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December 12, 2014

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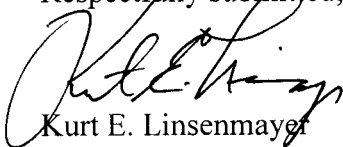
Top Hat Plan Exemption
Employee Benefits Security Administration
Room N-1513
U.S. Department of Labor
200 Constitution Avenue N.W.
Washington, D.C. 20210

**Re: Alyeska Pipeline Service Company
Alternative Reporting and Disclosure Statement for Pension Plan for Certain
Selected Employees (CORRECTED)**

Dear Sir or Madam:

By correspondence dated December 3, 2014, Alyeska Pipeline Service Company filed an Alternative Reporting and Disclosure Statement (the "Statement") for a top hat plan, as permitted under 29 C.F.R. § 2520.104-23. Due to an administrative error, section 5 of the Statement identified the number of participants in a tax-qualified plan rather than the nonqualified plan properly the subject of the Statement. Enclosed is a corrected version of the Statement. Please contact me if you have any questions.

Respectfully submitted,



Kurt E. Linsenmayer

KEL:ebmm
Enclosure

**Alternative Reporting and Disclosure Statement
for
Pension Plan for Certain Selected Employees**

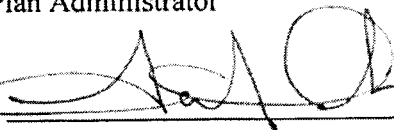
To: Top Hat Plan Exemption
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200 Constitution Avenue N.W.
Washington, D.C. 20210

Pursuant to 29 CFR § 2520.104-23, the Employer named below submits this Statement as an alternative method of compliance with the reporting and disclosure requirements of Part 1 of Title I of the Employee Retirement Income Security Act of 1974, as amended for an unfunded or insured pension plan maintained primarily for the purpose of providing deferred compensation for a select group of management or highly compensated employees.

1. **Employer's Name:** Alyeska Pipeline Service Company
2. **Employer's Address:** 3700 Centerpoint Drive, P.O. Box 196660 MS536, Anchorage, AK 99519-6660
3. **Employer's EIN:** 92-0039154
4. **Declaration:** The Employer maintains a plan primarily for the purpose of providing deferred compensation for a select group of management or highly compensated employees. The plan is covered by this Statement.
5. **Number of Participants in the Plan:** The number of participants in the plan are as follows: 34

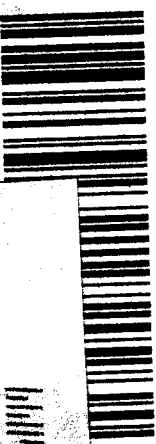
ALYESKA PIPELINE SERVICE COMPANY
as Plan Administrator

Dated: 12/11/14

By: 

Title: Compensation & Benefits Manager

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