



moving victims of violence from crisis to confidence

February 13, 2015

Top Hat Plan Exemption
Pension and Welfare Benefits Administration
Room N-1515
U.S. Department of Labor
200 Constitution Avenue NW
Washington, D.C. 20210

Re: Notice of Plan of Deferred Compensation

Gentlemen:

Pursuant to DOL Reg. Sec. 2520.104-23, the undersigned employer files the following information with respect to its plan of deferred compensation.

1. Name and Address of Employer:

Safe Horizon, Inc.

2 Lafayette Street, 3rd Floor, New York, NY 10007-1327

2. Federal Employer Identification No. (EIN):

13-2946970

3. The Employer maintains 1 plan of deferred compensation primarily for the purpose of providing deferred compensation to a select group of management or highly compensated employees.

4. One employee is covered by such plan.

Upon request, the Employer agrees to provide the Department of Labor with a copy of the plan documents for the above-mentioned plan.

Sincerely,

SAFE HORIZON, INC.

By: 

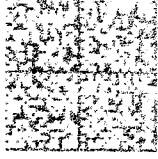
Ronald Moore

Vice President of Human Resources

**SEYFARTH
SHAW**

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