

**SHELTER FOR THE HOMELESS 457 PLAN**  
**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

Re: ERISA REPORTING AND DISCLOSURE STATEMENT

2520160080018

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: Shelter for the Homeless, Inc.

The Employer's mailing address is: ~~616 Atlantic Street~~

137 Henry St Suite 203

Stamford, Connecticut 06902

The Employer's federal identification number (EIN) is: 06-1144355

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

Plan Name: Shelter for the Homeless 457 Plan

Plan Effective Date: January 1, 2015

Plan Adoption Date: 11-30-15

Number of Participants: 2

(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: Shelter for the Homeless, Inc.

By: 

Date: 11-16-15

**CERTIFIED MAIL**



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