

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

Date Completed: 2/22/2016 10:25 AM EST

Confirmation Number: 1043

Amended Confirmation Number:

Employer Information

Name: Families in Transition, Inc.
Address: 122 Market Street
City: Manchester State: NH Zip Code: 03101

Plan Administrator Information

Name: Families in Transition, Inc.
Address: 122 Market Street
City: Manchester State: NH Zip Code: 03101
Phone: 6036419441
Email: mbeau@fitnh.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:	Families in Transition Section 457(b) Deferred Compensation Plan	Number of Employees: 1
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Additional Information:

This filing is made with respect to the Families in Transition Section 457(b) Deferred Compensation Plan. By this filing, Families in Transition, Inc. does not admit that this Plan is subject to ERISA.



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 1043. 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.