



2520172650007

BELLA INTERNATIONAL LLC

To the Secretary of Labor:

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 unfunded pension plans for a select group of management or highly compensated employees, specified in Department of Labor Regulations, 29 C.F.R. § 2520.104-23, the following information is provided by the undersigned employer.

Name and Address of Employer: BELLA INTERNATIONAL LLC
P.O. BOX 190816
SAN JUAN, PUERTO RICO 00919-0816

Employer Identification Number: 66-0257653

Bella International LLC currently maintains two nonqualified deferred compensation plans known as the Bella International Non-Qualified Deferred Compensation Plan I and the Bella International Non-Qualified Deferred Compensation Plan II, primarily for the purposes of providing deferred compensation for a select group of management or highly compensated employees.

Number of Plans and Participants in Each Plan: 2 Plan covering 1, and 15, Employees, respectively.

Dated: August 9th, 2017.

BELLA INTERNATIONAL LLC

By: [Signature] Administrative Committee Member
By: [Signature] Administrative Committee Member
By: [Signature] Administrative Committee Member

August 18, 2017

ERISA/PUBLIC DISCLOSURE
2017 AUG 25 PM 2:45

Certified Mail #7016 0600 0000 1506 9270
Receipt Requested

U.S. Department of Labor
Employee Benefits Security Administration
Top Hat Plan Exemption
200 Constitution Avenue, NW, N-1515
Washington, DC 20210

**Re: Bella International Non-Qualified Deferred Compensation Plan I
Bella International Non-Qualified Deferred Compensation Plan II
Employer identification number: 66-0257653
Plan number: 888**

Dear Sirs:

In accordance with the compliance process under the Delinquent Filer Voluntary Compliance Program for filing overdue Annual Return/Report of Employee Benefits Plan (Form 5500), enclosed is the statement described in regulation section 29 CFR § 2520.104-23.

Should you need additional information, please do not hesitate to contact us.

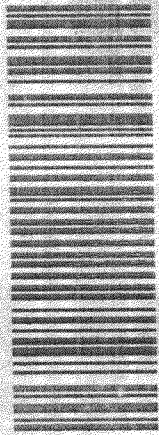
Cordially yours,



BRENDA L. HERNÁNDEZ RODRÍGUEZ
Senior Record keeper Plan

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLLOWING DOTTED LINE.

CERTIFIED MAIL



7016 0600 0000 1506 9270

CRS
CRS-CPA, P.S.C.

PO BOX 195492 SAN JUAN, PUERTO RICO 00919 - 5492

U.S. DEPARTMENT OF LABOR
EMPLOYEE BENEFITS SECURITY
ADMINISTRATION
TOP HAT PLAN EXEMPTION
200 CONSTITUTION AVENUE, NW, N-1515
WASHINGTON, DC 20210