

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

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Confirmation Number: 4931

Amended Confirmation Number:

Employer Information

Name: SONABANK  
Address: P O BOX 630  
City: GLEN ALLEN State: VA Zip Code: 23058

Plan Administrator Information

Name: SONABANK  
Address: P O BOX 630  
City: GLEN ALLEN State: VA Zip Code: 23058  
Phone: 2024641130  
Email: blagos@sonabank.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: SUPPLEMENTAL EXECUTIVE RETIREMENT PLAN Number of Employees: 3

Additional Information:

We installed an additional tranche of an executive deferred compensation plan effective April 2, 2018 for three participants. There are three additional agreements for three participants. The format of the 2018 agreement is similar to that of the 2007 filed plan agreement.



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 4931. 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.