Common Stock              | 73,676    | 98,816        |
| TENET HEALTHCARE CORP                                | Common Stock              | 271,467   | 374,777       |
| ABBVIE INC                                           | Common Stock              | 286,433   | 417,773       |
| NORWEGIAN CRUISE LINE HOLDIN                         | Common Stock              | 711,493   | 663,062       |
| BOISE CASCADE CO                                     | Common Stock              | 125,136   | 143,821       |
| TAYLOR MORRISON HOME CORP                            | Common Stock              | 665,205   | 690,510       |
| T MOBILE US INC                                      | Common Stock              | 89,318    | 179,233       |
| MURPHY USA INC                                       | Common Stock              | 394,387   | 654,282       |
| LEIDOS HOLDINGS INC                                  | Common Stock              | 1,019,013 | 983,209       |
| TRINET GROUP INC                                     | Common Stock              | 188,463   | 165,020       |
| ALLY FINANCIAL INC                                   | Common Stock              | 629,261   | 541,446       |
| SYNOVUS FINANCIAL CORP                               | Common Stock              | 392,598   | 556,307       |
| FIDELITY NATIONAL FINANCIAL                          | Common Stock              | 397,184   | 545,905       |
| SYNCHRONY FINANCIAL                                  | Common Stock              | 261,974   | 547,885       |
| GODADDY INC CLASS A                                  | Common Stock              | 773,835   | 991,587       |
| ALPHABET INC CL A                                    | Common Stock              | 962,032   | 1,031,117     |
| ATKORE INC                                           | Common Stock              | 239,324   | 168,402       |
| VISTRA CORP                                          | Common Stock              | 54,925    | 181,023       |
| BAKER HUGHES CO                                      | Common Stock              | 203,748   | 309,660       |
| KNIGHT SWIFT TRANSPORTATION                          | Common Stock              | 187,130   | 176,570       |
| EVERGY INC                                           | Common Stock              | 190,421   | 185,512       |
| THE CIGNA GROUP                                      | Common Stock              | 375,476   | 396,813       |
| FOX CORP CLASS B                                     | Common Stock              | 701,233   | 732,663       |
| PARSONS CORP                                         | Common Stock              | 942,552   | 942,334       |
| EQUITABLE HOLDINGS INC                               | Common Stock              | 556,756   | 572,361       |
| OVINTIV INC                                          | Common Stock              | 351,129   | 298,850       |
| UFP INDUSTRIES INC                                   | Common Stock              | 68,191    | 88,543        |
| VONTIER CORP                                         | Common Stock              | 143,392   | 167,142       |
| EXPAND ENERGY CORP                                   | Common Stock              | 250,530   | 297,854       |

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| Identity of Issue, Borrower, Lessor or Similar Party | Description of Investment | Cost       | Current Value |
|------------------------------------------------------|---------------------------|------------|---------------|
| CORE + MAIN INC CLASS A                              | Common Stock              | 124,884    | 163,625       |
| JACKSON FINANCIAL INC A                              | Common Stock              | 481,986    | 505,151       |
| AMCOR PLC                                            | Common Stock              | 101,354    | 86,290        |
| JACOBS SOLUTIONS INC                                 | Common Stock              | 83,441     | 168,762       |
| LABCORP HOLDINGS INC                                 | Common Stock              | 357,488    | 418,968       |
| ARISTA NETWORKS INC                                  | Common Stock              | 284,999    | 1,020,855     |
| NETBANK INC                                          | Common Stock              | 2,693      | -             |
| ATMOS ENERGY CORP                                    | Common Stock              | 12,459,753 | 70,568,109    |
| INTUIT INC                                           | Common Stock              | 808,654    | 2,309,737     |
| PROGRESSIVE CORP                                     | Common Stock              | 1,390,795  | 2,394,183     |
| AMAZON.COM INC                                       | Common Stock              | 1,269,098  | 3,411,295     |
| CINTAS CORP                                          | Common Stock              | 679,515    | 1,976,814     |
| WEST PHARMACEUTICAL SERVICES                         | Common Stock              | 1,313,750  | 1,425,214     |
| COSTAR GROUP INC                                     | Common Stock              | 1,835,092  | 1,818,171     |
| NVIDIA CORP                                          | Common Stock              | 588,085    | 3,296,148     |
| MICROSOFT CORP                                       | Common Stock              | 1,418,180  | 3,269,997     |
| CADENCE DESIGN SYS INC                               | Common Stock              | 1,762,493  | 1,803,962     |
| COSTCO WHOLESALE CORP                                | Common Stock              | 1,073,775  | 3,087,830     |
| ADOBE INC                                            | Common Stock              | 723,852    | 1,064,564     |
| AUTODESK INC                                         | Common Stock              | 1,565,803  | 2,501,704     |
| ALIGN TECHNOLOGY INC                                 | Common Stock              | 1,303,976  | 926,618       |
| NETFLIX INC                                          | Common Stock              | 1,478,518  | 1,793,336     |
| INTUITIVE SURGICAL INC                               | Common Stock              | 881,830    | 2,817,540     |
| TRANSDIGM GROUP INC                                  | Common Stock              | 1,990,614  | 1,988,362     |
| MASTERCARD INC A                                     | Common Stock              | 1,773,804  | 2,920,357     |
| GENERAC HOLDINGS INC                                 | Common Stock              | 758,712    | 1,030,772     |
| NXP SEMICONDUCTORS NV                                | Common Stock              | 965,450    | 1,272,666     |
| SERVICENOW INC                                       | Common Stock              | 1,481,179  | 3,108,272     |
| WORKDAY INC CLASS A                                  | Common Stock              | 2,138,724  | 2,181,128     |
| ZOETIS INC                                           | Common Stock              | 1,499,677  | 2,007,298     |
| VEEVA SYSTEMS INC CLASS A                            | Common Stock              | 1,437,970  | 1,211,250     |
| ALPHABET INC CL C                                    | Common Stock              | 1,466,654  | 3,006,476     |
| S+P GLOBAL INC                                       | Common Stock              | 1,943,120  | 2,581,787     |
| HILTON WORLDWIDE HOLDINGS IN                         | Common Stock              | 2,181,163  | 2,673,777     |
