

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

Date Completed: 10/13/2020 2:09 PM EST

Confirmation Number: 7070

Amended Confirmation Number:

Employer Information

Name: A.S.C.I.B., L.P.
Address: 901 S Mopac, Bldg 5, #140
City: Austin
State: TX
Zip Code: 78746

Plan Administrator Information

Name: Administrative Committee of A.S.C.I.B., L.P.
Address: 901 S Mopac, Bldg 5, #140
City: Austin
State: TX
Zip Code: 78746
Phone:
Email: gabrielle.bekink@smslp.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:	Phantom Equity Deferred Compensation Agreement	Number of Employees: 1
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Additional Information:

Address and email above are for company contact person.



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 7070. 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.