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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) is changed) over the lines. Managed Funds Association Political Action Committee 600 14th Street, NW ADDRESS (number and street) Suite 900 (Check if address is changed) Washington 20005 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS mfapac@managedfunds.org (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.managedfunds.org (Check if address is changed) DATE 2017 C00306894 FEC IDENTIFICATION NUMBER 3. X 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. Costantino, Louis, , Mr., Type or Print Name of Treasurer Costantino, Louis, , Mr., [Electronically Filed] 04 03 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

FFC	Form 1 (Revised 02/2009)	Page <b>2</b>
TYPE OF	COMMITTEE	. ago <b>2</b>
Candida	ate 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. (Con information below.)	nplete the candidate
Name of Candidate		
Candidate Party Affil		State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party C	ommittee:	<b></b>
(d)	This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Politica	Action Committee (PAC):	
(e) X	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.	nnected 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)	This committee supports/opposes more than one Federal candidate, and is NOT a separate s committee. (i.e., nonconnected committee)	egregated fund 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 Fu	ndraising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for t committees/organizations, at least one of which is an authorized committee of a federal candidate.	wo or more political
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
Co	ommittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.		

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	EEC Form 1 /Doving 1	02/2000)	Daga <b>2</b>
١٨	FEC Form 1 (Revised 0	<u> </u>	Page 3
	3.	s Association Political Action Committee	
6.	Name of Any Connected C	Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership	PAC Sponsor
M	anaged Funds Asso	ciation	
_			
		600 14th Street, NW	
	Mailing Address	Suite 900	
		Washington DC 20005	
		was in 1901	
		CITY STATE ZIF	CODE
	Relationship: X Connected	d Organization Affiliated Committee Joint Fundraising Representative Leade	rship PAC Sponsor
	books and records.	ntify by name, address (phone number optional) and position of the person in posses	ssion of committee
		600 14th Street, NW	
	Mailing Address	Suite 900	
		Washington , DC , 20005	
		Washington DC 20005	
	Title or Position	CITY STATE ZIF	CODE
	Treasurer		2600
3.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and the name assistant treasurer).	and address of
	Full Name Costantino of Treasurer	o, Louis, , Mr.,	
	Mailing Address	600 14th Street, NW	
		Suite 900	, , , , , <b>,</b> ,
		Washington   DC   20005	-  , , ,
		CITY STATE ZIP	CODE
	Title or Position Treasurer		2600

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Full Name of Designated	Landers, David, , ,	
Agent	600 14th Street, NW	
Mailing Address	000 14th Street, 1999	
	Suite 900	
	Washington DC 20005	-   -
	CITY STATE	ZIP CODE
Title or Position Assistant Treas	urer Telephone number 202 –	730 2600
		s accounts, rents
safety deposit bo	oxes or maintains funds.	
safety deposit bo	pnc Bank	decounts, rents
safety deposit bo Name of Bank, I	pnc Bank	decounts, rents
safety deposit bo Name of Bank, I	pnc Bank	
safety deposit bo Name of Bank, [	PNC Bank  P.O. Box 339  Pittsburgh  PA 15230	ZIP CODE
safety deposit bo Name of Bank, [	PNC Bank  P.O. Box 339  Pittsburgh  PA 15230  CITY  STATE	
safety deposit bo Name of Bank, [ Mailing Address	PNC Bank  P.O. Box 339  Pittsburgh  PA 15230  CITY  STATE	ZIP CODE
Name of Bank, I	PNC Bank P.O. Box 339 Pittsburgh CITY STATE  Depository, etc.	
safety deposit bo Name of Bank, [ Mailing Address	PNC Bank P.O. Box 339 Pittsburgh CITY STATE  Depository, etc.	ZIP CODE
Name of Bank, I	PNC Bank P.O. Box 339 Pittsburgh CITY STATE  Depository, etc.	ZIP CODE
Name of Bank, I	PNC Bank P.O. Box 339 Pittsburgh CITY STATE  Depository, etc.	ZIP CODE

## : 97 'A = G7 9 @ G B9 C I G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCF HZ G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: F1A Transaction ID:

This report is being amended to update the first name of the Treasurer for MFA-PAC.

Form/Schedule: Transaction ID: