

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

Date Completed: 8/13/2026 8:44 AM EST

Confirmation Number: 16878

Amended Confirmation Number:

Employer Information

Name: Smith College
Address: Garrison Hall, 42 West Street
City: Northampton
State: MA
Zip Code: 01063

Plan Administrator Information

Name: Ms. Katie Bowling, Head of Total Rewards
Address: Garrison Hall, 42 West Street
City: Northampton
State: MA
Zip Code: 01063
Phone: 4135852275
Email: kbowling@smith.edu

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:	Smith College 457(f) Deferred Compensation Plan 2	Number of Employees: 1
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Additional Information:

The Plan is effective as of July 1, 2026 and adopted on August 11, 2026.



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 16878. 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.