



November 1, 2021

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

CERTIFIED MAIL,
RETURN RECEIPT REQUESTED

Re: Deferred Compensation Arrangement

2520220070022

Dear Sir or Madam:

This filing is submitted pursuant to 29 CFR 2520.104-23 in connection with the alternative method of compliance with the reporting and disclosure requirements of part 1 of title I of the Employee Retirement Income Security Act of 1974.

1. Employer: The Napoleon State Bank
8912 North 421, P.O. Box 9
Napoleon, IN 47034-0009
2. Employer Identification Number: 35-0538700
3. Plan Name: Supplemental Executive Retirement Plan (the "Plan")
4. The employer maintains the Plan primarily for the purpose of providing deferred compensation for a select group of management or key employees, with such Plan having first been established November 1, 2021.
4. One (1) employee currently participates in the Plan.

Upon request, we will provide copies of the plan documents as required by the Regulations.

The Napoleon State Bank

Irvin J. Harmeyer

Chairman of the Board of Directors
Plan Administrator's Representative

4206178v1



NAPOLEON

P.O. Box 9 | 8912 N US 421 | Napoleon, IN 47034
(p)812.852.4002 | (f)812.852.2002



www.napoleonstatebank.com



The Napoleon State Bank

PO Box 9

Napoleon IN 47034

Attn: HR Dept

CERTIFIED MAIL



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