

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

Date Completed: 1/22/2020 6:26 PM EST

Confirmation Number: 6154

Amended Confirmation Number:

Employer Information

Name: Georgia Theatre Company
Address: 50 Cinema Lane
City: St. Simons Island
State: GA
Zip Code: 31522

Plan Administrator Information

Name: Georgia Theatre Company
Address: 50 Cinema Lane
City: St. Simons Island
State: GA
Zip Code: 31522
Phone: 9126345192
Email: mwarren@gtcmovies.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:	Georgia Theatre Company 2020 Stock Appreciation Right Plan	Number of Employees: 4
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Additional Information:

Four employees received awards under the plan in January 2020.



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 6154. 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.