

|                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                               |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
| <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 type="checkbox"/> a single-employer plan</div><div><input checked="" type="checkbox"/> a DFE (specify) M</div><div><input type="checkbox"/> the first return/report</div><div><input type="checkbox"/> the final return/report</div><div><input checked="" 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>DEFINED BENEFIT PLANS MTIA                                                                                                                                                                                                                                                                                                                                                 |
| 1b      | Three-digit plan number (PN) ▶ 006                                                                                                                                                                                                                                                                                                                                                         |
| 1c      | Effective date of plan                                                                                                                                                                                                                                                                                                                                                                     |
| 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>CONSOLIDATED NUCLEAR SECURITY, LLC<br><br>P.O. BOX 2115<br>OAK RIDGE, TN 37831-8258<br><br>602 SCARBORO ROAD<br>OAK RIDGE, TN 37830 |
| 2b      | Employer Identification Number (EIN)<br>62-1407069                                                                                                                                                                                                                                                                                                                                         |
| 2c      | Plan Sponsor's telephone number<br>865-574-1500                                                                                                                                                                                                                                                                                                                                            |
| 2d      | Business code (see instructions)                                                                                                                                                                                                                                                                                                                                                           |

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 |                                                   |            |                                                              |
|           | 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 | Filed with authorized/valid electronic signature. | 06/04/2026 | B. ELLEN HAWKS, BENEFITS DIRECTOR                            |
|           | Signature of DFE                                  | Date       | Enter name of individual signing as DFE                      |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                                                                                                                                            |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------|
| <b>3a</b> Plan administrator's name and address <input checked="" type="checkbox"/> Same as Plan Sponsor                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  | <b>3b</b> Administrator's EIN                                                                                                              |
| <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>3c</b> Administrator's telephone number<br><br><b>4b</b> EIN 45-4482782<br><b>4d</b> PN                                                 |
| <b>5</b> Total number of participants at the beginning of the plan year                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  | <b>5</b>                                                                                                                                   |
| <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><br><b>6a(2)</b><br><b>6b</b><br><b>6c</b><br><b>6d</b><br><b>6e</b><br><b>6f</b><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>                                                                                                                                   |

**8a** If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:

**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 |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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

**a Pension Schedules**

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

**b General Schedules**

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

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

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

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

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

**11c** Enter the Receipt Confirmation Code for the 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 \_\_\_\_\_

|                                                                                                                                                                                                                                              |                                                                                                                                                                                                                             |                                         |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|
| <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

|                                                                                                                            |                                                                                    |
|----------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|
| <div>A</div> <div>Name of plan</div> <div>DEFINED BENEFIT PLANS MTIA</div>                                                 | <div>B</div> <div>Three-digit plan number (PN) ▶</div> <div>006</div>              |
| <div>C</div> <div>Plan sponsor's name as shown on line 2a of Form 5500</div> <div>CONSOLIDATED NUCLEAR SECURITY, LLC</div> | <div>D</div> <div>Employer Identification Number (EIN)</div> <div>62-1407069</div> |

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).....

X

YesNo
- 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 |                                              |
| NORTHERN TRUST COMPANY                                                                                     | 50 SOUTH LASALLE STREET<br>CHICAGO, IL 60603 |
| 36-1561860                                                                                                 |                                              |

|                                                                                                            |
|------------------------------------------------------------------------------------------------------------|
| (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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**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)

JP MORGAN CHASE BANK, N.A.

1111 POLARIS PARKWAY  
COLUMBUS, OH 43240

20-6201314

| (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                     | NONE                                                                                              | 1470899                                                                | 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)

WESTERN ASSET MANAGEMENT COMPANY

385 E. COLORADO BLVD.  
PASADENA, CA 91101

95-2705767

| (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                     | NONE                                                                                              | 484475                                                                 | 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)

PGIM, INC.

655 BROAD STREET 8TH FLOOR  
NEWARK, NJ 07102

22-2540245

| (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                     | NONE                                                                                              | 332756                                                                 | 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)

SANDS CAPITAL MANAGEMENT LLC

1000 WILSON BLVD 3000  
ARLINGTON, VA 22209

20-2830751

| (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                     | NONE                                                                                              | 240983                                                                 | 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)

NORTHERN TRUST COMPANY

50 SOUTH LASALLE STREET  
CHICAGO, IL 60603

36-1561860

| (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? |
|------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 25                     | NONE                                                                                              | 34109                                                                  | 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)

BLACKROCK

400 HOWARD STREET  
SAN FRANCISCO, CA 94105

94-3112180

| (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                     | NONE                                                                                              | 28220                                                                  | 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"/>                                     |

**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>DEFINED BENEFIT PLANS MTIA                                                                                                                                      |                                                                                                                                                                                                                                   | B Three-digit plan number (PN) ▶ 006                                                                   |
| C Plan or DFE sponsor's name as shown on line 2a of Form 5500<br>CONSOLIDATED NUCLEAR SECURITY, LLC                                                                               |                                                                                                                                                                                                                                   | D Employer Identification Number (EIN)<br>62-1407069                                                   |
| 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: BLUEBAY GLOBAL FUNDS TOTAL RETURN                                                                                                         |                                                                                                                                                                                                                                   |                                                                                                        |
| b Name of sponsor of entity listed in (a): RBC GLOBAL ASSET MANAGEMENT (U.S) I                                                                                                    |                                                                                                                                                                                                                                   |                                                                                                        |
| c EIN-PN 41-1460668-000                                                                                                                                                           | d Entity code C                                                                                                                                                                                                                   | e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 71339417  |
| a Name of MTIA, CCT, PSA, or 103-12 IE: COMMINGLED PENSION TRUST FUND                                                                                                             |                                                                                                                                                                                                                                   |                                                                                                        |
| b Name of sponsor of entity listed in (a): JPMORGAN CHASE BANK, N.A.                                                                                                              |                                                                                                                                                                                                                                   |                                                                                                        |
| c EIN-PN 13-6038770-001                                                                                                                                                           | d Entity code C                                                                                                                                                                                                                   | e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 111166285 |
| a Name of MTIA, CCT, PSA, or 103-12 IE: 91 GLOBAL SELECT - EMERGING MARKETS                                                                                                       |                                                                                                                                                                                                                                   |                                                                                                        |
| b Name of sponsor of entity listed in (a): NINETY ONE                                                                                                                             |                                                                                                                                                                                                                                   |                                                                                                        |
| c EIN-PN 39-2079691-000                                                                                                                                                           | d Entity code C                                                                                                                                                                                                                   | e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 81753425  |
| a Name of MTIA, CCT, PSA, or 103-12 IE: ARROWSTREET GLOBAL EQUITY ACWI CIT                                                                                                        |                                                                                                                                                                                                                                   |                                                                                                        |
| b Name of sponsor of entity listed in (a): GLOBAL TRUST COMPANY                                                                                                                   |                                                                                                                                                                                                                                   |                                                                                                        |
| c EIN-PN 37-6607043-002                                                                                                                                                           | d Entity code C                                                                                                                                                                                                                   | e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 77667459  |
| a Name of MTIA, CCT, PSA, or 103-12 IE: EQUITY INDEX FUND                                                                                                                         |                                                                                                                                                                                                                                   |                                                                                                        |
| b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPA                                                                                                    |                                                                                                                                                                                                                                   |                                                                                                        |
| c EIN-PN 94-6052285-001                                                                                                                                                           | d Entity code C                                                                                                                                                                                                                   | e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 354825835 |
| a Name of MTIA, CCT, PSA, or 103-12 IE: NT COLLECTIVE SHORT TERM INVT                                                                                                             |                                                                                                                                                                                                                                   |                                                                                                        |
| b Name of sponsor of entity listed in (a): NORTHERN TRUST INVESTMENTS, INC.                                                                                                       |                                                                                                                                                                                                                                   |                                                                                                        |
| c EIN-PN 45-6138589-084                                                                                                                                                           | d Entity code C                                                                                                                                                                                                                   | e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2820321   |
| a Name of MTIA, CCT, PSA, or 103-12 IE: WESTERN ASSET US LONG DURATION, LLC                                                                                                       |                                                                                                                                                                                                                                   |                                                                                                        |
| b Name of sponsor of entity listed in (a): WESTERN ASSET MANAGEMENT COMPANY, L                                                                                                    |                                                                                                                                                                                                                                   |                                                                                                        |
| c EIN-PN 20-2721676-001                                                                                                                                                           | d Entity code E                                                                                                                                                                                                                   | e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 87286009  |
| For Paperwork Reduction Act Notice, see the Instructions for Form 5500.                                                                                                           |                                                                                                                                                                                                                                   |                                                                                                        |
| Schedule D (Form 5500) 2024 v. 240311                                                                                                                                             |                                                                                                                                                                                                                                   |                                                                                                        |

**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 RETIREMENT PROGRAM FOR EMPLOYEES OF CNS,LLC AT THE U.S. DEPT OF ENERGY FACILITIES AT OAK RIDGE, TN**b** Name of plan sponsor CONSOLIDATED NUCLEAR SECURITY, LLC**c** EIN-PN 45-4482782-001**a** Plan name**b** Name of plan sponsor**c** EIN-PN**a** Plan name**b** Name of plan sponsor**c** EIN-PN**a** Plan name**b** Name of plan sponsor**c** EIN-PN**a** Plan name**b** Name of plan sponsor**c** EIN-PN**a** Plan name**b** Name of plan sponsor**c** EIN-PN**a** Plan name**b** Name of plan sponsor**c** EIN-PN**a** Plan name**b** Name of plan sponsor**c** EIN-PN**a** Plan name**b** Name of plan sponsor**c** EIN-PN**a** Plan name**b** Name of plan sponsor**c** EIN-PN**a** Plan name**b** Name of plan sponsor**c** EIN-PN**a** Plan name**b** Name of plan sponsor**c** EIN-PN

|                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                   |                                        |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|
| <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>DEFINED BENEFIT PLANS MTIA                                                 | B Three-digit plan number (PN) ▶ 006                 |
| C Plan sponsor's name as shown on line 2a of Form 5500<br>CONSOLIDATED NUCLEAR SECURITY, LLC | D Employer Identification Number (EIN)<br>62-1407069 |

| 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>3</b>        |
| <b>b</b> Receivables (less allowance for doubtful accounts):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                               |                       |                 |
| <b>(1)</b> Employer contributions .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <b>1b(1)</b>                  |                       |                 |
| <b>(2)</b> Participant contributions.....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>1b(2)</b>                  |                       |                 |
| <b>(3)</b> Other .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <b>1b(3)</b>                  | 47809225              | 2426013         |
| <b>c</b> General investments:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                               |                       |                 |
| <b>(1)</b> Interest-bearing cash (include money market accounts & certificates of deposit) .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <b>1c(1)</b>                  |                       |                 |
| <b>(2)</b> U.S. Government securities .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <b>1c(2)</b>                  | 69956654              | 54854419        |
| <b>(3)</b> Corporate debt instruments (other than employer securities):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                               |                       |                 |
| <b>(A)</b> Preferred .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <b>1c(3)(A)</b>               | 6591461               | 1783167         |
| <b>(B)</b> All other .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <b>1c(3)(B)</b>               | 57849547              | 44901243        |
| <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>               | 98838940              | 0               |
| <b>(5)</b> Partnership/joint venture interests .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <b>1c(5)</b>                  | 304814291             | 212432529       |
| <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>                  | 647124419             | 699572742       |
| <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>                 | 173794068             | 87286009        |
| <b>(13)</b> Value of interest in registered investment companies (e.g., mutual funds) .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <b>1c(13)</b>                 | 110030107             | 0               |
| <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>                 | 2092196               | 1808372         |

|                                                                          |              |                       |                 |
|--------------------------------------------------------------------------|--------------|-----------------------|-----------------|
| <b>1d</b> Employer-related investments:                                  |              | (a) Beginning of Year | (b) End of Year |
| (1) Employer securities.....                                             | <b>1d(1)</b> |                       |                 |
| (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>    | 1518900908            | 1105064497      |
| <b>Liabilities</b>                                                       |              |                       |                 |
| <b>g</b> Benefit claims payable.....                                     | <b>1g</b>    |                       |                 |
| <b>h</b> Operating payables.....                                         | <b>1h</b>    |                       |                 |
| <b>i</b> Acquisition indebtedness.....                                   | <b>1i</b>    |                       |                 |
| <b>j</b> Other liabilities.....                                          | <b>1j</b>    | 513                   | 1423105         |
| <b>k</b> Total liabilities (add all amounts in lines 1g through 1j)..... | <b>1k</b>    | 513                   | 1423105         |
| <b>Net Assets</b>                                                        |              |                       |                 |
| <b>l</b> Net assets (subtract line 1k from line 1f).....                 | <b>1l</b>    | 1518900395            | 1103641392      |

**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</b> Contributions:                                                                      |                 |            |           |
| (1) Received or receivable in cash from: (A) Employers.....                                  | <b>2a(1)(A)</b> |            |           |
| (B) Participants.....                                                                        | <b>2a(1)(B)</b> |            |           |
| (C) 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), (C), and line <b>2a(2)</b> .....   | <b>2a(3)</b>    |            |           |
| <b>b</b> Earnings on investments:                                                            |                 |            |           |
| (1) Interest:                                                                                |                 |            |           |
| (A) Interest-bearing cash (including money market accounts and certificates of deposit)..... | <b>2b(1)(A)</b> |            |           |
| (B) U.S. Government securities.....                                                          | <b>2b(1)(B)</b> | 2306382    |           |
| (C) Corporate debt instruments.....                                                          | <b>2b(1)(C)</b> | 3030943    |           |
| (D) Loans (other than to participants).....                                                  | <b>2b(1)(D)</b> |            |           |
| (E) Participant loans.....                                                                   | <b>2b(1)(E)</b> |            |           |
| (F) Other.....                                                                               | <b>2b(1)(F)</b> | 112997     |           |
| (G) Total interest. Add lines <b>2b(1)(A)</b> through (F).....                               | <b>2b(1)(G)</b> |            | 5450322   |
| (2) Dividends: (A) Preferred stock.....                                                      | <b>2b(2)(A)</b> |            |           |
| (B) Common stock.....                                                                        | <b>2b(2)(B)</b> | 102990     |           |
| (C) Registered investment company shares (e.g. mutual funds).....                            | <b>2b(2)(C)</b> |            |           |
| (D) Total dividends. Add lines <b>2b(2)(A)</b> , (B), and (C).....                           | <b>2b(2)(D)</b> |            | 102990    |
| (3) Rents.....                                                                               | <b>2b(3)</b>    |            |           |
| (4) Net gain (loss) on sale of assets: (A) Aggregate proceeds.....                           | <b>2b(4)(A)</b> | 612638958  |           |
| (B) Aggregate carrying amount (see instructions).....                                        | <b>2b(4)(B)</b> | 603266737  |           |
| (C) Subtract line <b>2b(4)(B)</b> from line <b>2b(4)(A)</b> and enter result.....            | <b>2b(4)(C)</b> |            |           |
| (5) Unrealized appreciation (depreciation) of assets: (A) Real estate.....                   | <b>2b(5)(A)</b> |            |           |
| (B) Other.....                                                                               | <b>2b(5)(B)</b> | -1284342   |           |
| (C) Total unrealized appreciation of assets.<br>Add lines <b>2b(5)(A)</b> and (B).....       | <b>2b(5)(C)</b> |            |           |

|                                                                                                 |               | (a) Amount | (b) Total |
|-------------------------------------------------------------------------------------------------|---------------|------------|-----------|
| (6) Net investment gain (loss) from common/collective trusts .....                              | <b>2b(6)</b>  |            | 113600966 |
| (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>  |            | -3721974  |
| (10) Net investment gain (loss) from registered investment companies (e.g., mutual funds) ..... | <b>2b(10)</b> |            | 5372723   |
| <b>c</b> Other income .....                                                                     | <b>2c</b>     |            | 1836442   |
| <b>d</b> Total income. Add all <b>income</b> amounts in column (b) and enter total .....        | <b>2d</b>     |            | 130729348 |

**Expenses**

|                                                                                             |               |         |         |
|---------------------------------------------------------------------------------------------|---------------|---------|---------|
| <b>e</b> Benefit payment and payments to provide benefits:                                  |               |         |         |
| (1) Directly to participants or beneficiaries, including direct rollovers .....             | <b>2e(1)</b>  |         |         |
| (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>  |         |         |
| <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>  |         |         |
| (4) IQPA audit fees .....                                                                   | <b>2i(4)</b>  |         |         |
| (5) Investment advisory and investment management fees .....                                | <b>2i(5)</b>  | 2557334 |         |
| (6) Bank or trust company trustee/custodial fees .....                                      | <b>2i(6)</b>  | 34109   |         |
| (7) Actuarial fees .....                                                                    | <b>2i(7)</b>  |         |         |
| (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> | 478     |         |
| (12) Total administrative expenses. Add lines <b>2i(1)</b> through <b>(11)</b> .....        | <b>2i(12)</b> |         | 2591921 |
| <b>j</b> Total expenses. Add all <b>expense</b> amounts in column (b) and enter total ..... | <b>2j</b>     |         | 2591921 |

**Net Income and Reconciliation**

|                                                                               |              |  |            |
|-------------------------------------------------------------------------------|--------------|--|------------|
| <b>k</b> Net income (loss). Subtract line <b>2j</b> from line <b>2d</b> ..... | <b>2k</b>    |  | 128137427  |
| <b>l</b> Transfers of assets:                                                 |              |  |            |
| (1) To this plan .....                                                        | <b>2l(1)</b> |  | 696254042  |
| (2) From this plan .....                                                      | <b>2l(2)</b> |  | 1239650472 |

**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:

(2) EIN:

**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.)                 |     |    |        |
| <b>4a</b>                                                                                                                                                                                                                                                                                                  |     |    |        |
| <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.) |     | X  |        |
| <b>4b</b>                                                                                                                                                                                                                                                                                                  |     |    |        |
| <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.)                                                                                                                             |     | X  |        |
| <b>4c</b>                                                                                                                                                                                                                                                                                                  |     |    |        |
| <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.)                                                                                                                  |     | X  |        |
| <b>4d</b>                                                                                                                                                                                                                                                                                                  |     |    |        |
| <b>e</b> Was this plan covered by a fidelity bond?                                                                                                                                                                                                                                                         |     |    |        |
| <b>4e</b>                                                                                                                                                                                                                                                                                                  |     |    |        |
| <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?                                                                                                                                                                          |     |    |        |
| <b>4f</b>                                                                                                                                                                                                                                                                                                  |     |    |        |
| <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?                                                                                                                                       |     |    |        |
| <b>4g</b>                                                                                                                                                                                                                                                                                                  |     |    |        |
| <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?                                                                                                                             |     |    |        |
| <b>4h</b>                                                                                                                                                                                                                                                                                                  |     |    |        |
| <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.)                                                                                                                                                   | X   |    |        |
| <b>4i</b>                                                                                                                                                                                                                                                                                                  |     |    |        |
| <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.)                                                                                     | X   |    |        |
| <b>4j</b>                                                                                                                                                                                                                                                                                                  |     |    |        |
| <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?                                                                                                                                              |     |    |        |
| <b>4k</b>                                                                                                                                                                                                                                                                                                  |     |    |        |
| <b>l</b> Has the plan failed to provide any benefit when due under the plan?                                                                                                                                                                                                                               |     |    |        |
| <b>4l</b>                                                                                                                                                                                                                                                                                                  |     |    |        |
| <b>m</b> If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)                                                                                                                                                                                     |     |    |        |
| <b>4m</b>                                                                                                                                                                                                                                                                                                  |     |    |        |
| <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.                                                                                                                        |     |    |        |
| <b>4n</b>                                                                                                                                                                                                                                                                                                  |     |    |        |

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

**Defined Benefit Plans MITA**  
**EIN: 62-1407069 Plan: 006**  
**Schedule H, Line 4i - Schedule of Assets Held at Year End**  
**Year Ending 31 December 2024**

| Security Description / Asset ID                                                       | Shares/Par Value | Historical Cost     | Current Value       |
|---------------------------------------------------------------------------------------|------------------|---------------------|---------------------|
| <b><i>Non-Interest Bearing Cash - USD</i></b>                                         |                  |                     |                     |
| USD - United States dollar                                                            | 3.000            | 3.00                | 3.00                |
| <b>Total - all currencies</b>                                                         |                  | <b>3.00</b>         | <b>3.00</b>         |
| <b>Total Non-Interest Bearing Cash - USD</b>                                          |                  | <b>3.00</b>         | <b>3.00</b>         |
| <b><i>Receivables - Other - USD</i></b>                                               |                  |                     |                     |
| United States dollar                                                                  | 0.000            | 1,906.25            | 1,906.25            |
| Pending trade sales: United States dollar                                             | 0.000            | 1,317,442.26        | 1,317,442.26        |
| <b>Total - all currencies</b>                                                         |                  | <b>1,319,348.51</b> | <b>1,319,348.51</b> |
| <b>Total Receivables - Other - USD</b>                                                |                  | <b>1,319,348.51</b> | <b>1,319,348.51</b> |
| <b><i>U.S. Government Securities</i></b>                                              |                  |                     |                     |
| <b>United States - USD</b>                                                            |                  |                     |                     |
| UNITED STATES OF AMER TREAS BONDS 2.5% 02-15-2045<br>SEDOL: BVVT273                   | 1,825,000.000    | 1,960,583.98        | 1,267,733.40        |
| UNITED STATES OF AMER TREAS BONDS 2.875% 05-15-2052<br>SEDOL: BPSLLZ1                 | 14,380,000.000   | 11,989,905.42       | 10,073,864.13       |
| UNITED STATES OF AMER TREAS BONDS 3% DUE08-15-2052<br>SEDOL: BQHM4F3                  | 2,855,000.000    | 2,361,836.70        | 2,051,919.73        |
| UNITED STATES TREAS BDS 2.25% DUE<br>08-15-2046 SEDOL: BZ56WJ0                        | 10,960,000.000   | 8,119,755.32        | 7,084,612.50        |
| UNITED STATES TREAS BDS BD 3.125% DUE 02-15-2043 REG<br>SEDOL: B89T3Q0                | 3,345,000.000    | 2,694,840.97        | 2,645,293.94        |
| UNITED STATES TREAS BDS DTD 00305 4.75% 05-15-2054<br>SEDOL: BQSB5H8                  | 1,510,000.000    | 1,564,491.40        | 1,469,654.69        |
| UNITED STATES TREAS BDS WIT 1 7/8 08/15/41 1.75% DUE<br>08-15-2041 REG SEDOL: BLDBLR0 | 9,615,000.000    | 6,980,617.15        | 6,233,599.78        |
| UNITED STATES TREAS BDS 00245 2.875% DUE 08-15-2045 REG<br>SEDOL: BYSJ1Z8             | 1,785,000.000    | 1,315,028.76        | 1,318,110.94        |
| UNITED STATES TREAS BDS 2% 11-15-2041<br>SEDOL: BPBMDF5                               | 17,380,000.000   | 16,233,158.38       | 11,683,297.61       |

\*\* All or a portion of this security participates in Securities Lending.

