

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

Date Completed: 5/10/2024 9:49 AM EST

Confirmation Number: 13180

Amended Confirmation Number:

Employer Information

Name: National Christian Charitable Foundation, Inc.  
Address: 1150 Sanctuary Pkwy., Suite 350  
City: Alpharetta  
State: GA  
Zip Code: 30009

Plan Administrator Information

Name: National Christian Charitable Foundation, Inc.  
Address: 1150 Sanctuary Pkwy., Suite 350  
City: Alpharetta  
State: GA  
Zip Code: 30009  
Phone: 6788921892  
Email: jrichards@ncfgiving.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:	National Christian Charitable Foundation, Inc. 457f Plan	Number of Employees: 1
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Additional Information:

Effective Date: June 1, 2024 Total eligible employees 1 total participating 0 (new plan)



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 13180. 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.