PAGE 1/5 STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) Newmont Goldcorp Corporation PAC (NEWPAC) 101 Constitution Avenue NW ADDRESS (number and street) Suite 800 (Check if address is changed) Washington 20001-DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS mbdonnelly@newmont.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 2019 C00206672 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. DONNELLY, MARY, , , Type or Print Name of Treasurer DONNELLY, MARY, , , [Electronically Filed] 05 2019 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. FEC FORM 1 (Revised 06/2012)

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

FEC Fo	rm 1 (Revised 02/2009)	Page <b>2</b>
	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. (Compinformation below.)	plete the candidate
Name of Candidate		
Candidate Party Affiliat	Office Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Cor		Democratic,
(d)		Republican, etc.) Party.
Political A	action Committee (PAC):	
(e) <b>x</b>	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		

FEC Form 1 (Revised 0		Page 3
Write or Type Committee Name		
Newmont Goldo	corp Corporation PAC (NEWPAC)	
6. Name of Any Connected O	Organization, Affiliated Committee, Joint Fundraising Representative	, or Leadership PAC Sponsor
Newmont Goldcorp Co	prporation	
	6363 S. Fiddler's Green Circle	
Mailing Address		
	Greenwood Village CO	80111-5011
	CITY STATE	ZIP CODE
Relationship: <b>x</b> Connected	d Organization Affiliated Committee Joint Fundraising Representation	ative Leadership PAC Sponsor
<ul> <li>Custodian of Records: Iden books and records.</li> </ul>	tify by name, address (phone number optional) and position of the p	person in possession of committee
	Y, MARY, , ,	1
Full Name	,6363 S Fiddlers Green Cir	
Mailing Address		
	Greenwood Village CO	80111-5011
Title or Position	CITY STATE	ZIP CODE
Custodian of Records		202 742 4277
3. <b>Treasurer:</b> List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee assistant treasurer).	; and the name and address of
Full Name DONNELL' of Treasurer	Y, MARY, , ,	
Mailing Address	6363 S Fiddlers Green Cir	
	Greenwood Village	80111-5011
	CITY STATE	ZIP CODE
Title or Position Treasurer	Telephone number	202 742 - 4277

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Full Name of Designated Agent	1	
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
Banks or Other safety deposit b Name of Bank,	r Depositories: List all banks or other depositories in which the committee deposits funds, hold oxes or maintains funds. Depository, etc.	
safety deposit b	oxes or maintains funds.  Depository, etc.  Citibank  ,399 Park Avenue	
safety deposit b Name of Bank,	Depository, etc.  Citibank  399 Park Avenue  New York  NY  10043	
safety deposit b Name of Bank,	Depository, etc.  Citibank  399 Park Avenue  New York  CITY  STATE	ZIP CODE
safety deposit b Name of Bank, Mailing Address  Name of Bank,	Depository, etc.  Citibank  399 Park Avenue  New York  CITY  STATE  Depository, etc.	
safety deposit b Name of Bank, Mailing Address	Depository, etc.  Citibank  399 Park Avenue  New York  CITY  STATE  Depository, etc.	ZIP CODE
safety deposit b Name of Bank, Mailing Address  Name of Bank,	Depository, etc.  Citibank  399 Park Avenue  New York  CITY  STATE  Depository, etc.	ZIP CODE

## : 97 'A = G7 9 @ G B9 CI G'H9 LH F9 @ H98 'HC' 5 'F9 DCF Hz G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: F1A Transaction ID:

This statement of organization is being amended to update the name of PAC and connected organization as a result of a recent corporate merger.

Form/Schedule: Transaction ID: