

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

Date Completed: 6/29/2016 8:20 AM EST

Confirmation Number: 1502

Amended Confirmation Number:

Employer Information

Name: Crotched Mountain Foundation

Address: One Verney Drive

City: Greenfield State: NH Zip Code: 03047

Plan Administrator Information

Name: 457(b) Deferred Compensation Plan

Address: One Verney Drive

City: Greenfield State: NH Zip Code: 03047

Phone: 6035473311

Email: Deirdre.Grimes@CrotchedMountain.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:	457(b) Deferred Compensation Plan	Number of Employees: 1
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Additional Information:

effective date August 15, 2016 total eligible employees 1



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 1502. 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.