

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

Date Completed: 12/16/2025 7:13 AM EST

Confirmation Number: 15784

Amended Confirmation Number:

Employer Information

Name: Conner Industries, Inc.
Address: 3800 Sandshell Drive STE 235
City: Fort Worth
State: TX
Zip Code: 76137

Plan Administrator Information

Name: JASON SMITH
Address: 4711 Alyssa Ln
City: Celina
State: TX
Zip Code: 75009
Phone: 2142504156
Email: jcmj4smith@gmail.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:	Conner Industries, Inc. NQ	Number of Employees: 30
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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 15784. 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.