

May 23, 2001

Top Hat Plan Exemption
Pension and Welfare Benefits Administration
Room N-5644
U.S. Department of Labor
200 Constitution Avenue, NW
Washington, DC 20210

U.S. DEPT. OF LABOR
PUBLIC DISCLOSURE
01 MAY 30 PM 12:36

2520052092314

RE: Notice of Plan of Deferred Compensation

Dear Madam or Sir:

Pursuant to DOL Reg. Sec. 2520.104-23, the undersigned employer hereby files the following information with respect to its plan of deferred compensation.

1. Name and Address of Employer:

Samaritan's Purse
Post Office Box 3000 (801 Bamboo Road for overnight/express)
Boone, North Carolina 28607

2. Federal Employer Identification Number (EIN):

58-1437002

3. The Employer maintains one (1) plan of deferred compensation primarily for the purpose of providing deferred compensation to a select group of management of highly-compensated employees.

4. One (1) employee is covered by such plan.

Sincerely,



J. Todd Chasteen
Vice President of Human Resources
and General Counsel

JTC:jb

**Samaritan's
HOUSE**

P.O. BOX 3000
BOONE, NC 28607 U.S.A.



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