

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

Date Completed: 1/15/2019 3:06 PM EST

Confirmation Number: 4618

Amended Confirmation Number:

Employer Information

Name: Trigo Pizza Company, Inc.

Address: 3090 Johnson Road

City: Stevensville State: MI Zip Code: 49127

Plan Administrator Information

Name: Joyce L. Lunsford

Address: 3090 Johnson Road

City: Stevensville State: MI Zip Code: 49127

Phone: 2695565000

Email: jlunsford@trigohospitality.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:	Value Participation Plan	Number of Employees: 1
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Additional Information:

Re: Tom Pleiman



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 4618. 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.