

U.S. Department of Labor  
 Employee Benefits Security Administration  
 Top Hat Plan Exemption  
 200 Constitution Ave, NW, N-1513  
 Washington, DC 20210

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Re: ERISA REPORTING AND DISCLOSURE STATEMENT

To the Secretary of Labor:

In order to comply with the requirements of the alternative reporting and disclosure method under ERISA, Title I, Part 1, as provided for an unfunded or insured pension plan for a select group of management or highly compensated employees in D.O.L. Reg. Sec. 2520.104-23, the following information is provided by the undersigned plan administrator:

The name of the employer is: Henderson Health Care Services

The employer's mailing address is: 1621 Front Street, Henderson NE 68371

The employer's federal identification number (EIN) is: 47-0366569

The plans of employer and the number of participants covered in each plan is:

Henderson Health Care Services Retirement Plan

Number of Participants: 59

Plan effective date is January 1, 2009

Henderson Health Care Services 457(b) Plan

Number of Participants: 2

Plan effective date is January 1, 2009

(Specify plan, effective date and number of employees covered)

The above-named employer maintains this plan primarily for the purpose of providing nonqualified deferred compensation benefits to a select group of management or highly compensated employees. The employer will provide a copy of the agreement to the Secretary of Labor upon request.

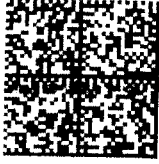
Employer: Henderson Health Care Services

By: Cheryl Brown

Date: 12-31-08

**HENDERSON HEALTH CARE SERVICES, INC.**

1621 Front Street  
Henderson, Nebraska 68371



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