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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. 1210-01102024This Form is Open to Public Inspection. |
| For calendar plan year 2024 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) 2024 v. 240311  |

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| 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 | 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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| a Plan name | ABCDEFGHI ABCDEFGHI ABCDEFGHI ABCDEFGHI ABCDEFGHI ABCDEFGHI ABCDEFGHI ABCDEFGHI ABCDEFGHI ABCDEFGHI ABCDEFGHI ABCDEFGHI ABCDEFGHI ABCDEFGHI |
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