FEC FORM 1

## STATEMENT OF ORGANIZATION

FORM 1	(See instruction		Office use only			
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5			
Managed Funds Ass	ociation Political Action Co	pmmittee	<u> </u>			
	<u> </u>					
ADDRESS (number and street)	600 14th Street, NW					
(Check if address	Suite 900		<u> </u>			
X is changed)	Washington		DC	20005   -		
		CITY	STATE▲	ZIP CODE ▲		
COMMITTEE'S E-MAIL ADDR	RESS (Please provide only one e-n					
(Check if address is changed)	mfapac@managedfu	nds.org				
COMMITTEE'S WEB PAGE A	ADDRESS (URL)					
(Check if address	www.managedfunds.	org		1		
is changed)						
2. DATE 0.1 /	28 / Y Y Y Y Y Y 2011					
3. FEC IDENTIFICATION N	UMBER (	C C00306894				
4. IS THIS STATEMENT	NEW (N) OR	X AMENDED (A)				
I certify that I have examined this	Statement and to the best of my know	vledge and belief it is true, correct a	and complete			
	Mar Maria Observa		·			
Type or Print Name of Treasur	erWII. WAIC CHAIOII					
Signature of Treasurer Elec	etronically Filed by Mr. Marc C	Charon	Date 0 1 M	28 Y 2011		
NOTE: Submission of false, error	neous, or incomplete information may	subject the person signing this Sta	·	es of 2 U.S.C. §437g.		
Office		For further information		FEC FORM 1		
Use Only		Federal Election Commis Toll Free 800-424-9530	ssion	(Revised 02/2009)		

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5.		OMMITTEE (Check One)			
	Candidate C	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.)					
	Name of Candidate				
	Candidate Party Affiliati	Office Sought: House Senate President	State District		
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.			
	Name of Candidate				
	Party Comm	nittee:			
	(d)	This committee is a (National, State (or subordinate) committee of the	(Democratic, Republican,etc.) Party.		
	Political Act	tion Committee (PAC):			
	(e) X	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	d organization is a:		
		Corporation Corporation w/o Capital Stock La	bor Organization		
		X Membership Organization Trade Association Co	poperative		
		χ 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 committee. (i.e., nonconnected committee)	d 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 Fundra	alsing Representative:			
	(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two o committees/organizations, at least one of which is an authorized committee of a federal candidate.	r more political		
	(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two o committees/organizations, none of which is an authorized committee of a federal candidate.	r more political		
Committees Participating in Joint Fundraiser					
		1 FEC ID number C			
		2. FEC ID number			
		3. FEC ID number			
		.   FEC ID number   C			

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W	rite or Type Committee Name							
	Managed Funds Associ	ation Political Action Committee						
6.	Name of Any Connected Org	ganization, Affiliated Committee, Joint	Fundraising Representative,	or Leadership PAC Sponsor				
L	Managed Funds Associa	tion						
	Mailing Address	600 14th Street, NW	,					
	-	Suite 900						
		Washington	рс	20005				
		CITY	STATE	ZIP CODE 🛦				
	Relationship:							
	X Connected Organization	Affiliated Committee	Joint Fundraising Representat	ive Leadership PAC Sponsor				
7.	Custodian of Records: Identify by name, address, (phone number optional), and position of the person in possession of Committee books and records.							
	Full Name Mr. Ma	Mr. Marc Charon Full Name						
	Mailing Address	600 14th Street, NW						
		Suite 900						
		Washington	DC					
	Title or Position ▼	CITY A	STATE	ZIP CODE A				
	Treasurer		Telephone number _	202 - 730 - 2600				
8.	Treasurer: List the name	and address (phone number opti	ional) of the treasurer of the	e committee; and the				
	name and address of any designated agent (e.g., assistant treasurer).							
	Full Name of Treasurer Mr. Ma	rc Charon						
	Mailing Address	600 14th Street, NV	I					
		Suite 900						
		Washington		20005				
	Title or Position ♥	CITY 🛦	STATI	ZIP CODE A				
	Treasurer		Telephone number	202 _ 730 _ 2600				

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	Full Name of Designated Agent	_	Roger Hollingsw	orth				
Mailing Address 600 14th Street, NW Suite 900				h Street, NW				
				00				
		-	Washington			DC		
	Title or Position ▼			CITY A		STATE A	ZIP CODE	A
	A	ssistant T	reasurer		Telephone num	<b>202</b>		2600
9.	Banks or Other D safety deposit box Name of Bank, De	es or maintai	ns funds.	her depositories in w	hich the committee	deposits funds, ho	olds accounts, rent	
	Mailing Address		F.O. BOX 339					
			Pittsburgh ,			PA	15230  _	
			<u> </u>	CITY <u>a</u>		STATE <b>△</b>	ZIP CODE	<b></b>
	Name of Bank, De	epository, etc.						
	Mailing Address							
				CITY 🔺		STATE.▲	ZIP CODE	<b>A</b>

A. Form/Schedule: F1A

This report is being amended to update the address and telephone numbers for MFA-PAC.

Transaction ID: