

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

Date Completed: 9/15/2023 10:18 AM EST

Confirmation Number: 12046
Amended Confirmation Number: 12008

Employer Information

Name: Cary Gastroenterology Associates
Address: 115 Kildaire Park Drive Ste 201
City: Cary
State: NC
Zip Code: 27518

Plan Administrator Information

Name: Cary Gastroenterology Associates
Address: 115 Kildaire Park Drive Ste 201
City: Cary
State: NC
Zip Code: 27518
Phone: 9198164948
Email: NSIMPSON@CARYGASTRO.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: CARY GASTROENTEROLOGY ASSOCIATES Number of
Employees: 5

Additional Information:

Updating plan to reflect number of employees in plan.



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 12046. 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.