

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

Date Completed: 5/19/2021 9:42 AM EST

Confirmation Number: 8169

Amended Confirmation Number:

Employer Information

Name: Delkor Systems, Inc.
Address: 4300 Round Lake Road West
City: Saint Paul
State: MN
Zip Code: 55112

Plan Administrator Information

Name: Dale C. Andersen
Address: 4300 Round Lake Road West
City: Saint Paul
State: MN
Zip Code: 55112
Phone:
Email: dandersen@delkorsystems.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: | Delkor LTI/ Dan Altman | Number of Employees: 1 |
| ID:2 | Plan Name: | Delkor LTI/Rick Gessler | Number of Employees: 1 |
| ID:3 | Plan Name: | Delkor LTI/ Jake Jacobson | Number of Employees: 1 |
| ID:4 | Plan Name: | Delkor LTI/Praveen Rokkam | Number of Employees: 1 |
| ID:5 | Plan Name: | Delkor LTi/ Kevin Weiss | Number of Employees: 1 |

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 8169. 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.