FEC FORM 1

STATEMENT OF ORGANIZATION

| FORM 1 | (See instructions) | Office use only |
|-------------------------------|--|-----------------------|
| NAME OF COMMITTEE (in a | (Check if name Example: If typying, type is changed) over the lines | |
| MCCAIN-PALI | N COMPLIANCE FUND, INC. | |
| 1 | | |
| ADDRESS (number and | C/O CAPLIN AND DRYSDALE | |
| (Check if address | ONE THOMAS CIRCLE NW, SUITE 100 | |
| X is changed) | WASHINGTON | DC 20005 - |
| | CITY▲ | STATE▲ ZIP CODE ▲ |
| COMMITTEE'S E-MAI | IL ADDRESS (Please provide only one e-mail address) | |
| (Check if address is changed) | SPURPURA@MCCAIN08HQ.COM | |
| | | |
| COMMITTEE'S WEB | PAGE ADDRESS (URL) | |
| (Check if address | 5 | |
| is changed) | <u> </u> | |
| | | |
| 2. DATE 0.3 | | |
| 3. FEC IDENTIFICA | TION NUMBER C C00446104 | |
| 4. IS THIS STATEM | MENT NEW (N) OR X AMENDED (A |)) |
| I certify that I have exami | ined this Statement and to the best of my knowledge and belief it is true, corru | ect and complete |
| | Trageurer JOSEPH SCHMUCKLER | |
| Type or Print Name of | Treasurer | |
| Signature of Treasurer | Electronically Filed by JOSEPH SCHMUCKLER | Date 03 / 15 / Y 2011 |
| NOTE: Submission of fal | lse, erroneous, or incomplete information may subject the person signing this | |
| Office | For further informa | |
| Use Only | Federal Election Cor Toll Free 800-424-91 | 530 (Revised 02/2009) |

| | FEC I | Form 1 (Revised 02/2009) | Page 2 |
|----|-----------------------------|--|---------------------------------------|
| 5. | TYPE OF C | OMMITTEE (Check One) | |
| | Candidate (| Committee: | |
| | (a) | This committee is a principal campaign committee. (Complete the candidate information below.) | |
| | (b) X | This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the information below.) | candidate |
| | Name of Candidate | JOHN S. MCCAIN AND SARAH H. PALIN | |
| | Candidate Party Affiliat | ion REP Office Sought: House Senate X President | State District |
| | (c) | This committee supports/opposes only one candidate, and is NOT an authorized committee. | |
| | Name of Candidate | | |
| | Party Comm | nittee: | |
| | (d) | (National, State (This committee is a (Or subordinate) committee of the | Democratic, epublican,etc.) Party. |
| | Political Ac | tion Committee (PAC): | |
| | (e) | This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6. | organization is a: |
| | | Corporation Corporation w/o Capital Stock Labor | Organization |
| | | Membership Organization Trade Association Coop | perative |
| | | 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 fu committee. (i.e., nonconnected committee) | und or party |
| | | In addition, this committee is a Lobbyist/Registrant PAC. | |
| | | In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.) | |
| | Joint Fundra | aising Representative: | |
| | (g) | This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or modern committees/organizations, at least one of which is an authorized committee of a federal candidate. | ore political |
| | (h) | This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or modern committees/organizations, none of which is an authorized committee of a federal candidate. | nore political |
| | Com | nmittees Participating in Joint Fundraiser | |
| | | 1. FEC ID number C | |
| | | 2. FEC ID number | |
| | | 3. FEC ID number | |
| | | EEC ID number C | |