| UBER TECHNOLOGIES INC                                | Common Stock              | 1,979,192  | 2,353,023     |
| TRANE TECHNOLOGIES PLC                               | Common Stock              | 1,027,874  | 1,138,337     |
| MARVELL TECHNOLOGY INC                               | Common Stock              | 2,003,374  | 2,981,929     |
| VERALTO CORP                                         | Common Stock              | 1,146,851  | 1,548,833     |
| TRADE DESK INC/THE CLASS A                           | Common Stock              | 1,422,672  | 1,285,896     |
| NATIONAL HEALTHCARE CORP                             | Common Stock              | 58,315     | 91,426        |
| ELBIT SYSTEMS LTD                                    | Common Stock              | 79,524     | 129,035       |
| BERKSHIRE HILLS BANCORP INC                          | Common Stock              | 226,913    | 245,920       |
| UNIVERSAL DISPLAY CORP                               | Common Stock              | 134,845    | 138,890       |
| HELEN OF TROY LTD                                    | Common Stock              | 184,805    | 89,745        |
| AMERICAN EAGLE OUTFITTERS                            | Common Stock              | 151,663    | 175,035       |
| WAFD INC                                             | Common Stock              | 373,955    | 354,640       |
| WILLIAMS SONOMA INC                                  | Common Stock              | 61,770     | 287,029       |
| VILLAGE SUPER MARKET CLASS A                         | Common Stock              | 65,587     | 86,103        |
| COMMERCIAL METALS CO                                 | Common Stock              | 74,207     | 203,360       |
| CURTISS WRIGHT CORP                                  | Common Stock              | 140,019    | 390,357       |
| POLARIS INC                                          | Common Stock              | 185,729    | 112,359       |
| EVEREST GROUP LTD                                    | Common Stock              | 215,965    | 317,153       |
| HELMERICH + PAYNE                                    | Common Stock              | 136,406    | 132,883       |
| OLD REPUBLIC INTL CORP                               | Common Stock              | 124,662    | 280,472       |

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| Identity of Issue, Borrower, Lessor or Similar Party | Description of Investment | Cost    | Current Value |
|------------------------------------------------------|---------------------------|---------|---------------|
| PULTEGROUP INC                                       | Common Stock              | 28,628  | 92,565        |
| UMB FINANCIAL CORP                                   | Common Stock              | 245,843 | 299,079       |
| VISHAY INTERTECHNOLOGY INC                           | Common Stock              | 189,679 | 175,329       |
| AMERICAN WOODMARK CORP                               | Common Stock              | 185,171 | 198,825       |
| COLUMBIA BANKING SYSTEM INC                          | Common Stock              | 248,481 | 253,894       |
| COLUMBUS MCKINNON CORP/NY                            | Common Stock              | 214,335 | 215,992       |
| COMFORT SYSTEMS USA INC                              | Common Stock              | 37,859  | 371,053       |
| EMCOR GROUP INC                                      | Common Stock              | 104,087 | 544,680       |
| FTI CONSULTING INC                                   | Common Stock              | 27,246  | 47,783        |
| FIRST CITIZENS BCSHS CL A                            | Common Stock              | 110,723 | 433,169       |
| GENCOR INDUSTRIES INC                                | Common Stock              | 118,229 | 182,678       |
| GRANITE CONSTRUCTION INC                             | Common Stock              | 151,966 | 372,768       |
| INGLES MARKETS INC CLASS A                           | Common Stock              | 122,451 | 106,326       |
| ITRON INC                                            | Common Stock              | 56,634  | 119,438       |
| KVH INDUSTRIES INC                                   | Common Stock              | 90,286  | 49,875        |
| KULICKE + SOFFA INDUSTRIES                           | Common Stock              | 47,820  | 46,660        |
| LSI INDUSTRIES INC                                   | Common Stock              | 154,842 | 410,733       |
| LSB INDUSTRIES INC                                   | Common Stock              | 189,922 | 116,886       |
| LA Z BOY INC                                         | Common Stock              | 139,371 | 182,994       |
| OSI SYSTEMS INC                                      | Common Stock              | 199,662 | 351,603       |
| OCEANFIRST FINANCIAL CORP                            | Common Stock              | 182,150 | 157,470       |
| OSHKOSH CORP                                         | Common Stock              | 65,110  | 61,796        |
| REX AMERICAN RESOURCES CORP                          | Common Stock              | 154,273 | 245,971       |
| RADIUS RECYCLING INC                                 | Common Stock              | 130,780 | 82,949        |
| SELECTIVE INSURANCE GROUP                            | Common Stock              | 169,169 | 215,096       |
| STIFEL FINANCIAL CORP                                | Common Stock              | 121,061 | 339,456       |
| CHURCHILL DOWNS INC                                  | Common Stock              | 92,507  | 180,279       |
| COHU INC                                             | Common Stock              | 121,360 | 181,560       |
| FIRST MERCHANTS CORP                                 | Common Stock              | 166,398 | 239,340       |
| GENTEX CORP                                          | Common Stock              | 72,185  | 73,262        |
| INTEGRA LIFESCIENCES HOLDING                         | Common Stock              | 153,656 | 141,750       |
| STEVEN MADDEN LTD                                    | Common Stock              | 126,338 | 155,198       |
| PROGRESS SOFTWARE CORP                               | Common Stock              | 186,547 | 299,690       |
| REGAL REXNORD CORP                                   | Common Stock              | 96,581  | 193,913       |
| SANDY SPRING BANCORP INC                             | Common Stock              | 276,090 | 300,019       |
| STONERIDGE INC                                       | Common Stock              | 15,066  | 3,135         |
| TETRA TECH INC                                       | Common Stock              | 16,727  | 39,840        |
| URBAN OUTFITTERS INC                                 | Common Stock              | 141,115 | 307,328       |
| GREIF INC CL A                                       | Common Stock              | 160,509 | 146,688       |
| HARMONIC INC                                         | Common Stock              | 66,494  | 121,055       |
| MKS INSTRUMENTS INC                                  | Common Stock              | 166,141 | 172,244       |
| MUELLER INDUSTRIES INC                               | Common Stock              | 115,307 | 571,392       |
| UNITED BANKSHARES INC                                | Common Stock              | 100,470 | 125,792       |
