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July 31, 2002

*Certified Mail*

Top Hat Plan Exemption  
Pension and Welfare Benefits Administration  
Room N-5644  
U.S. Department of Labor  
200 Constitution Avenue, NW  
Washington, DC 20210

U.S. DEPARTMENT OF LABOR  
EMPLOYEE BENEFITS DISCLOSURE  
02 AUG 20 AM 11:17

Re: Notice of Plan of Deferred Compensation

Dear Sir or Madam:

Pursuant to Dept. of Labor regulation section 2520.104-23, and on behalf of The Health Foundation of Greater Cincinnati (the "Employer"), I am hereby filing the following information with respect to the Employer's "nonqualified" plan of deferred compensation:

1. Name and address of Employer:  
The Health Foundation of Greater Cincinnati  
3805 Edwards Rd, Ste 500  
Cincinnati, OH 45209-1948
2. Employer's Identification Number (EIN): 31-0932681
3. The Employer presently maintains one "nonqualified" plan of deferred compensation primarily for the purpose of providing deferred compensation to a select group of management or highly compensated employees.
4. At present, four (4) employees are eligible under such plan.

The Employer will provide plan documents to the Secretary of Labor's representative upon request, pursuant to section 104(a)(6) of the Employee Retirement Income Security Act. This statement is being filed within 120 days of the date that the plan was adopted. Please contact the undersigned if you have any questions about this registration statement.

Sincerely yours,

THE HEALTH FOUNDATION OF GREATER  
CINCINNATI

By: 

Title: Vice President and CEO

PLACE STICKER AT TOP OF ENVELOPE  
TO THE RIGHT OF RETURN ADDRESS  
FOLD AT DOTTED LINE

THE HEALTH FOUNDATION  
OF GREATER CINCINNATI



U.S. POSTAGE  
04.42  
METER STATION

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