

Monthly Schedule of Portfolio Holdings of Short-term Investment Funds (STIF)
Office of the Comptroller of the Currency
Washington, D.C. 20219

Version 1.0

Identity Information

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|--|----------------------|
| 1. Name of Bank | <input type="text"/> |
| 2. FDIC Certificate Number | <input type="text"/> |
| 3. Contact Information | |
| 3a. Primary Contact Name and Title | <input type="text"/> |
| 3b. Primary Contact Telephone (Area code/phone number/extension) | <input type="text"/> |
| 3c. Primary Contact E-mail Address | <input type="text"/> |
| 4. Report Date | <input type="text"/> |

Fund Information

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|---|----------------------|
| 5. Name of Fund | <input type="text"/> |
| 6. Type of Fund (Common Trust Fund or Collective Investment Fund) | <input type="text"/> |
| 7. Dollar-weighted Average Portfolio Maturity | <input type="text"/> |
| 8. Dollar-weighted Average Portfolio Life Maturity | <input type="text"/> |
| 9. Net Assets | |
| 9a. Total Value of Securities at Amortized Cost | <input type="text"/> |
| 9b. Total Value of Other Assets at Amortized Cost | <input type="text"/> |
| 9c. Total Value of Liabilities | <input type="text"/> |
| 9d. Total Net Assets at Amortized Cost | <input type="text"/> |
| 10. Amortized Cost Net Asset Value Per Participating Interest | <input type="text"/> |
| 11. Mark-to-Market Net Asset Value Per Participating Interest | <input type="text"/> |
| 12. Capital / Liquidity Support | |
| 12a. Has the Bank or an Affiliate of the Bank entered into a Capital or Liquidity Support Agreement with the Fund (Yes or No) | <input type="text"/> |
| 12b. If 12a is yes, Provide the Mark-to-Market Net Asset Value Per Participating Interest Without the Support Agreement | <input type="text"/> |

