

2012 FEB -7 PM 3:21

ALTERNATIVE REPORTING AND DISCLOSURE STATEMENT FOR
A NONQUALIFIED DEFERRED COMPENSATION PLAN

To: Top Hat Plan Exemption
Employee Benefits Security Administration
Room N-5644
US Department of Labor
200 Constitution Avenue NW
Washington, DC 20210

In accordance with 29 CFR Section 2520.104-23 of the Department of Labor Regulations, which provides an alternative method for complying with the reporting and disclosure requirements of Part 1 of Title I of the Employee Retirement Income Security Act of 1974, you are hereby notified that the Employer identified below maintains the Plan identified below for the purpose of providing deferred compensation for a select group of management or highly compensated employees, and that all benefits provided by this Plan are paid as needed solely from the general assets of that Employer.

Employer's Name: Heartland Community Action Agency, Inc.

Employer's Address PO Box 1359, Willmar, MN 56201

Employer Identification Number: 41-0904860

Heartland Community Action Agency, Inc. 457(b) Eligible Deferred Compensation Plan
which covers 1 Participant.

Total Number of Plans: 1

Plan Administrator of the Plans Specified Above

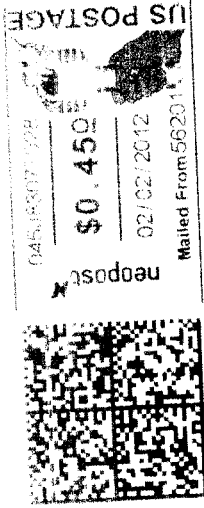
By: Heartland Community Action Agency Inc

Date: 1/24, 2012

Heartland



community action agency, inc.
200 SW 4th St.
PO Box 1359
Willmar, Minnesota 56201



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