

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

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1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5

S o u t h C a r o l i n a B a n k e r s A s s n . F e d e r a l P A C

ADDRESS (number and street) P O B o x 1 4 8 3

Check if different than previously reported. (ACC) C o l u m b i a S C 2 9 2 0 2

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C 0 0 1 0 3 8 6 1

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER) (b) Monthly Report Due On: Feb 20 (M2) Mar 20 (M3) Apr 20 (M4) May 20 (M5) Jun 20 (M6) Jul 20 (M7) Aug 20 (M8) Sep 20 (M9) Oct 20 (M10) Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE) (c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S) Election on in the State of (d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on in the State of

5. Covering Period 1 1 / 2 7 / 2 0 1 8 through 1 2 / 3 1 / 2 0 1 8

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Donna S. Taylor

Signature of Treasurer Donna S. Taylor Date 0 1 / 0 9 / 2 0 1 9

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

South Carolina Bankers Association Federal PAC

Report Covering the Period: From:

MM	DD	YYYY
11	27	2018

 To:

MM	DD	YYYY
12	31	2018

	COLUMN A This Period	COLUMN B Calendar Year-to-Date							
6. (a) Cash on Hand January 1, <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>YYYY</td><td>MM</td><td>DD</td></tr><tr><td>2018</td><td></td><td></td></tr></table>	YYYY	MM	DD	2018				<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>21,529.86</td></tr></table>	21,529.86
YYYY	MM	DD							
2018									
21,529.86									
(b) Cash on Hand at Beginning of Reporting Period.....	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>32,200.86</td></tr></table>	32,200.86							
32,200.86									
(c) Total Receipts (from Line 19).....	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>0.00</td></tr></table>	0.00	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>25,800.00</td></tr></table>	25,800.00					
0.00									
25,800.00									
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>32,200.86</td></tr></table>	32,200.86	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>47,329.86</td></tr></table>	47,329.86					
32,200.86									
47,329.86									
7. Total Disbursements (from Line 31).....	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>13,000.00</td></tr></table>	13,000.00	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>28,129.00</td></tr></table>	28,129.00					
13,000.00									
28,129.00									
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>19,200.86</td></tr></table>	19,200.86	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>19,200.86</td></tr></table>	19,200.86					
19,200.86									
19,200.86									
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td> </td></tr></table>								
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td> </td></tr></table>								

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

20181231 14:00:00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share		
(ii) Non-Federal Share		
(b) Other Federal Operating Expenditures		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))		
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	10,000.00	22,129.00
24. Independent Expenditures (use Schedule E)	3,000.00	6,000.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))		
29. Other Disbursements (Including Non-Federal Donations)		
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	13,000.00	28,129.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	13,000.00	28,129.00

2016 RELEASE UNDER E.O. 14176

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)		
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)		
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))		
37. Offsets to Operating Expenditures (from Line 15, page 3)		
38. Net Operating Expenditures (subtract Line 37 from Line 36)		

UNRECORDED COPY OF THIS FORM IS AVAILABLE TO THE PUBLIC

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE / OF 1

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

South Carolina Bankers Association Federal PAC

<p>A. Full Name (Last, First, Middle Initial) American Bankers Association</p>			<p>Date of Disbursement MM / DD / YYYY 1 2 / 0 7 / 2 0 1 8</p>		
<p>Mailing Address 1120 Connecticut Avenue</p>			<p>FEC Identification Number C</p>		
<p>City Washington</p>	<p>State DC</p>	<p>Zip Code 290036</p>	<p>Amount of Each Disbursement this Period 10,000.00</p>		
<p>Purpose of Disbursement Fare Share Contribution</p>			<p>Memo Item <input type="checkbox"/></p>		
<p>Candidate Name</p>			<p>Category/Type</p>		
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>State: District:</p>		

<p>B. Full Name (Last, First, Middle Initial)</p>			<p>Date of Disbursement MM / DD / YYYY</p>		
<p>Mailing Address</p>			<p>FEC Identification Number C</p>		
<p>City</p>	<p>State</p>	<p>Zip Code</p>	<p>Amount of Each Disbursement this Period</p>		
<p>Purpose of Disbursement</p>			<p>Memo Item <input type="checkbox"/></p>		
<p>Candidate Name</p>			<p>Category/Type</p>		
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>State: District:</p>		

<p>C. Full Name (Last, First, Middle Initial)</p>			<p>Date of Disbursement MM / DD / YYYY</p>		
<p>Mailing Address</p>			<p>FEC Identification Number C</p>		
<p>City</p>	<p>State</p>	<p>Zip Code</p>	<p>Amount of Each Disbursement this Period</p>		
<p>Purpose of Disbursement</p>			<p>Memo Item <input type="checkbox"/></p>		
<p>Candidate Name</p>			<p>Category/Type</p>		
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>State: District:</p>		

<p>SUBTOTAL of Disbursements This Page (optional).....▶</p>	<p>10,000.00</p>
<p>TOTAL This Period (last page this line number only).....▶</p>	<p>10,000.00</p>

2025 RELEASE UNDER E.O. 14176

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE / OF /

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

South Carolina Bankers Association Federal PAC

Full Name (Last, First, Middle Initial)

A.			Date of Disbursement	
Independent Community Bankers Association			MM / DD / YYYY 12 / 07 / 2018	
Mailing Address One Thomas Circle, NW			FEC Identification Number	
City Washington			C	
State DC			Amount of Each Disbursement this Period	
Zip Code 290036			3,000.00	
Purpose of Disbursement PAC Contribution			<input type="checkbox"/> Memo Item	
Candidate Name			Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:				

B.			Date of Disbursement	
Full Name (Last, First, Middle Initial)			MM / DD / YYYY	
Mailing Address			FEC Identification Number	
City			C	
State			Amount of Each Disbursement this Period	
Zip Code				
Purpose of Disbursement			<input type="checkbox"/> Memo Item	
Candidate Name			Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:				

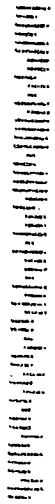
C.			Date of Disbursement	
Full Name (Last, First, Middle Initial)			MM / DD / YYYY	
Mailing Address			FEC Identification Number	
City			C	
State			Amount of Each Disbursement this Period	
Zip Code				
Purpose of Disbursement			<input type="checkbox"/> Memo Item	
Candidate Name			Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

MM / DD / YYYY	Amount of Each Disbursement this Period
	3,000.00

POSTAGE WILL BE PAID BY ADDRESSEE



SOUTH CAROLINA
Bankers Association

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Columbia, SC 29202

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Washington, DC 20463

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<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
 PREPARER	1-29-19 DATE PREPARED

20190129 10:00:00 AM