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June 27, 2008

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

To Whom It May Concern:

The undersigned declares that the employer described below maintains the following plan(s) primarily for the purpose of providing deferred compensation for a select group of management or highly compensated employees.

In compliance with Labor Reg. §2520.104-23 the undersigned provides the following information with respect to the plan(s):

Employer:

Employer Name: Greater Minnesota Housing Fund
Address: 332 Minnesota St Ste 1201
Saint Paul, Minnesota 55101-7593
EIN#: 41-1836919

Name of Plan: Greater Minnesota Housing Fund Deferred Compensation Plan
Number of Plan(s): 1
Number of Employees in Plan(s): 1

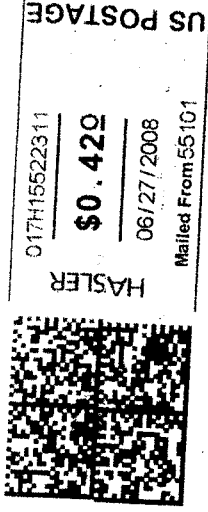
Very truly yours,

A handwritten signature in black ink, appearing to read "Linda Kozak". The signature is fluid and cursive.

Linda Kozak
Plan Administrator



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