

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

Date Completed: 6/14/2022 3:37 PM EST

Confirmation Number: 10034  
Amended Confirmation Number: 10021

Employer Information

Name: Southern Illinois Healthcare Foundation Inc  
Address: 2041 Goose Lake Dr.  
City: Sauget  
State: IL  
Zip Code: 62206

Plan Administrator Information

Name: Mark Murtha  
Address: 6010 Bond Avenue  
City: Centreville  
State: IL  
Zip Code: 62207  
Phone: 6183973303  
Email: mmurtha@sihf.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: 90
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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 10034. 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.