

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

Date Completed: 9/30/2025 12:44 PM EST

Confirmation Number: 15421

Amended Confirmation Number:

Employer Information

Name: Trustees of Grinnell College
Address: 733 Broad Street
City: Grinnell
State: IA
Zip Code: 50112

Plan Administrator Information

Name: Board of Trustees of Grinnell College
Address: 733 Broad Street
City: Grinnell
State: IA
Zip Code: 50112
Phone: 6412693500
Email: mulholla@grinnell.edu

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:	2024-2030 Section 457(f) Deferred Compensation Plan for the President of Grinnell College	Number of Employees: 1
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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 15421. 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.