

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

Date Completed: 3/23/2020 11:16 AM EST

Confirmation Number: 6416

Amended Confirmation Number:

Employer Information

Name: Trinseo LLC
Address: 1000 Chesterbrook Blvd, Suite 300
City: Berwyn
State: PA
Zip Code: 19312

Plan Administrator Information

Name: Trinseo LLC
Address: 1000 Chesterbrook Blvd, Suite 300
City: Berwyn
State: PA
Zip Code: 19312
Phone: 6102403277
Email: swaters@trinseo.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: Trinseo Restoration and Elective Deferral Plan Number of Employees: 22

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 6416. 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.