

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

Date Completed: 12/23/2015 10:20 AM EST

Confirmation Number: 863

Amended Confirmation Number:

Employer Information

Name: North Country School
Address: 4382 Cascade Road
City: Lake Placid State: NY Zip Code: 12946

Plan Administrator Information

Name: North Country School - Business Office
Address: 4382 Cascade Road
City: Lake Placid State: NY Zip Code: 12946
Phone: 5185239329
Email: fsabbow@northcountryschool.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: North Country School Section 457(b) Deferred Compensation Plan Number of Employees: 1

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 863. 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.