**Defined Benefit Plans MITA**  
**EIN: 62-1407069 Plan: 006**  
**Schedule H, Line 4i - Schedule of Assets Held at Year End**  
**Year Ending 31 December 2024**

| Security Description / Asset ID                                 | Shares/Par Value | Historical Cost      | Current Value        |
|-----------------------------------------------------------------|------------------|----------------------|----------------------|
| <i>U.S. Government Securities</i>                               |                  |                      |                      |
| <b>United States - USD</b>                                      |                  |                      |                      |
| UNITED STATES TREAS BDS 3.0% DUE 08-15-2048<br>SEDOL: BFZLQN7   | 4,860,000.000    | 3,927,460.97         | 3,554,634.38         |
| UNITED STATES TREAS BDS 3% DUE 05-15-2047 REG<br>SEDOL: BF0T9Z9 | 1,895,000.000    | 1,441,240.47         | 1,402,225.98         |
| WI TREASURY SEC 3.375% DUE 11-15-2048 REG<br>SEDOL: BGRW851     | 7,760,000.000    | 6,415,571.63         | 6,069,471.89         |
| <b>Total United States - USD</b>                                |                  | <b>65,004,491.15</b> | <b>54,854,418.97</b> |
| <b>Total U.S. Government Securities</b>                         |                  | <b>65,004,491.15</b> | <b>54,854,418.97</b> |
| <i>Corporate Debt Instruments - Preferred</i>                   |                  |                      |                      |
| <b>United States - USD</b>                                      |                  |                      |                      |
| DTE ELEC CO 4.3% DUE 07-01-2044<br>SEDOL: BNZC562               | 255,000.000      | 258,272.55           | 215,058.61           |
| DUKE ENERGY PROGRESS LLC 3.6% 09-15-2047<br>SEDOL: BF58H68      | 310,000.000      | 306,878.04           | 225,792.40           |
| DUKE ENERGY 4.15% DUE 12-01-2044<br>SEDOL: BSPCBB4              | 135,000.000      | 134,538.30           | 109,951.23           |
| GA PWR CO SR NT SER 2012A 4.3 DUE 03-15-2042<br>SEDOL: B78K6L3  | 358,000.000      | 370,416.08           | 304,702.32           |
| GEORGIA PWR CO 4.3% DUE 03-15-2043<br>SEDOL: B9LV101            | 290,000.000      | 283,393.20           | 242,529.27           |
| PPL ELEC UTILS 4.125% DUE 06-15-2044<br>SEDOL: BN7DSM0          | 140,000.000      | 140,178.56           | 116,529.41           |
| PUB SVC ELEC GAS FIXED 2.7% DUE 05-01-2050<br>SEDOL: BMVX324    | 220,000.000      | 219,102.40           | 134,435.33           |
| PUBLIC SERVICE ELECTRIC 4.05% DUE 05-01-2048<br>SEDOL: BF4NQX4  | 355,000.000      | 352,802.55           | 282,535.21           |
| UNION ELEC CO 4.0% DUE 04-01-2048<br>SEDOL: BFY3BS4             | 195,000.000      | 194,314.09           | 151,632.82           |
| <b>Total United States - USD</b>                                |                  | <b>2,259,895.77</b>  | <b>1,783,166.60</b>  |
| <b>Total Corporate Debt Instruments - Preferred</b>             |                  | <b>2,259,895.77</b>  | <b>1,783,166.60</b>  |

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**Defined Benefit Plans MITA**  
**EIN: 62-1407069 Plan: 006**  
**Schedule H, Line 4i - Schedule of Assets Held at Year End**  
**Year Ending 31 December 2024**

| Security Description / Asset ID                                        | Shares/Par Value | Historical Cost     | Current Value       |
|------------------------------------------------------------------------|------------------|---------------------|---------------------|
| <i>Corporate Debt Instruments - Other</i>                              |                  |                     |                     |
| <b>Australia - USD</b>                                                 |                  |                     |                     |
| BHP BILLITON FIN USA LTD 5.25% 09-08-2033<br>SEDOL: BRJRLC9            | 135,000.000      | 128,255.40          | 135,692.94          |
| BHP BILLITON FIN USA LTD 5.5% 09-08-2053<br>SEDOL: BRJRLD0             | 60,000.000       | 62,341.20           | 58,655.86           |
| <b>Total Australia - USD</b>                                           |                  | <b>190,596.60</b>   | <b>194,348.80</b>   |
| <b>Belgium - USD</b>                                                   |                  |                     |                     |
| ANHEUSER BUSCH INBEV WORLDWIDE INC 5.45% 01-23-2039<br>SEDOL: BJ555S5  | 225,000.000      | 218,995.70          | 225,594.50          |
| ANHEUSER-BUSCH COS LLC CORP 4.7% 02-01-2036<br>SEDOL: BK5XW52          | 310,000.000      | 319,492.90          | 293,870.46          |
| ANHEUSER-BUSCH COS LLC CORP 4.9% 02-01-2046<br>SEDOL: BJXS2M9          | 610,000.000      | 626,802.27          | 555,184.77          |
| <b>Total Belgium - USD</b>                                             |                  | <b>1,165,290.87</b> | <b>1,074,649.73</b> |
| <b>Canada - USD</b>                                                    |                  |                     |                     |
| ENBRIDGE INC FIXED 4.5% DUE 06-10-2044<br>SEDOL: BYMLKX1               | 165,000.000      | 159,987.57          | 136,147.99          |
| TRANSCANADA 6.2% DUE 10-15-2037<br>SEDOL: B287YY8                      | 480,000.000      | 579,358.65          | 494,843.63          |
| <b>Total Canada - USD</b>                                              |                  | <b>739,346.22</b>   | <b>630,991.62</b>   |
| <b>France - USD</b>                                                    |                  |                     |                     |
| TOTAL CAP INTL 3.127% DUE 05-29-2050 REG<br>SEDOL: BMYC5X3             | 390,000.000      | 390,000.00          | 255,884.55          |
| TOTALENERGIES CAPITAL S.A. 5.638% 04-05-2064<br>SEDOL: BPW6WP9         | 195,000.000      | 195,000.00          | 186,826.85          |
| <b>Total France - USD</b>                                              |                  | <b>585,000.00</b>   | <b>442,711.40</b>   |
| <b>Ireland - USD</b>                                                   |                  |                     |                     |
| AERCAP IRELAND CAPITAL DAC GTD SR NT 3.4% 10-29-2033<br>SEDOL: BNVW1W4 | 200,000.000      | 155,778.00          | 170,383.06          |
| <b>Total Ireland - USD</b>                                             |                  | <b>155,778.00</b>   | <b>170,383.06</b>   |

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**Defined Benefit Plans MITA**  
**EIN: 62-1407069 Plan: 006**  
**Schedule H, Line 4i - Schedule of Assets Held at Year End**  
**Year Ending 31 December 2024**

| Security Description / Asset ID                         | Shares/Par Value | Historical Cost   | Current Value     |
|---------------------------------------------------------|------------------|-------------------|-------------------|
| <b>Corporate Debt Instruments - Other</b>               |                  |                   |                   |
| <b>Italy - USD</b>                                      |                  |                   |                   |
| PVTPL ENI S P A 5.95%<br>CUSIP: 26874RAP3 05-15-2054    | 200,000.000      | 197,656.00        | 192,492.01        |
| <b>Total Italy - USD</b>                                |                  | <b>197,656.00</b> | <b>192,492.01</b> |
| <b>Norway - USD</b>                                     |                  |                   |                   |
| EQUINOR ASA 3.625% DUE 04-06-2040<br>SEDOL: BM8SST4     | 615,000.000      | 609,292.80        | 497,327.47        |
| STATOIL ASA 3.95 DUE 05-15-2043<br>SEDOL: BLSP5D1       | 165,000.000      | 161,309.50        | 135,284.87        |
| <b>Total Norway - USD</b>                               |                  | <b>770,602.30</b> | <b>632,612.34</b> |
| <b>United Kingdom - USD</b>                             |                  |                   |                   |
| ASTRAZENECA PLC 6.45% DUE 09-15-2037<br>SEDOL: B7FFL50  | 200,000.000      | 263,785.80        | 219,451.27        |
| GLAXOSMITHKLINE 6.375% DUE 05-15-2038<br>SEDOL: B88GFC2 | 130,000.000      | 158,184.00        | 140,908.25        |
| HSBC HLDGS PLC 6.5% DUE 09-15-2037<br>SEDOL: BFN0JF9    | 205,000.000      | 251,741.63        | 210,679.44        |
| HSBC HLDGS PLC 6.8% DUE 06-01-2038<br>SEDOL: B39GHK8    | 130,000.000      | 178,786.40        | 139,183.02        |
| VODAFONE GROUP PLC 5.75%<br>SEDOL: BNZHZ56 06-28-2054   | 135,000.000      | 134,054.43        | 130,331.56        |
| <b>Total United Kingdom - USD</b>                       |                  | <b>986,552.26</b> | <b>840,553.54</b> |
| <b>United States - USD</b>                              |                  |                   |                   |
| ABBOTT LABS 4.75% DUE 11-30-2036<br>SEDOL: BYVQ5V0      | 355,000.000      | 368,353.69        | 343,058.16        |
| ABBVIE INC FIXED 4.5% DUE 05-14-2035<br>SEDOL: BXDZFY1  | 630,000.000      | 651,358.74        | 590,155.62        |
| ABBVIE INC 4.55% DUE 03-15-2035 REG<br>SEDOL: BMWB8H7   | 305,000.000      | 312,868.34        | 286,836.80        |
| ABBVIE INC 4.875% DUE 11-14-2048<br>SEDOL: BGQW2K5      | 265,000.000      | 262,198.95        | 238,291.61        |
| ABBVIE INC 5.4% 03-15-2054<br>SEDOL: BSNSFM3            | 90,000.000       | 89,691.30         | 86,659.77         |

