Only

## STATEMENT OF **ORGANIZATION**

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FORM 1				Office Use (	Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	e Example:If typing, type over the lines.	12E	rE4M5	
Truist Financial Corpo	ration Federal PAC	C (formerly SunTrust Bar	nks Inc	. Political Action	n Committee)
ADDRESS (number and street)	1001 Semmes Avenue 5	5th Floor			
(Check if address	1		1 1 1		
is changed)	Richmond		VA	23224	
	CITY ▲		STAT	E A	ZIP CODE A
COMMITTEE'S E-MAIL ADDRE	ESS				
(Check if address	kevin.schutte@trui	ist.com			1
is changed)	Ontinual Consul E Ma	ii Adduses			
	Optional Second E-Ma fecinfo@pass1.c				
COMMITTEE'S WEB PAGE AD	DRESS (LIBL)				
(Check if address	l				1
is changed)					
2. DATE 08 1	6 2021				
3. FEC IDENTIFICATION N	UMBER ▶ C	C00386524			
г	1				
4. IS THIS STATEMENT	NEW (N)	R AMENDED (A)			
certify that I have examined t	this Statement and to the	best of my knowledge and belief	it is true,	correct and comple	te.
Type or Print Name of Treasure	er Mancine, Nick, , ,				
Type of Fillit Name of Heasure	, <u></u>				
Signature of Treasurer Man	cine, Nick, , ,	[Electronically Filed]	Date	08 16	2021
NOTE: Submission of false, erron		ation may subject the person signing	_		s of 2 U.S.C. §437g.
Office Use		For further information Federal Election Commis Toll Free 800-424-9530			FORM 1 ed 06/2012)

Local 202-694-1100

	FFC <b>Fo</b>	rm 1 (Revised 02/2009)	Page <b>2</b>		
		OMMITTEE	raye <b>z</b>		
Can	didate	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 Cand	e of didate				
	didate / Affiliati	Office Sought: House Senate President	State		
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Name Cand	e of didate				
Par	ty Con	nmittee:	(5)		
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.		
Poli	tical A	ction Committee (PAC):			
(e)	×	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected 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 s committee. (i.e., nonconnected committee)	egregated 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.)			
Join	t Fund	Iraising Representative:			
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for transmittees/organizations, at least one of which is an authorized committee of a federal candidate.	wo or more political		
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political		
	Com	mittees Participating in Joint Fundraiser			
	1.	FEC ID number			
	2.	FEC ID number			
	3.	FEC ID number			
	4.				

FEO. 5	22/2200	D
FEC Form 1 (Revised C		Page 3
Write or Type Committee Name		():44
· · · · · · · · · · · · · · · · · · ·	ration Federal PAC (formerly SunTrust Banks Inc. Political Action	· · · · · ·
6. Name of Any Connected O	Organization, Affiliated Committee, Joint Fundraising Representative, or Leadershi	p PAC Sponsor
Truist Financial Corpor	ration	
Mailing Address	303 Peachtree St.	
	Atlanta GA 30308	
	CITY STATE Z	IP CODE
Relationship: X Connected	d Organization Affiliated Committee Joint Fundraising Representative Lead	ership PAC Sponsor
<ul> <li>Custodian of Records: Iden books and records.</li> </ul>	tify by name, address (phone number optional) and position of the person in posse	ession of committee
Schutte, Ke	evin, , ,	ı
Full Name	,c/o PASS 1950 Roland Clarke Pl.	
Mailing Address	Ste 300	
	Reston VA 20191	
Title or Position	CITY STATE ZI	P CODE
Custodian of Records		91 0783
Treasurer: 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 Mancine, N	lick, , ,	
of Treasurer	214 N. Tryon Street	
Mailing Address		
	Charlotte NC 28208	
Title or Position	CITY STATE ZI	P CODE
Treasurer		4 – 2195

FEC <b>For</b> i	m 1 (Revised 02/2009)	Page <b>4</b>	
Full Name of Designated Schutte, Kevin, , ,			
Agent	1001 Semmes Avenue 5th Floor		
Mailing Address	Too Too Hilling Avoing out 1 but		
	Richmond VA 23224	[-] [	
	CITY STATE	ZIP CODE	
Title or Position Assistant Treas	surer Telephone number 804 -	291 - 0783	
	r <b>Depositories:</b> List all banks or other depositories in which the committee deposits funds, hold oxes or maintains funds.	ls accounts, rents	
safety deposit b Name of Bank,	oxes or maintains funds.  Depository, etc.  Truist Bank (formerly SunTrust Bank)  ,303 Peachtree Street	ls accounts, rents	
safety deposit be	oxes or maintains funds.  Depository, etc.  Truist Bank (formerly SunTrust Bank)  ,303 Peachtree Street	ls accounts, rents	
safety deposit be Name of Bank,	Depository, etc.  Truist Bank (formerly SunTrust Bank)  303 Peachtree Street	ls accounts, rents	
safety deposit be Name of Bank,	oxes or maintains funds.  Depository, etc.  Truist Bank (formerly SunTrust Bank)  ,303 Peachtree Street	ls accounts, rents	
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safety deposit be Name of Bank,	Depository, etc.  Truist Bank (formerly SunTrust Bank)  303 Peachtree Street  Atlanta  CITY  STATE		
safety deposit be Name of Bank, Mailing Address	Depository, etc.  Truist Bank (formerly SunTrust Bank)  303 Peachtree Street  Atlanta  CITY  STATE		
safety deposit be Name of Bank, Mailing Address	Depository, etc.  Truist Bank (formerly SunTrust Bank)  303 Peachtree Street  Atlanta  CITY  STATE  Depository, etc.		
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## : 97 'A = G7 9 @ G B9 CI G'H9 LH F9 @ H98 'HC' 5 'F9 DCF Hz G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: F1A Transaction ID:

This amendment is being filed to appoint a new Treasurer

Form/Schedule: Transaction ID:

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

FEC Form 1S (Revised 02/2017)

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5(a)	or(h). <b>Joint Fundraisin</b>	n Particinant		
O(g)	1		FEC ID number	C
	2.		FEC ID number	C
			FEC ID number	C
	3.		FEC ID number	C
	4.		FEG ID Hullibel	0
6.	=	Organization, Affiliated Committee, Joint Fundrary Fed State & Local PAC (fka SunTrus	= -	
	Mailing Address	1001 Semmes Avenue 5th Floor		
		Richmond	, ,   VA	23224
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Organization X Affiliated Committee Joint	Fundraising Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identify  Full Name	by name, address (phone number - optional)		
		1		
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
			elephone Number	
9.	Banks or Other Depositor safety deposit boxes or ma Name of Bank, Depository, etc.	ries: List all banks or other depositories in which intains funds.	the committee deposit	s funds, holds accounts, rents
	Mailing Address			
		CITY A	STATE ▲	ZIP CODE ▲