



ALTERNATIVE REPORTING AND DISCLOSURE STATEMENT FOR
NONQUALIFIED DEFERRED COMPENSATION PLAN

To: Top Hat Plan Exemption
Employee Benefits Security Administration
Room N-5644
US Department of Labor
200 Constitution Avenue NW
Washington, DC 20210

2520232540001

In accordance with 29 CFR Section 2520.104-23 of the Department of Labor Regulations, which provides an alternative method for complying with the reporting and disclosure requirements of Part 1 of Title 1 of the Employee Retirement Income Security Act of 1974, you are hereby notified that the Employer identified below maintains the Plan identified below for the purpose of providing deferred compensation for a select group of management or highly compensated employees, and that all benefits provided by this Plan are paid as needed solely from the general assets of that Employer.

Employer's Name: Community Foundation of Louisville, Inc.

Employer's Address: 325 W. Main Street, Louisville, KY, 40202

Employer Identification Number: 31-0997017

457 (b) Eligible Deferred Compensation Plan, which covers 2 Participants.

Total Number of Plans: 1

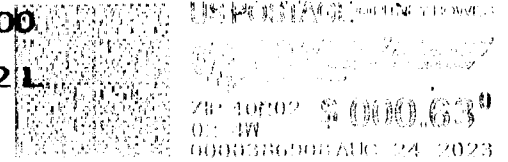
Employer's Name: The Community Foundation of Louisville

By: [Signature]

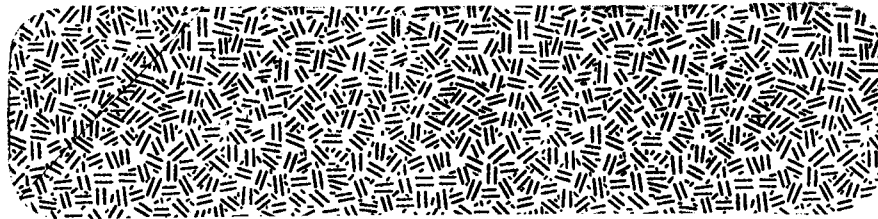
Date: July 12, 2023

The Community Foundation of Louisville
325 West Main Street, Ste. 1110
Louisville, KY 40202

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EBSA
Public Disclosure Room



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