

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

ADDRESS (number and street) One State Farm Plaza c/o Mark Schwamberger, Treasurer, Bloomington IL 61710-0001 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00544817 3. IS THIS REPORT NEW (N) OR AMENDED (A) x

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER) (b) Monthly Report Due On: Feb 20 (M2) x May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only) Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) (c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S) Election on M M / D D / Y Y Y Y Y Y in the State of (d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period 01 / 01 / 2021 through 01 / 31 / 2021

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Schwamberger, Mark, , ,

Type or Print Name of Treasurer

Signature of Treasurer Schwamberger, Mark, , , [Electronically Filed] Date 02 / 16 / 2021

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

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Page 2

Write or Type Committee Name

State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2021"/>	<input type="text" value="234742.45"/>	<input type="text" value="234742.45"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="234742.45"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="23567.84"/>	<input type="text" value="23567.84"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="258310.29"/>	<input type="text" value="258310.29"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="258310.29"/>	<input type="text" value="258310.29"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

Report Covering the Period: From: 01 / 01 / 2021 To: 01 / 31 / 2021

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	10983.29	10983.29
(ii) Unitemized	12584.55	12584.55
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	23567.84	23567.84
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	23567.84	23567.84
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	23567.84	23567.84
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	23567.84	23567.84

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	0.00	0.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	0.00

DETAILED SUMMARY PAGE
of Disbursements

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III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	23567.84	23567.84
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	23567.84	23567.84
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 10
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

A. Bever, Kelly, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13 Caladonia Ct

City Bloomington	State IL	Zip Code 61704-4185
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) State Farm	Occupation (for Individual) Vpo
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1500.00

Date of Receipt
 01 / 01 / 2021
Transaction ID : 483B8457B72D3107A181

Amount of Each Receipt this Period
 1500.00

Memo Item

B. Bryson, Katinka M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 34 Country Club Pl

City Bloomington	State IL	Zip Code 61701-3402
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) State Farm	Occupation (for Individual) Agency Vice President
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 208.32

Date of Receipt
 01 / 05 / 2021
Transaction ID : 4012AC4D22505BBC0910

Amount of Each Receipt this Period
 208.32

Memo Item

C. Dickerson, Reggie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5705 Ardington Blvd

City Glen Allen	State VA	Zip Code 23059-7623
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self Employed	Occupation (for Individual) State Farm Agent
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 01 / 19 / 2021
Transaction ID : 0B24F48B-7E1B-4E4B-

Amount of Each Receipt this Period
 300.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	2008.32
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 10
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

A. Engle, Erin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2803 Powell Dr
 City Bloomington State IL Zip Code 61704-4698
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Associate General Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 01 / 12 / 2021
Transaction ID : 4DB994CDEF3C35F5A270
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Faaborg, Rana, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 Cherrywood Ln
 City Bloomington State IL Zip Code 61701-2003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Vice President - Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 01 / 01 / 2021
Transaction ID : 44DC949FF66A38AEABC0
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Fields, Mike, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1515 Beckenham Dr
 City Bloomington State IL Zip Code 61704-7630
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Innovation Executive
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 01 / 15 / 2021
Transaction ID : 4B5B976075FFBD12530C
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 10
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

A. Haggarty, Helen M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3613 Armstrong Dr
 City Bloomington State IL Zip Code 61704-2837
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) State Farm Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 04 / 2021
 Transaction ID : EF9FB315-2EAE-42CE-
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Klinowski, Bill, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1435 Chelsea Ln
 City Naperville State IL Zip Code 60565-1609
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 01 / 05 / 2021
 Transaction ID : 4416BE48FB24976F8988
 Amount of Each Receipt this Period 600.00
 Memo Item

C. Koehler, Becky, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1540 S Bentley Ave Apt 402
 City Los Angeles State CA Zip Code 90025-7379
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) State Farm Occupation (for Individual) Vp-Agency/Sales
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 01 / 07 / 2021
 Transaction ID : 4704AA4548228D413E91
 Amount of Each Receipt this Period 1500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 2600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 10
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

A. Muleady, Lynnette, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2212 Tyler Trl
 City Bloomington State IL Zip Code 61705-8754
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Avp - Agency
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 01 / 15 / 2021
Transaction ID : 43B68038EEFE964D36B7
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Parker, Alisa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1308 Watersound Way
 City Bloomington State IL Zip Code 61705-7141
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Compensation Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 11 / 2021
Transaction ID : 419E896210C2B0399F60
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Terry, Victor, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6008 Southwind Ln
 City McKinney State TX Zip Code 75070-4871
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Vp-Pa & Chiefdiversityofficer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 208.32

Date of Receipt 01 / 21 / 2021
Transaction ID : 42459CA80E8003147210
 Amount of Each Receipt this Period 208.32
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1458.32
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 10
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

A. Waldron, Carol, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11342 N 128th Pl
 City Scottsdale State AZ Zip Code 85259-4474
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Vpo
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 01 / 2021
Transaction ID : 4DC7920ACD28A983F7A6
 Amount of Each Receipt this Period
 1500.00
 Memo Item

B. Wang, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22522 Bowens Wharf Pl
 City Ashburn State VA Zip Code 20148-6634
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Area Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 208.32

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 26 / 2021
Transaction ID : 47D6B2AF22A7061F6D98
 Amount of Each Receipt this Period
 208.32
 Memo Item

C. Williams, Larry, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5932 W Lake St
 City Chicago State IL Zip Code 60644-1833
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 208.33

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 31 / 2021
Transaction ID : 202101221116-24
 Amount of Each Receipt this Period
 208.33
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1916.65
TOTAL This Period (last page this line number only).....	10983.29