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| SCHEDULE D(Form 5500)Department of the TreasuryInternal Revenue ServiceDepartment of LaborEmployee Benefits Security Administration | DFE/Participating Plan InformationThis schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).⏵ File as an attachment to Form 5500.  | OMB No. 1210-01102016This Form is Open to Public Inspection. |
| For calendar plan year 2016 or fiscal plan year beginning and ending  |
| A Name of planABCDEFGHI ABCDEFGHI ABCDEFGHI ABCDEFGHI ABCDEFGHI ABCDEFGHI ABCDEFGHI ABCDEFGHI ABCDEFGHI ABCDEFGHI ABCDEFGHI ABCDEFGHI ABCDEFGHI ABCDEFGHI  | B Three-digitplan number (PN) ⏵ | 001 |
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| C Plan or DFE sponsor’s name as shown on line 2a of Form 5500ABCDEFGHI ABCDEFGHI ABCDEFGHI ABCDEFGHI ABCDEFGHI ABCDEFGHI ABCDEFGHI  | D Employer Identification Number (EIN)012345678 |
| Part I | Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs) |
| a Name of MTIA, CCT, PSA, or 103-12 IE: | ABCDEFGHI ABCDEFGHI ABCDEFGHI ABCD |
| b Name of sponsor of entity listed in (a): | ABCDEFGHI ABCDEFGHI ABCDEFGHI ABCDEFGHI ABCDEFGHI ABCDEFGHI ABCDEFGHI |
| c EIN-PN  | 123456789-123 | d Entity code  | 1 | e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)  | -123456789012345 |
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| For Paperwork Reduction Act Notice, see the Instructions for Form 5500.  | Schedule D (Form 5500) 2016 v.160205 |

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| Part II | Information on Participating Plans (to be completed by DFEs) (Complete as many entries as needed to report all participating plans) |
| a Plan name | ABCDEFGHI ABCDEFGHI ABCDEFGHI ABCDEFGHI ABCDEFGHI ABCDEFGHI ABCDEFGHI ABCDEFGHI ABCDEFGHI ABCDEFGHI ABCDEFGHI ABCDEFGHI ABCDEFGHI ABCDEFGHI |
| b Name of plan sponsor | ABCDEFGHI ABCDEFGHI ABCDEFGHI ABCDEFGHI ABCDEFGHI ABCDEFGHI ABCDEFGHI | c EIN-PN | 123456789-123 |
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