

Information submitted via Top Hat Plan Statement Online Filing System to U. S.
Department of Labor under 29 CFR 2520.104-23

Date Completed: 10/28/2024 9:53 AM EST

Confirmation Number: 13892

Amended Confirmation Number:

Employer Information

Name: Anco Insurance Managers, Inc. 401(k) Plan
Address: 1111 Briarcrest Drive
City: Bryan
State: TX
Zip Code: 77802

Plan Administrator Information

Name: ANCO Insurance Managers, Inc. 401(k) Plan
Address: 1111 Briarcrest Drive
City: Bryan
State: TX
Zip Code: 77802
Phone: 9797746257
Email: williamson@anco.com

Plan Information

Employer maintains the plan or plans below primarily for the purpose of providing deferred compensation for a select group of management or highly compensated employees.

| | | | |
|------|------------|----------------------------|----------------------------|
| ID:1 | Plan Name: | BUCS Agreement | Number of Employees: 1 |
| ID:2 | Plan Name: | Vesting Agreements | Number of Employees: 10 |
| ID:3 | Plan Name: | Executive Letter Agreement | Number of Employees: 1 |

Additional Information:



U. S. Department of Labor
Employee Benefits Security Administration
Washington, DC 20210

This message confirms that the Department of Labor's (DOL's) Employee Benefits Security Administration (EBSA) has received the filing of your Top Hat Plan Statement. The confirmation code for your filing is 13892. When correcting errors to your filing, please use this code in your amended statement. This communication does not mean that DOL has made a determination that you are eligible to file under DOL regulation 29 CFR 2520.104-23.