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Cullen and Dykman
177 Montague Street
Brooklyn, New York 11201-3611

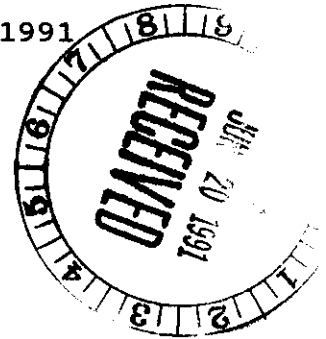
TELEPHONE (718) 855-9000

TELECOPIER (718) 855-4282

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

June 14, 1991

Top Hat Plan Exemption
Pension and Welfare Benefits
Administration
Room N-5644
U.S. Department of Labor
200 Constitution Avenue, N.W.
Washington, D.C. 20210



Re: The First National Bank of Long Island
Supplemental Executive Retirement Plan

Dear Sir/Madam:

Pursuant to Labor Regulations Section 2520.104-23, the following information is submitted with respect to The First National Bank of Long Island Supplemental Executive Retirement Plan:

1. Name and Address of Employer:

The First National Bank of Long Island
10 Glen Head Road
Glen Head, New York 11545

2. Employer Identification No.: 11-0804410

3. Declaration: The First National Bank of Long Island Supplemental Executive Retirement Plan ("Plan") is an unfunded, non-qualified deferred compensation plan maintained primarily for a select group of management employees for the purpose of providing benefits in excess of the limitations imposed by Section 415 of the Internal Revenue Code (regarding limitations on benefits and contributions under qualified plans) and Section 401(a)(17) of the Internal Revenue Code (regarding annual compensation to be taken into account under qualified plans for plan years commencing after December 31, 1988) and is not intended to comply with the requirements of Section 401(a) of the Internal Revenue Code ("Code").

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1010 FRANKLIN AVENUE
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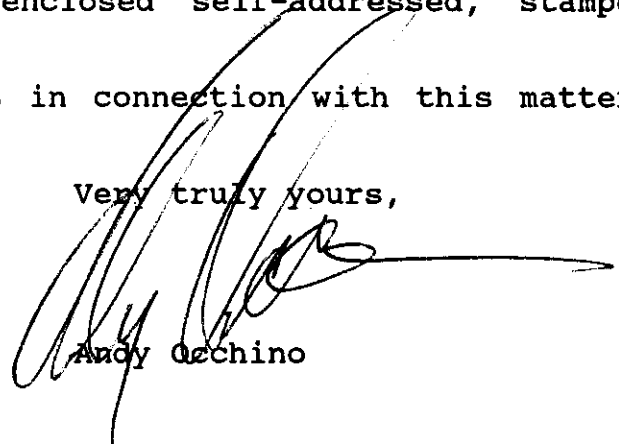
Top Hat Plan Exemption
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4. Number of Plans: 1
5. Number of Employees in the Plan: An employee shall become eligible to participate in the Plan if he or she is either (a) a participant in the Prototype Plan of the New York State Bankers Retirement System ("Retirement Plan") and his or her benefits thereunder are limited by Section 415 of the Code or Section 401(a)(17) of the Code; or (b) a participant in The First National Bank of Long Island Profit Sharing Plan and Trust ("Profit Sharing Plan") and his or her "Matching Contributions" or "Employer Contributions" (as these terms are defined in the Profit Sharing Plan) thereunder are limited by Section 415 of the Code or Section 401(a)(17) of the Code; or (c) a participant in both the Retirement Plan and the Profit Sharing Plan and his or her benefits under both or either of such plans are limited by Section 415 of the Code or Section 401(a)(17) of the Code.

Please acknowledge receipt of the foregoing by signing and dating the enclosed acknowledgement copy of this letter and returning it to me in the enclosed self-addressed, stamped envelope.

If you have any questions in connection with this matter, please contact me.

Very truly yours,



Andy Gecchino

AO:rm
cc: Ms. Barbara Shapiro

RECEIPT ACKNOWLEDGED:

Top Hat Plan Exemption
Pension and Welfare Benefits
Administration

By: _____

Dated: _____