FEC FORM 1	STATEMENT OF ORGANIZATION	PAGE 1 / 5
1. NAME OF COMMITTEE (in full)	(Check if name Example: If typing, type is changed) over the lines.	12FE4M5
Transform SR H		
ADDRESS (number and street)	3333 Beverly Road	
(Check if address	B6-236A	
is changed)	Hoffman Estates	IL 60179
		STATE ▲ ZIP CODE ▲
COMMITTEE'S E-MAIL ADDF	RESS	
(Check if address is changed)	luke.valentino@searshc.com	
	Optional Second E-Mail Address	
COMMITTEE'S WEB PAGE A (Check if address is changed)	DDRESS (URL)	
2. DATE 09 /	17 / Y Y Y Y 2019	
3. FEC IDENTIFICATION I	NUMBER ► C C00038612	
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 Treasu	rer Valentino, Luke, , Mr.,	
Signature of Treasurer	entino, Luke, , Mr., [Electronically Filed]	Date 09 17 / Y Y Y Y 2019
NOTE: Submission of false, erro	neous, or incomplete information may subject the person signing t ANY CHANGE IN INFORMATION SHOULD BE REPORTED W	
Office Use Only	For further information cc Federal Election Commission Toll Free 800-424-9530	

09/17/2019 08 : 53

I	FEC Fo	rm 1 (Revised 02/2009)	Page <b>2</b>
TYPE	E OF C	OMMITTEE	
Can	didate	e 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. (Compleinformation below.)	ete the candidate
Nam Canc	e of didate		
	didate / Affiliati	on 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		
Part	ty Con	nmittee:	
(d)			emocratic, publican, etc.) Party
Poli	tical A	ction Committee (PAC):	
(e)	×	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conne	cted organization is
		Corporation Corporation w/o Capital Stock	abor Organization
		Membership Organization	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 segr committee. (i.e., nonconnected committee)	egated 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 Func	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	
	2.	FEC ID number	
	3.	FEC ID number	
	4.	FEC ID number	

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FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

## Transform SR Holding LLC PAC

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

	Holdings LLC							
Mailing Address	3333 Beverly Rd							
	B6-236A							
	Hoffman Estates		60179					
	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.								
	5.	ptional) and position of the pers	on in possession of committee					
		otional) and position of the pers	son in possession of committee					
books and record	5.	otional) and position of the pers	in possession of committee					
books and record	S. Valentino, Luke, , ,	otional) and position of the pers						
books and record	S. Valentino, Luke, , , 3333 Beverly Road	ptional) and position of the pers	con in possession of committee					

Telephone number	847	286	9551

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

Full Name of Treasurer	Valentino, Luke, , Mr.,
Mailing Address	3333 Beverly Road
	B6-222B
	Hoffman Estates     IL     60179     –
	CITY STATE ZIP CODE
Title or Position General Counsel	Telephone number 847 286 9551

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent	Valentino, I	_uke, , ,				1																	
Mailing Address		3333 Beverly Rd																					
		B6-236A															1						
		Hoffman Estate										Ľ	L 		6	017	'9 			- [			
			CI	TΥ								ST	ATE					ZIF	C C	ODE	Ξ		
Title or Position	<b>)</b> 		 				Т	elep	hon	e n	um	ber		84	7			286		-[	g	551	

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.

Bank	k of America		
Mailing Address	Po Box 15284		
	Wilimington		19850
	CITY	STATE	ZIP CODE
Name of Bank, Deposito	ry, etc.		
Mailing Address			
	CITY	STATE	ZIP CODE

## :97 `A=G79 @@5 B9CIG`H9LH`F9 @5 H98 `HC`5 `F9DCFHžG7<98 I@9 `CF`+H9A=N5 H=CB

Form/Schedule: F1A Transaction ID :

Updating Treasurer, Designated Agent, Email address, and Bookkeeper.

Form/Schedule: Transaction ID: