

Environmental Protection & Compliance Division

Los Alamos National Laboratory PO Box 1663, K491 Los Alamos, NM 87545 505-667-2211

Symbol: EPC-DO: 20-160

LAUR: 20-23690

Date: 4 JUNZOZO

Ms. Adrienne L. Nash National Security Missions Los Alamos Field Office, A316 National Nuclear Security Administration Los Alamos, NM 87545

Subject: 2019 Toxic Chemical Release Inventory Report for the Emergency Planning

and Community Right-To-Know Act of 1986, Title III, Section 313

Dear Ms. Nash:

The 2019 Toxic Chemical Release Inventory Report, Form R, for Los Alamos National Laboratory (LANL) was submitted to the Environmental Protection Agency (EPA) using the online reporting tool, TRIMEweb. For 2019, lead and mercury are the only reportable chemicals. Per the Service Agreement/Work Authorization for Environmental Services (SAWA #M&O-003), Triad prepared and submitted the Form R with data input and concurrence from N3B. The report is required by Emergency Planning and Community Right-to-Know Act, Title III, Section 313. This year the EPA's deadline is July 1st and the report was submitted electronically on June 2nd, 2020.

Should you have questions or comments regarding the information provided in this report, please contact Walt Whetham at (505) 665-8885.

Sincerely,

Aaron M. Dailey MAQ Team Leader

AD/WW:jdm



Attachment(s): Attachment 1 2019 Toxic Chemical Release Inventory Report for the Emergency Planning and Community Right-to-Know Act, Title III, Section 313

Copy: Karen E. Armijo, LASO-MA-LS, karen.armijo.nash@nnsa.doe.gov Silas DeRoma, NA-LA, silas.deroma@nnsa.doe.gov Steve Hoffman, EM-LA, stephen.hoffman@em.doe.gov Paul Benjamin Underwood, EM-LA, ben.underwood@em.doe.gov David Nickless, EM-LA, david.nickless@em.doe.gov Hai Shen, EM-LA, hai.shen@em.doe.gov Kelly J. Beierschmitt, Triad, DDOPS, beierschmitt@lanl.gov Michael W. Hazen, Triad, ALDESHOSS, mhazen@lanl.gov William R. Mairson, Triad, ALDESHQSS, wrmairson@lanl.gov Timothy A. Dolan, Triad, GC-ESH, tdolan@lanl.gov Jennifer E. Payne, Triad, EPC-DO, jpayne@lanl.gov Taunia Van Valkenburg, Triad, EPC-CP, tauniav@lanl.gov Walter W. Whetham, Triad, EPC-CP, walt@lanl.gov Taylor A. Valdez, Triad, PCM-DO, tvaldez@lanl.gov Frazer Lockhart, N3B-RSI, Frazer.Lockhart@em-la.doe.gov Christian Maupin, N3B-ER, Christian.Maupin@em-la.doe.gov Elizabeth Lowes, N3B-ESH, Elizabeth.Lowes@em-la.doe.gov Dana Lindsay, N3B-DO, Dana.Lindsey@em-la.doe.gov **EPC-CP EPCRA File EPC-CP** Correspondence File lasomailbox@nnsa.doe.gov epccorrespondence@lanl.gov adesh-records@lanl.gov interface@lanl.gov



ATTACHMENT 1

2019 Toxic Chemical Release Inventory Report for the Emergency Planning and Community Right-to-Know Act, Title III, Section 313

EPC-DO: 20-160

LA-UR-20-23690

Date:	JUN 0 4 2020	

Form Approved OMB Number: Approval Expires: 2021-10-31

Page 1 of 5

Complete form online via TRI-MEweb. For a trade secret submission, send completed forms to TRI Reporting Center, P. O. Box 10163, Fairfax, VA 22038. The annual public burden related to the Form R is estimated to average 35.71 hours per response for a facility filing a report on one chemical. See the Reporting Forms and Instructions for more information on submissions and the Paperwork Reduction Act.

