

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

Date Completed: 1/24/2024 2:05 PM EST

Confirmation Number: 12668

Amended Confirmation Number:

Employer Information

Name: Moving Picture Institute  
Address: 375 Greenwich St.  
City: New York  
State: NY  
Zip Code: 10013

Plan Administrator Information

Name: Rob Pfaltzgraff/Moving Picture Institute  
Address: 375 Greenwich Street  
City: New York  
State: NY  
Zip Code: 10013  
Phone: 6107244212  
Email: rob@thempi.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:	Moving Picture Institute 457 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 12668. 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.