

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

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Confirmation Number: 7271

Amended Confirmation Number:

Employer Information

Name: Medical Guardian, LLC
Address: 1818 Market Square, Suite 1200
City: Philadelphia
State: PA
Zip Code: 19103

Plan Administrator Information

Name: Geoffrey M. Gross
Address: 1818 Market Square, Suite 1200
City: Philadelphia
State: PA
Zip Code: 19103
Phone: 2159195566
Email: geoff@medicalguardian.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:	Medical Guardian, LLC 2015 Phantom Equity Plan	Number of Employees: 145
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Additional Information:

Number of PARTICIPANTS in this top hat plan is six; note the number of EMPLOYEES with employer is a total of 145.



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 7271. 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.