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**Defined Benefit Plans MITA**  
**EIN: 62-1407069 Plan: 006**  
**Schedule H, Line 4i - Schedule of Assets Held at Year End**  
**Year Ending 31 December 2024**

| Security Description / Asset ID                                                 | Shares/Par Value | Historical Cost | Current Value |
|---------------------------------------------------------------------------------|------------------|-----------------|---------------|
| <b>Corporate Debt Instruments - Other</b>                                       |                  |                 |               |
| <b>United States - USD</b>                                                      |                  |                 |               |
| ABBVIE INC 5.5% 03-15-2064<br>SEDOL: BSNTZ60                                    | 70,000.000       | 69,738.20       | 66,987.67     |
| AEP TRANSP CO LLC 3.75% DUE 12-01-2047<br>CUSIP: 00115AAH2                      | 140,000.000      | 140,260.02      | 103,980.84    |
| AIR PRODS & CHEMS FIXED 2.7% DUE 05-15-2040<br>SEDOL: BKX8JV4                   | 135,000.000      | 129,203.65      | 96,374.38     |
| AMAZON COM INC NT 3.25% 05-12-2061<br>SEDOL: BNVX8J3                            | 420,000.000      | 362,048.80      | 273,837.64    |
| AMAZON COM INC 2.7% DUE 06-03-2060<br>CUSIP: 023135BU9                          | 290,000.000      | 286,566.40      | 166,696.23    |
| AMERICAN INTERNATIONAL GROUP INC BNDS 4.8% DUE 07-10-2045<br>REG SEDOL: BXSSDV8 | 90,000.000       | 89,334.90       | 80,560.79     |
| AMGEN INC FIXED 3.15% 02-21-2040<br>CUSIP: 031162CR9                            | 680,000.000      | 689,266.80      | 507,230.72    |
| AMGEN INC 2.77% 09-01-2053<br>SEDOL: BN0THC8                                    | 248,000.000      | 186,037.75      | 144,660.93    |
| AMGEN INC 4.4% 05-01-2045<br>CUSIP: 031162BZ2                                   | 200,000.000      | 197,456.32      | 166,020.45    |
| AMGEN INC 5.65% 03-02-2053<br>SEDOL: BMTY5X4                                    | 110,000.000      | 109,841.60      | 106,109.13    |
| ANTHEM INC 4.55% 03-01-2048<br>SEDOL: BGB6FS1                                   | 150,000.000      | 149,488.50      | 123,351.36    |
| ANTHEM INC 4.65% DUE 01-15-2043<br>SEDOL: BLSP6D8                               | 350,000.000      | 354,352.90      | 304,128.34    |
| APPALACHIAN PWR CO 7% DUE 04-01-2038<br>SEDOL: B2QH9T0                          | 150,000.000      | 185,173.50      | 164,969.23    |
| APPLE INC 2.65% DUE 05-11-2050 REG<br>CUSIP: 037833DW7                          | 935,000.000      | 897,980.45      | 582,875.29    |
| AT&T INC 3.55% DUE 09-15-2055<br>SEDOL: BNSLT2                                  | 1,315,000.000    | 997,452.08      | 887,241.30    |
| AT&T INC 3.8% 12-01-2057<br>CUSIP: 00206RMN9                                    | 433,000.000      | 420,988.28      | 299,350.70    |
| AVALONBAY CMNTYS 5.35% 06-01-2034<br>SEDOL: BSQJ9J4                             | 230,000.000      | 229,303.10      | 231,078.83    |
| BANK AMER CORP 3.311% DUE 04-22-2042<br>CUSIP: 06051GJW0                        | 290,000.000      | 280,178.80      | 217,068.97    |

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**Defined Benefit Plans MITA**  
**EIN: 62-1407069 Plan: 006**  
**Schedule H, Line 4i - Schedule of Assets Held at Year End**  
**Year Ending 31 December 2024**

| Security Description / Asset ID                                                            | Shares/Par Value | Historical Cost | Current Value |
|--------------------------------------------------------------------------------------------|------------------|-----------------|---------------|
| <b>Corporate Debt Instruments - Other</b>                                                  |                  |                 |               |
| <b>United States - USD</b>                                                                 |                  |                 |               |
| BANK AMER CORP 4.083% 03-20-2051<br>CUSIP: 06051GJA8                                       | 150,000.000      | 139,252.39      | 117,636.97    |
| BANK OF AMERICA CORPORATION 4.244% 04-24-2038<br>CUSIP: 06051GGM5                          | 460,000.000      | 457,109.80      | 409,491.13    |
| BANK OF AMERICA CORPORATION 6.11% 01-29-2037<br>SEDOL: B83ZNK8                             | 115,000.000      | 129,371.55      | 119,286.83    |
| BERKSHIRE HATHAWAY ENERGY CO 2.85% 05-15-2051<br>CUSIP: 084659BC4                          | 315,000.000      | 314,612.55      | 191,617.10    |
| BERKSHIRE HATHAWAY FINANCE CORP 3.85% 03-15-2052<br>SEDOL: BKP9NP7                         | 260,000.000      | 259,082.20      | 197,010.58    |
| BIOGEN INC SR NT 3.25% 02-15-2051<br>SEDOL: BPQW6H3                                        | 313,000.000      | 301,509.80      | 202,149.62    |
| BK NEW YORK MELLON CORP MEDIUM TERM TRANCHE # TR 00038<br>4.706% 02-01-2034 SEDOL: BP9N2W0 | 415,000.000      | 415,000.00      | 398,961.43    |
| BLACKROCK FUNDING INC 5.25% 03-14-2054<br>SEDOL: BPBJYZ3                                   | 55,000.000       | 53,719.21       | 52,040.22     |
| BLACKROCK FUNDING INC. 5.35% 01-08-2055<br>SEDOL: BRC16H8                                  | 120,000.000      | 121,503.60      | 114,773.51    |
| BOEING CO FIXED 5.705% DUE 05-01-2040<br>SEDOL: BM8XFQ5                                    | 125,000.000      | 125,000.00      | 119,031.35    |
| BOEING CO 3.75% DUE 02-01-2050<br>SEDOL: BJGV2H0                                           | 140,000.000      | 138,817.00      | 95,833.29     |
| BOEING CO 6.858% 05-01-2054<br>SEDOL: BV97X76                                              | 155,000.000      | 155,000.00      | 165,062.10    |
| BP CAP MKTS AMER INC 4.893% 09-11-2033<br>SEDOL: BMCJWJ1                                   | 125,000.000      | 124,997.50      | 120,947.80    |
| BP CAP MKTS AMER 2.772% DUE 11-10-2050<br>SEDOL: BMF3XC0                                   | 590,000.000      | 589,958.70      | 354,497.36    |
| BRISTOL MYERS FIXED 4.25% DUE 10-26-2049<br>SEDOL: BMW2G98                                 | 80,000.000       | 85,366.72       | 64,744.73     |
| BRISTOL MYERS SQUIBB CO 6.4% 11-15-2063<br>SEDOL: BNDS35                                   | 290,000.000      | 292,945.70      | 311,201.28    |
| BURL NORTHN SANTA 4.45% DUE 03-15-2043<br>SEDOL: B7YGHX4                                   | 270,000.000      | 299,435.40      | 234,957.88    |
| BURLINGTON NORTHN SANTA FE LLC 5.15 09-01-2043<br>SEDOL: BD00GW4                           | 70,000.000       | 69,017.90       | 67,062.00     |

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**Defined Benefit Plans MITA**  
**EIN: 62-1407069 Plan: 006**  
**Schedule H, Line 4i - Schedule of Assets Held at Year End**  
**Year Ending 31 December 2024**

| Security Description / Asset ID                                         | Shares/Par Value | Historical Cost | Current Value |
|-------------------------------------------------------------------------|------------------|-----------------|---------------|
| <b>Corporate Debt Instruments - Other</b>                               |                  |                 |               |
| <b>United States - USD</b>                                              |                  |                 |               |
| BURLINGTON NORTHN SANTA FE LLC 4.9 DUE 04-01-2044 REG<br>SEDOL: BKH0LR6 | 140,000.000      | 154,281.40      | 128,400.70    |
| BX COML MTG TR VAR RT 5.41043% DUE 11-13-2046<br>SEDOL: BT9N9D8         | 205,000.000      | 208,075.00      | 205,016.63    |
| CHARLES SCHWAB CORP 5.853% 05-19-2034<br>SEDOL: BP4YBS7                 | 210,000.000      | 210,000.00      | 216,359.11    |
| CHEVRON CORP NEW 2.978% DUE 05-11-2040<br>SEDOL: BLB4P80                | 240,000.000      | 240,000.00      | 178,057.53    |
| CIGNA CORP NEW FIXED 3.4% DUE 03-15-2050<br>SEDOL: BL6BBV1              | 50,000.000       | 47,400.00       | 32,924.72     |
| CIGNA GROUP 5.6% 02-15-2054<br>SEDOL: BNNK0Z2                           | 50,000.000       | 48,873.50       | 46,888.80     |
| CISCO SYS INC SR NT 5.9 DUE 02-15-2039 REG<br>CUSIP: 17275RAD4          | 145,000.000      | 186,977.37      | 153,301.73    |
| CITIGROUP INC 2.904% 11-03-2042<br>SEDOL: BNHX0S0                       | 240,000.000      | 240,000.00      | 168,272.03    |
| CITIGROUP INC 4.75% DUE 05-18-2046<br>SEDOL: BDGLCL2                    | 185,000.000      | 186,071.55      | 162,714.96    |
| CITIGROUP INC 5.316% 09-26-2020 REG<br>SEDOL: BLCBFR9                   | 320,000.000      | 320,000.00      | 308,319.83    |
| CITIGROUP INC 8.125% DUE 07-15-2039<br>SEDOL: B8G0DX3                   | 140,000.000      | 222,432.00      | 172,902.91    |
| COCA COLA CO FIXED 2.5% DUE 06-01-2040<br>SEDOL: BLB7Z01                | 395,000.000      | 394,806.45      | 276,863.77    |
| COMCAST CORP NEW FIXED 3.969% DUE 11-01-2047<br>SEDOL: BFWQ3V2          | 230,000.000      | 207,177.10      | 174,418.45    |
| COMCAST CORP NEW 2.937% 11-01-2056<br>CUSIP: 20030NDU2                  | 1,029,000.000    | 805,326.27      | 601,085.88    |
| COMCAST CORP NEW 2.987% 11-01-2063<br>SEDOL: BQB4RF6                    | 78,000.000       | 61,366.60       | 44,094.77     |
| COMCAST CORP 5.5% DUE 05-15-2064<br>SEDOL: BQPF829                      | 90,000.000       | 89,577.00       | 84,079.11     |
| COMMONWEALTH EDISON CO 3.85% 03-15-2052<br>SEDOL: BPQG0Y0               | 110,000.000      | 109,805.30      | 81,495.34     |
| CONOCOPHILLIPS CO FIXED 4.025% DUE 03-15-2062<br>SEDOL: BPG4CH1         | 400,000.000      | 514,867.72      | 289,392.64    |

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**Defined Benefit Plans MITA**  
**EIN: 62-1407069 Plan: 006**  
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**Year Ending 31 December 2024**

| Security Description / Asset ID                                  | Shares/Par Value | Historical Cost | Current Value |
|------------------------------------------------------------------|------------------|-----------------|---------------|
| <b>Corporate Debt Instruments - Other</b>                        |                  |                 |               |
| <b>United States - USD</b>                                       |                  |                 |               |
| CONS EDISON CO N Y INC 4.45 DUE 03-15-2044 REG<br>SEDOL: BJZD6Q4 | 270,000.000      | 289,813.42      | 230,833.06    |
| CONS EDISON CO N Y 3.95% DUE 03-01-2043<br>SEDOL: B8MJ1K7        | 465,000.000      | 446,699.67      | 372,408.93    |
| CONSUMERS ENERGY 4.2% DUE 09-01-2052<br>SEDOL: BNYNTF3           | 65,000.000       | 64,953.85       | 52,448.34     |
| CORNING INC 5.45% DUE 11-15-2079<br>SEDOL: BJXCLS0               | 115,000.000      | 115,440.80      | 104,155.09    |
| CSX CORP 3.8% DUE 11-01-2046<br>SEDOL: BYMPHS7                   | 455,000.000      | 432,380.97      | 350,382.40    |
| CVS HEALTH CORP 4.125% DUE 04-01-2040 REG<br>SEDOL: BM6CF53      | 62,000.000       | 60,954.68       | 48,631.49     |
| CVS HEALTH CORP 4.78% DUE 03-25-2038<br>SEDOL: BF4JK96           | 620,000.000      | 547,641.10      | 536,179.43    |
| DEVON ENERGY CORP 5.75% 09-15-2054<br>SEDOL: BSQNDD2             | 285,000.000      | 284,663.70      | 259,111.89    |
| DIAMONDBACK ENERGY INC 5.75% 04-18-2054<br>SEDOL: BMDPVW4        | 230,000.000      | 229,574.15      | 216,260.31    |
| DIAMONDBACK ENERGY INC 5.9% 04-18-2064<br>SEDOL: BMDPVL3         | 140,000.000      | 139,935.60      | 131,462.91    |
| DISNEY WALT CO 2.75% DUE 09-01-2049<br>SEDOL: BJJJTB4            | 165,000.000      | 159,678.75      | 103,111.86    |
| DISNEY WALT CO 3.5% DUE 05-13-2040 REG<br>SEDOL: BMFKW68         | 210,000.000      | 174,710.50      | 168,536.29    |
| DISNEY WALT CO 3.6% DUE 01-13-2051 REG<br>SEDOL: BMDHPZ1         | 210,000.000      | 229,844.15      | 154,699.01    |
| DOMINION RES INC 4.7% DUE 12-01-2044<br>SEDOL: BSR9GC9           | 75,000.000       | 75,460.03       | 63,705.43     |
| DOW CHEMICAL CO 4.375% DUE 11-15-2042<br>SEDOL: BFZDDH6          | 175,000.000      | 192,214.50      | 143,648.97    |
| DOWDUPONT INC 5.319% DUE 11-15-2038<br>SEDOL: BGL9DP3            | 313,000.000      | 329,770.32      | 314,035.28    |
| DUKE ENERGY 3.95% 03-15-2048<br>SEDOL: BFYS3G1                   | 190,000.000      | 188,225.71      | 145,771.10    |
| DUKE ENERGY 4 DUE 09-30-2042<br>SEDOL: B8GF9H4                   | 190,000.000      | 167,749.10      | 154,462.48    |

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**Year Ending 31 December 2024**

| Security Description / Asset ID                                      | Shares/Par Value | Historical Cost | Current Value |
|----------------------------------------------------------------------|------------------|-----------------|---------------|
| <b>Corporate Debt Instruments - Other</b>                            |                  |                 |               |
| <b>United States - USD</b>                                           |                  |                 |               |
| ELEVANCE HLTH INC 4.65% DUE 08-15-2044<br>SEDOL: BR17WN5             | 330,000.000      | 340,699.97      | 283,374.81    |
| ELI LILLY AND COMPANY 5.0% 02-09-2054<br>SEDOL: BSHRLF1              | 170,000.000      | 169,032.70      | 156,336.04    |
| EMERSON ELEC CO 2.8% DUE<br>12-21-2051/12-21-2021 BEO SEDOL: BLDBF90 | 95,000.000       | 94,789.10       | 58,811.99     |
| ENTERPRISE PRODS FIXED 4.9% DUE 05-15-2046<br>SEDOL: BYZ5J66         | 230,000.000      | 249,090.25      | 205,243.66    |
| ENTERPRISE PRODS OPER LLC 4.8% 02-01-2049<br>SEDOL: BF39VN8          | 75,000.000       | 74,542.50       | 64,637.11     |
| ENTERPRISE PRODS 5.1% DUE 02-15-2045<br>SEDOL: BJT1608               | 110,000.000      | 113,122.35      | 101,479.18    |
| EQUINIX INC FIXED 2.95% 09-15-2051<br>CUSIP: 29444UBM7               | 365,000.000      | 362,948.70      | 224,280.00    |
| EXELON CORP 5.1% DUE 06-15-2045<br>SEDOL: BYVF9K4                    | 250,000.000      | 260,094.87      | 226,567.91    |
| EXELON GENERATION SR NT 6.25 DUE 10-01-2039<br>SEDOL: B4LVKD2        | 270,000.000      | 301,357.80      | 281,706.12    |
| EXELON GENERATION 5.6 DUE 06-15-2042<br>SEDOL: B715FY1               | 95,000.000       | 97,725.43       | 91,719.91     |
| EXXON MOBIL CORP 3.452% DUE 04-15-2051 REG<br>SEDOL: BMDSC31         | 390,000.000      | 390,000.00      | 273,803.09    |
| EXXON MOBIL CORP 4.227% DUE 03-19-2040<br>SEDOL: BL68H58             | 620,000.000      | 628,321.26      | 544,437.28    |
| FEDEX CORP 4.05% DUE 02-15-2048<br>SEDOL: BF42ZD4                    | 300,000.000      | 283,961.20      | 229,867.74    |
| FL PWR & LT CO 3.7% 12-01-2047<br>SEDOL: BF3RG04                     | 140,000.000      | 138,892.60      | 105,079.85    |
| FL PWR & LT CO 4.05% DUE 06-01-2042<br>SEDOL: B8C07L3                | 140,000.000      | 139,940.09      | 115,497.00    |
| FL PWR & LT CO 5.95% DUE 02-01-2038<br>SEDOL: B2Q0F35                | 315,000.000      | 399,870.45      | 329,773.89    |
| FLORIDA PWR CORP 3.85% DUE 11-15-2042<br>SEDOL: B8HN579              | 255,000.000      | 250,172.85      | 200,990.64    |
| GEN DYNAMICS CORP FIXED 4.25% DUE 04-01-2040<br>SEDOL: BMFFMZ2       | 165,000.000      | 181,938.09      | 144,147.80    |

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**Year Ending 31 December 2024**

| Security Description / Asset ID                               | Shares/Par Value | Historical Cost | Current Value |
|---------------------------------------------------------------|------------------|-----------------|---------------|
| <b>Corporate Debt Instruments - Other</b>                     |                  |                 |               |
| <b>United States - USD</b>                                    |                  |                 |               |
| GILEAD SCIENCES 4.15% DUE 03-01-2047<br>CUSIP: 375558BK8      | 195,000.000      | 205,094.44      | 156,490.40    |
| GILEAD SCIENCES 4.75% DUE 03-01-2046<br>CUSIP: 375558BD4      | 260,000.000      | 267,327.02      | 229,303.21    |
| GILEAD SCIENCES 4.8% DUE 04-01-2044<br>SEDOL: BKHDRD3         | 75,000.000       | 74,854.50       | 67,187.90     |
| GOLDMAN SACHS GROUP INC 4.411% 04-23-2039<br>CUSIP: 38141GXA7 | 50,000.000       | 48,392.50       | 44,119.01     |
| GOLDMAN SACHS GROUP INC 5.33% 07-23-2035<br>SEDOL: BRC1656    | 120,000.000      | 120,000.00      | 117,913.42    |
| GOLDMAN SACHS 6.75% DUE 10-01-2037<br>SEDOL: B9CMD63          | 780,000.000      | 942,030.54      | 838,375.64    |
| HOME DEPOT INC 3.3% DUE 04-15-2040 REG<br>SEDOL: BMQ5MC8      | 205,000.000      | 203,183.70      | 159,862.20    |
| HOME DEPOT INC 4.875 DUE 02-15-2044<br>SEDOL: BDD8L53         | 150,000.000      | 147,730.58      | 137,327.90    |
| HOME DEPOT INC 5.3% 06-25-2054<br>SEDOL: BPLZ1P0              | 160,000.000      | 158,095.41      | 153,471.00    |
| JPMORGAN CHASE & CO 3.882% 07-24-2038<br>SEDOL: BF348B0       | 325,000.000      | 294,092.50      | 277,503.30    |
| JPMORGAN CHASE & CO 4.032% 07-24-2048<br>CUSIP: 46647PAK2     | 460,000.000      | 459,116.08      | 363,185.85    |
| JPMORGAN CHASE & CO 5.534% 11-29-2045<br>SEDOL: BR4Y0J5       | 95,000.000       | 95,000.00       | 92,810.80     |
| JPMORGAN CHASE & CO. 5.336% 01-23-2035<br>SEDOL: BQWR431      | 80,000.000       | 79,711.25       | 79,633.36     |
| JPMORGAN CHASE & 5.6% DUE 07-15-2041<br>SEDOL: B6QKFT9        | 195,000.000      | 225,189.90      | 196,877.52    |
| KINDER MORGAN INC 5.55% DUE 06-01-2045<br>SEDOL: BSXNP73      | 350,000.000      | 361,706.03      | 327,024.25    |
| KINDER MORGAN 5.5 DUE 03-01-2044<br>SEDOL: BJZXT76            | 275,000.000      | 275,417.80      | 254,971.91    |
| KROGER CO 4.45% DUE 02-01-2047<br>SEDOL: BYND735              | 55,000.000       | 65,143.65       | 45,304.52     |
| KROGER CO 5.65% 09-15-2064<br>SEDOL: BSFVBD3                  | 200,000.000      | 199,110.00      | 188,378.29    |

