

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

Date Completed: 7/2/2018 12:18 PM EST

Confirmation Number: 3940

Amended Confirmation Number:

Employer Information

Name: Seminole Tribe of Florida d/b/a Seminole Gaming
Address: 6300 Stirling Road
City: Hollywood State: FL Zip Code: 33024

Plan Administrator Information

Name: Seminole Tribe of Florida d/b/a Seminole Gaming
Address: c/o SHRSS - Attn: Benefits Team, 5701 Stirling Road
City: Davie State: FL Zip Code: 33314
Phone: 9545855680
Email: john.eder@stofgaming.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:	Seminole Tribe of Florida Supplemental Executive Retirement Plan for the Gaming Division	Number of Employees: 269
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Additional Information:

The original inception effective date of the plan is 7/1/2018.



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 3940. 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.