PAGE 1/5 STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) Main Street Banking Political Action Committee PO Box 7427 ADDRESS (number and street) (Check if address is changed) Alexandria 22307-7427 VACITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS mainstreetpac@electioncompliance.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 09 2016 C00551192 FEC IDENTIFICATION NUMBER 3. X OR IS THIS STATEMENT NEW (N) AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Zachary Quinn Type or Print Name of Treasurer Zachary Quinn [Electronically Filed] 05 2016 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. FEC FORM 1 (Revised 06/2012)

	Office			For further information contact:
.	Use			Federal Election Commission
				Toll Free 800-424-9530
	Only			Local 202-694-1100

Political Action Committee (PAC): (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is Corporation Corporation Not Capital Stock Labor Organization Membership Organization Trade Association Cooperative In addition, this committee is a Lobbyist/Registrant PAC. (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or paracommittee. (i.e., nonconnected committee) In addition, this committee is a Lobbyist/Registrant PAC. In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.) Joint Fundraising Representative: (g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate. (h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate. Committees Participating in Joint Fundraiser 1. FEC ID number C 2. FEC ID number C 3. FEC ID number C	ı	FEC Fo i	rm 1 (Revised 02/2009)	Page 2				
(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.) Name of Candidate Party Affiliation				-				
Name of Candidate Candidate Party Affiliation This committee supports/opposes only one candidate, and is NOT an authorized committee. Name of Candidate Party Committee: ((a) This committee is a	(a)		This committee is a principal campaign committee. (Complete the candidate information below	.)				
Candidate Party Affiliation This committee supports/opposes only one candidate, and is NOT an authorized committee. Name of Candidate Party Committee: (d) This committee is a	(b)							
Party Affiliation								
Name of Candidate Party Committee: (d) This committee is a '(National, State or subordinate) committee of the Republican, etc.) Part Political Action Committee (PAC): (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is Corporation Corporation Corporation New Capital Stock Labor Organization In addition, this committee is a Lobbyist/Registrant PAC. (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or part committee. (i.e., nonconnected committee) In addition, this committee is a Lobbyist/Registrant PAC. In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.) Joint Fundraising Representative: (g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate. Committees Participating in Joint Fundraiser 1. FEC ID number C 3. FEC ID number C 3. FEC ID number C 4. FEC ID number C 4. FEC ID number C 5. FEC ID number C 6. FEC ID number C 7. FE								
Party Committee: (d) This committee is a	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.					
(d) This committee is a								
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Membership Organization	(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected organization is a				
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3. FEC ID number C			FEC ID number					
/		4.						

FEC Form 1 (Revised	02/2009)		Page 3
Write or Type Committee Name			. ago u
Main Street Bar	nking Political Action Commi	ittee	
	Organization, Affiliated Committee, Joint Fundraising		r Leadership PAC Sponsor
NONE			
Mailing Address			
	CITY	STATE	ZIP CODE
Relationship: Connecte	d Organization Affiliated Committee Joint Fundra	aising Representativ	ve Leadership PAC Sponsor
 Custodian of Records: Idea books and records. 	ntify by name, address (phone number optional) and p	position of the pers	son in possession of committee
	sourcing LLC		
Full Name	5845 Richmond Highway		
Mailing Address	Suite 820		
	Alexandria	, VA	22303
Title or Position	CITY	STATE	ZIP CODE
Custodian of Records	Telephone	e number 703	3 6551
3. Treasurer: List the name an any designated agent (e.g.,	nd address (phone number optional) of the treasurer of assistant treasurer).	of the committee; a	nd the name and address of
Full Name Zachary Q	tuinn		ı
of Treasurer	IPO Box 7427		
Mailing Address			
	Alexandria	VA	22307-7427
Title or Position Treasurer	CITY Telephone	STATE 703	ZIP CODE 347 - 6551 - 1

FEC Forn	1 (Revised 02/2009)	Page 4					
Full Name of Designated	esignated Karen Linebarger						
Agent	PO Box 7427						
Mailing Address							
	Alexandria , VA , 22307-7427						
		CODE					
Title or Position Assistant Treasu	urer Telephone number	_ 6551					
safety deposit bo	Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds. Name of Bank, Depository, etc.						
	Capital One Bank						
Mailing Address	6197 Oxon Hill Rd						
	Oxon Hill MD 20745						
	CITY STATE ZIP	CODE					
Name of Bank, [Depository, etc.						
Mailing Address							
	CITY STATE ZIP	CODE					

: 97 'A = G7 9 @ G B9 C I G'H9 L H'F9 @ 5 H98 'HC'5 'F9 DC F HZ G7 < 98 I @ 'C F' + H9 A = N5 H + C B

Form/Schedule: F1A Transaction ID:

Amendment

Form/Schedule: Transaction ID: