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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) Make Israel Great Again Political Action Committee 7213 Farr St ADDRESS (number and street) (Check if address is changed) Annandale 22003 VACITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS pkrason@fec-compliance.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2017 C00630822 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. Krason, Patrick, , , Type or Print Name of Treasurer Krason, Patrick, , , [Electronically Filed] 01 2017 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

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	PE OF COMMITTEE						
	naidate	didate 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. (Complete the candidate information below.)					
	ne of didate						
	didate y Affiliatio	Office Sought: House Senate President	State				
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District				
	ne of didate						
Par	arty Committee:						
(d)		(National, State	Democratic, Republican, etc.) Party.				
Pol	itical A	ction Committee (PAC):					
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cont	nected organization is a				
		Corporation Corporation w/o Capital Stock	Labor Organization				
		Membership Organization Trade Association	Cooperative				
<b>(f)</b>		In addition, this committee is a Lobbyist/Registrant PAC.					
(f)	X	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or pa 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.)					
Joir	nt 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.	o 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.	o or more political				
	Com	Committees 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				<b>3</b> · -
_	eat Again Political	Action Comm	ittee	
	Organization, Affiliated Committee,			rship PAC Sponsor
NONE				
			<u> </u>	
Mailing Address				
Mailing Address				
	CITY		STATE	ZIP CODE
Relationship: Connected	d Organization Affiliated Committe	ee Joint Fundraising Ro	epresentative L	eadership PAC Sponsor
. Custodian of Records: Ider books and records.	ntify by name, address (phone number	er optional) and position	of the person in p	ossession of committee
Krason, Pa	atrick, , ,			<b>.</b>
Mailing Address	7213 Farr St			
Walling Address				
	Annandale		VA 22003	
Title or Position	CITY	S	TATE	ZIP CODE
Treasurer		Telephone numbe	er 202 – [	567
Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional assistant treasurer).	) of the treasurer of the co	ommittee; and the r	name and address of
Full Name Krason, Pa	atrick, , ,			
Mailing Address	7213 Farr St			
	Annandale		VA 22003	
Title or Position , Treasurer	CITY	S	TATE	ZIP CODE
		Telephone numbe	er 202 – L	567 - 1171

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Full Name of Designated Agent						
Mailing Address						
Title or Position	CITY ST		ZIP CODE			
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.    Access National Bank						
Mailing Address	1800 Robert Fulton Dr					
	_#105					
	Reston	VA 20191				
	CITY	TATE	ZIP CODE			
Name of Bank, Depository, etc.						
Mailing Address						
	CITY	TATE	ZIP CODE			

## : 97 A = G7 9 @ G5 B9 CI G H9 L H F 9 @ 5 H9 8 HC 5 F 9 DC F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: F1N Transaction ID:

Consistent with the stipulated judgment in Carey v. FEC, this committee intends to establish a separate bank account to deposit and withdraw funds raisedin unlimited amounts from individuals, corporations, labor organizations, and/or other political committees. The funds maintained in this separate account will not be used to make contributions, whether direct, in-kind, or via coordinated communications, or coordinated expenditures, to federal candidates or committees.

Form/Schedule: Transaction ID: