

**REPORTING AND DISCLOSURE STATEMENT**

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

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2520172240027

Name and Address of Employer: *United Way of Rhode Island, Inc.  
50 Valley Street  
Providence, RI 02909*

EIN of Employer: *05-0276059*

*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: *United Way of Rhode Island, Inc. 457(b) Plan*

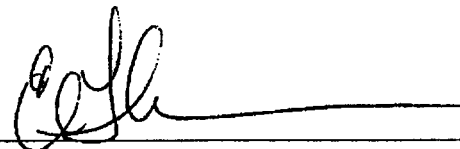
Date of Adoption of Plan: *June 16, 2017*

Number of Plans: *One (1)*

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

**UNITED WAY OF RHODE ISLAND, INC.**

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



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

*6-16-17*



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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  
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[www.angellpensiongroup.com](http://www.angellpensiongroup.com)

July 21, 2017

**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

**Re: *United Way of Rhode Island, Inc. 457(b) Plan***

Dear Sir/Madam:

Enclosed for filing is the Disclosure Statement for the United Way of Rhode Island, Inc. 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/12425-03

Enclosure

cc: Lynn Corwin, PHR, SHRM-CP, *United Way of Rhode Island, Inc.*  
Joseph J. Borin, CPC, QPA, QKA, *The Angell Pension Group, Inc.*

The ANGELL Pension Group, Inc.  
88 Boyd Avenue  
East Providence, Rhode Island 02914



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**CERTIFIED MAIL**



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200 Constitution Avenue NW  
Washington, DC 20210**