

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

Date Completed: 2/3/2021 3:45 PM EST

Confirmation Number: 7611

Amended Confirmation Number:

Employer Information

Name: W.L. Gary Company, Incorporated
Address: 225 Vine St. NW
City: Washington
State: DC
Zip Code: 20090

Plan Administrator Information

Name: W.L. Gary Company, Incorporated
Address: 225 Vine St. NW
City: Washington
State: DC
Zip Code: 20090
Phone: 2027230676
Email: MikeS@wlgary.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: W.L. Gary Company, Incorporated NQDC Plan Number of
Employees: 6

Additional Information:

effective date March 1, 2021 eligible employees 6 participating employees 0 (new plan)



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 7611. 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.