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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. Creative Majority Political Action Committee 1730 Rhode Island Ave NW ADDRESS (number and street) Suite 310 (Check if address is changed) Washington 20036 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS keegan@revolutionmessaging.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2016 C00619759 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. Keegan Goudiss Type or Print Name of Treasurer Keegan Goudiss [Electronically Filed] 06 2016 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

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		OMMITTEE	i aye £				
Can	ndidate	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.)					
Nam Cand	e of didate						
	didate / Affiliati	Office Sought: House Senate President	State				
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.						
Nam Cand	e of didate						
Par	ty Con	nmittee:					
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.				
Poli	tical A	ction Committee (PAC):					
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	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)	X	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund o committee. (i.e., nonconnected committee)					
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)					
Join	t Fund	Iraising 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 to committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political				
	Com	Committees Participating in Joint Fundraiser					
	1.	FEC ID number					
	2.	FEC ID number					
	3.	FEC ID number					
	4.						

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Write or Type Committee Na		, ago o
Creative Maio	rity Political Action Committee	
	d Organization, Affiliated Committee, Joint Fundraising Representation	ative, or Leadership PAC Sponsor
NONE		
<u> </u>	<u> </u>	
Mailing Address	<u> </u>	
Mailing Address		
	CITY STA	TE ZIP CODE
Relationship: Connec	cted Organization Affiliated Committee Joint Fundraising Repre	esentative Leadership PAC Sponsor
. Custodian of Records: lo books and records.	dentify by name, address (phone number optional) and position of	the person in possession of committee
I	coodstein	
Full Name Mailing Address	1730 Rhode Island Ave NW	
Mailing Address	Suite 310	
	Washington	20036
Title or Position	CITY STATI	E ZIP CODE
Custodian of Records	Telephone number	
Treasurer: List the name any designated agent (e.g	and address (phone number optional) of the treasurer of the comm	nittee; and the name and address of
Full Name Keegan of Treasurer	Goudiss	
Mailing Address	1730 Rhode Island Ave NW	
	Suite 310	
	Washington	20036
Title or Position , Treasurer	CITY STATE	E ZIP CODE
1	Telephone number	

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Full Name of Designated Agent			
Mailing Address			
	CITY	STATE	ZIP CODE
Title or Position	Telepho	one number	
Banks or Other safety deposit be Name of Bank, I	Depositories: List all banks or other depositories in which the xes or maintains funds. Depository, etc. Amalgamated Bank		
Mailing Address	1825 K Street NW		
	Suite 1450		
	Washington		20036
	CITY	STATE	ZIP CODE
Name of Bank, I	Depository, etc.		
Mailing Address			
	CITY		

: 97 A = G7 9 @ G5 B9 CI G'H9 LHF9 @ 5 H98 'HC' 5 F9 DCF HZ G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: F1N Transaction ID:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Form/Schedule: Transaction ID: