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PUBLIC AFFAIRS  
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March 4, 1998

Pension and Welfare Benefits Administration  
U.S. Department of Labor  
Washington, D.C. 20216

Dear Sir or Madam:

Re: Alternative Method of Compliance of  
Reporting and Disclosure Requirements pursuant  
to DOL Regulation Section 2520.104-23(b)(1)

This Statement is hereby provided by the following Employer pursuant to the alternative method of compliance as set forth in the above Regulation:

1. Name and Address of Employer: **MOODY CORPORATION**  
3016 UNIONVILLE ROAD  
CRANBERRY TWP., PA 16066-3408
2. Employer Identification Number: 25-1443965
3. The Employer hereby declares that the herein disclosed "Deferred Compensation Plan for Dalton Moody" is provided for the sole benefit of Dalton Moody, who is a member of a select group of employees of the Employer.
4. The Employer currently maintains only one such Plan, which benefits only one employee.

This Statement is herein dated this 14 day of MARCH, 1998.

ATTEST

Mack Stalkaus  
Secretary/Assistant Secretary

MOODY CORPORATION, INC.

By: Dalton N. Moody

Title: President

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**MAIL**

**MOODY CORPORATION**

3016 UNIONVILLE ROAD • CRANBERRY TWP., PA 16066  
(412) 776-5650 • FAX (412) 776-5515

TO:

Pension and Welfare Benefits Admin.  
US Department of Labor  
Washington, DC  
20216