

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

Date Completed: 5/11/2020 11:47 AM EST

Confirmation Number: 6557

Amended Confirmation Number:

Employer Information

Name: Trapper Mining, Inc.
Address: P.O. Box 187
City: Craig
State: CO
Zip Code: 81626

Plan Administrator Information

Name: Trapper Mining, Inc.
Address: P.O. Box 187
City: Craig
State: CO
Zip Code: 81626
Phone: 9708244401
Email: kathy.innes@trappermine.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:	Trapper Mining, Inc. Deferred Compensation Plan	Number of Employees: 1
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Additional Information:

Trapper Mining, Inc. Deferred Compensation Plan effective 5/7/2020



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 6557. 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.