

Information submitted via Top Hat Plan Statement Online Filing System to U. S.
Department of Labor under 29 CFR 2520.104-23

Date Completed: 9/21/2023 10:00 AM EST

Confirmation Number: 12073

Amended Confirmation Number:

Employer Information

Name: Premier Cooperative Inc.
Address: 2104 W Park Ct
City: Champaign
State: IL
Zip Code: 61821

Plan Administrator Information

Name: Tim Hughes
Address: 2104 W Park Ct
City: Champaign
State: IL
Zip Code: 61821
Phone: 2176375207
Email: thughes@premiercooperative.net

Plan Information

Employer maintains the plan or plans below primarily for the purpose of providing deferred compensation for a select group of management or highly compensated employees.

ID:1	Plan Name: NW Split Dollar Plan	Number of Employees: 1
ID:2	Plan Name:	Number of Employees: 1
ID:3	Plan Name:	Number of Employees: 1
ID:4	Plan Name:	Number of Employees: 1
ID:5	Plan Name:	Number of Employees: 1
ID:6	Plan Name:	Number of Employees: 1
ID:7	Plan Name:	Number of Employees: 1

Additional Information:



U. S. Department of Labor
Employee Benefits Security Administration
Washington, DC 20210

This message confirms that the Department of Labor's (DOL's) Employee Benefits Security Administration (EBSA) has received the filing of your Top Hat Plan Statement. The confirmation code for your filing is 12073. When correcting errors to your filing, please use this code in your amended statement. This communication does not mean that DOL has made a determination that you are eligible to file under DOL regulation 29 CFR 2520.104-23.