

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

Date Completed: 8/15/2019 10:33 AM EST

Confirmation Number: 5413

Amended Confirmation Number:

Employer Information

Name: CGFNS International, Inc.  
Address: 3600 Market Street, Suite 400  
City: Philadelphia  
State: PA  
Zip Code: 19104

Plan Administrator Information

Name: Keith Miller  
Address: 3600 Market Street, Suite 400  
City: Philadelphia  
State: PA  
Zip Code: 19104  
Phone: 2152228454  
Email: kmiller@cgfns.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:	CGFNS International, Inc. 457(f) Plan	Number of Employees: 1
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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 5413. 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.