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. Future Forward USA PAC 611 Pennsylvania Ave SE ADDRESS (number and street) Num 143 (Check if address is changed) Washington 20003 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS smele@mbacg.com (Check if address is changed) Optional Second E-Mail Address ngoitiandia@mbacg.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 05 2018 C00669259 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. McLean, Chauncey, , , Type or Print Name of Treasurer McLean, Chauncey, , , [Electronically Filed] 02 08 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 Only

Local 202-694-1100

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		OMMITTEE	
	naidate	Committee:	
(a)	Ш	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	Ш	This committee is an authorized committee, and is NOT a principal campaign committee. (Compinformation below.)	plete the candidate
	ne of didate		
	didate y Affiliatio	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
	ne of didate		
Par	ty Con	nmittee:	
(d)		· · · · · · · · · · · · · · · · · · ·	Democratic, Republican, etc.) Party.
Pol	itical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cont	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.	
(5)		_	areasted fund or porty
(f)	×	This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (i.e., nonconnected committee)	gregated fulld of party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joir	nt 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 Nam	e	
Future Forward	I USA PAC	
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representative, or Leader	ship PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connecte	ed Organization	eadership PAC Sponso
Relationship.	d Organization Anniated Committee South Fundraising Representative	cadership i Ac Sponso
Custodian of Records: Ide books and records.	entify by name, address (phone number optional) and position of the person in po-	ossession of committee
Mele, Ste	ven, , ,	
Full Name	044 Day and a 25	
Mailing Address	611 Pennsylvania Ave SE	
	Num 143	
	Washington DC 20003	
Title or Position	CITY STATE	ZID CODE
Title of Position	CITY STATE	ZIP CODE
Custodian of Records		
8. Treasurer: List the name ar	nd address (phone number optional) of the treasurer of the committee; and the n	ame and address of
any decignated agent (e.g.		
any designated agent (e.g.,		
Full Name McLean, 0	Chauncey, , ,	
Full Name McLean, 0 of Treasurer		
Full Name McLean, 0	Chauncey, , ,	
Full Name McLean, 0 of Treasurer	Chauncey, , , , 611 Pennsylvania Ave SE Num 143	
Full Name McLean, 0 of Treasurer	Chauncey, , , [611 Pennsylvania Ave SE] [Num 143] Washington DC 20003	7IP CODE
Full Name McLean, 0 of Treasurer	Chauncey, , , , 611 Pennsylvania Ave SE Num 143	ZIP CODE

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Full Name of Designated Agent	Goitiandia, Nicole, , ,	
Mailing Address	611 Pennsylvania Ave SE	
	Num 143	
	Washington DC 20003 CITY STATE	ZIP CODE
Title or Position Assistant Treasure	rer 	
safety deposit boxe Name of Bank, De		olds accounts, rents
Ľ	Amalgamated Bank	
Mailing Address	1825 K St NW	
	Washington DC 20006	3
	Washington DC 20006 CITY STATE	ZIP CODE
Name of Bank, De	CITY STATE	
Name of Bank, De	CITY STATE	
Name of Bank, De	CITY STATE epository, etc.	
L	CITY STATE epository, etc.	
L	CITY STATE epository, etc.	

: 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:

Consistent with the stipulated judgment in Carey v. FEC, this committee intends to establish a separate bank account to deposit and withdraw funds raised in unlimited amounts from individuals, corporations, labor organizations, and/or other political committees. The funds maintained in this separate account will not be used to make contributions, whether direct, in-kind, or via coordinated communications, or coordinated expenditures, to federal candidates or committees.

Form/Schedule: Transaction ID: