

**Alternative Reporting and Disclosure Statement
For Non-Qualified Deferred Compensation Plans**

(Mailed to the DOL within 120 days of the date you adopt your 457(b) plan)

To: **US Department of Labor**
Employee Benefits Security Administration
Top Hat Plan Exemption
200 Constitution Avenue, NW, Suite N-1513
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 and 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, 29CFR Sec.2520.104-23, the following information is provided by the undersigned administrator:

1. The name of the Employer is: Vail Valley Foundation, Inc.
2. The mailing address of the Employer is: PO Box 309, Vail, CO 81658
3. The Employer Identification Number is: 74-2215035
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 in each Plan (Non-Qualified Plans):

One Plan(s) covering seven Eligible Employees
6. The Employer will provide a copy of the agreements(s) to the office of Pension and Welfare Benefit Program upon request.

Employer: Vail Valley Foundation, Inc.

By: _____

Authorized Person

Phone

970-949-1999

Dated: _____

4/7/04



VAIL VALLEY
FOUNDATION

Providing leadership
in athletic, educational
and cultural endeavors
to enhance and sustain
the quality of life in the
Vail Valley.

P.O. Box 309
Vail, Colorado 81658
970-949-1999
Fax 970-949-9265

★ ★
157
3375 • 00-370 PB8737514
8109 MAILED FROM AVON CO 81620



US Department of Labor

Employer Benefits Security Administration

Top Hat Plan Exemption

200 Constitution Ave, NW, Suite N-1513

Washington, DC 20210