

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

Date Completed: 12/18/2025 11:33 AM EST

Confirmation Number: 15793

Amended Confirmation Number:

Employer Information

Name: Simplicity Credit Union  
Address: 222 E Upham St  
City: Marshfield  
State: WI  
Zip Code: 54449

Plan Administrator Information

Name: Simplicity Credit Union  
Address: 222 E Upham St  
City: Marshfield  
State: WI  
Zip Code: 54449  
Phone:  
Email: nfaber@simplicity.coop

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:	Retention Payment Plan	Number of Employees: 3
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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 15793. 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.