

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

Date Completed: 8/9/2017 10:57 AM EST

Confirmation Number: 2804

Amended Confirmation Number:

Employer Information

Name: Auto Care Association
Address: 7101 Wisconsin Ave, Suite 1300
City: Bethesda State: MD Zip Code: 20814

Plan Administrator Information

Name: Auto Care Association - Attn: Nathan Perrine
Address: 7101 Wisconsin Ave, Suite 1300
City: Bethesda State: MD Zip Code: 20814
Phone: 2403331040
Email: nathan.perrine@autocare.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: Auto Care Association Section 457(f) Deferred Compensation Plan Number of Employees: 1

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 2804. 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.