| WEBSTER FINANCIAL CORP                               | Common Stock              | 294,490 | 397,584       |
| EXELIXIS INC                                         | Common Stock              | 181,149 | 294,705       |
| ABERCROMBIE + FITCH CO CL A                          | Common Stock              | 66,346  | 317,624       |
| HEIDRICK + STRUGGLES INTL                            | Common Stock              | 145,098 | 203,826       |
| HNI CORP                                             | Common Stock              | 121,155 | 188,888       |
| AXT INC                                              | Common Stock              | 46,837  | 29,404        |
| ORASURE TECHNOLOGIES INC                             | Common Stock              | 87,632  | 36,100        |
| KB HOME                                              | Common Stock              | 116,355 | 256,308       |
| FIRST COMMUNITY BANKSHARES                           | Common Stock              | 144,962 | 189,462       |
| MILLER INDUSTRIES INC/TENN                           | Common Stock              | 87,084  | 179,740       |
| AMN HEALTHCARE SERVICES INC                          | Common Stock              | 103,246 | 47,840        |

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| Identity of Issue, Borrower, Lessor or Similar Party | Description of Investment      | Cost    | Current Value |
|------------------------------------------------------|--------------------------------|---------|---------------|
| ACUITY BRANDS INC                                    | Common Stock                   | 6,406   | 14,606        |
| PROVIDENT FINANCIAL SERVICES                         | Common Stock                   | 303,816 | 290,900       |
| HOWMET AEROSPACE INC                                 | \$215,000; 4.85%; 15 Oct 2031  | 219,693 | 210,693       |
| ROPER TECHNOLOGIES INC                               | \$135,000; 4.9%; 15 Oct 2034   | 134,814 | 129,838       |
| VENTAS REALTY LP                                     | \$154,000; 5%; 15 Jan 2035     | 153,456 | 147,141       |
| APTIV SWISS HOLDINGS LTD                             | \$300,000; 4.65%; 13 Sep 2029  | 300,609 | 291,234       |
| DELL INT LLC / EMC CORP                              | \$175,000; 4.85%; 01 Feb 2035  | 168,082 | 166,185       |
| SHELL FINANCE US INC                                 | \$15,000; 4.55%; 12 Aug 2043   | 13,923  | 13,116        |
| SAFEHOLD GL HOLDINGS LLC                             | \$86,000; 5.65%; 15 Jan 2035   | 85,128  | 83,914        |
| ROPER TECHNOLOGIES INC                               | \$30,000; 2%; 30 Jun 2030      | 25,334  | 25,572        |
| CANADIAN NATL RESOURCES                              | \$155,000; 2.05%; 15 Jul 2025  | 160,551 | 152,672       |
| CHENIERE ENERGY PARTNERS                             | \$205,000; 4.5%; 01 Oct 2029   | 200,886 | 198,477       |
| BRISTOL MYERS SQUIBB CO                              | \$102,000; 4.25%; 26 Oct 2049  | 109,331 | 82,397        |
| KINDER MORGAN INC                                    | \$55,000; 2%; 15 Feb 2031      | 54,552  | 46,038        |
| RELIANCE INC                                         | \$130,000; 2.15%; 15 Aug 2030  | 112,986 | 110,939       |
| FEDEX 2020 1 PASS TST                                | \$279,069; 1.875%; 20 Aug 2035 | 254,666 | 231,902       |
| BROWN + BROWN INC                                    | \$63,000; 2.375%; 15 Mar 2031  | 57,638  | 52,933        |
| NATIONAL RURAL UTIL COOP                             | \$10,000; 1.35%; 15 Mar 2031   | 9,975   | 8,028         |
| ELEVANCE HEALTH INC                                  | \$95,000; 2.55%; 15 Mar 2031   | 79,374  | 81,513        |
| VERIZON COMMUNICATIONS                               | \$167,000; 3.4%; 22 Mar 2041   | 131,630 | 126,300       |
| MICROSOFT CORP                                       | \$195,000; 2.921%; 17 Mar 2052 | 184,784 | 128,823       |
| JPMORGAN CHASE + CO                                  | \$150,000; 1%; 22 Apr 2032     | 126,025 | 128,671       |
| BANK OF AMERICA CORP                                 | \$265,000; 1%; 22 Apr 2032     | 223,175 | 227,791       |
| DPL INC                                              | \$200,000; 4.125%; 01 Jul 2025 | 201,940 | 197,138       |
| BUNGE LTD FINANCE CORP                               | \$115,000; 2.75%; 14 May 2031  | 116,172 | 99,404        |
| MICROCHIP TECHNOLOGY INC                             | \$225,000; 4.25%; 01 Sep 2025  | 227,570 | 224,057       |
| MARTIN MARIETTA MATERIAL                             | \$95,000; 2.4%; 15 Jul 2031    | 79,044  | 80,798        |
| ENBRIDGE INC                                         | \$45,000; 3.4%; 01 Aug 2051    | 42,503  | 30,091        |
| GOLDMAN SACHS GROUP INC                              | \$50,000; 1%; 21 Jul 2032      | 40,776  | 41,670        |
| TORONTO DOMINION BANK                                | \$50,000; 1.25%; 10 Sep 2026   | 45,116  | 47,237        |
| AT+T INC                                             | \$257,000; 3.55%; 15 Sep 2055  | 188,995 | 172,856       |
| CARLISLE COS INC                                     | \$200,000; 2.2%; 01 Mar 2032   | 159,216 | 163,218       |
| SABRA HEALTH CARE LP                                 | \$120,000; 3.2%; 01 Dec 2031   | 108,451 | 102,955       |
| MARVELL TECHNOLOGY INC                               | \$110,000; 2.45%; 15 Apr 2028  | 108,977 | 101,468       |
| MARVELL TECHNOLOGY INC                               | \$180,000; 2.95%; 15 Apr 2031  | 155,096 | 157,891       |
| FORD MOTOR COMPANY                                   | \$227,000; 3.25%; 12 Feb 2032  | 182,522 | 188,796       |
| MORGAN STANLEY                                       | \$155,000; 1%; 21 Jan 2033     | 130,841 | 132,799       |
| AMERICAN EXPRESS CO                                  | \$160,000; 2.55%; 04 Mar 2027  | 147,910 | 153,179       |
| NUCOR CORP                                           | \$130,000; 3.125%; 01 Apr 2032 | 114,482 | 113,845       |
| BROWN + BROWN INC                                    | \$222,000; 4.2%; 17 Mar 2032   | 206,933 | 204,613       |
| MORGAN STANLEY                                       | \$330,000; 1%; 20 Apr 2028     | 322,877 | 325,274       |
| JPMORGAN CHASE + CO                                  | \$65,000; 1%; 26 Apr 2026      | 64,677  | 64,831        |
| MOTOROLA SOLUTIONS INC                               | \$100,000; 5.6%; 01 Jun 2032   | 101,595 | 102,043       |
| CHENIERE ENERGY PARTNERS                             | \$50,000; 3.25%; 31 Jan 2032   | 42,426  | 43,355        |
| WELLS FARGO + COMPANY                                | \$100,000; 1%; 25 Jul 2033     | 96,257  | 96,577        |
| KINDER MORGAN INC                                    | \$73,000; 4.8%; 01 Feb 2033    | 70,629  | 69,368        |
| SOUTHERN CO GAS CAPITAL                              | \$105,000; 5.15%; 15 Sep 2032  | 104,607 | 104,812       |
| LOWE S COS INC                                       | \$189,000; 5%; 15 Apr 2033     | 190,805 | 186,069       |
| T MOBILE USA INC                                     | \$120,000; 5.65%; 15 Jan 2053  | 119,381 | 116,114       |
| NATIONAL RURAL UTIL COOP                             | \$155,000; 5.8%; 15 Jan 2033   | 166,803 | 160,344       |
