

Explanation of Form 2

**ALTERNATIVE REPORTING AND DISCLOSURE STATEMENT FOR
NONQUALIFIED DEFERRED COMPENSATION PLANS FOR A SELECT
GROUP OF MANAGEMENT OR HIGHLY COMPENSATED EMPLOYEES****— For the Use of Legal Counsel Only —**

Application: Unfunded nonqualified deferred compensation plans maintained for a select group of management or highly compensated employees.

Purpose: Substitute for all reporting requirements under Part I of ERISA.

Timing: To be filed with the Secretary of Labor within 120 days after the plan becomes effective.

Manner of Filing: The completed form should be mailed (we recommend certified receipt requested) to:

Top Hat Plan Exemption
Employee Benefits Security Administration
Room N-5644
U.S. Department of Labor
200 Constitution Avenue NW
Washington, DC 20210

- Notes:**
- (1) It is not necessary to file a separate form for each covered plan maintained by the employer, and alternative language, in brackets, is provided for use where there is more than one plan.
 - (2) We believe that it is reasonable to take the position that where there are separate employment agreements for individual employees, each containing deferred compensation provisions, but all using essentially the same terms, there is only one plan.

EBSA/PUBLIC DISCLOSURE
2020
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Form 2

ALTERNATIVE REPORTING AND DISCLOSURE STATEMENT
FOR NONQUALIFIED DEFERRED COMPENSATION PLANS
FOR A SELECT GROUP OF MANAGEMENT
OR HIGHLY COMPENSATED EMPLOYEES

-- For the Use of Legal Counsel Only --

To the Secretary of Labor:

In compliance with the requirements of the alternative method of reporting and disclosure under Part 1 of Title I of the Employee Retirement Income Security Act of 1974 for unfunded pension plans for a select group of management or highly compensated employees, specified in Department of Labor Regulations, 29 C.F.R. § 2520.104-23, the following information is provided by the undersigned employer.

Name and Address of Employer: Crystal Engineering Co., Inc.
2 Stanley Tucker Dr. Newburgport, MA 01950

Employer Identification Number: 04-2389706

[Name of employer] maintains a plan (or plans) primarily for the purpose of providing deferred compensation for a select group of management or highly compensated employees.

Number of Plans and
Participants in Each Plan: 1 Plan covering 4 employees [or
_____ Plans covering _____, _____, and _____, employees,
respectively.]

Dated 11/28/20, 2020.

[Name of Employer]

By: [Signature]
Plan Administrator
Michael R. Totts



**CRYSTAL
ENGINEERING**

2 Stanley Tucker Drive
Newburyport, MA 01950

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