



May 13, 2009

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**Alliance**  
1520 W. 10th  
P.O. Box 739  
Alliance, NE 69301  
(308) 762-5870  
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US Department of Labor  
Employee Benefits Security Administration  
Top Hat Plan Exemption  
200 Constitution Avenue, NW, Suite N-1513  
Washington, DC 20210

Dear Sir or Madam:

In order to comply with the requirements of the alternative reporting and disclosure method under ERISA, Parts 1, Title 1, as provided for in an unfunded plan for a select group of management or highly compensated employees in D.O.L. Regulation 252-.104-23, the following information is provided:

The name of the employer is: 21<sup>st</sup> Century Equipment, LLC

The mailing address of the employer is: RR1, Box 61, Bridgeport, NE 69336

The employer's federal identification number (EIN) is:  
32-0218771

The number of plans is: one (1)

The number of covered employees is: six (6)

The above named employer maintains this plan primarily for the purpose of providing deferred compensation benefits to a select group of management or highly compensated employees.

The employer will send a copy of all plan documents and agreements to the Secretary, upon request.

Sincerely,

Owen A. Palm  
President/CEO

**Bridgeport**  
West Highway 26  
RR1, Box 61  
Bridgeport, NE 69336  
(308) 262-1110  
(800) 682-5121  
FAX (308) 262-1451

**Gordon**  
6742 State Hwy 27  
Gordon, NE 69343  
(308) 282-0665  
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FAX (308) 282-2897

**Imperial**  
1001 North Highway 61  
P.O. Box 877  
Imperial, NE 69033  
(308) 882-4326  
(800) 525-4934  
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**Ogallala**  
South Highway 61  
101 Road East 80  
Ogallala, NE 69153  
(308) 284-4049  
(800) 658-4227  
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**Sidney**  
1901 Link 17J  
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