



December 19, 2016

Top Hat Plan Exemption
Employee Benefits Security Administration
Room N-1513
U. S. Department of Labor
200 Constitution Avenue NW
Washington, DC 20210

2520170330023

RE: Notice of Plan of Deferred Compensation

Pursuant to Department of Labor Regulations Section 2520.104-23, the undersigned employer hereby supplies the following information:

- A. Community Bancshares of Mississippi, Inc.
1255 West Government Street
Brandon, MS 39042
- B. Federal Employer Identification No: 64-0606241
- C. The employer maintains the following plans of non-qualified deferred compensation primarily for the purpose of providing deferred compensation to a select group of management or highly compensated employees:

- 1. Name of Plan: Community Bancshares of Mississippi, Inc.
Executive Supplemental Deferred
Compensation Plan
- Number of Participants: 1

Very truly yours,

COMMUNITY BANCSHARES OF MISSISSIPPI, INC.

By:

Title:

CFO



325 Maxey Drive (39042)
P.O. Box 2019
Brandon, MS 39043

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