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**Year Ending 31 December 2024**

| Security Description / Asset ID                                 | Shares/Par Value | Historical Cost | Current Value |
|-----------------------------------------------------------------|------------------|-----------------|---------------|
| <b>Corporate Debt Instruments - Other</b>                       |                  |                 |               |
| <b>United States - USD</b>                                      |                  |                 |               |
| LOCKHEED MARTIN CORP 4.09% 09-15-2052<br>SEDOL: BF38WR6         | 265,000.000      | 265,969.90      | 209,884.06    |
| LOCKHEED MARTIN 3.8% DUE 03-01-2045<br>SEDOL: BVYPPC4           | 105,000.000      | 100,039.87      | 82,846.28     |
| LOCKHEED MARTIN 4.07% DUE 12-15-2042<br>SEDOL: BBD6G92          | 145,000.000      | 134,183.93      | 121,015.17    |
| LOCKHEED MARTIN 4.7% DUE 05-15-2046<br>SEDOL: BDB6944           | 85,000.000       | 83,741.15       | 76,083.36     |
| LOWES COS INC 4.05% DUE 05-03-2047<br>SEDOL: BYWC120            | 135,000.000      | 132,907.23      | 104,903.18    |
| LOWES COS INC 5% DUE 04-15-2040<br>SEDOL: BMH1W03               | 320,000.000      | 318,505.60      | 299,415.68    |
| MARSH & MCLENNAN 4.9% DUE 03-15-2049<br>SEDOL: BJ2NYF2          | 255,000.000      | 254,727.15      | 228,562.47    |
| MCDONALDS CORP 4.45% DUE 03-01-2047 REG<br>SEDOL: BDFC7W2       | 160,000.000      | 154,969.53      | 134,431.38    |
| MCDONALDS CORP FIXED 4.6% DUE 05-26-2045<br>SEDOL: BY3R500      | 230,000.000      | 240,896.25      | 199,638.83    |
| MERCK & CO INC 2.9% DUE 12-10-2061<br>SEDOL: BLHM7R1            | 50,000.000       | 49,859.00       | 28,730.94     |
| MERCK & CO INC NEW FIXED 2.45% DUE 06-24-2050<br>SEDOL: BMBQJZ8 | 90,000.000       | 87,880.50       | 51,875.77     |
| MERCK & CO INC NEW 3.7% DUE 02-10-2045<br>SEDOL: BVG7BV9        | 125,000.000      | 122,860.36      | 96,906.74     |
| MERRILL LYNCH & CO 7.75% DUE 05-14-2038<br>SEDOL: BBMT8T6       | 145,000.000      | 181,797.18      | 169,432.93    |
| META PLATFORMS INC FIXED 4.45% DUE 08-15-2052<br>SEDOL: BMGK096 | 65,000.000       | 57,865.60       | 54,875.31     |
| META PLATFORMS INC 5.4% 08-15-2054<br>SEDOL: BT3NPB4            | 155,000.000      | 154,381.55      | 150,200.16    |
| META PLATFORMS INC 5.55% 08-15-2064<br>CUSIP: 30303M8W5         | 280,000.000      | 278,790.40      | 274,124.89    |
| METLIFE INC STEP CPN 4.721% DUE 12-15-2044<br>SEDOL: BRF1CN3    | 15,000.000       | 15,137.70       | 13,256.18     |
| METLIFE INC 4.875% DUE 11-13-2043<br>SEDOL: BGD XK74            | 120,000.000      | 138,088.80      | 109,053.73    |

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| Security Description / Asset ID                             | Shares/Par Value | Historical Cost | Current Value |
|-------------------------------------------------------------|------------------|-----------------|---------------|
| <b>Corporate Debt Instruments - Other</b>                   |                  |                 |               |
| <b>United States - USD</b>                                  |                  |                 |               |
| METLIFE INC 5.7% DUE 06-15-2035<br>SEDOL: B0BXDC0           | 105,000.000      | 120,147.30      | 107,952.53    |
| METLIFE INC 5.875% DUE 02-06-2041<br>SEDOL: B4Z51H1         | 100,000.000      | 115,252.46      | 102,169.50    |
| MICROSOFT CORP 2.525% DUE 06-01-2050 BEO<br>SEDOL: BM9DJ73  | 55,000.000       | 54,810.25       | 33,949.01     |
| MICROSOFT CORP 4.1% DUE 02-06-2037<br>CUSIP: 594918BZ6      | 210,000.000      | 222,417.88      | 196,154.04    |
| MIDAMERICAN ENERGY 6.125% DUE 04-01-2036<br>SEDOL: B1FTHZ2  | 250,000.000      | 326,162.50      | 263,136.67    |
| MORGAN STANLEY 3.971% 07-22-2038<br>SEDOL: BZ9P947          | 145,000.000      | 145,712.17      | 123,368.96    |
| MORGAN STANLEY 4.3% DUE 01-27-2045<br>SEDOL: BVRZ811        | 70,000.000       | 67,271.22       | 57,749.41     |
| MORGAN STANLEY 5.831% 04-19-2035<br>SEDOL: BLDCHK8          | 200,000.000      | 200,430.00      | 204,173.65    |
| MORGAN STANLEY 6.375% DUE 07-24-2042<br>SEDOL: B98G6S2      | 65,000.000       | 88,902.70       | 70,315.80     |
| NEW YORK LIFE INS 6.75% DUE 11-15-2039<br>SEDOL: B4VBR19    | 295,000.000      | 398,177.37      | 327,168.96    |
| NORFOLK SOUTHN CORP 3.155% DUE 05-15-2055<br>SEDOL: BN79088 | 230,000.000      | 150,673.00      | 145,658.48    |
| NORFOLK SOUTHN 3.05% DUE 05-15-2050<br>SEDOL: BL6L2C9       | 290,000.000      | 289,318.50      | 187,788.89    |
| NORTHROP GRUMMAN CORP 5.2% 06-01-2054<br>SEDOL: BS2G0M3     | 140,000.000      | 139,459.60      | 130,223.66    |
| NORTHROP GRUMMAN 4.03% DUE 10-15-2047<br>SEDOL: BF15KD1     | 50,000.000       | 58,246.00       | 39,282.04     |
| NORTHROP GRUMMAN 4.75% DUE 06-01-2043<br>SEDOL: BB9ZSW0     | 465,000.000      | 459,915.46      | 417,088.73    |
| NORTHWESTERN UNIV 2.64% DUE 12-01-2050<br>SEDOL: BLB6SV0    | 250,000.000      | 250,000.00      | 155,519.40    |
| NSTAR ELEC CO 4.4% DUE 03-01-2044<br>SEDOL: BKJ9BP9         | 190,000.000      | 192,942.05      | 160,551.44    |
| ORACLE CORP 3.95% DUE 03-25-2051<br>SEDOL: BMYLXC5          | 125,000.000      | 92,137.50       | 92,664.05     |

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| Security Description / Asset ID                                                     | Shares/Par Value | Historical Cost | Current Value |
|-------------------------------------------------------------------------------------|------------------|-----------------|---------------|
| <b>Corporate Debt Instruments - Other</b>                                           |                  |                 |               |
| <b>United States - USD</b>                                                          |                  |                 |               |
| ORACLE CORP 4.125% DUE 05-15-2045<br>SEDOL: BWTM334                                 | 510,000.000      | 506,661.30      | 402,659.69    |
| ORACLE CORP 4% 11-15-2047<br>SEDOL: BD390R1                                         | 155,000.000      | 154,273.05      | 118,248.69    |
| OWENS CORNING 5.95% 06-15-2054<br>SEDOL: BNNRNW1                                    | 65,000.000       | 67,627.30       | 64,327.40     |
| PACIFICORP 5.5% 05-15-2054<br>SEDOL: BNBXR85                                        | 245,000.000      | 244,892.20      | 229,083.31    |
| PARKER-HANNIFIN CORP 4.45% 11-21-2044<br>SEDOL: BSPPVM4                             | 95,000.000       | 85,591.20       | 81,462.17     |
| PARKER-HANNIFIN FIXED 4.2% DUE 11-21-2034<br>SEDOL: BSPPVL3                         | 160,000.000      | 164,800.46      | 148,132.82    |
| PARTNERS HEALTHCARE SYS INC 3.192% DUE 07-01-2049<br>SEDOL: BL1NJJ6                 | 50,000.000       | 52,906.00       | 33,951.14     |
| PECO ENERGY CO 5.25% 09-15-2054<br>SEDOL: BTFK5B3                                   | 220,000.000      | 219,469.80      | 208,505.58    |
| PEPSICO INC 3.625% DUE 03-19-2050<br>CUSIP: 713448EU8                               | 130,000.000      | 129,316.20      | 96,933.47     |
| PFIZER INVESTMENT ENTER 5.3% 05-19-2053<br>SEDOL: BQ66T84                           | 320,000.000      | 319,523.20      | 300,095.69    |
| PHILIP MORRIS INTERNATIONAL INC 3.875% BDS DUE 08-21-2042<br>USD1000 SEDOL: B90G0K0 | 290,000.000      | 263,921.81      | 229,586.59    |
| PHILLIPS 66 3.3% DUE 03-15-2052<br>SEDOL: BNM6J09                                   | 310,000.000      | 307,715.30      | 200,018.77    |
| PHILLIPS 66 4.65% DUE 11-15-2034<br>SEDOL: BSPCBQ9                                  | 175,000.000      | 179,149.23      | 163,189.31    |
| PROLOGIS L P 5.25% 03-15-2054<br>SEDOL: BPDYZG4                                     | 60,000.000       | 59,318.40       | 56,052.01     |
| PUBLIC SERVICE CO OF COLORADO 4.5% 06-01-2052<br>SEDOL: BMH3RJ3                     | 65,000.000       | 64,290.85       | 53,815.78     |
| PVTPL MASSACHUSETTS MUT LIFE INS CO SURPLUS NT 3.375%<br>04-15-2050 SEDOL: BLB4M78  | 85,000.000       | 84,649.80       | 56,831.61     |
| PVTPL NESTLE HLDGS INC 3.9% 09-24-2038<br>SEDOL: BG0QJS0                            | 400,000.000      | 395,724.00      | 344,709.60    |
| PVTPL NORTHWESTERN MUT LIFE INS CO 3.625% 09-30-205<br>SEDOL: BJXLHN4               | 301,000.000      | 270,323.67      | 201,759.48    |

\*\* All or a portion of this security participates in Securities Lending.