						TRIF	acility ID Number		
EPA United S	tates		RM R			87545LSLMSLOSAL			
	rental Protection Section 313 of the Errergency Ralaso known as Title III of the Supe				96,	Toxic Chemical, Category, or Generic Name			ric Name
, igono,						Mercury			
	ection only applies if you are revising or wing a previously submitted form, otherwise	Rev	ision (Enter up to	two code(s	;))	W	thdrawal (Ente	r up to two	code(s))
leave b			[][]][]	
Importan	t: See Instructions to determine when "Not Applicable ((NA)" boxes sh	ould be checked.						
		Part I. F	ACILITY IDENTIFICA	TION INFOR	VATION				
	11. REPORTING YEAR: 2019								
SECTION	12. TRADE SECRET INFORMATION								
2.1	Are you claiming the toxic chemical identified on page [] Yes (Answer question 2.2; attach substar [X] NO (Do not answer 2.2; go to Section 3)	ntiation forms)	?						
2.2	ls this copy [] Sanitized [] Uhsanitized (Answer only if "Yes" in 2.1)								
SECTION	 I3. CERTIFICATION (Important: Read and sign after cor	mpleting all forn	nsections.)						
	certify that I have reviewed the attached documents a this report are accurate based on reasonable estimate					rmetion is	s true and comple	ete and that t	ne amounts and
Name ar	nd official title of owner/operator or senior managemen	t official:	Sig	gnature:	*				Date Signed:
Aaron	Dailey Environmental Manager		Re	ference Co	opy: Copy of Reco	ord Res	ides in CDX		2020-06-02
SECTION	14. FACILITY IDENTIFICATION								
	Facility or Establishment Name TRIAD NATIONAL SECURITY, LLC, LOS ALAM	OS NATIONA	L LABORATORY	E	1RI Facility ID Number 87545LSLMSLC			BIA Code	
4,1	Street BIKINI ATOLL RD SM30	ATOLL RD SM30				phys	ty or Establishment cal street address) BOX 1663	Mailing Addres	s (if different from
	City/County/State/ZIP Code LOS ALAMOS / Los Alamos / NM / 87545					/ NM /	87545	Country (Non-	US)
4.2	This report contains information for: (Important: check a or b; check c or d if applicable)		a. [X] An Entire fa	cility	b. [] Part of a facili	ity	c. [] A Federal t	acility	d. [X] 6000
4.3	Technical Contact name	Walt Whet	tham	Email Addres walt@lanl			Telephone Number (include area code 505-665-8885		nd ext.)
4.4	Rublic Contact name	Peter Hyde	•	Email Address pahyde@			Telephone Number (include 505-667-3792		nd ext.)
4.5	NAICS Code(s) (6 digits)	a, 928110 (Primary)	b.	c.	d.	e.	f.		
4.6	Dun and Bradstreet Number(s) (9 digits)								
7.0	a. NA								
	b.								
	15. PARENT COMPANY INFORMATION								
5.1	Name of U.S. Parent Company (for TRI Reporting purposes)	US DEPAR	TMENT OF ENERG	SY				S. Parent Cor ting purpose	npany (for TRI s) []
	Parent Company's Dun & Bradstreet Number	NA[X]	y						
PA Forn	19350-1 (Rev.) - Previous editions are obsolete.				Prin	ted using	TRI-MEweb		

				TRI Facility ID Number				
	EPA FO	ORM R		87545LSLMSLOSAL				
	PART II. CHEMICAL - SI	PECIFIC INFORMATION	ON -	Toxic Chemical, Category, or Generic Name				
				Mercury				
SECTIO	N 1. TOXIC CHEMICAL IDENTITY (Importan	nt: DO NOT complete this se	ection if you are reporting a mixture	component in Section 2 belo	w.)			
	CAS Number (Important: Enter only one number exa	ctly as it appears on the S	ection 313 list. Enter category code	if reporting a chemical categ	ory.)			
1.1	007439976							
	Toxic Chemical or Chemical Category Name (Importa	ant: Enter only one name ex	cactly as it appears on the Section	313 list.)				
1.2	Mercury Mercury							
	Generic Chemical Name (Important: Complete only if	Part I, Section 2.1 is check	red "Yes". Generic Name must be s	tructurally descriptive).				
1.3	NA							
SECTIO	N 2. MXTURE COMPONENT IDENTITY (Important: DO N	NOT complete this section it	Fyou completed Section 1.)					
ОШОПО	Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, spaces, and punctuation.)							
2.1	1							
SECTIO	NA. N.3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL	AT THE EACH ITY						
	nt: Check all that apply.)	ALITERACEIT						
3.1	Manufacture the toxic chemical:	3.2 Process the toxic	c chemical:	3.3 Otherwise use the	toxic chemical:			
	a. [X] Produce b. [] Import							
a. [] / Sub-t Sub-t C. [] For on-site use/processing d. [] For sale/distribution c. [] As a byproduct f. [] As an inpurity e. [] /		a. [] As a reactar Sub-Uses: b. [] As a formula Sub-Uses: c. [] As an article d. [] Repackaging e. [] As an impuril f. [] Recycling	tion component	a. [] As a chemical processing aid Sub-Uses: b. [] As a manufacturing aid Sub-Uses: c. [X] Ancillary or other use Sub-Uses: Z399				
SECTION	N4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL OF	V-SITEAT ANY TIMEDURIN	NG THE CALENDARYEAR					
4.1	[04] (Enter two-digit code from instruction packa	ge.)						
SECTION	N 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING	EACH ENVIRONMENTAL M	EDIUM ON-SITE					
			A. Total Release (pounds/year*) (Enter range code or estimate**)	B. Basis of Estimate (Enter code)	C. Percent from Stormwater			
5.1	Fugitive or non-point air emissions	NA []	0	o				
5.2	Stack or point air emissions	NA []	0.86	EI				
5.3	Discharges to receiving streams or water bodies (Enter one name per box)	NA []						
	Stream or Water Body Name	Reach Code (optional)						
5.3.1	Sandia Tributary to Rio Grande		0.0019	M2	0%			
5.3.2	Los Alamos Tributary to Rio Grande		0.0002	M2	0%			
5.3.3	Mortandad Tributary to Rio Grande		0.0008	M2	0%			