| FEC Form 1 (Rev | ed 02/2009) | | Page 3 |
|------------------------------------|---|---------------------------------------|-------------------------------|
| Write or Type Committee N | me | | |
| MCCAIN-PALIN CO | MPLIANCE FUND, INC. | | |
| 6. Name of Any Connect | d Organization, Affiliated Committee, Jo | oint Fundraising Representative, or l | Leadership PAC Sponsor |
| JOHN MCCAIN 200 | INC. | | |
| | | | |
| Mailing Address | PO BOX 16664 | | |
| | | | |
| | ARLINGTON | VA | 22215 |
| | СІТУ▲ | STATE ≜ | ZIP CODE ▲ |
| Relationship: | | | |
| Connected Organi | ation X Affiliated Committee | Joint Fundraising Representative | Leadership PAC Sponsor |
| Full Name Li | C/O CAPLIN AND | DRYSDALE RCLE NW, SUITE 100 | |
| | WASHINGTON | DC | 20005 |
| Title or Position ▼ ASSI | CITY A TANT TREASURER | STATE Telephone number 70 | ZIP CODE 1 03 - 650 - 5800 |
| | ame and address (phone number c any designated agent (e.g., assistan | | ommittee; and the |
| Full Name of Treasurer J | SEPH SCHMUCKLER | | |
| Mailing Address | C/O CAPLIN AND | DRYSDALE | |
| | ONE THOMAS C | IRCLE NW, SUITE 100 | |
| | WASHINGTON | | |
| Title or Position ♥ | CITY A | STATE | ZIP CODE A |
| TRE | SURER | Telephone number | 03 _ 650 _ 5800 |
| | | i elephone number | |

| FEC Form 1 (Revis | sed 02/2009) | | Page 4 |
|---|---|----------------------------|-----------------------|
| Full Name of Designated Agent | SALVATORE A. PURPURA | | |
| Mailing Address | C/O CAPLIN AND DRYSDALE | | |
| | ONE THOMAS CIRCLE NW, SU | TE 100 | |
| | WASHINGTON | DC | 20005 – |
| Title or Position ▼ | CITY A | STATE A | ZIP CODE A |
| ASSIST | TANT TREASURER Telep | hone number | 650 5800 |
| | | | |
| Banks or Other Deposit safety deposit boxes or m | aintains funds. | ommittee deposits funds, h | nolds accounts, rents |
| | aintains funds. | ommittee deposits funds, h | nolds accounts, rents |
| safety deposit boxes or m Name of Bank, Depository | aintains funds. | ommittee deposits funds, h | nolds accounts, rents |
| safety deposit boxes or m Name of Bank, Depository | aintains funds. y, etc. | ommittee deposits funds, h | nolds accounts, rents |
| safety deposit boxes or m Name of Bank, Depository | aintains funds. y, etc. AGLE BANK | ommittee deposits funds, h | nolds accounts, rents |
| safety deposit boxes or m Name of Bank, Depository | aintains funds. y, etc. AGLE BANK | ommittee deposits funds, h | nolds accounts, rents |
| safety deposit boxes or m Name of Bank, Depository | aintains funds. y, etc. AGLE BANK 1725 I STREET NW | | |
| safety deposit boxes or m Name of Bank, Depository | aintains funds. y, etc. AGLE BANK 1725 I STREET NW WASHINGTON CITY | DC | 20006 |
| safety deposit boxes or m Name of Bank, Depository EA Mailing Address Name of Bank, Depository | aintains funds. y, etc. AGLE BANK 1725 I STREET NW WASHINGTON CITY | DC | 20006 |
| safety deposit boxes or m Name of Bank, Depository EA Mailing Address Name of Bank, Depository | aintains funds. y, etc. AGLE BANK 1725 I STREET NW WASHINGTON CITY y, etc. | DC STATE △ | 20006 ZIP CODE |
| safety deposit boxes or m Name of Bank, Depository EA Mailing Address Name of Bank, Depository | aintains funds. y, etc. AGLE BANK 1725 I STREET NW WASHINGTON CITY y, etc. PMORGAN CHASE BANK 345 PARK AVE | DC STATE △ | 20006 ZIP CODE |
| safety deposit boxes or m Name of Bank, Depository EA Mailing Address Name of Bank, Depository | aintains funds. y, etc. AGLE BANK 1725 I STREET NW WASHINGTON CITY y, etc. PMORGAN CHASE BANK 345 PARK AVE | DC STATE △ | 20006 ZIP CODE |

