

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

Date Completed: 5/5/2021 9:08 AM EST

Confirmation Number: 8107

Amended Confirmation Number:

Employer Information

Name: Availity LLC
Address: 5555 Gate Parkway Suite 110
City: Jacksonville
State: FL
Zip Code: 32256

Plan Administrator Information

Name: Availity LLC
Address: 5555 Gate Parkway Suite 110
City: Jacksonville
State: FL
Zip Code: 32256
Phone: 6142840532
Email: christopher.bohme@availity.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:	Availity LLC 2021 Long-Term Incentive Plan	Number of Employees: 40
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Additional Information:

effective date March 1, 2021 total eligible employees 40 total 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 8107. 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.