

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

Date Completed: 3/6/2023 12:59 PM EST

Confirmation Number: 11257
Amended Confirmation Number: 5709

Employer Information

Name: Atlantic Theater Company
Address: 76 9th Ave Suite 313
City: New York
State: NY
Zip Code: 10011

Plan Administrator Information

Name: Pamela Adams
Address: 76 9th Ave Suite 313
City: New York
State: NY
Zip Code: 10011
Phone: 6462161090
Email: padams@atlantictheater.org

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:	Atlantic Theater Company 457(f) Defined Retirement Benefit Plan	Number of Employees: 3
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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 11257. 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.