| Banks or Other Depositories: safety deposit boxes or maintains | List all banks or other depositories in which the come funds | nmittee deposits funds, hol | ds accounts, rents |
|--|--|-----------------------------|---------------------|
| Name of Bank, Depository, etc. | Turido. | | [ADDITIONAL] |
| CHAIN E | BRIDGE | | |
| | 1445-A Laughlin Avenue | | |
| Mailing Address | 1770 A Eddgilli Avende | | |
| | | | |
| 1 | MCLEAN | VA L | 22101 |
| | CITY 🛕 | STATE ⊿ | ZIP CODE 🛕 |
| | | | [ADDITIONAL |
| | nization, Affiliated Committee, Joint Fundraising R | Representative, or Leade | rship PAC Sponsor |
| MCCAIN VICTORY 2008 | | | |
| | | | |
| Mailing Address | 228 S WASHINGTON ST STE 115 | 1 1 1 1 1 1 1 | |
| | 1 | | |
| | ALEXANDRIA | VA | 22314 |
| letion chin : | CITY▲ | STATE ≜ | ZIP CODE |
| elationship: Connected Organization | Affiliated Committee X Joint Fundraising F | Representative Lea | dership PAC Sponsor |
| Designated Agent | | | [ADDITIONAL] |
| Full Name | | | |
| Matter Address | | | |
| Mailing Address | | | |
| | | | |
| | | | |
| Title or Position ♥ | CITY A | STATE▲ | ZIP CODE 4 |
| | | | |
| | Tolo | phone number | |
| | | p | |
| Joint Fundraiser Participant | Tele | | [ADDITIONAL] |

| Banks or Other Depositories: safety deposit boxes or maintain: | List all banks or other depositories in which the common stunds | nittee deposits funds, hold | s accounts, rents |
|--|---|-----------------------------|---------------------------------|
| Name of Bank, Depository, etc. | , idited. | [| ADDITIONAL] |
| | | | |
| Mailing Address | | | |
| | | | |
| | | | |
| | CITY 🗖 | STATE.▲ | ZIP CODE 🛕 |
| Name of Any Connected Orga | nization, Affiliated Committee, Joint Fundraising Re | presentative, or Leaders | [ADDITIONAL] ship PAC Sponsor |
| MCCAIN VICTORY CALIF | ORNIA | | |
| | | | |
| Mailing Address | 228 S WASHINGTON ST STE 115 | | |
| | | | |
| | ALEXANDRIA | L VA | 22314 |
| Relationship: | CITY▲ | STATE 🛕 | ZIP CODE |
| Connected Organization | Affiliated Committee X Joint Fundraising Re | epresentative Lead | ership PAC Sponsor |
| Designated Agent | | | [ADDITIONAL] |
| Full Name | | | |
| Mailing Address | | | |
| | | | |
| | | | |
| Title or Position ▼ | CITY A | STATE ▲ | ZIP CODE A |
| | Telep | hone number | |
| Joint Fundraiser Participant | | | [ADDITIONAL] |
| | | EC ID number | |

| Banks or Other Depositories: safety deposit boxes or maintain | | nittee deposits funds, hold | ls accounts, rents |
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| Name of Bank, Depository, etc. | | | [ADDITIONAL] |
| | | | |
| Mailing Address | - | | |
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| | | | |
| | CITY 🗻 | STATE △ | ZIP CODE 🛕 |
| MCCAIN VICTORY FLOR | I 228 S WASHINGTON ST STE 115 | | |
| Mailing Address | 220/3/WASI IING FOR \$1/312/115 | | |
| | | | |
| | ALEXANDRIA | L <mark>VA</mark> L | 22314 |
| elationship: | CITY▲ | STATE A | ZIP CODE |
| Connected Organization | Affiliated Committee X Joint Fundraising Re | epresentative Lead | dership PAC Sponsor |
| Designated Agent | | | [ADDITIONAL] |
| Full Name | | | |
| Mailing Address | | | |
| ag . too. ooo | | | |
| | | | |
| Title or Position ▼ | CITY A | STATE. | ZIP CODE A |
| | Teleph | none number | |
| Joint Fundraiser Participant | | | [ADDITIONAL] |
| | 1 - | EC ID number C | - |
| | F | EC ID number | |