EPA Form 9350-1 (Rev.) - Previous editions are obsolete.

			TRI Facility ID Number			
		EPA F	87545LSLMSLOSAL Toxic Chemical, Category, or Generic Name			
	PART II. CHEMICAL	- SPECIFI				
		1				
SECTION	5. QUANTITY OF THE TOXIC CHEMICA	L BVIENING	EACH ENVIRONMENTAL MEDIUM ON-SITE (Continued)			
		NA	A. Total Release (pounds/year*) (Enter range of	ode** or estimate)	B. Basis of Estimate (Enter code)	
5.4-5.5	Disposal to land on-site	fi Sa		HE STEP STATE	AND THE RESERVE OF THE PARTY OF	
5.4.1	Qass I Underground Injection wells	[X]				
5.4.2	Class IFV Underground Injection wells	[X]				
5.5.1.A	RCRA subtitle Clandfills	[X]				
5.5.1.B	Other landfills	[X]				
5,5.2	Land treatment/application farming	[X]				
5.5.3A	RORA Subtitle C surface impoundments	[X]	H			
5.5.3B	Other surface impoundments	[X]				
5.5.4	Other disposal	[X]				
	Waste Rock Piles Information check this box if your Section 5.5 qua	antities includ	e "waste rock piles." [] Enter quantity of "waste rock	piles" (pounds/year*)		
SECTION	16. TRANSFER(S) OF THE TOXIC OHE	VICAL IN WAS	STES TO OFF-STIELOCATIONS			
6.1 DISC	HARGES TO PUBLICLY OWNED TREA	TMENT WOR	KS (POTWs)		[NA[X]	

EPA Form 9350-1 (Rev.) - Previous editions are obsolete.

							TRI Faci	lity ID Number		
			EPA FORM				87545L	SLMSLOSAL		
	PAR	T II. CHEMICAL	- SPECIFIC IN	FORMATION (CONTINUED)			Toxic O	nemical, Category, or	Generic Name	
							Mercu	У		
SECTIO	XV 6.2 TRANSFERS T	TO OTHER OFF-SITE	ELOCATIONS	NA[]						
6.2.1 C	Off-Site EPA Identifica	ation Number (RORA	A IDNo.)		UTD9	8259889	8			
Of	f-Site Location Name	e:			ENER	GYSOLU	TIONS CL	IVEFACILITY		
Of	f-Site Address:				U.S. II	NTERSTA	TE 80, E	KIT 49, FIVE M		
City	GRANTSVILLE		County	Tooele	State	υT	ZIP	84029	(Non-US)	
	Is location under c	ontrol of reporting f	acility or parent co	mpany?			[]Yes	[X] No		
	A. Total Tra	ansfer (pounds/yea ge code** or estima	r*)	B. Basis of Estimate (Enter code)				Type of Waste Trea cycling/Energy Recov		
1 . 25.5			1.0		1. M65		cycling to led gy Nector	very (Liner code)		
		ation Number (DCD)		IMAD	0000103					
	6.2.2 Off-Site EPA Identification Number (RORA IDNb.) Off-Site Location Name:							T RICHLAND INC		
	Off-Site Address:				_	BATTELL		THOREMENT		
	1		L_			T	1	1	Country	T
Oty	RICHLAND		County	Benton	State	WA	ZIP	99354	(Non-US)	
Is location under control of reporting facility or parent company?					[]Yes	[X] No				
		ansfer (pounds/yea ge code** or estima		B. Basis of Estimate (Enter code)			C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (Enter code)			
1.	0.1	1.0		1. M64	. M64					
6.2.3 C	Off-Site EPA Identifica	ation Number (ROR/	AIDNo.)		NM48	9013908	8			
Of	f-Site Location Name);			U.S. DOE WASTE ISOLATION PILOT PLANT					
Of	f-Site Address:				30 MI	30 MILES EAST OF CARLSBAD ON				
City	CARLSBAD		County	Eddy	State	NIM	ZIP	88220	(Non-US)	
	Is location under co	ontrol of reporting f	acility or parent co	mpany?			[]Yes	[X] Nb		
		insfer (pounds/yea ge code** or estima		B. Basis of Estimete (Enter code)			C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (Enter code)			
1.	11.9			1.0		1 . M41	1 . M41			
6.2.4 C	ff-Site EPA Identifica	ation Number (RORA	A IDNo.)		CODS	8059118	4			
Of	-Site Location Name);			VEOL	JA ES TE	CHNICAL	SOLUTIONS LLC		
Of	f-Site Address:				9131	E96TH	VE			-
City	HENDERSON		County	Adams	State	co	ZIP	80640	Country (Non-US)	
	Is location under co	ontrol of reporting f	acility or parent co	mpany?			[]Yes	[X] No		
		insfer (pounds/yea ge code** or estimat		B. Basis of Estimate (Enter code)			C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (Enter code)			
1.86.7 1.O						1 . M64				
	N7A, ONSITE WAS									
[] Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream con				aining th	ne toxic ch	emical or o	The state of the s			
a. General Waste Stream (enter code) b. Waste Treatment Method(s) Sequence [enter 3-character code(s)]			c. Waste Treatment Efficiency Estimate							
	7A.1a			7A.1 b				7A 1		
	S			2: H101		E5				
	7A 2 a			7A 2 b				7A.2	2 c	
	W	2:H123 3:H077 4:H082 5:H124 6:H129 7:H122				E3				

