

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

Date Completed: 5/14/2025 1:20 PM EST

Confirmation Number: 14915

Amended Confirmation Number:

Employer Information

Name: Lincoln Maine Federal Credit Union
Address: P.O. Box 220
City: Lincoln
State: ME
Zip Code: 04457

Plan Administrator Information

Name: Ms. Brittany Libbey, COO
Address: P.O. Box 220
City: Lincoln
State: ME
Zip Code: 04457
Phone: 2077948623
Email: brittany@lincolnmainefcu.com

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:	Lincoln Maine Federal Credit Union 457(b) Plan	Number of Employees: 2
------	------------	---	---------------------------

Additional Information:

The Plan is effective as of January 1, 2025 and was adopted on May 13, 2025.



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 14915. 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.