| Banks or Other Depositories: safety deposit boxes or maintains | List all banks or other depositories in which the committee | e deposits funds, ho | lds accounts, rents |
|--|---|----------------------|-----------------------------------|
| Name of Bank, Depository, etc. | | | [ADDITIONAL] |
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| Mailing Address | | | |
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| L | | | |
| | CITY 🛕 | STATE. △ | ZIP CODE 🛕 |
| Name of Any Connected Organ | nization, Affiliated Committee, Joint Fundraising Repres | sentative, or Leade | [ADDITIONAL] ership PAC Sponsor |
| | | | |
| Mailing Address | 228 S WASHINGTON ST STE 115 | | |
| | ALEXANDRIA | VA L | 22314 |
| Relationship: | CITY▲ | STATE A | ZIP CODE |
| Connected Organization | Affiliated Committee X Joint Fundraising Repres | sentative Lea | adership PAC Sponsor |
| Designated Agent | | | [ADDITIONAL] |
| Full Name | | | |
| Mailing Address | | | |
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| | | | |
| Title or Position ▼ | CITY A | STATE | ZIP CODE A |
| | Telephone | number | |
| Joint Fundraiser Participant | | | [ADDITIONAL] |
| | FEC | ID number | |

| Banks or Other Depositories: safety deposit boxes or maintain | | nittee deposits funds, hold | ls accounts, rents |
|---|---|-----------------------------|---------------------------------|
| Name of Bank, Depository, etc. | a.a. | I | [ADDITIONAL] |
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| Mailing Address | | | |
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| | | | |
| | CITY 🗖 | STATE. △ | ZIP CODE 🛕 |
| Name of Any Connected Orga | anization, Affiliated Committee, Joint Fundraising Re | presentative, or Leader | [ADDITIONAL] ship PAC Sponsor |
| | | | |
| Mailing Address | 228 S WASHINGTON ST STE 115 | | |
| | ALEXANDRIA | VA L | 22314 |
| elationship: | CITY▲ | STATE A | ZIP CODE |
| Connected Organization | Affiliated Committee X Joint Fundraising Re | epresentative Lead | dership PAC Sponsor |
| Designated Agent | | | [ADDITIONAL] |
| Full Name | | | |
| Mailing Address | | | |
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| | | | |
| Title or Position ▼ | CITY A | STATE ∆ | ZIP CODE A |
| - | Teleph | none number | |
| Joint Fundraiser Participant | | | [ADDITIONAL] |
| | F | EC ID number | |

| Banks or Other Depositories: safety deposit boxes or maintains | List all banks or other depositories in which the commit | tee deposits funds, ho | lds accounts, rents |
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| Name of Bank, Depository, etc. | , rando. | | [ADDITIONAL] |
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| Mailing Address | | | |
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| | | | |
| | CITY 🛕 | STATE ⊿ | ZIP CODE 🛕 |
| Name of Any Connected Orga | nization, Affiliated Committee, Joint Fundraising Repr | resentative, or Leade | [ADDITIONAL] ership PAC Sponsor |
| | | | |
| Mailing Address | PO BOX 16664 | | |
| | ARLINGTON | VA L | 22215 |
| Relationship: | CITY▲ | STATE A | ZIP CODE |
| Connected Organization | X Affiliated Committee Joint Fundraising Rep | resentative Lea | adership PAC Sponsor |
| Designated Agent | | | [ADDITIONAL] |
| Full Name | | | |
| Mailing Address | | | |
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| | | | |
| Title or Position ▼ | CITY A | STATE▲ | ZIP CODE A |
| | Telepho | ne number | |
| Joint Fundraiser Participant | | | [ADDITIONAL] |
| | FE | C ID number | |

