Only

STATEMENT OF

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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. Cambridge Analytica 55 Merchant Street ADDRESS (number and street) 3000 (Check if address is changed) **HONOLULU** 96813-4397 HI CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS Admin@CPAhi.com (Check if address is changed) Optional Second E-Mail Address | Admin@kmtCPA.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 01 2018 C00674622 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. AKAMINE, RYAN, MITSUO, , Type or Print Name of Treasurer AKAMINE, RYAN, MITSUO, , [Electronically Filed] 03 2018 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

Local 202-694-1100

FI	FC Fo	rm 1 (Revised 02/2009)	Page 2
TYPE	OF C	OMMITTEE	1 4go 2
Cano	didate	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 Candi			
Candid Party	date Affiliati	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Candid			
Party	y Con	nmittee:	
(d)		· · · · · · · · · · · · · · · · · · ·	(Democratic, Republican, etc.) Party.
Politi	ical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nected 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 se committee. (i.e., nonconnected committee)	gregated 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	Fund	raising 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.	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.		

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Write or Type Committee Na		. 490
Cambridge Ar		
	d Organization, Affiliated Committee, Joint Fundraising Representative, or	Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Conne	cted Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
Custodian of Records: I books and records.	dentify by name, address (phone number optional) and position of the person	on in possession of committee
	NE, RYAN, MITSUO, ,	
Full Name	55 MERCHANT ST	
Mailing Address	3000	
	HONOLULU , HI ,	96813-4397
Title or Position	CITY STATE	ZIP CODE
	Telephone number	
3. Treasurer : List the name any designated agent (e.o.	and address (phone number optional) of the treasurer of the committee; ang., assistant treasurer).	d the name and address of
Full Name AKAMI of Treasurer	NE, RYAN, MITSUO, ,	
Mailing Address	55 MERCHANT ST	
C	3000	
	HONOLULU	96813-4397
	CITY STATE	ZIP CODE
Title or Position	Talanhara murahar	_ 206 _ 8282
	Telephone number	_

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Full Name of Designated Agent	CHASE, EDWARD, , ,	
Mailing Address	55 MERCHANT ST	
	3000	
	HONOLULU HI 96813-2 CITY STATE	4397
Title or Position		206 8282
safety deposit box	xes or maintains funds.	
safety deposit box Name of Bank, D	ces or maintains funds. Depository, etc. Capital One, N.A.	
safety deposit box Name of Bank, D	P.O. Box 60 , MN 56302-00	
safety deposit box Name of Bank, D	P.O. Box 60 , MN 56302-00 St. Cloud CITY STATE	0060
safety deposit box Name of Bank, D Mailing Address	P.O. Box 60 , MN 56302-00 St. Cloud CITY STATE	0060
safety deposit box Name of Bank, D Mailing Address	P.O. Box 60 , MN 56302-00 St. Cloud CITY STATE	0060
safety deposit box Name of Bank, D Mailing Address Name of Bank, D	P.O. Box 60 , MN 56302-00 St. Cloud CITY STATE	0060
safety deposit box Name of Bank, D Mailing Address Name of Bank, D	P.O. Box 60 , MN 56302-00 St. Cloud CITY STATE	0060

: 97 A = G7 9 @ G5 B9 CI G H9 L H F 9 @ 5 H9 8 HC 5 F 9 DC F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

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: