

**SCHOFIELD RESIDENCE 457(B) 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

2520191430011

Re: ERISA REPORTING AND DISCLOSURE STATEMENT

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: Wheel Chair Home, Inc. d.b.a. Schofield Residence

The Employer's mailing address is: 3333 Elmwood Avenue

Kenmore, New York 14217

The Employer's federal identification number (EIN) is: 16-0743225

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

Plan Name: Schofield Residence 457(b) Plan

Plan Effective Date: January 1, 2019

Plan Adoption Date: January 1, 2019

Number of Participants: 1  
(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: Wheel Chair Home, Inc. d.b.a. Schofield Residence

By: *Jameson Phillips*

Date: 3/27/2019



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Kenmore, NY 14217  
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info@SchofieldCare.org

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April 4, 2019

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Employee Benefits Security Administration  
Top-Hat Plan Exemption  
200 Constitution Avenue NW, N-1513  
Washington DC 20210

To the Secretary of Labor:

Enclosed is the signed Top-Hat Plan Exemption Statement for the Schofield Residence 457(b) Plan.

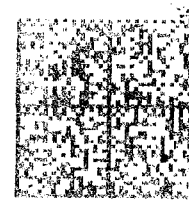
Sincerely,


Loretta Hoth  
Executive Assistant

enclosure

  
**SCHOFIELDCARE**  
A Legacy of Caring  
3333 Elmwood Avenue  
Kenmore, NY 14217

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