

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

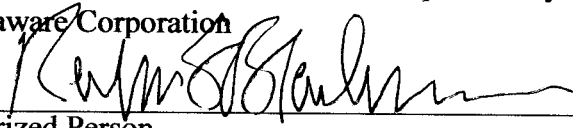
To: Top Hat Plan Exemption  
Employee Benefits Security Administration  
Room N 1513  
U.S. Department of Labor  
200 Constitution Ave. N.W.  
Washington, DC 20210

2014-05-01 11:11:11

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: **Foundation for Advancing Alcohol Responsibility**
- 2. The mailing address of the Employer is: **1250 I Street NW; Suite 400  
Washington, DC 20005**
- 3. The Employer Identification Number is: **36-3704297**
- 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(s) covering 2 Eligible Employees.**
- 6. The Employer will provide a copy of the agreement(s) to the office of Employee Benefits Security Administration upon request.

**Foundation for Advancing Alcohol Responsibility  
A Delaware Corporation**

By:   
Authorized Person

Dated: 2/26/14

**THE CENTURY COUNCIL**  
DISTILLERS FIGHTING DRUNK DRIVING & UNDERAGE DRINKING

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*Return Receipt Requested*

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200 Constitution Avenue, NW  
Washington, DC 20210

**RETURN RECEIPT  
REQUESTED**

20210

