



February 5, 2014

TOP-HAT PLAN EXEMPTION STATEMENT

CERTIFIED MAIL—RETURN RECEIPT REQUESTED

Top-Hat Plan Exemption
EBSA
Room N-1513
U.S. Department of Labor
200 Constitution Ave., NW
Washington, D.C. 20210

2014 FEB 12 11 30 AM

RE: Iseman Homes, Inc.

Dear Sir or Madam:

On behalf of the plan administrator referenced above, the following is a list of the information required by DOL 2520.104.23:

1. Employer Name: Iseman Homes, Inc.
2. Address: 4733 North Cliff Avenue, PO Box 5042, Sioux Falls, South Dakota 57117-5042.
3. Employer EIN: 20-3004104
4. The Employer maintains a Plan (or Plans) primarily for the purpose of providing deferred compensation for a select group of management or highly compensated employees.
5. Number of Plans: 1
6. Number of Employees in Plan(s): 1

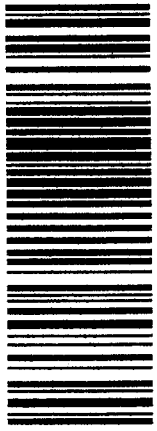
Sincerely,
ISEMAN HOMES, INC.

A handwritten signature in cursive script that reads "James L. Gaard".

James L. Gaard
Secretary

**Isseman
HOMES**
YOU'RE HOME, NOW.
Since 1920

4733 North Cliff Ave, P.O. Box 5042
Sioux Falls, South Dakota 57117-5042



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