

FEC FORM 1

STATEMENT OF ORGANIZATION

Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines.

12FE4M5

DONALD J. TRUMP FOR PRESIDENT, INC.

ADDRESS (number and street) 725 FIFTH AVENUE

(Check if address is changed)

NEW YORK NY 10022
CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

TRUMP@REDCURVE.COM

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

WWW.DONALDJTRUMP.COM

2. DATE 01 / 20 / 2017

3. FEC IDENTIFICATION NUMBER C C00580100

4. 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.

Type or Print Name of Treasurer CRATE, BRADLEY, T., MR.,

Signature of Treasurer CRATE, BRADLEY, T., MR., [Electronically Filed] Date 01 / 20 / 2017

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.

5. TYPE OF COMMITTEE

Candidate 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 DONALD J. TRUMP / , MICHAEL R. PENCE, , ,

Candidate Party Affiliation REP Office Sought: House Senate President State District 00

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

Party Committee:

- (d) This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected 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) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party 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 Fundraising 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 two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1. _____ FEC ID number C _____
2. _____ FEC ID number C _____
3. _____ FEC ID number C _____
4. _____ FEC ID number C _____

Write or Type Committee Name

DONALD J. TRUMP FOR PRESIDENT, INC.

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

TRUMP VICTORY

Mailing Address C/O RED CURVE SOLUTIONS
 138 CONANT STREET, 2ND FLOOR
 BEVERLY MA 01915
 CITY STATE ZIP CODE

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative 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 CRATE, BRADLEY, T., MR.,
 Mailing Address C/O RED CURVE SOLUTIONS
 138 CONANT ST, 2ND FLOOR
 BEVERLY MA 01915
 CITY STATE ZIP CODE
 Title or Position
 TREASURER Telephone number 617 303 6800

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer CRATE, BRADLEY, T., MR.,
 Mailing Address C/O RED CURVE SOLUTIONS
 138 CONANT ST, 2ND FLOOR
 BEVERLY MA 01915
 CITY STATE ZIP CODE
 Title or Position
 TREASURER Telephone number 617 303 6800

Full Name of Designated Agent CRATE, BRADLEY, T., MR.,

Mailing Address C/O RED CURVE SOLUTIONS
138 CONANT ST, 2ND FLOOR
BEVERLY MA 01915
CITY STATE ZIP CODE

Title or Position Telephone number
TREASURER 617 - 303 - 6800

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

CHAIN BRIDGE BANK, N.A.

Mailing Address 1445-A LAUGHLIN AVENUE
MCLEAN VA 22101
CITY STATE ZIP CODE

Name of Bank, Depository, etc.

BANK OF AMERICA

Mailing Address 17 ENON ST
BEVERLY MA 01915
CITY STATE ZIP CODE

FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

[ADDITIONAL]

Mailing Address

_____ - _____

CITY ▲

STATE ▲

ZIP CODE ▲

[ADDITIONAL]

Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

TRUMP MAKE AMERICA GREAT AGAIN COMMITTEE

Mailing Address

C/O RED CURVE SOLUTIONS

138 CONANT STREET, 2ND FLOOR

BEVERLY

MA

01915

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship:

Connected Organization

Affiliated Committee

Joint Fundraising Representative

Leadership PAC Sponsor

[ADDITIONAL]

Designated Agent

Full Name

Mailing Address

_____ - _____

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

____ - ____ - ____

Joint Fundraiser Participant

[ADDITIONAL]

FEC ID number

C _____