

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: 14010
Amended Confirmation Number: 12530

Employer Information

Name: Children's Home of Northern Kentucky
Address: 200 Home Road, Covington, KY
City: Covington
State: KY
Zip Code: 41011

Plan Administrator Information

Name: David Howard
Address: 200 Home Road, Covington, KY
City: Covington
State: KY
Zip Code: 41011
Phone: 8592924176
Email: dhoward@chnk.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:	CHNK Behavioral Health G77351 457(b)	Number of Employees: 5
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Additional Information:

a select group of management or highly compensated employees. ID:1 Plan Name: CHNK Behavioral Health G77351 457(b) Deferred Compensation Plan Number of Employees: 5 Added a new position and employee eligible to participate in the plan meeting the definition for inclusion in a select group of management or highly compensated employees. The number of participants is now 5, previously the number was 4.



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 14010. 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.