



2520043381761

September 20, 2004

Top Hat Plan Exemption
Employee Benefits Security Administration
Room N-5644
US Department of Labor
200 Constitution Avenue NW
Washington, DC 20210

In accordance with 29 CFR Section 2520.104-23 of the Department of Labor Regulations, which provides an alternative method for complying with the reporting and disclosure requirements of Part I of Title I of the Employee Retirement Income Security Act of 1974, you are hereby notified that the Employer identified below maintains the Plan identified below for the purpose of providing deferred compensation for a select group of management or highly compensated employees, and that all benefits provided by this Plan are paid as needed solely from the general assets of that Employer.

Employer's Name: Family Service League of Suffolk County, Inc.
Employer's Address: 790 Park Avenue
Huntington, New York 11743
Employer's Identification Number: 11-1631827

457 Plan of Family Service League covers 8 Participants.
Total Number of Plans: 1

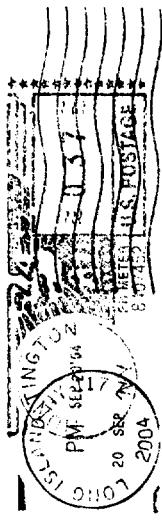
Bernice Selig, Plan Administrator

Signature: 

Date: 9/20/04



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