

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

Date Completed: 8/31/2022 7:36 PM EST

Confirmation Number: 10350

Amended Confirmation Number:

Employer Information

Name: Albuquerque Academy
Address: 6400 Wyoming Blvd NE
City: Albuquerque
State: NM
Zip Code: 87109

Plan Administrator Information

Name: Sandy Timmons
Address: 6400 Wyoming Blvd NE
City: Albuquerque
State: NM
Zip Code: 87109
Phone: 5058283226
Email: timmons@aa.edu

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:	Albuquerque Academy 457(b) Deferred Compensation Plan	Number of Employees: 1
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Additional Information:

Plan Effective Date: 8/1/2022



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 10350. 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.