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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) National Apartment Association Political Action Committee 4300 Wilson Blvd ADDRESS (number and street) Suite 400 (Check if address is changed) Arlington 22203-4168 VACITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS naapac@naahq.org (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2016 C00113241 FEC IDENTIFICATION NUMBER 3. IS THIS STATEMENT NEW (N) OR 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. Culkin, Douglas, S., , CAE Type or Print Name of Treasurer Culkin, Douglas, S., , CAE [Electronically Filed] 10 18 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. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only

Local 202-694-1100

ı	FEC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	
	ididate	Committee:	
(a)	Ш	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	Ш	This committee is an authorized committee, and is NOT a principal campaign committee. (Compinformation below.)	ete the candidate
Nam Cand	e of didate		
	didate / Affiliation	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
Name Cand	e of didate		
Par	ty Con	nmittee:	
(d)		(National, State	Democratic, epublican, etc.) Party.
Poli	tical A	ction Committee (PAC):	
(e)	×	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conn	ected organization is a
		Corporation Corporation w/o 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 seg committee. (i.e., nonconnected committee)	regated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	t Fund	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

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Write or Type Committee Name	e	
National Apartn	ment Association Political Action Committee	<b>;</b>
6. Name of Any Connected (	Organization, Affiliated Committee, Joint Fundraising Representative, or Leadersh	ip PAC Sponsor
NATIONAL APARTME	ENT ASSOCIATION	
Mailing Address	4300 Wilson Blvd	
ag / taa.eee		
	Arlington VA 22203-416	37  -
	CITY STATE 2	ZIP CODE
Relationship: <b>x</b> Connecte	d Organization Affiliated Committee Joint Fundraising Representative Lead	dership PAC Sponsor
Custodian of Records: Idea books and records.	ntify by name, address (phone number optional) and position of the person in poss	session of committee
Full Name		
Mailing Address	1	
g		
		-
Title or Position	CITY STATE Z	7ID CODE
Title of Position	CITY STATE 2	ZIP CODE
	Telephone number	
8. <b>Treasurer:</b> List the name an any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; and the nan assistant treasurer).	ne and address of
	ouglas, S., , CAE	
of Treasurer	4300 Wilson Blvd Ste 400	
Mailing Address		
	Adjusted	00
	Arlington VA 22203-416 CITY STATE Z	68 ZIP CODE
Title or Position Treasurer		518 <sub>   </sub> 6141 <sub> </sub>

Telephone number

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Full Name of			
Designated Agent			
Mailing Address			
	CITY	STATE	ZIP CODE
Title or Position			
	Telephone no	umber	
Name of Bank, Depos	NC Bank		
Name of Bank, Depos	sitory, etc.		
Name of Bank, Depos	sitory, etc.	PA	15230
Name of Bank, Depos	NC Bank PO Box 609	PA STATE	15230 ZIP CODE
Name of Bank, Depos	PO Box 609 Pittsburgh		
Name of Bank, Depos  Mailing Address  Name of Bank, Depos	PO Box 609 Pittsburgh		
Name of Bank, Depos  Mailing Address  Name of Bank, Depos	PO Box 609  Pittsburgh  CITY  Sitory, etc.		
Name of Bank, Depos  Mailing Address  Name of Bank, Depos	PO Box 609 Pittsburgh CITY  sitory, etc.		
Name of Bank, Depos  Mailing Address  Name of Bank, Depos	PO Box 609 Pittsburgh CITY  sitory, etc.	STATE	
Name of Bank, Depos  Mailing Address  Name of Bank, Depos	PO Box 609 Pittsburgh CITY  sitory, etc.		