FEC FORM 1		STATEMEI ORGANIZ	PAGE 1 / 5 -							
1. NAME OF COMMITTEE (in	full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5						
L3 Technol	ogies,	Inc. PAC			1					
ADDRESS (number a	nd street)	600 Third Avenue								
(Check if a is changed	address	New York		NY 10016 STATE ▲						
COMMITTEE'S E-MA		SS								
(Check if a is changed	address I)	fecinfo@pass1.com								
		Optional Second E-Mail Ad	dress							
COMMITTEE'S WEB	address	DRESS (URL)								
2. DATE		D / Y Y Y Y 2017								
3. FEC IDENTIFIC	CATION NU	JMBER ► C c	00338087							
4. IS THIS STATEN	IENT	NEW (N) OR	× AMENDED (A)							
I certify that I have e	examined th	is Statement and to the best	of my knowledge and belief it	is true, correct and co	omplete.					
Type or Print Name	of Treasurer	Souza, Stephen M, , ,								
Signature of Treasure	er Souza,	, Stephen M, , ,	[Electronically Filed]	Date 01	10 / Y Y Y Y 2017					
NOTE: Submission of			may subject the person signing the ON SHOULD BE REPORTED W		nalties of 2 U.S.C. §437g.					
Office Use Only			For further information cc Federal Election Commissic Toll Free 800-424-9530 Local 202-694-1100	on F I	EC FORM 1 Revised 06/2012)					

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TYPE OF (COMMITTEE
Candidat	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. (Complete the candidate information below.)
Name of Candidate	L
Candidate Party Affilia	tion Office Sought: House Senate President District
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name of Candidate	
Party Co	mmittee:
(d)	This committee is a(National, State or subordinate) committee of the(Democratic, Republican, etc.) Par
Political /	Action Committee (PAC):
(e) X	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is
	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 par 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 Fun	draising 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.
Con	nmittees Participating in Joint Fundraiser
1.	
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

L3 Technologies, Inc. PAC

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

	3 Technologies, Inc.				
	Mailing Address	600 Third Avenue			
		New York		NY 100	16
		CITY		STATE	ZIP CODE
	Relationship: x Connected	Organization Affiliated Committee J	loint Fundrais	ing Representative	Leadership PAC Sponsor
7.	Custodian of Records: Identibooks and records.	ify by name, address (phone number opt	ional) and po	sition of the person in	n possession of committee
	Souza, Ste	ohen M, , ,			
	Full Name	.600 Third Avenue			
	Mailing Address				
		New York			016
	Title or Position	CITY		STATE	ZIP CODE
	Custodian of Records		Telephone r	number 212	- [[5205

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	Souza, Stephen M, , ,
Mailing Address	600 Third Avenue
	New York NY 10016 - <
	CITY STATE ZIP CODE
Title or Position Treasurer	Telephone number 212 805 5205

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Full Name of Designated Agent	Burnett, Gre	egg, , ,																
Mailing Address		600 Third Avenue																
		New York								NY			10	0016			- [_	
			CI	TΥ						STATE	Ξ				ZIF	o cc	DE	
Title or Position	urer					Tele	phor	ne n	um	ber				-[- [_	

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.

The B	ank of New York		
Mailing Address	One Wall Street		
	New York		D286
	CITY	STATE	ZIP CODE
Name of Bank, Depository,	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 :

This amended registration is being filed to update the committee's name and connected organization's name. Please make the necessary changes to your records.

Form/Schedule: Transaction ID: