

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

Date Completed: 8/1/2018 10:27 AM EST

Confirmation Number: 4029

Amended Confirmation Number:

Employer Information

Name: Ulster Savings Bank
Address: 180 Schwenk Drive
City: Kingston State: NY Zip Code: 12401

Plan Administrator Information

Name: Ulster Savings Bank
Address: 180 Schwenk Drive
City: Kingston State: NY Zip Code: 12401
Phone: 8453386322
Email: mdipalma@ulstersavings.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:	Ulster Savings Bank Nonqualified Deferred Compensation Plan	Number of Employees: 7
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Additional Information:

Total eligible employees 7 Total participating employees 7 Effective date July 1, 2018



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 4029. 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.