

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

Date Completed: 6/16/2026 3:28 PM EST

Confirmation Number: 16632

Amended Confirmation Number:

Employer Information

Name: Takeda Pharmaceuticals U.S.A., Inc.  
Address: 500 Kendall Street  
City: Cambridge  
State: MA  
Zip Code: 02421

Plan Administrator Information

Name: Takeda Pharmaceuticals U.S.A., Inc. U.S. Benefit Administrative Committee  
Address: 500 Kendall Street  
City: Cambridge  
State: MA  
Zip Code: 02421  
Phone: 8473833000  
Email: matthew.regan@takeda.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:	Takeda Pharmaceuticals U.S.A., Inc. Supplemental Executive Retirement Plan	Number of Employees: 2262
ID:2	Plan Name:	Takeda Pharmaceuticals U.S.A., Inc. Excess Benefit Plan	Number of Employees: 125
ID:3	Plan Name:	Takeda Pharmaceuticals U.S.A., Inc. Deferred Compensation Plan	Number of Employees: 872
ID:4	Plan Name:	Shire US Holdings Inc. Supplemental Executive Retirement Plan	Number of Employees: 4
ID:5	Plan Name:	Millennium Pharmaceuticals, Inc. Amended and Restated Nonqualified Deferred Compensation Plan	Number of Employees: 13
ID:6	Plan Name:	Millennium Pharmaceuticals, Inc. Supplemental Executive Retirement Plan	Number of Employees: 26

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 16632. 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.