

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

Date Completed: 8/23/2021 2:47 PM EST

Confirmation Number: 8544  
Amended Confirmation Number: 925

Employer Information

Name: The Macallan Group, LLC  
Address: 1645 Powers Ferry Rd., SE, Suite 250  
City: Marietta  
State: GA  
Zip Code: 30067

Plan Administrator Information

Name: James L. Rhoden, III  
Address: 1645 Powers Ferry Rd., SE, Suite 250  
City: Marietta  
State: GA  
Zip Code: 30067  
Phone: 4046038833  
Email: jay.rhoden@macallangroup.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:	The Macallan Group, LLC Deferred Compensation Plan	Number of Employees: 2
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Additional Information:

Amended filing for The Macallan Group, LLC Deferred Compensation Plan as a result of a change in Employer Identification Number. Pursuant to Department of Labor Regulation §2520.104-23, this statement is being filed on behalf of The Macallan Group, LLC to inform the Secretary of the Department of Labor that The Macallan Group, LLC has adopted the following unfunded plan of deferred compensation primarily for the purpose of providing deferred compensation for a select group of management or highly compensated employees: The Macallan Group, LLC Deferred Compensation 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 8544. 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.