

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

Date Completed: 3/20/2017 11:23 AM EST

Confirmation Number: 2366

Amended Confirmation Number:

Employer Information

Name: UMassFive College Federal Credit Union

Address: PO Box 1060

City: Hadley State: MA Zip Code: 01035

Plan Administrator Information

Name: UMassFive College Federal Credit Union

Address: PO Box 1060

City: Hadley State: MA Zip Code: 01035

Phone: 4132565509

Email: jrahilly@umassfive.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: UMassFive College FCU 457(b) Plan	Number of Employees: 6
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Additional Information:

Effective Date May 1, 2017 Total eligible employees 6 Total participating 0 (new plan)



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 2366. 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.