

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

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Amended Confirmation Number:

Employer Information

Name: TMF Health Quality Institute
Address: 3107 Oak Creek Dr., Suite 200
City: Austin
State: TX
Zip Code: 78727

Plan Administrator Information

Name: TMF Health Quality Institute
Address: 3107 Oak Creek Dr., Suite 200
City: Austin
State: TX
Zip Code: 78727
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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:	TMF Health Quality Institute Defined Contribution Supplemental Retirement Plan for Employees: 1 Russell Wade Kohl	Number of
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Additional Information:

On August 14, 2019, TMF Health Quality Institute (the "Employer") adopted the following new unfunded pension plan for a select group of management or highly compensated employees (a "Top Hat Plan"): the TMF Health Quality Institute Defined Contribution Supplemental Retirement Plan for Russell Wade Kohl. In addition to this new Top Hat Plan, the Employer continues to maintain the following four Top Hat Plans: (1) the TMF Health Quality Institute Defined Contribution Supplemental Retirement Plan for Thomas J. Manley, (2) the TMF Health Quality Institute Defined Contribution Supplemental Retirement Plan for Pamela L. Hoernis, (3) the Severance, Confidentiality, Non-Competition and Non-Solicitation Agreement with Thomas J. Manley, and (4) the Severance, Confidentiality, Non-Competition and Non-Solicitation Agreement with Pamela L. Hoernis. Statements required by Regulation Section 2520.104-23 for these four plans have already been filed with the Department of Labor (the "DOL"). Benefits under all five of the Top Hat Plans are paid as needed solely from the general assets of the Employer. Documents relating to all five of the Top Hat Plans will be provided to the DOL upon request.



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 5691. 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.