

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

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Confirmation Number: 12650

Amended Confirmation Number:

Employer Information

Name: The Joint Commission on Accreditation of Healthcare Organizations
Address: 1 Renaissance Blvd, Oakbrook Terrace, IL
City: Oakbrook Terrace
State: IL
Zip Code: 60181

Plan Administrator Information

Name: Lori Rudnicki
Address: 1 Renaissance Blvd, Oakbrook Terrace, IL
City: Oakbrook Terrace
State: IL
Zip Code: 60181
Phone: 6307925605
Email: lrudnicki@jointcommission.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: | The Joint Commission 457(f) Plan | Number of Employees: 6 |
|------|------------|----------------------------------|---------------------------|

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 12650. 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.