

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: 5819

Amended Confirmation Number:

Employer Information

Name: Hosparus, Inc.  
Address: 3532 Ephraim McDowell Drive  
City: Louisville  
State: KY  
Zip Code: 40205

Plan Administrator Information

Name: Hosparus, Inc.  
Address: 3532 Ephraim McDowell Drive  
City: Louisville  
State: KY  
Zip Code: 40205  
Phone: 5024566200  
Email: jdemunbrun@hosparus.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:	Hosparus, Inc. Section 457(b) Plan Agreement for R. Mueller	Number of Employees: 1
ID:2	Plan Name:	Hosparus, Inc. Section 457(b) Plan Agreement for P. Marshall	Number of Employees: 1
ID:3	Plan Name:	Hosparus, Inc. Section 457(b) Plan Agreement for G. Cooper	Number of Employees: 1
ID:4	Plan Name:	Hosparus, Inc. Section 457(b) Plan Agreement for M. Merrifield	Number of Employees: 1
ID:5	Plan Name:	Hosparus, Inc. Section 457(b) Plan Agreement for B. Snider	Number of Employees: 1
ID:6	Plan Name:	Hosparus, Inc. Section 457(b) Plan Agreement for S. Orman	Number of Employees: 1
ID:7	Plan Name:	Hosparus, Inc. Section 457(b) Plan Agreement for T. Graham	Number of Employees: 1
ID:8	Plan Name:	Hosparus, Inc. Section 457(b) Plan Agreement for S. Herrmann	Number of Employees: 1

Additional Information:

The most recent Top Hat Exemption Statement for Hosparus, Inc. was sent to the Department of Labor on July 18, 2018. The 2018 exemption statement also listed 8 plans. Recently, one of the plans for which the 2018 exemption statement was filed has since been terminated and paid out and another plan has been adopted. The 8 plans listed on this Top Hat Exemption Statement reflects those recent changes.



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 5819. 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.