

CRYSTAL SPRINGS UPLANDS SCHOOL

January 23, 2014

Pension and Welfare Benefits Administration

Secretary of Labor

Top Hat Plan Exemption Pension and Welfare Benefits Administration

Room N-5644 - U.S. Department of Labor

200 Constitution Avenue, N.W.

Washington, D.C. 20210

Re: The Crystal Springs Uplands School Non-Qualified Tandem 457 Retirement Plan

Dear Secretary:

Pursuant to Section 2520.104-23 of the Department of Labor's Regulations, this letter will serve as notice that the {Name of School} School has established a Non Qualified Tandem 457 Supplemental Retirement Plan, which is composed of (a) Non-Qualified Section 457(b) Deferred Compensation Plan and (b) Non-Qualified Section 457(f) Supplemental Executive retirement Plan. The undersigned intends to utilize the alternative form of compliance with the reporting and disclosure requirements of Part 1 of Title I of the Employee Retirement Income Security Act of 1974 ("ERISA"), which alternative form of compliance is provided in the aforesaid Regulations Section.

Pursuant to Regulations Section 2520.104-23 (b), the following information is provided:

1. **Name and Address of Employer :**
 Crystal Springs Uplands School
 400 Uplands Drive
 Hillsborough, CA 94010
2. **Employer's Employer Identification Number :** 94-1247265
3. The Employer hereby declares that it maintains the Plan primarily for the purpose of providing deferred compensation for a select group of management or highly compensated employees.


2014 JAN 23 11:16:00

4. The Employer hereby states that the Plan is expected to cover one (1) employee(s).

Pursuant to Regulations Section 2520.104-23(b)(2), the Employer will provide Plan documents, if any, to the Secretary of Labor upon request as required by Section 104(a)(1) of ERISA.

Very truly yours,

Crystal Springs Uplands School

By: 

Print Name: Diane M. Isola

Print Title: CFO

Date: January 23, 2014



CRYSTAL SPRINGS UPLAND
 400 Uplands Drive
 Hillsborough, California 94010-69

7004 2510 0000 3300 5127

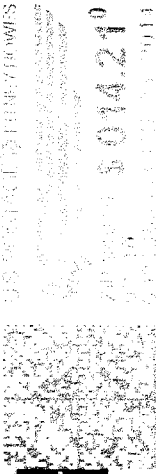
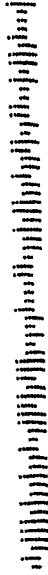
PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

CERTIFIED MAIL



7004 2510 0000 3300 5127

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