| PHILIP MORRIS INTL INC                               | \$255,000; 5.75%; 17 Nov 2032  | 271,297 | 262,204       |
| ENERGY TRANSFER LP                                   | \$265,000; 7.375%; 01 Feb 2031 | 277,301 | 277,118       |
| CAPITAL ONE FINANCIAL CO                             | \$138,000; 1%; 01 Feb 2029     | 135,565 | 138,958       |
| T MOBILE USA INC                                     | \$80,000; 5.05%; 15 Jul 2033   | 79,387  | 78,335        |

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| Identity of Issue, Borrower, Lessor or Similar Party | Description of Investment      | Cost    | Current Value |
|------------------------------------------------------|--------------------------------|---------|---------------|
| BP CAP MARKETS AMERICA                               | \$104,000; 4.812%; 13 Feb 2033 | 102,151 | 100,535       |
| CVS HEALTH CORP                                      | \$70,000; 5.25%; 21 Feb 2033   | 70,864  | 67,106        |
| FISERV INC                                           | \$45,000; 5.6%; 02 Mar 2033    | 45,427  | 45,577        |
| NUTRIEN LTD                                          | \$45,000; 5.8%; 27 Mar 2053    | 45,382  | 44,262        |
| GENERAL MOTORS FINL CO                               | \$150,000; 5.85%; 06 Apr 2030  | 150,341 | 153,200       |
| WARNERMEDIA HOLDINGS INC                             | \$135,000; 4.279%; 15 Mar 2032 | 119,475 | 118,963       |
| CONSTELLATION BRANDS INC                             | \$50,000; 4.9%; 01 May 2033    | 48,681  | 48,279        |
| HCA INC                                              | \$195,000; 5.5%; 01 Jun 2033   | 194,973 | 192,915       |
| EIDP INC                                             | \$160,000; 4.8%; 15 May 2033   | 157,074 | 155,424       |
| PFIZER INVESTMENT ENTER                              | \$200,000; 5.11%; 19 May 2043  | 195,084 | 187,744       |
| NNN REIT INC                                         | \$30,000; 5.6%; 15 Oct 2033    | 30,642  | 30,254        |
| SYSCO CORPORATION                                    | \$129,000; 6%; 17 Jan 2034     | 139,451 | 135,220       |
| PNC FINANCIAL SERVICES                               | \$105,000; 1%; 22 Jan 2035     | 105,517 | 106,213       |
| TRUIST FINANCIAL CORP                                | \$130,000; 1%; 24 Jan 2035     | 131,503 | 130,995       |
| NISOURCE INC                                         | \$130,000; 5.35%; 01 Apr 2034  | 135,184 | 128,924       |
| DTE ENERGY CO                                        | \$155,000; 5.85%; 01 Jun 2034  | 156,686 | 159,117       |
| VENTAS REALTY LP                                     | \$20,000; 5.625%; 01 Jul 2034  | 20,813  | 20,137        |
| STEEL DYNAMICS INC                                   | \$222,000; 5.375%; 15 Aug 2034 | 227,135 | 220,073       |
| UNITEDHEALTH GROUP INC                               | \$20,000; 5.5%; 15 Jul 2044    | 19,857  | 19,399        |
| JPMORGAN CHASE + CO                                  | \$130,000; 1%; 01 May 2028     | 136,559 | 126,317       |
| WELLS FARGO + COMPANY                                | \$195,000; 1%; 22 May 2028     | 183,960 | 188,963       |
| CANADIAN NATL RESOURCES                              | \$195,000; 3.85%; 01 Jun 2027  | 197,544 | 190,864       |
| COLLINS AEROSPACE                                    | \$145,000; 3.5%; 15 Mar 2027   | 143,825 | 139,419       |
| GOLDMAN SACHS GROUP INC                              | \$375,000; 1%; 05 Jun 2028     | 396,615 | 364,222       |
| ENBRIDGE INC                                         | \$40,000; 3.7%; 15 Jul 2027    | 43,865  | 39,023        |
| MORGAN STANLEY                                       | \$91,000; 1%; 22 Jul 2028      | 82,083  | 87,751        |
| NORTHROP GRUMMAN CORP                                | \$55,000; 4.03%; 15 Oct 2047   | 56,997  | 43,177        |
| ALABAMA POWER CO                                     | \$135,000; 3.7%; 01 Dec 2047   | 101,959 | 100,787       |
| MORGAN STANLEY                                       | \$10,000; 1%; 24 Jan 2029      | 9,508   | 9,644         |
| GOLDMAN SACHS GROUP INC                              | \$25,000; 1%; 23 Apr 2029      | 23,627  | 24,045        |
| COMCAST CORP                                         | \$78,000; 3.9%; 01 Mar 2038    | 81,687  | 65,577        |
| ELEVANCE HEALTH INC                                  | \$100,000; 4.101%; 01 Mar 2028 | 117,001 | 97,725        |
| CVS HEALTH CORP                                      | \$40,000; 4.78%; 25 Mar 2038   | 49,917  | 34,587        |
| JPMORGAN CHASE + CO                                  | \$30,000; 1%; 23 Apr 2029      | 34,804  | 29,086        |
| CAPITAL ONE FINANCIAL CO                             | \$458,000; 4.25%; 30 Apr 2025  | 452,202 | 456,988       |
| PRUDENTIAL FINANCIAL INC                             | \$10,000; 3.935%; 07 Dec 2049  | 11,007  | 7,538         |
| BANK OF AMERICA CORP                                 | \$415,000; 1%; 20 Dec 2028     | 448,415 | 397,890       |
| INTEL CORP                                           | \$175,000; 3.734%; 08 Dec 2047 | 164,824 | 115,413       |
| ENERGY TRANSFER LP                                   | \$110,000; 4.95%; 15 Jun 2028  | 109,406 | 109,805       |
| PFIZER INC                                           | \$40,000; 4.1%; 15 Sep 2038    | 45,229  | 34,934        |
| AT+T INC                                             | \$40,000; 4.1%; 15 Feb 2028    | 38,465  | 39,132        |
| HOME DEPOT INC                                       | \$60,000; 4.5%; 06 Dec 2048    | 66,729  | 51,252        |
| MORGAN STANLEY                                       | \$90,000; 1%; 23 Jan 2030      | 102,684 | 87,593        |
| JPMORGAN CHASE + CO                                  | \$320,000; 1%; 29 Jan 2027     | 310,350 | 317,514       |
| WRKCO INC                                            | \$55,000; 3.375%; 15 Sep 2027  | 51,786  | 52,918        |
| BANK OF AMERICA CORP                                 | \$60,000; 1%; 07 Feb 2030      | 66,590  | 57,500        |
| BANK OF AMERICA CORP                                 | \$430,000; 1%; 23 Apr 2027     | 415,259 | 423,094       |
| JPMORGAN CHASE + CO                                  | \$295,000; 1%; 06 May 2030     | 327,727 | 279,350       |
| PRINCIPAL FINANCIAL GRP                              | \$170,000; 3.7%; 15 May 2029   | 187,135 | 161,901       |
| ANHEUSER BUSCH CO/INBEV                              | \$195,000; 4.9%; 01 Feb 2046   | 187,221 | 177,327       |
| FISERV INC                                           | \$200,000; 3.5%; 01 Jul 2029   | 206,189 | 187,652       |
| RADIAN GROUP INC                                     | \$10,000; 4.875%; 15 Mar 2027  | 9,850   | 9,929         |
| CONSTELLATION BRANDS INC                             | \$170,000; 3.15%; 01 Aug 2029  | 181,531 | 156,536       |
| UDR INC                                              | \$160,000; 3%; 15 Aug 2031     | 138,447 | 140,507       |

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|------------------------------------------------------|--------------------------------|---------|---------------|
| LINCOLN NATIONAL CORP                                | \$45,000; 3.05%; 15 Jan 2030   | 39,913  | 40,509        |
| ROPER TECHNOLOGIES INC                               | \$120,000; 2.95%; 15 Sep 2029  | 107,387 | 109,630       |