EPA FORM R PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number	
87545LSLMSLOSAL	
Toxic Chemical, Category, or Generic Name	
Mercury	

SECTION 7B. ON SITE ENERGY RECOVERY PROCESSES

[X] NA - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category.

Energy Recovery Methods [Enter 3-character code(s)]

SECTION 7C. ON SITE RECYCLING PROCESSES

[X] NA - Check here if no on-site recycling is applied to any waste stream containing the toxic chemical or chemical category.
Recycling Methods [Enter 3-character code(s)]

SECTION	18. SOURCE REDUCTION AND WASTE MANAGEMENT						
			P	iolumn A rior Year unds/year*)	Column B Current Reporting Year (pounds/year*)	Column C Following Yea (pounds/year	
	8.1 - 8.7 Production-Related Waste Managed		Li di Lego				N WINE IED
8.1a	Total on-site disposal to Class I Underground Injection Wells, RCRA Subtitle Clandfills, and other landfills		NA	-73	NA	NA	NA
8.1b	Total other on-site disposal or other releases		NA		0.8629	NA	NA
8.1c	Total off-site disposal to Class I Underground Injection Wells, RORA Subtitle Clandfills, and other landfills		NA .		112.3	NA	NA
8.1d	Total other off-site disposal or other releases		NA		11.9	NA	NA
8.2	Quantity used for energy recovery on-site		NA		NA	NA	NA
8.3	Quantity used for energy recovery off-site		NA		NA	NA	NA
8.4	Quantity recycled on-site		NA		NA	NA	NA
8.5	Quantity recycled off-site		NA		NA	NA	NA
8.6	Quantity treated on-site		NA .		NA	NA	NA
8.7	Quantity treated off-site		NA		NA	NA	NA
8.8	Non-production-related waste managed**				NA		31
8.9	[] Production ratio or [X] Activity ratio (select one and enter value to	o right)			0.8		
8.10	Did your facility engage in any newly implemented source reduction year? If so, complete the following section; if not, check NA.	this cherrical	during the reporting	NA [X]			
	Source Reduction Activities (Enter code(s))		Method	s to Identify Activity (Enter code(s))		stimated annual reductio Enter code(s)) (optional)
8.10.1	NA						

*For Dioxin and Dioxin-like Compounds, report in grams/year
** Includes quantities released to the environment or transferred off-site as a result of
remedial actions, catastrophic events, or other one-time events not associated with
production processes

TRI Facility ID Number		
87545LSLMSLOSAL		
Toxic Chemical, Category, or Generic Name		
Mercury		

Additional optional information on source reduction, recycling, or pollution control activities.

Section 8.11: If you wish to submit additional optional information on source reduction, recycling, or pollution control activities, provide it here.					
Topic	Comment				

Section 9.1: If you wish to submit any miscellaneous, additional, or optional information regarding your Form R submission, provide it here.				
Topic	Comment			
Your facility did not submit a form for this chemical for the prior reporting year.	We did not exceed the mercury threshold in 2018.			

FormApproved OMB Number: Approval Expires: 2021-10-31

Page 1 of 5

Complete form online via TRI-MEweb. For a trade secret submission, send completed forms to TRI Reporting Center, P. O. Box 10163, Fairfax, VA 22038. The annual public burden related to the Form R is estimated to average 35.71 hours per response for a facility filing a report on one chemical. See the Reporting Forms and Instructions for more information on submissions and the Paperwork Reduction Act.

## Process of the Emergency Form R United States Environmental Protection Agency Agency Agency This section only applies if you are revising or withdrawing a previously submitted form, otherwise leave blank: Important: See histructions to determine when "Not Applicable (NA)" boxes should be checked. Part I. FACILITY IDENTIFICATION INFORMATION SECTION 1. REPORTING YEAR: 2019 SECTION 2. TRADE SECRET INFORMATION Are you claiming the toxic chemical identified on page 2 trade secret? [] Yes (Answer question 2.2; attach substantiation forms) [X] NO (Do not answer 2.2; go to Section 3) Secritical Content of the Emergency Flanning and Community Right-to-know Act of 1986, Toxic Chemical, Category, or Generic Name Lead Toxic Chemical, Category, or Generic Name Lead Toxic Chemical Lead Toxic Chemical Lead Toxic Chemical Lead Toxic Chemical Lead T							
Environmental Protection Agency Section 313 of the Emergency Hanning and Community Right-to-know Act of 1996, also known as Title III of the Superfund Amendments and Reauthorization Act. Toxic Chemical, Category, or Generic Name Lead This section only applies if you are revising or withdrawing a previously submitted form, otherwise leave blank: [][]] Important: See instructions to determine when "Not Applicable (NA)" boxes should be checked. Part I. FACILITY IDENTIFICATION INFORMATION SECTION 1. REPORTING YEAR: 2019 SECTION 2. TRADE SECRET INFORMATION Are you claiming the toxic chemical identified on page 2 trade secret? [] Yes (Answer question 2.2; attach substantiation forms) [X] NO (Do not answer 2.2; go to Section 3) Is this copy [] Sanitized [] Unsanitized							
This section only applies if you are revising or withdrawing a previously submitted form, otherwise leave blank: This section only applies if you are revising or withdrawing a previously submitted form, otherwise leave blank: This section only applies if you are revising or Revision (Enter up to two code(s)) Withdrawal (Enter up to two code(s))							
withdrawing a previously submitted form, otherwise [][] [] [] [] [] [] [] [] []							
Iterate blank:							
Part I. FACILITY IDENTIFICATION INFORWATION SECTION 1. REPORTING YEAR: 2019 SECTION 2. TRADE SECRET INFORMATION Are you claiming the toxic chemical identified on page 2 trade secret? [] Yes (Answer question 2.2; attach substantiation forms) [X] NO (Do not answer 2.2; go to Section 3) Is this copy 2.2 [] Sanitized [] Unsanitized							
SECTION 1. REPORTING YEAR: 2019 SECTION 2. TRADE SECRET INFORMATION Are you claiming the toxic chemical identified on page 2 trade secret? [] Yes (Answer question 2.2; attach substantiation forms) [X] NO (Do not answer 2.2; go to Section 3) Is this copy [] Sanitized [] Unsanitized							
SECTION 2. TRADE SECRET INFORWATION Are you claiming the toxic chemical identified on page 2 trade secret? [] Yes (Answer question 2.2; attach substantiation forms) [X] NO (Do not answer 2.2; go to Section 3) Is this copy [] Sanitized [] Unsanitized							
Are you claiming the toxic chemical identified on page 2 trade secret? [] Yes (Answer question 2.2; attach substantiation forms) [X] NO (Do not answer 2.2; go to Section 3) Is this copy [] Sanitized [] Unsanitized							
2.1 [] Yes (Answer question 2.2; attach substantiation forms) [X] NO (Do not answer 2.2; go to Section 3) Is this copy 2.2 [] Sanitized [] Unsanitized							
2.2 [] Sanitized [] Unsanitized							
SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)							
I hereby certify that I have reviewed the attached docurrents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the arrounts and values in this report are accurate based on reasonable estimates using data available to the preparers of this report.							
Name and official title of owner/operator or senior management official: Signature: Date Signed:							
Aaron Dailey Environmental Manager Reference Copy: Copy of Record Resides in CDX 2020-06-02							
SECTION 4. FACILITY IDENTIFICATION							
Facility or Establishment Name TRI Facility ID Number BIA Code 87545LSLMSLOSAL							
4.1 Street Facility or Establishment Mailing Address (if different from physical street address) PO BOX 1663							
City/County/State/ZIP Code City/State/ZIP Code LOS ALAMOS / Los Alamos / NM / 87545 Country (Non-US)							
4.2 This report contains information for: (Important: check a or b; check c or d if applicable) a. [X] An Entire facility b. [] Part of a facility c. [] A Federal facility d. [X] G000							
4.3 Technical Contact name Walt Whetham Email Address walt@lanl.gov Telephone Number (include area code and ext.) 505-665-8885							
4.4 Public Contact name Peter Hyde Email Address pahyde@lanl.gov Telephone Number (include area code and ext.) 505-667-3792							
4.5 NAICS Code(s) (6 digits) a. 928110 (Primary) b. c. d. e. f.							
Dun and Bradstreet Number(s) (9 digits)							
a. NA							
b,							
SECTION 5. PARENT COMPANY INFORMATION							
Narre of U.S. Parent Company (for TRI Reporting purposes) No U.S. Parent Company (for TRI Reporting purposes) No U.S. Parent Company (for TRI Reporting purposes)							
5.2 Parent Company's Dun & Bradstreet Number NA [X]							

