

**Alternative Reporting And Disclosure Statement  
For Nonqualified Deferred Compensation Plans**

EBSA/PUR110 08/11/12  
2012 NOV 26 PM 4:21

To: Top Hat Plan Exemption  
Employee Benefits Security Administration  
Room N 1513  
U.S. Department of Labor  
200 Constitution Ave. N.W.  
Washington, DC 20210

In compliance with the requirements of the alternative method of reporting and disclosure under Part I of Title I of the Employee Retirement Income Security Act of 1974 for un-funded or insured pension plans for a select group of management or highly compensated employees, specified in Department of Labor Regulations, 29 CFR Sec. 2520.104-23, the following information is provided by the undersigned administrator:

1. The name of the Employer is: New Prime, Inc. dba Prime, Inc.
2. The mailing address of the Employer is: 2740 North Mayfair Avenue  
Springfield, IL 65803
3. The Employer Identification Number is: 43-1396933
4. The above named Employer maintains a Plan (or Plans) primarily for the purpose of providing deferred compensation benefits for a select group of management or highly compensated employees.
5. Number of Plans and Eligible Employees in each Plan:  
One Plan(s) covering **36** Eligible Employees.
6. The Employer will provide a copy of the agreement(s) to the office of Employee Benefits Security Administration upon request.

New Prime, Inc. dba Prime, Inc.  
A Missouri Corporation

By: TRD Hoedl  
Authorized Person

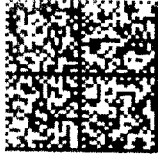
Dated: 11/16/12



40 North Mayfair  
Box 4208  
Springfield, MO 65808-4208



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