

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

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Confirmation Number: 2175

Amended Confirmation Number:

Employer Information

Name: San Francisco University High School  
Address: 3065 Jackson Street  
City: San Francisco State: CA Zip Code: 94115

Plan Administrator Information

Name: San Francisco University High School  
Address: 3065 Jackson Street  
City: San Francisco State: CA Zip Code: 94115  
Phone: 4154473124  
Email: tonia.rivera@sfuhs.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: San Francisco University High School DeferredNumber of  
Compensation Plan 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 2175. 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.