| WELLS FARGO + COMPANY                                | \$85,000; 1%; 30 Oct 2030      | 82,136  | 76,672        |
| EASTERN ENERGY GAS                                   | \$140,000; 3%; 15 Nov 2029     | 142,300 | 127,106       |
| GENERAL MOTORS FINL CO                               | \$205,000; 2.9%; 26 Feb 2025   | 195,045 | 204,262       |
| NATIONAL RURAL UTIL COOP                             | \$175,000; 2.4%; 15 Mar 2030   | 164,287 | 154,385       |
| NNN REIT INC                                         | \$100,000; 2.5%; 15 Apr 2030   | 95,083  | 87,526        |
| AMGEN INC                                            | \$115,000; 3.15%; 21 Feb 2040  | 104,285 | 85,703        |
| BP CAP MARKETS AMERICA                               | \$80,000; 3%; 24 Feb 2050      | 72,665  | 50,860        |
| MARTIN MARIETTA MATERIAL                             | \$155,000; 2.5%; 15 Mar 2030   | 131,895 | 137,128       |
| NORTHROP GRUMMAN CORP                                | \$49,000; 5.15%; 01 May 2040   | 49,541  | 46,880        |
| INTEL CORP                                           | \$10,000; 4.75%; 25 Mar 2050   | 9,989   | 7,729         |
| CITIGROUP INC                                        | \$335,000; 1%; 31 Mar 2031     | 330,234 | 321,992       |
| FLORIDA POWER + LIGHT CO                             | \$105,000; 2.85%; 01 Apr 2025  | 106,499 | 104,501       |
| TARGET CORP                                          | \$200,000; 2.65%; 15 Sep 2030  | 196,293 | 178,272       |
| NVIDIA CORP                                          | \$105,000; 2.85%; 01 Apr 2030  | 111,413 | 96,224        |
| TOYOTA MOTOR CREDIT CORP                             | \$165,000; 3.375%; 01 Apr 2030 | 166,339 | 152,854       |
| CITIGROUP INC                                        | \$580,000; 1%; 08 Apr 2026     | 558,048 | 577,204       |
| CHARTER COMM OPT LLC/CAP                             | \$175,000; 2.8%; 01 Apr 2031   | 142,347 | 147,577       |
| CONSTELLATION BRANDS INC                             | \$30,000; 2.875%; 01 May 2030  | 26,455  | 26,806        |
| WELLS FARGO + COMPANY                                | \$1,000,000; 1%; 30 Apr 2026   | 971,098 | 990,950       |
| AIR PRODUCTS + CHEMICALS                             | \$105,000; 2.7%; 15 May 2040   | 79,786  | 74,893        |
| MOHAWK INDUSTRIES INC                                | \$139,000; 3.625%; 15 May 2030 | 132,531 | 128,373       |
| GENERAL MOTORS CO                                    | \$116,000; 6.125%; 01 Oct 2025 | 132,281 | 116,893       |
| LINCOLN NATIONAL CORP                                | \$70,000; 3.4%; 15 Jan 2031    | 61,527  | 62,937        |
| NUTRIEN LTD                                          | \$175,000; 2.95%; 13 May 2030  | 170,086 | 157,446       |
| RELX CAPITAL INC                                     | \$250,000; 3%; 22 May 2030     | 249,630 | 227,130       |
| AT+T INC                                             | \$60,000; 2.3%; 01 Jun 2027    | 55,933  | 56,632        |
| WELLS FARGO + COMPANY                                | \$30,000; 1%; 02 Jun 2028      | 28,474  | 28,255        |
| TCI COMMUNICATIONS INC                               | \$180,000; 7.875%; 15 Feb 2026 | 225,617 | 186,345       |
| DEUTSCHE TELEKOM INT FIN                             | \$210,000; 8.75%; 15 Jun 2030  | 265,932 | 243,989       |
| BRITISH TELECOMMUNICATIO                             | \$195,000; 9.625%; 15 Dec 2030 | 265,460 | 236,241       |
| BURLINGTON RESOURCES LLC                             | \$50,000; 7.2%; 15 Aug 2031    | 69,234  | 55,425        |
| CANADIAN PACIFIC RAILWAY                             | \$185,000; 7.125%; 15 Oct 2031 | 209,740 | 205,302       |
| ORANGE SA                                            | \$205,000; 9%; 01 Mar 2031     | 281,047 | 244,054       |
| AMERICA MOVIL SAB DE CV                              | \$25,000; 6.375%; 01 Mar 2035  | 31,141  | 26,365        |
| TELEFONICA EMISIONES SAU                             | \$100,000; 7.045%; 20 Jun 2036 | 112,254 | 109,910       |
| IBERDROLA INTL BV                                    | \$170,000; 6.75%; 15 Jul 2036  | 197,212 | 187,712       |
| DIAGEO CAPITAL PLC                                   | \$65,000; 5.875%; 30 Sep 2036  | 83,379  | 68,481        |
| BERKSHIRE HATHAWAY ENERG                             | \$70,000; 6.125%; 01 Apr 2036  | 75,040  | 73,611        |
| VODAFONE GROUP PLC                                   | \$35,000; 6.15%; 27 Feb 2037   | 38,258  | 36,748        |
| TRAVELERS COS INC                                    | \$35,000; 6.25%; 15 Jun 2037   | 48,482  | 37,657        |
| VALERO ENERGY CORP                                   | \$125,000; 6.625%; 15 Jun 2037 | 136,616 | 131,118       |
| XTO ENERGY INC                                       | \$50,000; 6.75%; 01 Aug 2037   | 68,897  | 55,504        |
| AMERICA MOVIL SAB DE CV                              | \$60,000; 6.125%; 15 Nov 2037  | 70,428  | 61,621        |
| SHELL INTERNATIONAL FIN                              | \$210,000; 6.375%; 15 Dec 2038 | 259,277 | 228,560       |
| PROGRESS ENERGY INC                                  | \$310,000; 6%; 01 Dec 2039     | 334,652 | 313,342       |
| PRUDENTIAL FINANCIAL INC                             | \$100,000; 6.625%; 21 Jun 2040 | 125,458 | 109,594       |
| CSX CORP                                             | \$150,000; 6.22%; 30 Apr 2040  | 189,939 | 160,452       |
| EQUINOR ASA                                          | \$90,000; 5.1%; 17 Aug 2040    | 100,723 | 86,666        |
| HOME DEPOT INC                                       | \$111,000; 5.4%; 15 Sep 2040   | 131,943 | 110,810       |
| DEVON ENERGY CORPORATION                             | \$100,000; 5.6%; 15 Jul 2041   | 99,452  | 92,425        |
| UNITEDHEALTH GROUP INC                               | \$80,000; 4.625%; 15 Nov 2041  | 79,793  | 70,437        |
| INTERNATIONAL PAPER CO                               | \$100,000; 6%; 15 Nov 2041     | 106,948 | 102,281       |

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| Identity of Issue, Borrower, Lessor or Similar Party | Description of Investment      | Cost    | Current Value |
|------------------------------------------------------|--------------------------------|---------|---------------|
| ELEVANCE HEALTH INC                                  | \$60,000; 4.625%; 15 May 2042  | 54,002  | 51,806        |
| RTX CORP                                             | \$98,000; 4.5%; 01 Jun 2042    | 86,133  | 84,584        |
| COMCAST CORP                                         | \$100,000; 4.65%; 15 Jul 2042  | 98,142  | 87,704        |
| ENTERPRISE PRODUCTS OPER                             | \$160,000; 4.85%; 15 Mar 2044  | 153,199 | 143,002       |
| EQUINOR ASA                                          | \$40,000; 3.95%; 15 May 2043   | 46,846  | 32,768        |
| NUCOR CORP                                           | \$55,000; 5.2%; 01 Aug 2043    | 61,942  | 52,241        |
| ABBVIE INC                                           | \$60,000; 4.4%; 06 Nov 2042    | 54,260  | 51,931        |
| VIRGINIA ELEC + POWER CO                             | \$200,000; 4.65%; 15 Aug 2043  | 207,403 | 175,394       |
| EATON CORP                                           | \$80,000; 4%; 02 Nov 2032      | 73,742  | 74,750        |
