FEC

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. BIPARTISAN VOLUNTARY PUBLIC AFFAIRS COMMITTEE OF THE PNC FINANCIAL SERVICES GROUP, INC. (PNC PAC) 800 17th Street NW, 12th Floor ADDRESS (number and street) (Mail Stop C6-CPNC-12-6) (Check if address is changed) Washington 20006-3962 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS PNCPAC.Support@pnc.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 2021 C00035519 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. Smith, Shawn, D,, Type or Print Name of Treasurer Smith, Shawn, D,, [Electronically Filed] 12 2021 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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	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.)			
Name of Candidate				
Candidate Party Affiliat	Office Sought: House Senate President	State		
(c)	c) This committee supports/opposes only one candidate, and is NOT an authorized committee.			
Name of Candidate				
Party Cor	committee:			
(d)		(Democratic, Republican, etc.) Party.		
Political A	action Committee (PAC):			
(e) x	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	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.			
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate se committee. (i.e., nonconnected committee)	gregated 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 Fund	draising Representative:			
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw 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 tw 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				

l		
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Write or Type Committee Name	9	
BIPARTISAN VOLUNTARY	PUBLIC AFFAIRS COMMITTEE OF THE PNC FINANCIAL SERVICE	ES GROUP, INC. (PNC PAC)
6. Name of Any Connected C	Organization, Affiliated Committee, Joint Fundraising Representative, or	or Leadership PAC Sponsor
The PNC Financial Se	ervices Group, Inc.	
Mailing Address	The Tower at PNC Plaza 300 Fifth A	
3		
	Pittsburgh	15222-
	CITY STATE	ZIP CODE
		ZII GODE
Relationship: x Connected	d Organization Affiliated Committee Joint Fundraising Representati	ve Leadership PAC Sponsor
7. Custodian of Records: Iden books and records.	ntify by name, address (phone number optional) and position of the per	son in possession of committee
Smith, Sha	awn, D, ,	1
Full Name	,800 17th St NW	
Mailing Address		
	Washington	20006-3962
Title or Position	CITY STATE	ZIP CODE
Custodian of Records	Telephone number	2 835 4539
3. Treasurer: List the name an any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; a assistant treasurer).	and the name and address of
Full Name Smith, Sha	awn, D, ,	
Mailing Address	800 17th St NW	
	Washington DC	20006-3962
	CITY STATE	ZIP CODE
Title or Position Treasurer		2 835 4539

. 20 . 011	n 1 (Revised 02/2009)	Page 4
Full Name of Designated		
Agent		
Mailing Address		
	CITY STATE ZIF	P CODE
Title or Position		1 1
	Telephone number	
	Depository, etc. IPNC Bank, N.A.	,
Mailing Address	PNC Bank, N.A. The Tower at PNC Plaza 300 Fifth Avenue Pittsburgh PA 15222	. 1-1
	PNC Bank, N.A. The Tower at PNC Plaza 300 Fifth Avenue Pittsburgh PA 15222	D CODE
	PNC Bank, N.A. The Tower at PNC Plaza 300 Fifth Avenue Pittsburgh CITY STATE ZI	P CODE
Mailing Address	PNC Bank, N.A. The Tower at PNC Plaza 300 Fifth Avenue Pittsburgh CITY STATE ZI	P CODE
Mailing Address	PNC Bank, N.A. The Tower at PNC Plaza 300 Fifth Avenue Pittsburgh CITY STATE ZI	P CODE
Mailing Address Name of Bank, I	PNC Bank, N.A. The Tower at PNC Plaza 300 Fifth Avenue Pittsburgh CITY STATE ZI	P CODE
Mailing Address Name of Bank, I	PNC Bank, N.A. The Tower at PNC Plaza 300 Fifth Avenue Pittsburgh CITY STATE ZI	P CODE

: 97 'A = G7 9 @ G B9 CI G'H9 LH F9 @ 5 H9 8 'HC '5 'F 9 DC F HZ G7 < 98 I @ 'C F' + H9 A = N5 H= C B

Form/Schedule: F1A Transaction ID:

This registration is being amended to remove an affiliated committee.

Form/Schedule:

Transaction ID:

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

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5(g)	or(h). Joint Fundraisin	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	С
	4.		FEC ID number	C
6.		Organization, Affiliated Committee, Joint Fundr		
	FEDERAL Bipartisan	Noluntary Public Affairs Committee of Th	e PNC Financial Se	rvices Group, Inc. (PNC
	Mailing Address	800 17th Street NW, 12th Floor		
	, and the second	(Mail Stop C6-CPNC-12-6)		
		Washington	, DC	20006-
	Relationship:	CITY A	STATE A	ZIP CODE ▲
	Connected	d Organization X Affiliated Committee Joint	Fundraising Representa	tive Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
		1		1
	TITLE OR POSITION	CITY A	STATE ▲	ZIP CODE ▲
		1	elephone Number	
9.		ries: List all banks or other depositories in which	the committee deposits	funds, holds accounts, rents
	safety deposit boxes or ma	aintains funds.		
	Name of Bank, Depository, etc.			
	Name of Bank,			
	Name of Bank, Depository, etc.			
	Name of Bank, Depository, etc.	Lintains funds.		