

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: 14169
Amended Confirmation Number:

Employer Information

Name: ARNTZ BUILDERS INC
Address: 431 PAYRAN ST
City: PETALUMA
State: CA
Zip Code: 94952

Plan Administrator Information

Name: DAVID ARNTZ
Address: 431 PAYRAN ST
City: PETALUMA
State: CA
Zip Code: 94952
Phone: 7078352900
Email: YULIYA@ARNTZBUILDERS.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:	Key Employee Top Hat Plan	Number of Employees: 2
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Additional Information:

Arntz Builders, Inc. Key Employee Top Hat Plan December 3, 2024



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 14169. 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.