

2520103440573

ALTERNATIVE REPORTING AND DISCLOSURE STATEMENT FOR
A NONQUALIFIED DEFERRED COMPENSATION PLAN

2010 OCT 13 PM 2:34

To: 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 1 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: Community Living, Inc.

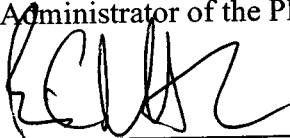
Employer's Address: 1040 St. Peters Howell Road - St. Peters, MO 63376

Employer Identification Number: 43-1129770

Community Living, Inc. 457(b) Eligible Deferred Compensation Plan which covers 1 Participant.

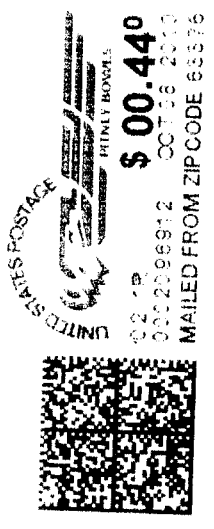
Total Number of Plans: 1

Plan Administrator of the Plans Specified Above: Community Living, Inc.

By:  BRIAN C. MATLOCK

Date: OCTOBER 6, 2010.

Enriching the lives of people with disabilities
1040 St. Peters Howell Road St. Peters, MO 63376



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