

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

Date Completed: 6/23/2022 10:59 AM EST

Confirmation Number: 10085

Amended Confirmation Number:

Employer Information

Name: United Network for Organ Sharing  
Address: 700 N. 4th Street  
City: Richmond  
State: VA  
Zip Code: 23219

Plan Administrator Information

Name: Dale Smith  
Address: 700 N. 4th Street  
City: Richmond  
State: VA  
Zip Code: 23219  
Phone: 8047824880  
Email: dale.smith@unos.org

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:	Number of Employees: 8
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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 10085. 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.