| Banks or Other Depositories: safety deposit boxes or maintains | List all banks or other depositories in which the committee | deposits funds, ho | lds accounts, rents |
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| Name of Bank, Depository, etc. | | | [ADDITIONAL] |
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| Mailing Address | | | |
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| L | | | |
| | CITY 🗖 | STATE ⊿ | ZIP CODE 🛕 |
| Name of Any Connected Organ MCCAIN-PALIN VICTORY | nization, Affiliated Committee, Joint Fundraising Repres | entative, or Leade | [ADDITIONAL] ership PAC Sponsor |
| | , 220 C WACHINGTON CT CTE 115 | | |
| Mailing Address | 228 S WASHINGTON ST STE 115 | | |
| | ALEXANDRIA | VA | 22314 |
| Relationship: | CITY▲ | STATE A | ZIP CODE |
| Connected Organization | Affiliated Committee X Joint Fundraising Repres | entative Lea | adership PAC Sponsor |
| Designated Agent | | | [ADDITIONAL] |
| Full Name | | | |
| Mailing Address | | | |
| | | | |
| Title or Position ▼ | CITY & | ——STATE. | |
| | Telephone | number | |
| Joint Fundraiser Participant | | | [ADDITIONAL] |
| | FEC I | D number C | |

| Banks or Other Depositories: safety deposit boxes or maintains | List all banks or other depositories in which the committee | deposits funds, ho | lds accounts, rents |
|--|---|--------------------|-----------------------------------|
| Name of Bank, Depository, etc. | | | [ADDITIONAL] |
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| Mailing Address | | | |
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| | CITY 🗖 | STATE ⊿ | ZIP CODE 🛕 |
| Name of Any Connected Organ | nization, Affiliated Committee, Joint Fundraising Repres | entative, or Leade | [ADDITIONAL] ership PAC Sponsor |
| | | | |
| Mailing Address | 228 S WASHINGTON ST STE 115 | | |
| | ALEXANDRIA | VA | 22314 |
| Relationship: | CITY▲ | STATE A | ZIP CODE |
| Connected Organization | Affiliated Committee X Joint Fundraising Repres | sentative Lea | adership PAC Sponsor |
| Designated Agent | | | [ADDITIONAL] |
| Full Name | | | |
| Mailing Address | | | |
| | | | |
| Title or Position ♥ | CITY A | STATE. | ZIP CODE A |
| | Telephone | number | |
| Joint Fundraiser Participant | | | [ADDITIONAL] |
| | FEC I | D number C | |

| Banks or Other Depositories: safety deposit boxes or maintains | List all banks or other depositories in which the committee funds | e deposits funds, ho | olds accounts, rents |
|--|---|----------------------|-----------------------------------|
| Name of Bank, Depository, etc. | Tollide. | | [ADDITIONAL] |
| | | | |
| Mailing Address | | | |
| L | | | |
| L | | | |
| | CITY 🛕 | STATE_ | ZIP CODE 🛕 |
| Name of Any Connected Organ MCCAIN-PALIN VICTORY | nization, Affiliated Committee, Joint Fundraising Repres | sentative, or Leade | [ADDITIONAL] ership PAC Sponsor |
| | 228 S WASHINGTON ST STE 115 | | |
| Mailing Address | 220 3 WASHINGTON 31 31E 115 | | |
| | ALEXANDRIA | VA L | 22314 |
| Relationship: | CITY▲ | STATE A | ZIP CODE |
| Connected Organization | Affiliated Committee X Joint Fundraising Repres | sentative Le | adership PAC Sponsor |
| Designated Agent | | | [ADDITIONAL] |
| Full Name | | | |
| Mailing Address | | | |
| | | | |
| | | | _ |
| Title or Position ▼ | CITY & | STATE ∆ | ZIP CODE A |
| | Telephone | e number | |
| Joint Fundraiser Participant | | | [ADDITIONAL] |
| <u>.</u> | FEC | ID number C | |