| FEDEX CORP                                           | \$40,000; 4.9%; 15 Jan 2034    | 42,761  | 38,927        |
| GILEAD SCIENCES INC                                  | \$100,000; 4.8%; 01 Apr 2044   | 104,323 | 89,496        |
| PRUDENTIAL FINANCIAL INC                             | \$25,000; 4.6%; 15 May 2044    | 29,880  | 21,844        |
| VERIZON COMMUNICATIONS                               | \$150,000; 4.4%; 01 Nov 2034   | 144,525 | 138,971       |
| KINDER MORGAN INC                                    | \$50,000; 5.55%; 01 Jun 2045   | 47,253  | 46,730        |
| HCA INC                                              | \$190,000; 5.375%; 01 Feb 2025 | 205,309 | 190,036       |
| GOLDMAN SACHS GROUP INC                              | \$170,000; 3.5%; 23 Jan 2025   | 176,921 | 169,901       |
| OVINTIV INC                                          | \$275,000; 5.375%; 01 Jan 2026 | 274,011 | 275,960       |
| CHUBB INA HOLDINGS LLC                               | \$100,000; 3.15%; 15 Mar 2025  | 98,403  | 99,669        |
| SPECTRA ENERGY PARTNERS                              | \$50,000; 4.5%; 15 Mar 2045    | 41,939  | 41,117        |
| ABBVIE INC                                           | \$50,000; 4.7%; 14 May 2045    | 45,734  | 44,117        |
| FISERV INC                                           | \$165,000; 3.85%; 01 Jun 2025  | 168,166 | 164,200       |
| CVS HEALTH CORP                                      | \$110,000; 5.125%; 20 Jul 2045 | 100,885 | 92,418        |
| FORD MOTOR CREDIT CO LLC                             | \$200,000; 4.134%; 04 Aug 2025 | 195,876 | 198,752       |
| ENERGY TRANSFER LP                                   | \$170,000; 5.95%; 01 Dec 2025  | 179,937 | 171,199       |
| ALLY FINANCIAL INC                                   | \$465,000; 5.75%; 20 Nov 2025  | 473,216 | 467,399       |
| CONSTELLATION BRANDS INC                             | \$5,000; 4.75%; 01 Dec 2025    | 5,410   | 5,000         |
| ROPER TECHNOLOGIES INC                               | \$185,000; 3.85%; 15 Dec 2025  | 193,188 | 183,409       |
| DEVON ENERGY CORPORATION                             | \$260,000; 5.85%; 15 Dec 2025  | 272,612 | 261,742       |
| NETFLIX INC                                          | \$45,000; 5.875%; 15 Feb 2025  | 47,494  | 45,045        |
| APPLE INC                                            | \$195,000; 4.65%; 23 Feb 2046  | 214,714 | 178,287       |
| SOUTHERN CO GAS CAPITAL                              | \$230,000; 3.25%; 15 Jun 2026  | 219,895 | 225,264       |
| BUNGE LTD FINANCE CORP                               | \$260,000; 3.25%; 15 Aug 2026  | 252,128 | 253,952       |
| SOUTHWEST AIRLINES CO                                | \$165,000; 3%; 15 Nov 2026     | 159,855 | 159,440       |
| CHARTER COMM OPT LLC/CAP                             | \$2,000; 4.908%; 23 Jul 2025   | 2,035   | 1,998         |
| LINCOLN NATIONAL CORP                                | \$270,000; 3.625%; 12 Dec 2026 | 284,399 | 264,622       |
| AT+T INC                                             | \$5,000; 4.55%; 09 Mar 2049    | 5,045   | 4,148         |
| AMGEN INC                                            | \$25,000; 4.663%; 15 Jun 2051  | 27,160  | 20,932        |
| SABRA HEALTH CARE LP                                 | \$370,000; 5.125%; 15 Aug 2026 | 384,981 | 369,711       |
| CAPITAL ONE FINANCIAL CO                             | \$25,000; 3.75%; 09 Mar 2027   | 26,062  | 24,408        |
| SILICON MOTION TECHNOL ADR                           | 4,500 Units                    | 247,912 | 243,225       |
| SHELL PLC ADR                                        | 4,386 Units                    | 241,266 | 274,783       |
| TOTALENERGIES SE SPON ADR                            | 5,569 Units                    | 303,841 | 303,510       |
| BP PLC SPONS ADR                                     | 9,918 Units                    | 331,330 | 293,176       |
| FED HM LN PC POOL QN7193                             | \$268,003; 1.5%; 01 Aug 2036   | 273,070 | 231,203       |
| FED HM LN PC POOL QB4903                             | \$339,883; 2.5%; 01 Nov 2050   | 296,508 | 282,368       |
| FED HM LN PC POOL SB8137                             | \$162,909; 2%; 01 Jan 2037     | 146,891 | 143,984       |
| FED HM LN PC POOL QD6680                             | \$180,846; 3%; 01 Feb 2052     | 181,496 | 155,208       |
| FED HM LN PC POOL QN8967                             | \$163,556; 2%; 01 Dec 2036     | 167,709 | 144,803       |
| FED HM LN PC POOL SD8321                             | \$509,234; 4%; 01 May 2053     | 492,167 | 465,883       |
| FED HM LN PC POOL SD8365                             | \$913,936; 4.5%; 01 Oct 2053   | 901,512 | 860,352       |
| FED HM LN PC POOL C45720                             | \$10,328; 7.5%; 01 Dec 2030    | 10,456  | 10,425        |
| FED HM LN PC POOL C09022                             | \$104,551; 3%; 01 Jan 2043     | 108,791 | 92,366        |
| FED HM LN PC POOL C09019                             | \$45,118; 3%; 01 Dec 2042      | 43,349  | 39,860        |
| FED HM LN PC POOL G08525                             | \$83,369; 3%; 01 May 2043      | 84,057  | 73,650        |

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| Identity of Issue, Borrower, Lessor or Similar Party | Description of Investment      | Cost      | Current Value |
|------------------------------------------------------|--------------------------------|-----------|---------------|
| FED HM LN PC POOL G08528                             | \$79,359; 3%; 01 Apr 2043      | 82,199    | 70,108        |
| FED HM LN PC POOL C09035                             | \$19,117; 3%; 01 Apr 2043      | 19,125    | 16,889        |
| FED HM LN PC POOL G08653                             | \$283,583; 3%; 01 Jul 2045     | 287,651   | 247,628       |
| FED HM LN PC POOL G08640                             | \$31,582; 3%; 01 May 2045      | 31,503    | 27,627        |
| FED HM LN PC POOL G18556                             | \$69,819; 2.5%; 01 Jun 2030    | 70,529    | 66,573        |
| FED HM LN PC POOL G60498                             | \$60,393; 4%; 01 Feb 2046      | 64,885    | 56,233        |
| FED HM LN PC POOL G08710                             | \$192,314; 3%; 01 Jun 2046     | 188,407   | 167,169       |
| FED HM LN PC POOL G08726                             | \$121,631; 3%; 01 Oct 2046     | 123,969   | 105,651       |
| FED HM LN PC POOL G08737                             | \$190,695; 3%; 01 Dec 2046     | 178,565   | 165,283       |
| FED HM LN PC POOL G08741                             | \$354,985; 3%; 01 Jan 2047     | 344,546   | 308,347       |
| FED HM LN PC POOL G16164                             | \$50,437; 2.5%; 01 Jan 2030    | 50,965    | 49,103        |
| FED HM LN PC POOL ZS4697                             | \$1,142,698; 3%; 01 Jan 2047   | 1,034,241 | 991,199       |
| FED HM LN PC POOL SD8097                             | \$115,174; 2%; 01 Aug 2050     | 97,987    | 90,516        |
| FED HM LN PC POOL RA5826                             | \$184,286; 2.5%; 01 Sep 2051   | 189,814   | 151,890       |
| FNMA POOL FM4967                                     | \$309,614; 1%; 01 Dec 2050     | 326,014   | 257,618       |
| FNMA POOL BQ4169                                     | \$251,705; 2%; 01 Nov 2050     | 261,380   | 197,712       |
| FNMA POOL BR1155                                     | \$360,945; 2%; 01 Dec 2050     | 374,593   | 283,241       |
| FNMA POOL BR7022                                     | \$169,894; 2%; 01 Mar 2051     | 172,469   | 133,372       |
| FNMA POOL MA4378                                     | \$92,203; 2%; 01 Jul 2051      | 82,550    | 72,251        |
| FNMA POOL BR3060                                     | \$118,531; 2.5%; 01 Mar 2051   | 123,513   | 97,721        |
| FNMA POOL FM7496                                     | \$429,237; 1%; 01 Jun 2051     | 433,952   | 339,681       |
| FNMA POOL MA4398                                     | \$737,328; 2%; 01 Aug 2051     | 588,339   | 577,077       |
| FNMA POOL MA4399                                     | \$48,536; 2.5%; 01 Aug 2051    | 40,558    | 39,768        |
| FNMA POOL MA4437                                     | \$164,076; 2%; 01 Oct 2051     | 129,876   | 128,324       |
| FNMA POOL MA4438                                     | \$865,189; 2.5%; 01 Oct 2051   | 743,676   | 707,647       |
| FNMA POOL FM8360                                     | \$517,515; 1%; 01 Aug 2051     | 539,124   | 429,827       |
| FNMA POOL FM8683                                     | \$61,751; 1%; 01 Aug 2051      | 56,763    | 50,832        |
| FNMA POOL CB1784                                     | \$363,951; 2.5%; 01 Oct 2051   | 376,718   | 299,972       |
| FNMA POOL MA4493                                     | \$603,092; 2.5%; 01 Dec 2051   | 497,174   | 493,365       |
| FNMA POOL FM9406                                     | \$269,302; 1%; 01 Nov 2051     | 268,587   | 210,818       |
| FNMA POOL MA4564                                     | \$356,578; 3%; 01 Mar 2052     | 360,172   | 303,512       |
| FNMA POOL MA4579                                     | \$734,384; 3%; 01 Apr 2052     | 630,213   | 625,086       |
| FNMA POOL MA4600                                     | \$2,038,215; 3.5%; 01 May 2052 | 1,898,437 | 1,806,429     |
| FNMA POOL MA4626                                     | \$593,646; 4%; 01 Jun 2052     | 564,354   | 543,869       |
| FNMA POOL MA4655                                     | \$342,513; 4%; 01 Jul 2052     | 316,253   | 313,591       |
| FNMA POOL MA4656                                     | \$1,735,112; 4.5%; 01 Jul 2052 | 1,666,673 | 1,635,204     |
| FNMA POOL MA4700                                     | \$1,315,953; 4%; 01 Aug 2052   | 1,236,240 | 1,205,413     |
| FNMA POOL MA4733                                     | \$554,727; 4.5%; 01 Sep 2052   | 527,148   | 522,803       |
| FNMA POOL MA4783                                     | \$35,040; 4%; 01 Oct 2052      | 32,308    | 32,093        |
| FNMA POOL BW1433                                     | \$377,201; 4%; 01 May 2052     | 379,013   | 345,124       |
| FNMA POOL MA4868                                     | \$496,768; 5%; 01 Jan 2053     | 482,566   | 480,950       |
| FNMA POOL MA4978                                     | \$114,869; 5%; 01 Apr 2053     | 108,274   | 110,910       |
| FNMA POOL FS4409                                     | \$163,742; 1%; 01 Jun 2037     | 149,236   | 148,945       |
| FNMA POOL MA5070                                     | \$612,431; 4.5%; 01 Jul 2053   | 584,491   | 576,530       |
| FNMA POOL MA5089                                     | \$471,136; 4%; 01 Jul 2053     | 454,707   | 431,330       |
| FNMA POOL 357484                                     | \$14,279; 5.5%; 01 Feb 2034    | 14,545    | 14,367        |
| FNMA POOL 735502                                     | \$10,289; 1%; 01 Apr 2035      | 10,188    | 10,615        |
| FNMA POOL 745418                                     | \$33,949; 1%; 01 Apr 2036      | 36,702    | 34,348        |
| FNMA POOL 256270                                     | \$9,830; 6%; 01 Jun 2036       | 9,738     | 10,192        |
| FNMA POOL 255410                                     | \$22,827; 6.5%; 01 Sep 2034    | 24,018    | 23,789        |
| FNMA POOL 745275                                     | \$10,737; 1%; 01 Feb 2036      | 11,316    | 10,657        |
| FNMA POOL 881671                                     | \$565; 1%; 01 Mar 2036         | 566       | 567           |
| FNMA POOL 735591                                     | \$13,408; 1%; 01 Jun 2035      | 13,865    | 13,299        |
| FNMA POOL 995024                                     | \$8,705; 1%; 01 Aug 2037       | 9,180     | 8,801         |

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|------------------------------------------------------|---------------------------------------|------------|---------------|
| FNMA POOL 969719                                     | \$25,110; 6%; 01 Mar 2038             | 26,001     | 25,864        |
| FNMA POOL AH3394                                     | \$142,610; 4%; 01 Jan 2041            | 152,283    | 134,555       |
| FNMA POOL AB2092                                     | \$293,837; 4%; 01 Jan 2041            | 294,242    | 276,336       |
| FNMA POOL AB2172                                     | \$36,448; 4%; 01 Feb 2041             | 38,527     | 34,389        |
| FNMA POOL AB8464                                     | \$49,054; 2.5%; 01 Feb 2043           | 52,059     | 41,355        |
| FNMA POOL AU1628                                     | \$38,726; 3%; 01 Jul 2043             | 37,310     | 34,168        |
| FNMA POOL AS6520                                     | \$65,483; 3.5%; 01 Jan 2046           | 66,927     | 58,773        |
| FNMA POOL MA2578                                     | \$81,520; 3.5%; 01 Apr 2046           | 85,380     | 73,166        |
| FNMA POOL BA0849                                     | \$22,428; 3.5%; 01 Apr 2046           | 23,570     | 20,167        |
| FNMA POOL AS7343                                     | \$51,567; 3%; 01 Jun 2046             | 53,089     | 44,781        |
| FNMA POOL MA2705                                     | \$59,1646; 3%; 01 Aug 2046            | 56,245     | 51,360        |
| FNMA POOL AS7112                                     | \$26,728; 3.5%; 01 May 2046           | 28,242     | 23,989        |
| FNMA POOL MA2709                                     | \$22,827; 2.5%; 01 Aug 2031           | 23,904     | 21,599        |
| FNMA POOL BC4764                                     | \$352,390; 3%; 01 Oct 2046            | 345,287    | 305,410       |
| FNMA POOL MA2833                                     | \$132,833; 3%; 01 Dec 2046            | 126,078    | 115,270       |
| FNMA POOL AL9105                                     | \$30,323; 1%; 01 Oct 2046             | 32,569     | 29,136        |
| FNMA POOL MA2868                                     | \$128,237; 2.5%; 01 Jan 2032          | 134,378    | 120,872       |
| FNMA POOL MA2879                                     | \$39,692; 4%; 01 Jan 2047             | 40,990     | 36,825        |
| FNMA POOL AS8573                                     | \$67,685; 3.5%; 01 Dec 2046           | 69,927     | 60,748        |
| FNMA POOL MA2896                                     | \$29,348; 3.5%; 01 Feb 2047           | 29,049     | 26,340        |
| FNMA POOL MA3088                                     | \$80,929; 4%; 01 Aug 2047             | 84,709     | 75,049        |
| FNMA POOL MA3121                                     | \$57,707; 4%; 01 Sep 2047             | 60,502     | 53,514        |
| FNMA POOL MA3210                                     | \$63,460; 3.5%; 01 Dec 2047           | 63,848     | 56,905        |
| FNMA POOL MA3238                                     | \$637,616; 3.5%; 01 Jan 2048          | 596,968    | 572,261       |
| FNMA POOL MA3332                                     | \$148,671; 3.5%; 01 Apr 2048          | 142,283    | 133,431       |
| FNMA POOL FM1000                                     | \$216,215; 1%; 01 Apr 2047            | 219,301    | 187,557       |
| FNMA POOL FM1001                                     | \$26,741; 1%; 01 Nov 2048             | 27,488     | 24,000        |
| FNMA POOL FM1308                                     | \$75,028; 1%; 01 Feb 2047             | 78,521     | 62,680        |
| FNMA POOL MA3896                                     | \$156,006; 2.5%; 01 Jan 2035          | 141,283    | 142,276       |
| FNMA POOL MA3993                                     | \$155,516; 4%; 01 Apr 2050            | 144,144    | 143,591       |
| FNMA POOL MA4047                                     | \$70,118; 2%; 01 Jun 2050             | 72,162     | 55,132        |
| FNMA POOL BP5878                                     | \$116,802; 2.5%; 01 Jun 2050          | 110,609    | 96,893        |
| FNMA POOL MA4100                                     | \$268,722; 2%; 01 Aug 2050            | 276,826    | 211,205       |
| FNMA POOL MA4158                                     | \$319,515; 2%; 01 Oct 2050            | 329,901    | 250,979       |
| FNMA POOL CA6307                                     | \$158,321; 2.5%; 01 Jul 2050          | 161,376    | 130,551       |
| GNMA II POOL 786266                                  | \$882,827; 2.5%; 20 Mar 2052          | 754,556    | 733,320       |
| GNMA II POOL MA8488                                  | \$390,399; 4%; 20 Dec 2052            | 372,526    | 359,796       |
| GNMA II POOL MA8427                                  | \$441,080; 4.5%; 20 Nov 2052          | 434,487    | 417,685       |
| GNMA II POOL MA3663                                  | \$61,268; 3.5%; 20 May 2046           | 62,530     | 55,460        |
| GNMA II POOL MA7705                                  | \$192,356; 2.5%; 20 Nov 2051          | 162,841    | 160,752       |
| GNMA II POOL MA3662                                  | \$120,082; 3%; 20 May 2046            | 117,236    | 105,760       |
| GNMA II POOL MA4837                                  | \$105,897; 3.5%; 20 Nov 2047          | 106,533    | 95,830        |
| GNMA II POOL MA8946                                  | \$115,913; 4.5%; 20 Jun 2053          | 112,553    | 109,687       |
| GNMA II POOL MA0783                                  | \$378,592; 3.5%; 20 Feb 2043          | 397,828    | 346,006       |
| GNMA II POOL MA1157                                  | \$180,484; 3.5%; 20 Jul 2043          | 188,335    | 164,967       |
| US TREASURY N/B                                      | \$5,705,000; 2.375%; 15 Feb 2042      | 4,448,505  | 4,061,161     |
| US TREASURY N/B                                      | \$2,280,000; 1.875%; 15 Feb 2032      | 1,947,619  | 1,917,685     |
| US TREASURY N/B                                      | \$2,575,000; 1.25%; 15 May 2050       | 1,677,513  | 1,220,756     |
| US TREASURY N/B                                      | \$2,270,000; 2.875%; 15 May 2028      | 2,170,982  | 2,168,304     |
| TOWN OF SNOWMASS VILLAGE CO                          | \$705,000; 1.75%; 01 Sep 2034         | 57,178     | -             |
| HYDRO QUEBEC                                         | \$25,000; 8.25%; 15 Jan 2027          | 35,653     | 26,561        |
| ACADIAN INTL SMALL CAP                               | LONG/SHORT FUND; 2,221 UNITS          | 4,659,652  | 22,105,565    |
| BAIRD AGGREGATE BOND FUND                            | BAIRD AGGREGATE BOND; 6,647,395 UNITS | 71,892,257 | 64,147,361    |
| RUSSELL 1000 INDEX NON LENDING                       | 1000 INDEX NL FUND; 723,252 UNITS     | 10,626,380 | 66,158,731    |

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|------------------------------------------------------|--------------------------------------------------|-----------------------|-----------------------|
| GQG PARTNERS EMERGING MARKETS                        | GQG PART EMERGING MARKETS FUND; 691,394 UNITS    | 11,857,263            | 11,435,660            |
| PIMCO RAE EMERGING MARKETS FUND                      | PIMCO RAE EMERGING MARKETS FUND; 1,148,739 UNITS | 12,373,405            | 11,613,748            |
| TS W INTERNATIONAL LARGE CAP                         | INTL LARGE CAP FUND: 1,365,613 UNITS             | 13,656,127            | 20,825,593            |
| MFS INTERNATIONAL GROWTH FUND                        | MFS INTL GROWTH; 523,537 UNITS                   | 18,247,491            | 21,669,190            |
| DIAMONDROCK HOSPITALITY CO                           | REAL ESTATE INV TRUST; 12,600 UNITS              | 109,557               | 113,778               |
| PIEDMONT OFFICE REALTY TRUST A                       | REAL ESTATE INV TRUST; 8,950 UNITS               | 131,553               | 81,893                |
| SABRA HEALTH CARE REIT INC                           | REAL ESTATE INV TRUST; 20,000 UNITS              | 333,466               | 346,400               |
| SUMMIT HOTEL PROPERTIES INC                          | REAL ESTATE INV TRUST; 8,300 UNITS               | 86,251                | 56,855                |
| KITE REALTY GROUP TRUST                              | REAL ESTATE INV TRUST; 6,800 UNITS               | 143,688               | 171,632               |
| APPLE HOSPITALITY REIT INC                           | REAL ESTATE INV TRUST; 16,000 UNITS              | 242,428               | 245,600               |
| LXP INDUSTRIAL TRUST                                 | REAL ESTATE INV TRUST; 22,000 UNITS              | 227,666               | 178,640               |
| HEALTHPEAK PROPERTIES INC                            | REAL ESTATE INV TRUST; 11,500 UNITS              | 277,440               | 233,105               |
| BROADSTONE NET LEASE INC                             | REAL ESTATE INV TRUST; 8,450 UNITS               | 145,364               | 134,017               |
| EASTGROUP PROPERTIES INC                             | REAL ESTATE INV TRUST; 2,876 UNITS               | 415,417               | 461,569               |
| AGREE REALTY CORP                                    | REAL ESTATE INV TRUST; 2,850 UNITS               | 159,701               | 200,783               |
| BRANDYWINE REALTY TRUST                              | REAL ESTATE INV TRUST; 3,950 UNITS               | 49,181                | 22,120                |
| COMMUNITY HEALTHCARE TRUST I                         | REAL ESTATE INV TRUST; 7,250 UNITS               | 233,313               | 139,273               |
| STIF 25 BPS                                          | MONEY MKT                                        | 38,441,853            | 38,441,853            |
|                                                      |                                                  | <u>\$ 404,305,900</u> | <u>\$ 579,825,868</u> |