

The Wexner Foundation

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**ALTERNATIVE REPORTING AND DISCLOSURE STATEMENT FOR
A NONQUALIFIED DEFERRED COMPENSATION PLAN**

To: Top Hat Exemption
Employee Benefits Security Administration
Room N-1513
US Department of Labor
200 Constitution Avenue NW
Washington, DC 20210

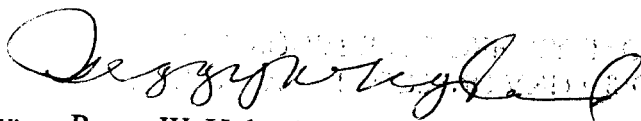
In accordance with 29 CFR Section 2520.104-23 of the Department of Labor Regulations, which provides an alternative method for complying with the reporting and disclosure requirements of Part 1 of Title I of the Employee Retirement Income Security Act of 1974, you are hereby notified that the Employer identified below maintains the Plan identified below for the purpose of providing deferred compensation for a select group of management or highly compensated employees, and that all benefits provided by this Plan are paid as needed solely from the general assets of that Employer.

Employer's Name: The Wexner Foundation
Employer's Address: 8000 Walton Parkway, Suite 100
New Albany, OH 43054

Employer Identification Number: 23-7320631

The Wexner Foundation 457(b) Eligible Deferred Compensation Plan covers one Participant.

Total Number of Plans: One


By: Peggy W. Uglan
Plan Administrator of the Plan Specified Above

Date: 3/23/06