**Defined Benefit Plans MITA**  
**EIN: 62-1407069 Plan: 006**  
**Schedule H, Line 4i - Schedule of Assets Held at Year End**  
**Year Ending 31 December 2024**

| Security Description / Asset ID                                               | Shares/Par Value | Historical Cost | Current Value |
|-------------------------------------------------------------------------------|------------------|-----------------|---------------|
| <b>Corporate Debt Instruments - Other</b>                                     |                  |                 |               |
| <b>United States - USD</b>                                                    |                  |                 |               |
| RTX CORPORATION 5.375% 02-27-2053<br>SEDOL: BQS6QG9                           | 355,000.000      | 354,368.10      | 337,617.57    |
| SHELL FIN US INC 4.375% 05-11-2045<br>SEDOL: BR4TTW6                          | 420,000.000      | 456,695.69      | 351,583.25    |
| SHELL INTL FIN B V GTD NT 5.5 DUE 03-25-2040<br>SEDOL: B4XNLW2                | 160,000.000      | 204,995.20      | 159,682.30    |
| SHELL INTL FIN B V 6.375% DUE 12-15-2038<br>SEDOL: B90FLN7                    | 130,000.000      | 172,061.25      | 141,537.93    |
| SOUTHERN CALIF EDISON CO 4.65 DUE 10-01-2043<br>SEDOL: BF6DYS3                | 180,000.000      | 178,761.60      | 156,165.29    |
| SOUTHWESTN ELEC 6.2% DUE 03-15-2040<br>SEDOL: B618D27                         | 100,000.000      | 126,638.00      | 103,005.33    |
| SOUTHWESTN PUB SVC FIXED 4.4% 11-15-2048<br>SEDOL: BGYKMF6                    | 240,000.000      | 238,452.00      | 194,744.36    |
| STARBUCKS CORP FIXED 4.45% 08-15-2049<br>CUSIP: 855244AU3                     | 120,000.000      | 119,788.80      | 98,364.98     |
| STARBUCKS CORP 3.5% DUE 11-15-2050<br>CUSIP: 855244BA6                        | 380,000.000      | 377,454.00      | 263,107.64    |
| STRYKER CORP 4.375 DUE 05-15-2044 REG<br>SEDOL: BM56JF4                       | 225,000.000      | 226,748.25      | 189,650.88    |
| T-MOBILE USA INC FIXED 5.65% DUE 01-15-2053<br>SEDOL: BN72M69                 | 245,000.000      | 244,350.75      | 237,659.91    |
| T-MOBILE USA INC 3.4% 10-15-2052<br>CUSIP: 87264ACT0                          | 575,000.000      | 553,971.45      | 384,411.52    |
| T-MOBILE USA INC 3.6% 11-15-2060<br>CUSIP: 87264ABY0                          | 115,000.000      | 116,079.85      | 76,162.28     |
| TEXAS INSTRS INC FIXED 5% 03-14-2053<br>SEDOL: BMF9DQ2                        | 150,000.000      | 149,491.50      | 137,622.35    |
| TEXAS INSTRUMENTS INC 5.05% DUE 05-18-2063<br>SEDOL: BMCJZD6                  | 300,000.000      | 297,501.00      | 270,806.87    |
| TIME WARNER CABLE 5.5% DUE 09-01-2041<br>SEDOL: B441BS1                       | 220,000.000      | 219,217.31      | 187,044.80    |
| TRUIST FINANCIAL CORPORATION 5.867% 06-08-2034<br>CUSIP: 89788MAP7            | 210,000.000      | 210,000.00      | 213,852.39    |
| U S BANCORP MEDIUM TERM NTS- BOOK ENTRY 4.839% 02-01-2034<br>CUSIP: 91159HJL5 | 375,000.000      | 375,000.00      | 359,048.45    |

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**Defined Benefit Plans MITA**  
**EIN: 62-1407069 Plan: 006**  
**Schedule H, Line 4i - Schedule of Assets Held at Year End**  
**Year Ending 31 December 2024**

| Security Description / Asset ID                                           | Shares/Par Value | Historical Cost | Current Value |
|---------------------------------------------------------------------------|------------------|-----------------|---------------|
| <b>Corporate Debt Instruments - Other</b>                                 |                  |                 |               |
| <b>United States - USD</b>                                                |                  |                 |               |
| UNION PAC CORP FIXED 3.79% DUE 04-06-2071<br>SEDOL: BMCFFP6               | 155,000.000      | 158,060.79      | 105,362.52    |
| UNION PAC CORP 3.25% DUE 02-05-2050<br>SEDOL: BKDMLD2                     | 480,000.000      | 453,364.80      | 328,193.31    |
| UNITED PARCEL SVC INC 5.05% 03-03-2053<br>SEDOL: BQMRXX4                  | 105,000.000      | 104,451.90      | 96,412.55     |
| UNITEDHEALTH GROUP INC 2.75% DUE 05-15-2040/05-18-2020 REG SEDOL: BM95BC8 | 425,000.000      | 370,726.90      | 300,718.26    |
| UNITEDHEALTH GROUP INC 5.625% 07-15-2054<br>SEDOL: BPDY7Z7                | 245,000.000      | 244,603.83      | 238,268.39    |
| UNITEDHEALTH GROUP 4.25% DUE 04-15-2047<br>SEDOL: BD9GGT0                 | 160,000.000      | 159,696.00      | 129,800.39    |
| UNITEDHEALTH GROUP 5.7% DUE 10-15-2040<br>SEDOL: B55H840                  | 340,000.000      | 397,213.90      | 340,219.93    |
| UNITEDHEALTH GROUP 5.75% DUE 07-15-2064<br>SEDOL: BPDY809                 | 60,000.000       | 62,926.80       | 58,509.78     |
| UTD PARCEL SVC INC 3.75% 11-15-2047<br>SEDOL: BDRYRR1                     | 255,000.000      | 254,359.95      | 193,158.10    |
| VERIZON COMMUNICATIONS INC 2.987% 10-30-2056 USD<br>SEDOL: BMXT869        | 264,000.000      | 233,349.76      | 156,897.33    |
| VERIZON COMMUNICATIONS 3.7% DUE 03-22-2061 BEO<br>SEDOL: BKY5GZ7          | 235,000.000      | 235,543.65      | 159,609.20    |
| VERIZON COMMUNICATIONS 4.4% DUE 11-01-2034 REG<br>SEDOL: BSBN5N1          | 50,000.000       | 50,545.50       | 46,336.47     |
| VERIZON 2.65% DUE 11-20-2040<br>SEDOL: BMWBBK1                            | 650,000.000      | 579,186.45      | 444,963.21    |
| VERIZON 3.85% DUE 11-01-2042<br>SEDOL: B8HCRP8                            | 60,000.000       | 53,792.64       | 47,262.75     |
| VERIZON 4.272% DUE 01-15-2036<br>SEDOL: BYRLRK2                           | 130,000.000      | 118,707.60      | 116,952.19    |
| VERIZON 4.862% DUE 08-21-2046<br>SEDOL: BXVMD62                           | 135,000.000      | 137,957.85      | 120,625.94    |
| VIRGINIA ELEC & PWR CO 4.65 DUE 08-15-2043<br>SEDOL: BD1NQR7              | 170,000.000      | 182,584.70      | 149,223.17    |
| VISA INC 4.15% DUE 12-14-2035<br>SEDOL: BYPHG16                           | 155,000.000      | 165,018.01      | 143,247.35    |

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**Defined Benefit Plans MITA**  
**EIN: 62-1407069 Plan: 006**  
**Schedule H, Line 4i - Schedule of Assets Held at Year End**  
**Year Ending 31 December 2024**

| Security Description / Asset ID                                                                 | Shares/Par Value | Historical Cost       | Current Value         |
|-------------------------------------------------------------------------------------------------|------------------|-----------------------|-----------------------|
| <i>Corporate Debt Instruments - Other</i>                                                       |                  |                       |                       |
| <b>United States - USD</b>                                                                      |                  |                       |                       |
| VISA INC 4.3% DUE 12-14-2045<br>SEDOL: BYPHFN1                                                  | 245,000.000      | 269,617.44            | 209,813.72            |
| WACHOVIA BK NATL ASSN MEDIUM TERM SUB BKTRANCHE # SB<br>00009 6.6 DUE 01-15-2038 SEDOL: B7XGYR8 | 255,000.000      | 340,423.14            | 278,181.08            |
| WACHOVIA BK NATL ASSN MTN SUB BKTRANCHE # SB 00007 5.85 DUE<br>02-01-2037 BEO SEDOL: B1PB082    | 645,000.000      | 757,904.85            | 658,172.01            |
| WALMART INC NT 2.65% 09-22-2051<br>SEDOL: BMDP812                                               | 110,000.000      | 109,593.00            | 68,145.71             |
| WASTE MANAGEMENT INC 2.95% DUE 06-01-2041<br>SEDOL: BMBVPZ5                                     | 210,000.000      | 208,924.80            | 152,584.09            |
| WELLS FARGO & CO MEDIUM TERM 5.013% 04-04-2051<br>CUSIP: 95000U2M4                              | 115,000.000      | 115,000.00            | 102,225.99            |
| WYETH NT 5.95 DUE 04-01-2037/03-27-2007 BEO<br>SEDOL: B91ZLT2                                   | 345,000.000      | 444,652.44            | 360,275.88            |
| <b>Total United States - USD</b>                                                                |                  | <b>49,149,800.34</b>  | <b>40,722,500.43</b>  |
| <b>Total Corporate Debt Instruments - Other</b>                                                 |                  | <b>53,940,622.59</b>  | <b>44,901,242.93</b>  |
| <i>Partnership/Joint Venture Interests</i>                                                      |                  |                       |                       |
| <b>United States - USD</b>                                                                      |                  |                       |                       |
| APOLLO TOTAL RETURN FUND (EXEMPT) LP<br>CUSIP: 992L44994                                        | 48,012,590.990   | 48,012,590.99         | 71,581,446.28         |
| BLACKSTONE PROPERTY PARTNERS LP<br>CUSIP: 992XCS996                                             | 49,330,909.600   | 49,330,909.60         | 47,551,234.00         |
| SMART MARKETS FUND LP<br>CUSIP: 992RBN991                                                       | 75,457,480.790   | 75,457,480.79         | 93,299,849.14         |
| <b>Total United States - USD</b>                                                                |                  | <b>172,800,981.38</b> | <b>212,432,529.42</b> |
| <b>Total Partnership/Joint Venture Interests</b>                                                |                  | <b>172,800,981.38</b> | <b>212,432,529.42</b> |

\*\* All or a portion of this security participates in Securities Lending.

