

EBSA/PUBLIC DISCLOSURE  
2009 DEC -9 AM 8:02

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

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: Kittson Memorial Hospital Association dba  
Kittson Memorial Healthcare Center

The employer's mailing address is: PO Box 700  
Hallock, MN 56728

The employer's federal identification number (EIN) is: 41-0724034

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

Plan Name: Kittson Memorial Hospital Association 457 Plan  
Effective Date: January 1, 2010  
Number of Employees Covered: 4  
(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: Kittson Memorial

By: Richard Fasting, CEO

Date: 11/9/09

**KITTSOON MEMORIAL  
HEALTHCARE CENTER**  
P.O. Box 700-1010 S. Birch  
Hallock, MN 56728-0700

FIRST CLASS



U.S. Dept of Labor  
Employee Benefits Sec. Admin.  
TOP Hat Plan Exemption  
200 Constitution Ave. NW N-1513  
Washington, DC 20010

