

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: 8288

Amended Confirmation Number:

Employer Information

Name: Ballston Spa National Bank
Address: PO Box 70
City: Ballston Spa
State: NY
Zip Code: 12020

Plan Administrator Information

Name: Timothy E Blow, EVP
Address: PO Box 70
City: Ballston Spa
State: NY
Zip Code: 12020
Phone: 5183638641
Email: tim.blow@bsnb.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:	2021 Ballston Spa National Bank Salary Continuation Agreement	Number of Employees: 1
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Additional Information:

There is one participant in the 2021 top hat plan. There are three participants in the 2019 top hat plan.



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 8288. 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.