

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

Date Completed: 3/25/2022 10:14 AM EST

Confirmation Number: 9609

Amended Confirmation Number:

Employer Information

Name: Healthcare Foundation of La Porte, Inc  
Address: 140 East Shore Parkway  
City: La Porte  
State: IN  
Zip Code: 46350

Plan Administrator Information

Name: The Healthcare Foundation of La Porte , Inc Board of Directors through Maria Fruth CEO  
Address: 140 East Parkway  
City: La Porte  
State: IN  
Zip Code: 46350  
Phone: 2193262471  
Email: mfruth@hflaporte.org

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:	Number of Employees: 1
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Additional Information:

On July 24, 2019, an unfunded deferred compensation plan was adopted by the Board of Directors of Healthcare Foundation of La Porte, Inc (HFL). The plan defers compensation for the HFL CEO, Maria Fruth ,and NO other employees of HFL. The Plan is (i) unfunded and not insured; (ii) covers only the CEO, the most highly compensated employee of HFL; and (iii) is in a written document which was approved by the HFL Board of Directors and is subject to review and administration by the Board of Directors. It was believed a registration was filed with the Department in 2019 by the former Chief Financial Officer of HFL , but no registration statement can be located so it is believed that through omission, no statement has been filed. This registration statement is filed to comply with DOL regulations for unfunded Top Hat plans by HFL general counsel, James Kaminski, jwkaminski@nlkj.com, 219-362-1577.



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 9609. 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.