

# PANORAMA

3/22/2023

Top Hat Plan Exemption  
Pension and Welfare Benefits Administration  
Room N-5644  
U.S. Department of Labor  
200 Constitution Avenue, N.W.  
Washington, D.C. 20210

2520230950013

Dear Sir or Madam:

The purpose of this letter is to provide alternative single filing compliance with reporting and disclosure requirements regarding Nonqualified Top Hat Plans under Part I of Title I of ERISA. This filing is intended to comply with Department of Labor Regulations Section 2520.104-23:

- A. Name and Address of Employer:  
Panorama Insurance Associates, Inc.  
2270 Douglas Blvd Suite 212  
Roseville, CA 95661
- B. Employer Identification Number: 94-2213553
- C. Panorama Insurance Associates, Inc. maintains the following plans for a select group of management or highly compensated employees:
1. Panorama Nonqualified Defined Contribution Plan  
Number of Participants: 12

In accordance with Section 104(a)(1) of ERISA, the Employer will provide Plan documents to the Secretary of Labor upon request.

Very truly yours,

Panorama Insurance Associates, Inc.

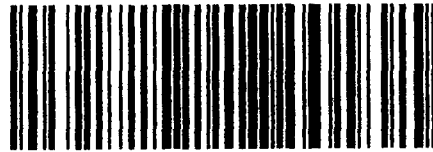
By:   
(signature of authorized representative)

Name: Shivam Ashoka  
(print)

Title: Chief Executive Officer

CES Administration  
4341 Acer Grove Rd Ste. C300  
Springfield, IL 62711

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Top Hat Plan Exemption  
Pension & Welfare Benefits Administration  
Room N-5644  
U.S. Dept. of Labor  
200 Constitution Ave. N.W. N-1513  
Washington, DC 20210