**Defined Benefit Plans MITA**  
**EIN: 62-1407069 Plan: 006**  
**Schedule H, Line 4i - Schedule of Assets Held at Year End**  
**Year Ending 31 December 2024**

| Security Description / Asset ID                                                                     | Shares/Par Value | Historical Cost       | Current Value         |
|-----------------------------------------------------------------------------------------------------|------------------|-----------------------|-----------------------|
| <i>Value of Interest in Common/Collective Trusts</i>                                                |                  |                       |                       |
| <b>International Region - USD</b>                                                                   |                  |                       |                       |
| CF BLUE BAY GLOBAL FUNDS SPC - TOTAL RETURN CREDIT SP<br>CUSIP: 2A999CC75                           | 512,275.000      | 55,324,814.95         | 71,339,416.50         |
| <b>Total International Region - USD</b>                                                             |                  | <b>55,324,814.95</b>  | <b>71,339,416.50</b>  |
| <b>United States - USD</b>                                                                          |                  |                       |                       |
| CF JPMCB STRATEGIC PROPERTY FUND<br>CUSIP: 99089IWA0                                                | 10,054,837.670   | 81,203,196.26         | 111,166,285.28        |
| CF NINETY ONE EMERGING MARKET EQUITY FUND<br>CUSIP: 65999VF69                                       | 469,523.460      | 75,844,238.07         | 81,753,424.86         |
| MFO ARROWSTREET COLLECTIVE INVT TR GLOBAL EQUITY ACWI CIT<br>CLASS B CUSIP: 04281W705               | 305,617.970      | 56,938,823.81         | 77,667,458.76         |
| MFO BLACKROCK EQUITY INDEX<br>CUSIP: B7A16LYF8                                                      | 149,411.080      | 239,666,722.06        | 354,825,835.48        |
| NT COLLECTIVE SHORT TERM INVT FD<br>CUSIP: 66586U452                                                | 2,820,320.630    | 2,820,320.63          | 2,820,320.63          |
| <b>Total United States - USD</b>                                                                    |                  | <b>456,473,300.83</b> | <b>628,233,325.01</b> |
| <b>Total Value of Interest in Common/Collective Trusts</b>                                          |                  | <b>511,798,115.78</b> | <b>699,572,741.51</b> |
| <i>103-12 Investment Entities</i>                                                                   |                  |                       |                       |
| <b>United States - USD</b>                                                                          |                  |                       |                       |
| MFO WESTERNASSET US LONG DURATION LLC<br>CUSIP: 2R999G2E5                                           | 3,760,869.020    | 86,393,996.45         | 87,286,009.09         |
| <b>Total United States - USD</b>                                                                    |                  | <b>86,393,996.45</b>  | <b>87,286,009.09</b>  |
| <b>Total 103-12 Investment Entities</b>                                                             |                  | <b>86,393,996.45</b>  | <b>87,286,009.09</b>  |
| <i>Other</i>                                                                                        |                  |                       |                       |
| <b>Mexico - USD</b>                                                                                 |                  |                       |                       |
| UNITED MEXICAN STAT MEX NEW ISS USD 31YRINSEDOL = A038P73<br>5% DUE 04-27-2051 REG CUSIP: 91087BAL4 | 200,000.000      | 185,200.00            | 150,093.09            |
| UNITED MEXICAN STS GLOBAL NT 4.4% 02-12-2052<br>CUSIP: 91087BAS9                                    | 310,000.000      | 308,778.60            | 209,357.58            |

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**Defined Benefit Plans MITA**  
**EIN: 62-1407069 Plan: 006**  
**Schedule H, Line 4i - Schedule of Assets Held at Year End**  
**Year Ending 31 December 2024**

| Security Description / Asset ID                                                                  | Shares/Par Value | Historical Cost     | Current Value       |
|--------------------------------------------------------------------------------------------------|------------------|---------------------|---------------------|
| <i>Other</i>                                                                                     |                  |                     |                     |
| <b>Mexico - USD</b>                                                                              |                  |                     |                     |
| <b>Total Mexico - USD</b>                                                                        |                  | <b>493,978.60</b>   | <b>359,450.67</b>   |
| <b>United States - USD</b>                                                                       |                  |                     |                     |
| CALIFORNIA ST 7.625% 03-01-2040 BEO TAXABLE<br>SEDOL: B52J623                                    | 515,000.000      | 714,733.30          | 606,842.42          |
| FUT MAR 25 CBT UL T-BONDS<br>CUSIP: 999599GH0                                                    | -39.000          | -4,796,056.35       | -4,637,343.75       |
| FUT MAR 25 CBT UL T-BONDS<br>CUSIP: 999599GH0                                                    | 39.000           | 4,796,056.35        | 4,637,343.75        |
| FUT MAR 25 CBT ULT TNOTE<br>CUSIP: 999599GH0                                                     | 74.000           | 8,390,448.44        | 8,237,125.00        |
| FUT MAR 25 CBT ULT TNOTE<br>CUSIP: 999599GH0                                                     | -74.000          | -8,390,448.44       | -8,237,125.00       |
| FUT MAR 25 CBT 5Y T-NOTE<br>CUSIP: 999599GH0                                                     | 165.000          | 17,635,336.35       | 17,540,273.44       |
| FUT MAR 25 CBT 5Y T-NOTE<br>CUSIP: 999599GH0                                                     | -165.000         | -17,635,336.35      | -17,540,273.44      |
| FUT MAR 25 U.S. T-BONDS<br>CUSIP: 999599GH0                                                      | -68.000          | -7,912,183.43       | -7,741,375.00       |
| FUT MAR 25 U.S. T-BONDS<br>CUSIP: 999599GH0                                                      | 68.000           | 7,912,183.43        | 7,741,375.00        |
| FUT MAR 25 US 2YR T-NOTE<br>CUSIP: 999599GH0                                                     | -68.000          | -13,982,987.52      | -13,981,437.50      |
| FUT MAR 25 US 2YR T-NOTE<br>CUSIP: 999599GH0                                                     | 68.000           | 13,982,987.52       | 13,981,437.50       |
| NEW YORK N Y CITY TRANSITIONAL FIN AUTH REV 5.572%<br>11-01-2038 BEO TAXABLE SEDOL: B56SPB8      | 250,000.000      | 299,367.50          | 248,302.95          |
| NY NY CTY MUN WTR FIN AUTH WTR & SWR REVBLD AMER BDS 5.724<br>6-15-2042 REG TXBLE SEDOL: B3NRLF0 | 330,000.000      | 434,597.12          | 324,119.20          |
| TEXAS TRANSN COMMN ST HWY FD REV 5.178% 04-01-2030 BEO<br>TAXABLE SEDOL: B52BMP4                 | 200,000.000      | 239,856.77          | 201,883.60          |
| UNIVERSITY MICH UNIV 2.437% DUE 04-01-2040 REG TAXABLE<br>SEDOL: BMVYNJ4                         | 95,000.000       | 95,000.00           | 67,773.07           |
| <b>Total United States - USD</b>                                                                 |                  | <b>1,783,554.69</b> | <b>1,448,921.24</b> |
| <b>Total Other</b>                                                                               |                  | <b>2,277,533.29</b> | <b>1,808,371.91</b> |

\*\* All or a portion of this security participates in Securities Lending.

**Defined Benefit Plans MITA**  
**EIN: 62-1407069    Plan: 006**  
**Schedule H, Line 4i - Schedule of Assets Held at Year End**  
**Year Ending 31 December 2024**

| Security Description / Asset ID               | Shares/Par Value | Historical Cost       | Current Value           |
|-----------------------------------------------|------------------|-----------------------|-------------------------|
| <i>Other Liabilities</i>                      |                  |                       |                         |
| Pending trade purchases: United States dollar | 0.000            | -1,423,104.89         | -1,423,104.89           |
| <b>Total - all currencies</b>                 |                  | <b>-1,423,104.89</b>  | <b>-1,423,104.89</b>    |
| <b>Total Other Liabilities</b>                |                  | <b>-1,423,104.89</b>  | <b>-1,423,104.89</b>    |
| <b>Total</b>                                  |                  | <b>894,371,883.03</b> | <b>1,102,534,727.05</b> |

\*\* All or a portion of this security participates in Securities Lending.

DEFINED BENEFIT PLANS MTIA  
EIN: 62-1407069 PLAN #006  
SCHEDULE H, LINE 4j SCHEDULE OF REPORTABLE TRANSACTIONS  
YEAR ENDING 31 DECEMBER 2024

◆ 5% Report - Part A

*Single Transaction in Excess of 5%*

| Security Description / Asset ID                                                                   | Shares/Par Value | Date      | Acquisition Price | Disposition Price | Lease Rental | Expenses Incurred | Cost           | Current Value on Transaction Date | Net Gain/Loss |
|---------------------------------------------------------------------------------------------------|------------------|-----------|-------------------|-------------------|--------------|-------------------|----------------|-----------------------------------|---------------|
| <b>Value of Interest in Common/Collective Trusts</b>                                              |                  |           |                   |                   |              |                   |                |                                   |               |
| <b>United States - USD</b>                                                                        |                  |           |                   |                   |              |                   |                |                                   |               |
| MFO BLACKROCK EQUITY INDEX CUSIP: B7A16LYF8                                                       | 104,047.200      | 26 Jun 24 | 2,196.7580        |                   |              | 0.00              | 228,566,618.88 | 228,566,618.88                    | 0.00          |
| <b>Value of Interest in Registered Investment Companies</b>                                       |                  |           |                   |                   |              |                   |                |                                   |               |
| <b>United States - USD</b>                                                                        |                  |           |                   |                   |              |                   |                |                                   |               |
| MFO WILMINGTON TR COLTV INVT TR HOTCHKIS & WILEY<br>LARGE CAP VALUE CIT FEE CL F CUSIP: 97182E196 | -5,648,362.770   | 14 Jun 24 |                   | 20.4310           |              | 0.00              | 74,050,035.94  | 115,402,829.45                    | 41,352,793.51 |

NOTE: TRANSACTIONS ARE BASED ON THE 2023-12-31 VALUE (INCLUDING ACCRUALS) OF 1,518,900,394.79

DEFINED BENEFIT PLANS MTIA  
EIN: 62-1407069 PLAN #006  
**SCHEDULE H, LINE 4j SCHEDULE OF REPORTABLE TRANSACTIONS**  
**YEAR ENDING 31 DECEMBER 2024**

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◆ 5% Report - Part C Summary

*Series of Transactions by Issue in Excess of 5%*

| Security Description / Asset ID                   |                    | Number of Transactions | Transaction Aggregate |                   | Lease Rental | Expenses Incurred | Cost of Asset  | Current Value of Asset on Transaction |
|---------------------------------------------------|--------------------|------------------------|-----------------------|-------------------|--------------|-------------------|----------------|---------------------------------------|
|                                                   |                    |                        | Acquisition Price     | Disposition Price |              |                   |                |                                       |
| MFO BLACKROCK EQUITY INDEX CUSIP: B7A16LYF8       | Total acquisitions | 3                      | 238,169,885.99        |                   |              | 0.00              | 238,169,885.99 | 238,169.885.99                        |
|                                                   | Total dispositions | 4                      |                       | 28,220.28         |              | 0.00              | 17,739.95      | 28.220.28                             |
| NT COLLECTIVE SHORT TERM INVT FD CUSIP: 66586U452 | Total acquisitions | 233                    | 47,727,786.35         |                   |              | 0.00              | 47,727,786.35  | 47,727.786.35                         |
|                                                   | Total dispositions | 96                     |                       | 44,907,465.72     |              | 0.00              | 44,907,465.72  | 44,907.465.72                         |
| NT COLLECTIVE SHORT TERM INVT FD CUSIP: 66586U452 | Total acquisitions | 139                    | 44,033,483.73         |                   |              | 0.00              | 44,033,483.73  | 44,033.483.73                         |
|                                                   | Total dispositions | 81                     |                       | 69,896,309.75     |              | 0.00              | 69,896,309.75  | 69,896.309.75                         |

NOTE: TRANSACTIONS ARE BASED ON THE 2023-12-31 VALUE (INCLUDING ACCRUALS) OF 1,518,900,394.79