

FEC FORM 1

STATEMENT OF ORGANIZATION

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Office Use Only

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines.

12FE4M5

American National Trump Super PAC

ADDRESS (number and street)

350 S. Figueroa St. # 190

(Check if address is changed)

Los Angeles

CITY

CA

STATE

90071

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

Johnson@LosLaw.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

thedailyTrump.org

Note: This Committee intends to make unlimited independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow V. FEC it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications to federal candidates or committees.

2. DATE

10/26/2015

3. FEC IDENTIFICATION NUMBER

C

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

William Johnson

Signature of Treasurer

[Handwritten Signature]

Date

10/26/2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office Use Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 06/2012)

20151109 09:00:00

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 _____

Candidate Party Affiliation 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 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	<input type="checkbox"/>
2.	_____	FEC ID number	<input type="checkbox"/>
3.	_____	FEC ID number	<input type="checkbox"/>
4.	_____	FEC ID number	<input type="checkbox"/>

2009-1-14 09:00:00 AM

Write or Type Committee Name

American National Trump Super Pac

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

Note: The Treasurer of this pac is also chairman of the American Freedom Party.

Mailing Address

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

William Johnson

Mailing Address

350 S. Figueroa St # 420

Los Angeles

CA

90071

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number

213-621-3000

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

William Johnson

Mailing Address

350 S. Figueroa St # 420

Los Angeles

CA

90071

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number

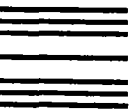
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2014-11-09 09:00 AM

WILLIAM JOHNSON
350 S FIGUEROA ST STE 190
LOS ANGELES, CA 90071



Federal Election Commission
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Washington DC 20463-0001



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PREPARER *JD*
 (3/2015)

11/9/15
 DATE PREPARED

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