



P.O. Box 4858  
1414 Corn Products Road  
Corpus Christi, Texas  
78469-4858

07 NOV -7 AM 12:08

Bus: (361) 693-2100  
Fax: (361) 693-2819

### Alternative Reporting And Disclosure Statement For Nonqualified Deferred Compensation Plans

2520080801493

To: Top Hat Plan Exemption  
Employee Benefits Security Administration  
Room N 1513  
U.S. Department of Labor  
200 Constitution Ave. N.W.  
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 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, 29 CFR Sec. 2520.104-23, the following information is provided by the undersigned administrator:

1. The name of the Employer is: Berry GP, Inc.
2. The mailing address of the Employer is: P.O. Box 4858  
Corpus Christi, TX 78469
3. The Employer Identification Number is: 74-1239592
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 Employees in each Plan:  
One Plan covering 100 Eligible Employees.
6. The Employer will provide a copy of the agreement(s) to the office of Employee Benefits Security Administration upon request.

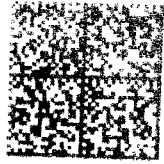
Berry GP, Inc.  
A Texas Corporation

By: *[Signature]*  
Authorized Person

Dated: October 29, 2007



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Washington D.C. 20210

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