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ALTERNATIVE REPORTING AND DISCLOSURE STATEMENT
FOR UNFUNDED NONQUALIFIED DEFERRED COMPENSATION PLANS

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Top Hat Plan Exemption
Pension and Welfare Benefits Administration
Room N-6544
U.S. Department of Labor
200 Constitution Avenue, N.W.
Washington, DC 20210

In compliance with the requirements of the alternative method of reporting and disclosure under Part 1 of Title 1 of the Employee Retirement Income Security Act of 1974 for unfunded or insured pension plans for a select group of management or highly compensated employees, specified in Department of Labor Regulations, 29, C.F.R. Sec. 2520 104-23, the following information is provided by the undersigned employer.

Name and Address of Employer:

BARILLA AMERICA, INC.
200 Tri-State International, Suite 200
Lincolnshire, IL 60069-4409

Employer Identification Number: 06-1400247

Barilla America, Inc. maintains a plan primarily for the purpose of providing deferred compensation for a select group of management or highly compensated employees.

Number of Plan(s) and Participants in each Plan:

1 Plan covering 10 employees

Dated: March 25, 1998

Barilla America, Inc.

By

Barbara Maiorica
Plan Administrator



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Suite 200
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