



14820 Highway 7
 Minnetonka, MN 55345

t: 952-545-8815
 f: 952-545-8010

Alternative Reporting And Disclosure Statement For Nonqualified Deferred Compensation Plans

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

In compliance with the requirements of the alternative method of reporting and disclosure under Part I of Title I of the Employee Retirement Income Security Act of 1974 for un-funded or insured pension plans for a select group of management or highly compensated employees, specified in Department of Labor Regulations, 29 CFR Sec. 2520.104-23, the following information is provided by the undersigned administrator:

1. The name of the Employer is: Minnwest Corporation
2. The mailing address of the Employer is: 14820 Hwy 7
 Minnetonka, MN 55345
3. The Employer Identification Number is: 41-1549950
4. The above named Employer maintains a Plan (or Plans) primarily for the purpose of providing deferred compensation benefits for a select group of management or highly compensated employees.
5. Number of Plans and Eligible Employees in each Plan:
 One Plan(s) covering 30 Eligible Employees.
6. The Employer will provide a copy of the agreement(s) to the office of Employee Benefits Security Administration upon request.

Minnwest Corporation
 A Minnesota Corporation

By: T. J. McVey
 Authorized Person

Dated: 12.17.14



ADDRESS SERVICE REQUESTED



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

20210