				TRI Facility ID Number	ber		
	EPA F	ORM R		37545LSLMSLOSAL			
	PART II. CHEMICAL - S	SPECIFIC INFORMATION	ON .	Toxic Chemical, Category, or Generic Name			
				_ead			
SECTION	N 1. TOXIC CHEMICAL IDENTITY (Import	ant: DO NOT complete this so	ection if you are reporting a mixture	component in Section 2 belo	w.)		
	CAS Number (Important: Enter only one number ex	actly as it appears on the S	ection 313 list. Enter category code	if reporting a chemical categ	ory.)		
1.1	007439921						
	Toxic Chemical or Chemical Category Name (Impor	tant: Enter only one name ex	cactly as it appears on the Section (313 list.)			
1,2	Lead		Service of the service of the service of				
	Generic Chemical Name (Important: Complete only	if Part I. Section 2.1 is check	red "Yes". Generic Name must be s	tructurally descriptive).			
1.3		in Fact, Coolon 211 to Oneon	50 100 100 1010 1010 100 100	a dotal cally docon partoy.			
CECTION	NA	NOT	f 1 \				
SECILO	N.2. MXTURE COMPONENT IDENTITY (Important: DC Generic Chemical Name Provided by Supplier (Imp			and punctuation)			
2.1	2 11 11	JILANIL IVEXINDINO 70 CHAPA	icters, including numbers, spaces, i	aria parictadaori.)			
	NA						
	N3, ACTIVITIES AND USES OF THE TOXIC CHEVIC4 nt: Check all that apply.)	LATTHEFACILITY					
	Manufacture the toxic chemical:	3.2 Process the toxic	c chemical:	3.3 Otherwise use the	toxic chemical:		
	a. [] Produce b. [] Import						
If produce or import: c. [] For on-site use/processing d. [] For sale/distribution e. [] As a byproduct f. [] As an impurity Sub-Uses: c. [] As an artic d, [X] Repacka e. [] As an impurity		b. [] As a formula	component component ing	a. [] As a chemical processing aid Sub-Uses: b. [] As a manufacturing aid Sub-Uses: c. [X] Ancillary or other use Sub-Uses: Z399			
SECTION	44. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL (IL DN-SITEAT ANY TIMEDURIN	NG THE CALENDAR YEAR				
4.1	[05] (Enter two-digit code from instruction pack	age.)					
SECTION	N 5. QUANTITY OF THE TOXIC OHEMICAL ENTERING	EACH ENVIRONMENTAL M	EDIUMON-SITE				
			A. Total Release (pounds/year*) (Enter range code or estimate**)	B. Basis of Estimate (Enter code)	C. Percent from Stormwater		
5.1	Fugitive or non-point air emissions	NA[]	3.2	С			
5.2	Stack or point air errissions	NA[]	0.49	E1			
5.3	Discharges to receiving streams or water bodies (Enter one name per box)	NA[]			TARREST ST		
	Stream or Water Body Name	Reach Code (optional)					
_	Sandia Tributary to Rio Grande		0.178	M2	0%		
	Mortandad Tributary to Rio Grande		0.01	M2	0%		
5.3.3	Los Alamos Tributary to Rio Grande		0.054	M2	0%		

EPA Form 9350-1 (Rev.) - Previous editions are obsolete.

				THI Facility ID Nur	nber		
		₽	87545LSLMSLOSAL Toxic Cherrical, Category, or Generic Name Lead				
	PART II. CHEMICA	AL - SPE					
SECTION	5. QUANTITY OF THE TOXIC CHEV	ICAL EVITE	RING EACH ENVIRONMENTAL MEDIUM ON-SITE (Continue	d)			
		NA	A. Total Release (pounds/year*) (Enter range	code** or estimate)	B. Basis of Estimate (Enter code)		
5.4-5.5	Disposal to land on-site				A PART OF THE PART		
5.4.1	Class I Underground Injection wells	[X]					
5.4.2	Class IFV Underground Injection wells	[X]					
5.5.1.A	RORA subtitle Clandfills	[X]					
5.5.1.B	Other landfills	[X]					
5.5.2	Land treatment/application farming	[X]					
5,5.3A	RCRA Subtitle C surface impoundments	[X]					
5.5.3B	Other surface impoundments	[X]					
5.5.4	Other disposal	[]	1845		С		
	Waste Rock Ples Information check this box if your Section 5.5	quantities ir	nclude "waste rock piles." [] Enter quantity of "waste roc	ck piles" (pounds/year*)			
SECTION	16. TRANSFER(S) OF THE TOXIC O	HEMICAL IN	IWASTES TO OFF-SITE LOCATIONS				
6.1 DISC	HARGES TO PUBLICLY OWNED TR	EATMENT V	VORKS (POTWs)		NA [X]		

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						TRI Fac	ility ID Number				
		EPA F	ORM R			87545LSLMSLOSAL					
	PART II. CHI		C INFORMATION (CONTINUED	0)		Toxic Chemical, Category, or Generic Name					
						Lead					
SECTIO	N 6.2 TRANSFERS TO OTHER	OFF-SITE LOCATIONS	NA []								
6,2,1 C	off-Site EPA Identification Number	per (RCRA IDNo.)		lumpe	8259889	8					
<u> </u>	f-Site Location Name:						IVE FACILITY				
Of	f-Site Address:			_			XIT 49, FIVE M				
C4.	CDANTONALLE	lot		<u> </u>		T	1	Country			
City	GRANTSVILLE	County	Tooele	State	υT	ZIP	84029	(Non-US)			
	Is location under control of re	eporting facility or pare	nt company?			[]Yes	[X] No				
	A. Total Transfer (pou		B. Basis of Estirrate (Enter code)					ste Treatment/Disposal/			
1.	12468.6	or estimate)	1. 0	-	1. M65	Recycling/Energy Recovery (Enter code)					
	ff-Site EPA Identification Numb	ver /DCDA IDAh \		INAD	2 004 00000						
	f-Site Location Name:	DET (NOTA ID NO.)			0000103		ST RICHLAND IN	_			
	f-Site Address:				BATTELL		SI NCHEADIN	<u> </u>			
	T		7	2023	T	LOCAD	_	Country			
City	RICHLAND	County	Benton	State	WA	ZIP	99354	(Non-US)			
	Is location under control of re	eporting facility or pare	nt company?			[]Yes	[X] No				
	A. Total Transfer (pou	unds/year*)	B. Basis of Estimate			C	Type of Waste Tr	reatment/Disposal/			
	(Enter range code**	or estimate)	(Enter code)		Recycling/Energy Recovery (E		covery (Enter code)				
1.	4.1		1.0		1 . M64						
6.2.3 C	ff-Site EPA Identification Numb	oer (RORA ID No.)		NV38	9009000	1					
Of	-Site Location Name:			U.S.	DOE, NINS	ANFO					
Of	f-Site Address:			NEVA	DA NATIO	ONAL SE	CURITYSITE				
City	MERCURY	County	Nye	State	NV	ZIP	89023	(Non-US)			
	Is location under control of re	eporting facility or pare	nt company?			[]Yes	[X]No				
	A. Total Transfer (pou		B. Basis of Estimate (Enter code)				Type of Waste Tr	reatment/Disposal/ covery (Enter code)			
1.	0.5	,	1.0		1. M94						
6.2.4 C	ff-Site EPA Identification Numb	per (RORA ID No.)		CODS	8059118	4					
	-Site Location Name:	Section 14 Control of the Control of			VEOLIA ES TECHNICAL SOLUTIONS LLC						
Off	-Site Address:			9131	E96TH	VE					
City	HENDERSON	County	Adams	State	œ	ZIP	80640	Country			
- City				Cazac		-	00040	(Nbn-US)			
	Is location under control of re	eporting facility or pare	ompany?			[] Yes [X] No					
	A. Total Transfer (pou		B. Basis of Estimate (Enter code)				C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (Enter code)				
1.	462.4	or estimate)	1.0	7 5 37 7				covery (Lines code)			
6.2.5 O	ff-Site EPA Identification Numb	er (RORA ID No.)		NM48	9013908	8					
	-Site Location Name:	,		-	U.S. DOE WASTE ISOLATION PILOT PLANT						
Off	-Site Address:						RLSBAD ON				
City	CARLSBAD	County	Eddy	State	NM	ZIP	88220	Country (Non-US)			
	Is location under control of re	eporting facility or pare	nt company?			[] Yes	[X]Nb	10.50			
	A. Total Transfer (pou		B. Basis of Estimate	T	[] Yes [X] No C. Type of Waste Treatment/Disposal/						
1	(Enter range code** c	or estimate)	(Enter code)		Recycling/Energy Recovery (Enter code) 1. M41						
		or (DODA IDAL \	1.0	la page		20		-11-2			
	ff-Site EPA Identification Numb -Site Location Name:	ER (MUNA IUNO.)			NMD986683563 WASTE MGMT OF NEW MEXICO						
	-Site Address:						LOOP NE				
UI UI	CITIC PULLICOS.			402 II	AND IK	F LMA	LUUF NE				

