FEC FORM 1	STATEMENT ORGANIZAT		PAGE 1 / 5 -
1. NAME OF COMMITTEE (in full)		Example:If typing, type over the lines.	12FE4M5
Keep America	Great PAC		
	PO Box 36-20197		
ADDRESS (number and street			
(Check if address is changed)			
	New York		NY    10129
			STATE ▲ ZIP CODE ▲
COMMITTEE'S E-MAIL ADD	RESS		
(Check if address is changed)	nlerner802@gmail.com		<u></u>
lo onangody	Optional Second E-Mail Address	;	
<ul> <li>(Check if address is changed)</li> </ul>			
2. DATE 03 /	D D / Y Y Y Y 09 2016		
3. FEC IDENTIFICATION	NUMBER ► C C0061	2846	
4. IS THIS STATEMENT	× NEW (N) OR	AMENDED (A)	
I certify that I have examine	d this Statement and to the best of n	ny knowledge and belief it	is true, correct and complete.
Type or Print Name of Treas	urer Nathan Lerner		
Signature of Treasurer	athan Lerner	[Electronically Filed]	Date 03 / 25 / Y Y Y
NOTE: Submission of false, er	roneous, or incomplete information may ANY CHANGE IN INFORMATION S		nis Statement to the penalties of 2 U.S.C. §437 ITHIN 10 DAYS.
Office Use Only		For further information cd Federal Election Commissio Toll Free 800-424-9530 Local 202-694-1100	

-		
FEC FO	rm 1 (Revised 02/2009)	Page <b>2</b>
TYPE OF C	OMMITTEE	
Candidate	Committee:	
(a)	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Compinformation below.)	plete the candidate
Name of Candidate		
Candidate Party Affiliati	on Office Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Con	nmittee:	
(d)		Democratic, Republican, etc.) Party
Political A	ction Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nected organization is
	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 second committee. (i.e., nonconnected committee)	gregated fund or part
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fund	raising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw 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	mittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.	FEC ID number	

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Write or Type Committee Name

Title or Position

## Keep America Great PAC

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Mailing Address																							
					CIT	Y							ST	ATE				Z	IP (		DE		
Relationship:	Connected	l Organizatic	n	Affilia	ted C	omm	ittee		Joint	: Fun	drais	sing	Repr	eser	ntativ	/e	L	.ead	lersł	nip F	PAC	Spo	nsor
7. Custodian of Re books and record		tify by name	e, addr	ess (	ohone	e nur	nber	0	ptiona	al) ar	nd po	ositio	on of	the	per	son	in p	OSS	essi	on	of co	omm	ittee
	Nathan Ler	rner																					I
Full Name		,1207 Willo																					
Mailing Address			wave																				
		Hoboken											N	J		07	030						

Telephone number	802 - 373 - 3099	

STATE

**ZIP CODE** 

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

CITY

Full Name	Nathan Lerner
of Treasurer	
Mailing Address	1207 Willow ave
	Hoboken
	CITY STATE ZIP CODE
Title or Position	

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Full Name of Designated Agent								I	I																					
Mailing Address																														
																							L							
							СІЛ	ΓY											STA	ΤE					ZII	PC	COD	Ε		
Title or Position																														
														Tele	eph	ione	e ni	umt	ber											

9. 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.

Ally Fir			
Mailing Address	P.O. Box 380901		
	Bloomington	MN 554	38
	CITY	STATE	ZIP CODE
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY	STATE	ZIP CODE

## :97 `A=G79 @@5 B9CIG`H9LH`F9 @5 H98 `HC`5 `F9DCFHžG7<98 I@9 `CF`+H9A=N5 H=CB

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: