

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

Date Completed: 3/10/2025 6:06 PM EST

Confirmation Number: 14590

Amended Confirmation Number:

Employer Information

Name: National Council for Air and Stream Improvement, Inc.
Address: 1513 Walnut Street, Suite 200
City: Cary
State: NC
Zip Code: 27511

Plan Administrator Information

Name: Tammerah Garren/Executive Vice President, Treasurer, Corporate Secretary
Address: 4331 Edwin and Gurley Drive
City: Sherrille Ford
State: NC
Zip Code: 28673
Phone: 9199416410
Email: tgarren@ncasi.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:	Supplemental Retirement Plan effective 1-1-2025	Number of Employees: 1
------	------------	--	---------------------------

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 14590. 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.