

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

Date Completed: 10/16/2025 5:43 PM EST

Confirmation Number: 15516

Amended Confirmation Number:

Employer Information

Name: Arizona Chapter National Safety Council, Inc.
Address: 16814 N. 31st Ave Building 5
City: PHOENIX
State: AZ
Zip Code: 85053

Plan Administrator Information

Name: Arizona Chapter National Safety Council, Inc. Board of Directors
Address: 16814 N. 31st Ave Building 5
City: PHOENIX
State: AZ
Zip Code: 85053
Phone: 6023209622
Email: rmurray@acnsc.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 Non-Qualified Retirement Plan of Arizona Chapter National Safety Council , Inc. For Debbie Grado	Number of Employees: 1
ID:2	Plan Name:	Non-Qualified Retirement Plan of Arizona Chapter Natioanlk Safety Council, Inc. for Jennifer Tittle	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 15516. 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.