Statement of Organization

1. Name of Committee (in full)  
   Example: If typing, type over the lines.
   [ ] (Check if name is changed)
   
   Black Lives Matter PAC LLC

2. Address (number and street)  
   [ ] (Check if address is changed)

   4827 Cupples Place

3. City

   St Louis

4. State

   MO

5. Zip Code

   63113

[ ] Committee's E-mail Address (Please provide only one e-mail address)

   [ ] (Check if address is changed)

   murdockreport@gmail.com

6. Committee's Web Page Address (URL)

   [ ] (Check if address is changed)

7. Date

   09/15/2015

8. FEC Identification Number

   C

9. Is this statement [X] 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.

Type or Print Name of Treasurer

   James Hill

Signature of Treasurer

   James Hill

Date

   09/16/2015

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.
5. TYPE OF COMMITTEE

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. (Complete the candidate information below.)

Name of Candidate
__________________________

Candidate Party Affiliation
__________________________ Office Sought: [ ] House [ ] Senate [ ] President
State
District

(c) [ ] This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate
__________________________

Party Committee:
(d) [ ] This committee is a —— (National, State or subordinate) committee of the —— (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):
(e) [ ] This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected 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) [X] This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party 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.)

Joint Fundraising Representative:
(g) [ ] This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.

(h) [ ] This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser
1. ________________________ FEC ID number: __________
2. ________________________ FEC ID number: __________
3. ________________________ FEC ID number: __________
4. ________________________ FEC ID number: __________
Black Lives Matter PAC LLC

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

None

Mailing Address

Relationship: □ Connected Organization □ Affiliated Committee □ Joint Fundraising Representative □ Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name: James Hill
Mailing Address: 4827 Cupples Place
St Louis, MO 63113
Title or Position: [Blank]

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).

Full Name of Treasurer: LaRhonda Wilson
Mailing Address: 4827 Cupples Place
St Louis, MO 63113
Title or Position: Asst Treasurer
### Full Name of Designated Agent

**Commerce Bank**

**Mailing Address**

8000 Forsyth Blvd

St Louis, MO 63105-1797

**Title or Position**

[Blank]

**Telephone number**

[Blank]

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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.**

[Blank]

**Mailing Address**

[Blank]

**CITY**

[Blank]

**STATE**

[Blank]

**ZIP CODE**

[Blank]

[Blank]

**Name of Bank, Depository, etc.**

[Blank]

**Mailing Address**

[Blank]

**CITY**

[Blank]

**STATE**

[Blank]

**ZIP CODE**

[Blank]
Federal Election Commission
999 E Street NW
Washington, DC 20463
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Date of Receipt: 9/22

Preparer: MP

Date Prepared: 3/2015