

TOP-HAT PLAN EXEMPTION STATEMENT

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

Dear Sir / Madam,

Please accept this letter as a registration statement for our non qualified deferred compensation plan.

Employer Name: Pathfinder International

Address: Nine Galen Street, Suite 217, Watertown, MA 02472

Employer EIN: 53-0235320

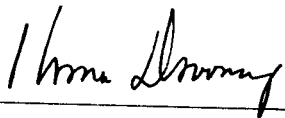
Name of Plan: Pathfinder 457(b) Plan

The Plan is maintained for a select group of management or highly compensated employees.

Number of Plans: 1

Number of Employees in Plan: 2

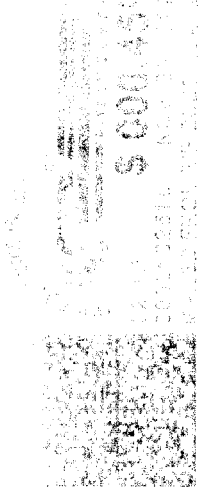
Sincerely,



Officer of Pathfinder International

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Pathfinder
INTERNATIONAL
a global leader in reproductive health



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Int'l Health Benefit