PAGE 1/5

STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) MBDA Incorporated Political Action Committee 1300 Wilson Boulevard Suite 550 ADDRESS (number and street) (Check if address is changed) Arlington 22209 VACITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS pac@mbda-us.com (Check if address is changed) Optional Second E-Mail Address |fecinfo@pass1.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 01 2019 C00490037 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. Pennock, James, , , Type or Print Name of Treasurer Pennock, James, , , [Electronically Filed] 03 2019 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

-	FC Fo	rm 1 (Revised 02/2009)	Page 2				
		COMMITTEE	1 aye 2				
Can	didate	e Committee:					
(a)	Ш	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. (Cominformation below.)	plete the candidate				
Name Cand							
Cand Party	idate Affiliati	on Office Sought: House Senate President	State				
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.					
Name Cand							
Part	y Con	nmittee:	/Dama austic				
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.				
Polit	tical A	ction Committee (PAC):					
(e)	×	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor	nnected organization is a				
		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 segregated fund or par 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	t Fund	Iraising Representative:					
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	vo 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.	vo or more political				
	Com	mittees Participating in Joint Fundraiser					
	1.	FEC ID number					
	2.	FEC ID number					
	3.	FEC ID number					
	4.						

	_		
I	FEC Form 1 (Revise	ed 02/2009)	Page 3
V	Vrite or Type Committee Na		<u> </u>
I	MBDA Incorpo	orated Political Action Committee	
6.	-	d Organization, Affiliated Committee, Joint Fundraising Representative, or Leadersh	nip PAC Sponsor
N	IBDA Incorporated		
	Mailing Address	1300 Wilson Boulevard Suite 550	
		Arlington VA 22209-23.	23
		CITY STATE	ZIP CODE
	Relationship: x Connec	cted Organization Affiliated Committee Joint Fundraising Representative Lea	dership PAC Sponsor
	Custodian of Records: le	dentify by name, address (phone number optional) and position of the person in pos-	session of committee
	Full Name	n, Vincent, , ,	
	Mailing Address	c/o PASS 1950 Roland Clarke Place	
		Suite 300	
		Reston VA 20191	
	Title or Position	CITY STATE 2	ZIP CODE
	Custodian of Records		476
3.	Treasurer: List the name any designated agent (e.g.	and address (phone number optional) of the treasurer of the committee; and the nan	ne and address of
	Full Name Pennoc of Treasurer	k, James, , ,	
	Mailing Address	1300 Wilson Boulevard Suite 550	
		Arlington	23
	Title or Position	CITY STATE 2	ZIP CODE
	Treasurer	703 Telephone number 703 3	887 - 7125

FEC Form 1 (Re	evised 02/2009)		Pa	age 4
		_		
Full Name of Designated Prana Agent	zatelli, John, , ,			
Mailing Address	1300 Wilson Boulevard Suite 550			
	Arlington CITY S	VA TATE	22209-2323 ZIP CODI	<u> </u>
Title or Position Assistant Treasurer	Telephone number	er	3	7135
safety deposit boxes or Name of Bank, Deposit		deposits fu	nds, holds accounts	s, rents
safety deposit boxes or Name of Bank, Deposit	maintains funds. tory, etc. nk of America	deposits fu	nds, holds accounts	s, rents
safety deposit boxes or Name of Bank, Deposit	maintains funds. tory, etc.	deposits fu	nds, holds accounts	s, rents
safety deposit boxes or Name of Bank, Deposit	maintains funds. tory, etc. nk of America 1700 North Moore Street		inds, holds accounts	s, rents
safety deposit boxes or Name of Bank, Deposit	maintains funds. tory, etc. nk of America	deposits fu		s, rents
safety deposit boxes or Name of Bank, Deposit	maintains funds. tory, etc. nk of America 1700 North Moore Street Arlington			
safety deposit boxes or Name of Bank, Deposit Bar Mailing Address	maintains funds. tory, etc. nk of America 1700 North Moore Street Arlington CITY S	VA	22209	
safety deposit boxes or Name of Bank, Deposit	maintains funds. tory, etc. nk of America 1700 North Moore Street Arlington CITY S	VA	22209	
safety deposit boxes or Name of Bank, Deposit Bar Mailing Address	maintains funds. tory, etc. 1700 North Moore Street Arlington CITY S tory, etc.	VA	22209	
Safety deposit boxes or Name of Bank, Deposit Mailing Address Name of Bank, Deposit	maintains funds. tory, etc. 1700 North Moore Street Arlington CITY S tory, etc.	VA	22209	
Safety deposit boxes or Name of Bank, Deposit Mailing Address Name of Bank, Deposit	maintains funds. tory, etc. 1700 North Moore Street Arlington CITY S tory, etc.	VA	22209	

: 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 registration is being amended to disclose a new Treasurer.

Form/Schedule: Transaction ID: