

**REPORTING AND DISCLOSURE STATEMENT**

**TOP HAT PLAN (DOL REG. §2520.104-23)**

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**2520161890087**

Name and Address of Employer: *The Massachusetts Foundation for Learning Disabilities  
533 North Road  
Westfield, MA 01085*

EIN of Employer: *04-3099610*

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

Name of Plan: *The Massachusetts Foundation for Learning Disabilities 457(b) Plan*

Date of Adoption of Plan: *June 22, 2016*

Number of Plans: *One (1)*

Number of Participants in Plan: *One (1)*

**THE MASSACHUSETTS FOUNDATION FOR  
LEARNING DISABILITIES**

By: *Jamino Ross*

Dated: *6/22/16*



A N G E L L

The ANGELL Pension Group, Inc.  
Actuaries, Consultants, and Administrators for Employee Benefit Plans  
88 Boyd Avenue  
East Providence, Rhode Island 02914  
Tel: 401.438.9250 Fax: 401.438.7278  
[info@angellpensiongroup.com](mailto:info@angellpensiongroup.com)  
[www.angellpensiongroup.com](http://www.angellpensiongroup.com)

June 24, 2016

**CERTIFIED MAIL, RETURN RECEIPT REQUESTED**

Top Hat Plan Exemption  
Employee Benefits Security Administration  
Room N-1513  
U.S. Department of Labor  
200 Constitution Avenue NW  
Washington, DC 20210

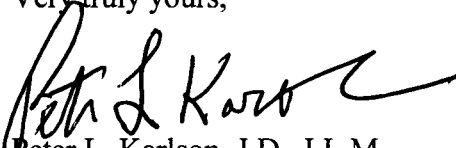
2016 JUN 30 AM 11:18  
U.S.S.A./PUBLIC PROCLAMATION

**Re: *The Massachusetts Foundation for Learning Disabilities 457(b) Plan***

Dear Sir/Madam:

Enclosed for filing is the Disclosure Statement for The Massachusetts Foundation for Learning Disabilities 457(b) Plan to meet the alternative method of compliance with the reporting and disclosure requirements of Part I of Title I of ERISA for top-hat plans pursuant to DOL Reg. Section 2520.104-23.

Very truly yours,

  
Peter L. Karlson, J.D., LL.M.

PLK/jjb  
TOPHAT DOL LTR-457B.DOC

Enclosure

cc: Janine Ross, *The Massachusetts Foundation for Learning Disabilities*  
John G. Madden, CPA, Esq., *Leonard Mulherin & Greene, P.C.*  
Joseph J. Borin, CPC, QPA, QKA, *The Angell Pension Group, Inc.*

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533 North Road  
Westfield, MA 01085*

EIN of Employer: *04-3099610*

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

Name of Plan: *The Massachusetts Foundation for Learning Disabilities 457(f) Plan*

Date of Adoption of Plan: *June 22, 2016*

Number of Plans: *One (1)*

Number of Participants in Plan: *One (1)*

**THE MASSACHUSETTS FOUNDATION FOR  
LEARNING DISABILITIES**

By: \_\_\_\_\_

*Janine Ross*

Dated: \_\_\_\_\_

*6/22/16*



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June 24, 2016

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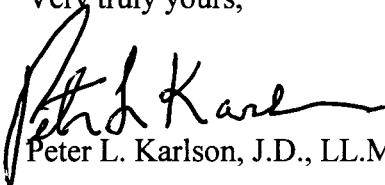
Top Hat Plan Exemption  
Employee Benefits Security Administration  
Room N-1513  
U.S. Department of Labor  
200 Constitution Avenue NW  
Washington, DC 20210

**Re: *The Massachusetts Foundation for Learning Disabilities 457(f) Plan***

Dear Sir/Madam:

Enclosed for filing is the Disclosure Statement for The Massachusetts Foundation for Learning Disabilities 457(f) Plan to meet the alternative method of compliance with the reporting and disclosure requirements of Part I of Title I of ERISA for top-hat plans pursuant to DOL Reg. Section 2520.104-23.

Very truly yours,

  
Peter L. Karlson, J.D., LL.M.

PLK/jjb  
TOPHAT DOL LTR-457F.DOC

Enclosure

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John G. Madden, CPA, Esq., *Leonard Mulherin & Greene, P.C.*  
Joseph J. Borin, CPC, QPA, QKA, *The Angell Pension Group, Inc.*

2016 JUN 30 AM 11:17  
ESSA/FOIA DISCLOSURE

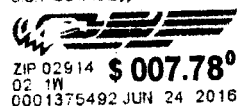
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**CONFIDENTIAL & CONFIDENTIAL**

**Plan Exemption  
Employee Benefits Security Administration  
Room 4000  
Department of Labor  
Constitution Avenue NW  
Washington, DC 20210**

