

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

Date Completed: 9/2/2022 8:03 PM EST

Confirmation Number: 10359

Amended Confirmation Number:

Employer Information

Name: On Path Federal Credit Union  
Address: 3131 N I-10 Service Road  
City: Metairie  
State: LA  
Zip Code: 70002

Plan Administrator Information

Name: Jared Freeman  
Address: 3131 N-I10 Service Road  
City: Metairie  
State: LA  
Zip Code: 70002  
Phone: 3345587767  
Email: jared.freeman@beonpath.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:	ONPATH FEDERAL CREDIT UNION EXECUTIVE INCENTIVE AGREEMENT	Number of Employees: 3
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Additional Information:

September 2, 2022 United States Department of Labor Employee Benefits Security Administration Top Hat Plan Exemption 200 Constitution Avenue, NW, N-1513 Washington, DC 20210 This statement is being provided pursuant to Department of Labor Regulation 29 CFR §2520.104-23 as the alternative method of compliance with the reporting and disclosure requirements of Part I of Title I of the Employee Retirement Income Security Act of 1974 for unfunded plans for a select group of management or highly compensated employees. In accordance with said Regulation, [sample bank] is providing the following information: Sponsoring Employer Name and Address: OnPath Federal Credit Union 3131 N. I-10 Service Road E Metairie, LA 70002 Sponsoring Employer Identification Number: 72 -0838126 Number of Plans: 1 Name of Plan(s): OnPath Federal Credit Union Executive Incentive Agreement Number of Participants: 3 The Employer maintains the Plan primarily for the purpose of providing deferred compensation for a select group of management and highly compensated employees. Please acknowledge receipt of this notice by stamping or signing the enclosed copy of this notice and returning it to me in the enclosed envelope. Sincerely,



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 10359. 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.