

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

Date Completed: 1/25/2024 10:18 AM EST

Confirmation Number: 12670

Amended Confirmation Number:

Employer Information

Name: Lanier Federal Credit Union
Address: 3718 Mundy Mill Rd
City: Oakwood
State: GA
Zip Code: 30566

Plan Administrator Information

Name: Cherry Walton/Lanier Federal Credit Union
Address: 3718 Mundy Mill Rd
City: Oakwood
State: GA
Zip Code: 30566
Phone: 7709546303
Email: cherry@lanierfcu.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:	Lanier Federal Credit Union 457(b) Plan	Number of Employees: 4
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Additional Information:

This plan is effective 2/6/2024.



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 12670. 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.