

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

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Confirmation Number: 16099

Amended Confirmation Number:

Employer Information

Name: Prospera Credit Union
Address: 4830 N Ballard Rd
City: Appleton
State: WI
Zip Code: 54913

Plan Administrator Information

Name: Prospera Credit Union
Address: 4830 N Ballard Rd
City: Appleton
State: WI
Zip Code: 54913
Phone: 9208824803
Email: sheila.schinke@myprospera.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:	Sheila Schinke	Number of Employees: 1
ID:2	Plan Name:	Todd Thiel	Number of Employees: 1
ID:3	Plan Name:	Kristina Flores	Number of Employees: 1
ID:4	Plan Name:	Michelle McClelland	Number of Employees: 1
ID:5	Plan Name:	Michelle Gloudemans	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 16099. 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.