PAGE 1 / 4

STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) LPL Financial LLC Political Action Committee (LPL PAC) 75 State Street ADDRESS (number and street) 24th Floor (Check if address is changed) **Boston** 02109-MA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS keith.shores@lpl.com (Check if address is changed) Optional Second E-Mail Address outsourcing@aristotle.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2012 C00486217 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. Keith Shores Type or Print Name of Treasurer Keith Shores [Electronically Filed] 2012 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

	FEC Fo	rm 1 (Revised 02/2009)	Page 2			
		COMMITTEE  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 Can	e of didate					
	didate y Affiliati	on 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)		· · · · · · · · · · · · · · · · · · ·	emocratic, epublican, etc.) Party.			
Poli	itical A	action Committee (PAC):				
(e)	$\times$	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ected organization is a			
		X Corporation Corporation w/o Capital Stock	_abor 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.)				
Join	t Fund	Iraising 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.	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.	or more political			
	Com	mittees Participating in Joint Fundraiser				
	1.	FEC ID number C				
	2.	FEC ID number				
	3.	FEC ID number				
	Δ					

Г		
FEC Form 1 (Revised 0	02/2009)	Page <b>3</b>
Write or Type Committee Name		
LPL Financial L	LC Political Action Committee (LPL PAC)	
6. Name of Any Connected O	rganization, Affiliated Committee, Joint Fundraising Representative, or Leadership	p PAC Sponsor
LPL Financial LLC		
Mailing Address	75 State Street	
	24th Floor	
	Boston MA 02109-	
	CITY STATE Z	IP CODE
Relationship: X Connected	d Organization Affiliated Committee Joint Fundraising Representative Lead	ership PAC Sponsor
<ol> <li>Custodian of Records: Identification books and records.</li> </ol>	tify by name, address (phone number optional) and position of the person in posse	ession of committee
Peggy Ho Full Name		
Mailing Address	75 State Street	
	24th Floor	
	Boston MA 02109-182	7
Title or Position	CITY STATE ZI	P CODE
Custodian of Records	Telephone number 617 – 89	07   4348
8. <b>Treasurer:</b> List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and the name assistant treasurer).	e and address of
Full Name Keith Shore	es	1
of Treasurer	9785 Towne Centre Drive	
Mailing Address		
	San Diego	3 I I
		P CODE
Title or Position Treasurer	858   90	

Telephone number

FEC Form 1 (R	Revised 02/2009)	Page <b>4</b>				
Full Name of Designated Agent	o Kloman					
Mailing Address	9785 Towne Centre Drive					
	San Diego CA					
Title or Position Assistant Treasurer	Telephone number	858 - 909 - 7118				
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.  Bank of America						
Mailing Address	1655 Grant Street					
	Concard	A94520				
	CITY STAT	E ZIP CODE				
Name of Bank, Deposit	itory, etc.					
Mailing Address						
Mailing Address						
Mailing Address						