

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

Date Completed: 12/10/2025 4:29 PM EST

Confirmation Number: 15771

Amended Confirmation Number:

Employer Information

Name: TRACE FIBER HOLDING COMPANY, LLC
Address: 3845 TENNYSON ST STE 115
City: DENVER
State: CO
Zip Code: 80212

Plan Administrator Information

Name: Artesian Partners
Address: 711 12th Street
City: Golden
State: CO
Zip Code: 80401
Phone: 3035073276
Email: DERRIA@ARTESIAN.COM

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:	TRACE FIBER HOLDING COMPANY, LLC EQUITY INCENTIVE PLAN	Number of Employees: 2
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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 15771. 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.