

Minnesota Epilepsy Group, P.A.[®]

2520113150620

225 Smith Avenue N., Suite 201 St. Paul, Minnesota 55102-2697 FAX 651.241.5248 651.241.5290

November 3, 2011

Sent Via Certified Mail Return
Receipt Requested

Top Hat Plan Exemption
Pension and Welfare Administration
Room N-5644
Us Department of Labor
200 Constitution Dr
Washington, DC 20210

EBSA/PUBLIC DISCLOSURE
2011 NOV 16 PM 2:58

Dear Sir or Madame:

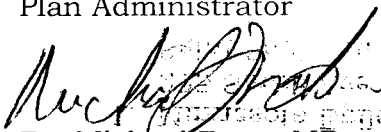
Pursuant to the Department of Labor Regulations, 29 C.F.R. 2520.104-23 under section 110 of Title I of the Employee Retirement Income Security Act of 1974, the undersigned employer provides the following information in compliance with the alternative method of reporting and disclosure for unfunded plans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

1. Minnesota Epilepsy Group, PA
225 Smith Ave N #201
Saint Paul, Minnesota 55102
2. Employer Identification Number: 41-1678253
3. Minnesota Epilepsy Group, PA 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 reported herein:

<u>PLAN</u>	<u>PARTICIPANTS</u>
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- | | |
|------------------------------------|---|
| 1. 2011 Deferred Compensation Plan | 5 |
|------------------------------------|---|

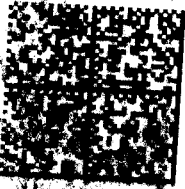
Plan Administrator


 By: Michael Frost, MD
 Its: President

Minnesota Epilepsy Group, P.A.

225 Smith Avenue N., Suite 201 St. Paul, Minnesota 55102

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE



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\$ 05.54

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