

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

Date Completed: 8/30/2021 12:19 PM EST

Confirmation Number: 8564

Amended Confirmation Number:

Employer Information

Name: Lakeshore Learning Equipment Company d/b/a Lakeshore Learning Materials  
Address: 2695 East Dominguez Street  
City: Carson  
State: CA  
Zip Code: 90895

Plan Administrator Information

Name: Lakeshore Learning Equipment Company d/b/a Lakeshore Learning Materials  
Address: 2695 East Dominguez Street  
City: Carson  
State: CA  
Zip Code: 90895  
Phone: 5626521514  
Email: klamb@lakeshorelearning.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:	Lakeshore Learning Materials Deferred Compensation Plan	Number of Employees: 3
ID:2	Plan Name:	Deferred Compensation Agreement - EA	Number of Employees: 1
ID:3	Plan Name:	Deferred Compensation Arrangement - SG Bonus	Number of Employees: 1

Additional Information:

This statement is being filed in connection with three Form 5500 submissions under the Delinquent Filer Voluntary Compliance Program (DFVCP).



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 8564. 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.