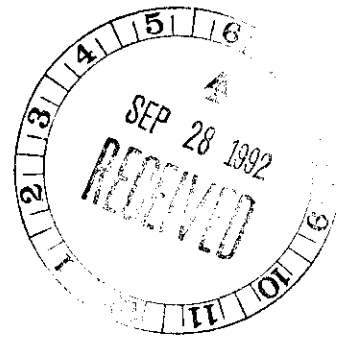


2520190030616



STATEMENT
(in lieu of form 5500 series annual returns and reports)

of

THE OKONITE COMPANY EXCESS BENEFIT PLAN

and

THE OKONITE COMPANY PERFORMANCE SHARE PLAN

The Okonite Company, as administrator of The Okonite Company Excess Benefit Plan (the "Benefit Plan") and The Okonite Company Performance Share Plan (the "Share Plan") (collectively the "Plans"), hereby declares the following:

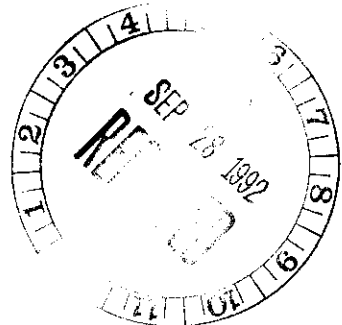
1. Employer: The Okonite Company
100 Hilltop Road
Ramsey, New Jersey 07446
2. Employer identification number 22-2279445
3. The Okonite Company maintains two (2) plans, the Benefit Plan and the Share Plan. The Plans provide deferred compensation for a select group of management and highly compensated employees.
4. There are 6 employees participating in the Benefit Plan.
5. There are 11 employees participating in the Share Plan.

DATED: September 18, 1992

THE OKONITE COMPANY

By: *[Signature]*

Title: Vice President



THE OKONITE COMPANY
HILLTOP ROAD
RAMSEY, NEW JERSEY 07446

DAVID J. SOKIRA
VICE PRESIDENT - FINANCE AND TREASURER

September 18, 1992

U.S. Department of Labor
Pension and Welfare Benefits
Administration
P.O. Box 75212
Washington, DC 20013-5212


Re: The Okonite Company Excess Benefit Plan
The Okonite Company Performance Share
Plan (collectively, the "Plans")

Pursuant to the Labor Department Notice on Civil
Penalty Relief for Top Hat Plans, Late Filers,
57 F.R.33019, dated July 24, 1992 (the "Notice"),
we, as the administrator of the Plans, submit the
enclosed Statement (in lieu of form 5500 series
annual returns and reports) for filing in order
to voluntarily comply with the disclosure require-
ments of part 1 of ERISA. In accordance with the
Notice it is our understanding and intention that
the filing of this Statement will serve as com-
pliance with our Plans' ERISA disclosure obliga-
tions for plan years 1988 through 1991 and all
subsequent plan years.

Also, enclosed is our check in the amount of
\$1,000 payable to the U.S. Department of Labor
which represents the civil penalty imposed pur-
suant to the Notice.

If you have any questions or comments, please do
not hesitate to call me.

Very truly yours,


DAVID J. SOKIRA,
Vice President

4242



Post Office Box 340
Ramsey, New Jersey 07446



U.S. Department of Labor
Pension and Welfare Benefits Administration
P. O. Box 75212
Washington, DC 20013-5212