City	RIO RANCHO		County	Sandoval	Star	e NM	ZIP	87124	Country (Non-US)		
	ls location under cont	rol of reporting f	acility or parent	company?			[]Yes	[X] No			
	A. Total Trans (Enter range of	B. Basis of Estin (Enter code)	A-1000	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (Enter code)							
1.	0.3			1.0		1 . M64					
6.2.7 O	ff-Site EPA Identificatio	n Number (ROR/	A ID No.)		TXI	98808846	4				
Off	-Site Location Name:				WA	STE CONT	ROL SPI	CIALISTS			
Off	-Site Address:				999	8 W STAT	EHIGHW	AY 176			
City	ANDREWS		County	Andrews	Sta	e TX	ZIP	797149100	Country (Non-US)		
Is location under control of reporting facility or parent company?						[]Yes[X]No					
A. Total Transfer (pounds/year*) B. Basis of Estimate) (Enter range code** or estimate) (Enter code)						C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (Enter code)					
1.51.8				1.0		1 . M64					
SECTIO	N 7A. ONSITE WASTE	TREATMENT ME	THOOS AND EFT	ROBNCY							
[] Not A	Applicable (NA) - Check	chere if no on-si	te waste treatm	ent is applied to any waste str	eam containing	the toxic cl	nerrical or	chemical category.			
			nent Method(s) Sequence character code(s)]			c. Waste Treatment Efficiency Estimate					
7A.1 a				7A.1 b	7A.1b			7A.1 c			
W 2:H123 3:H077 4:H0				H082 5: H124 6: H129 7	082 5:H124 6:H129 7:H122			B			
7A.2a			7A 2 b	7A 2 b			7A 2 c				
	S			2: H101				E 6			

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EPA FORM R PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number	
87545LSLMSLOSAL	
Toxic Chemical, Category, or Generic Name	
Lead	

SECTION 7B, ON SITE BNERGY RECOVERY PROCESSES

[X] NA - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category.
Energy Recovery Methods [Enter 3-character code(s)]

SECTION 7C. ON SITE RECYCLING PROCESSES

[X] NA - Check here if no on-site recycling is applied to any waste stream containing the toxic chemical or chemical category.

Recycling Methods [Enter 3-character code(s)]

		Colurm A Prior Year (pounds/year*)	Column B Current Reporting Year (pounds/year*)	Column C Following Yea (pounds/year*				
	8.1 - 8.7 Production-Related Waste Managed		THE PERSON NAMED IN					
8.1a	Total on-site disposal to Class I Underground Injection Wells, RORA Subtitle Clandfills, and other landfills	NA	NA	NA	NA			
8.1b	Total other on-site disposal or other releases	1142,439	1848.932	1500	1500			
8.1c	Total off-site disposal to Class I Underground Injection Wells, RORA Subtitle Clandfills, and other landfills	17405.6	12987.2	5000	5000			
8.1d	Total other off-site disposal or other releases	13.5	2913.8	100	100			
8.2	Quantity used for energy recovery on-site	NA	NA	NA	NA			
8.3	Quantity used for energy recovery off-site	NA	NA	NA	NA			
8.4	Quantity recycled on-site	NA	NA	NA	NA			
8.5	Quantity recycled off-site	NA	NA	NA	NA			
8.6	Quantity treated on-site	NA	NA	NA	NA			
8.7	Quantity treated off-site	NA	NA	NA	NA			
8.8	Non-production-related waste managed**		NA	NA				
8.9	[] Production ratio or [X] Activity ratio (select one and enter value	1.29	1.29					
8,10	Did your facility engage in any newly implemented source reduction year? If so, complete the following section; if not, check NA.	on activities for this chemical during the rep	this chemical during the reporting NA [X]					
	Source Reduction Activities (Enter code(s))	Methods to Identify A	ctivity (Enter code(s))		tirrated annual reduction Inter code(s)) (optional			

*For Dioxin and Dioxin-like Compounds, report in grams/year
** Includes quantities released to the environment or transferred off-site as a result of
remedial actions, catastrophic events, or other one-time events not associated with
production processes

TRI Facility IDNumber

87545LSLMSLOSAL

Toxic Cherrical, Category, or Generic Name

Lead

Additional optional information on source reduction, recycling, or pollution control activities.

Section 8.11: If you wish to submit additional optional information on source reduction, recycling, or pollution control activities, provide it here.

Topic Comment

Section 9.1: If you wish to submit any miscellaneous, additional, or optional information regarding your Form Rsubmission, provide it here.

Topic Comment