

July 24, 1996

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

Dear Sir or Madam:

Pursuant to Department of Labor Regulations, 29 C.F.R. Section 2520.104-23, under Section 110 of Title I of the Employee Retirement Income Security Act of 1974, State Bank of New Richland provides the following information in compliance with the alternative method of reporting the disclosure for unfunded plans maintained for a select group of management or highly compensated employees.

1. Name and address of Employer:

State Bank of New Richland
103 North Broadway
New Richland, MN 56072

2. Employer Identification Number:

41-1649754

3. State Bank of New Richland maintains plans primarily to provide deferred compensation benefits for a select group of management or highly compensated employees.

4. Number of such Plans and number of Participants in each Plan:

<u>Number of Plans</u>	<u>Number of Participants in Each Plan</u>
1	1

State Bank of New Richland
Plan Administrator

Kristi Darrin
By

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PUBLIC DISCLOSURE