FEC

STATEMENT OF

FORM 1	ORGANIZ <i>i</i>	ATION		
i Oitim i	(See instruction	ons)		Office use only
NAME OF COMMITTEE (in f	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5	1 1
Altria Group, I	nc. Political Action Committee (Altriapac)	11111	
				11111111
ADDRESS (number and s	101 Constitution Ave	e NW 		
(Check if address	Suite 400W			
is changed)	Washington		DC	20001 -
		CITY▲	STATE▲	ZIP CODE ▲
COMMITTEE'S E-MAI	ADDRESS (Please provide only one e-			
(Check if address is changed)	altriapac@altria.con	n 		
COMMITTEE'S WEB I	PAGE ADDRESS (URL)			
 DATE M M M M M M M M M M M M M M M M M M M		C C00089136 X AMENDED (A)		
I certify that I have examin	ned this Statement and to the best of my kno	owledge and belief it is true, correc	t and complete	
Type or Print Name of ⁻	Freasurer Gayle Drisco			
Signature of Treasurer	Electronically Filed by Gayle Dris	sco	Date 11	/ 04 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of fals	se, erroneous, or incomplete information ma	y subject the person signing this S		
Office Use Only		For further informatic Federal Election Comm Toll Free 800-424-953	nission	FEC FORM 1 (Revised 02/2009)

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5.			OMMITTEE (Check One) 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 tinformation below.)	he candidate
	Name Cand			
	Cand Party	idate Affiliati	Office Sought: House Senate President	State District
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name Cand			
	Party	Comm		
	(d)		(National, State This committee is a (or subordinate) committee of the	(Democratic, Republican,etc.) Party.
	Politi	cal Act	tion Committee (PAC):	
	(e)	X	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	d organization is a:
			X Corporation Corporation w/o Capital Stock La	bor Organization
			Membership Organization Trade Association Co	ooperative
	(f)		X In addition, this committee is a Lobbyist/Registrant PAC.	
	(1)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated committee. (i.e., nonconnected committee)	d 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 Fundraising Representative:				
	(g)	Ш	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two o committees/organizations, at least one of which is an authorized committee of a federal candidate.	r more political
	(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two o committees/organizations, none of which is an authorized committee of a federal candidate.	r more political
		Com	mittees Participating in Joint Fundraiser	
			1. FEC ID number	
			2. FEC ID number	
			3. FEC ID number	
			. EEC ID number C	

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Write or Type Committee Name			
Altria Group, Inc. Politic	cal Action Committee (Altriapac)		
6. Name of Any Connected Org	ganization, Affiliated Committee, Joint Fun	draising Representative, or L	eadership PAC Sponsor
Altria Group Inc.			
		<u> </u>	
Mailing Address	6601 West Broad Street	<u> </u>	<u> </u>
	HQ Building		
	Richmond	L VA	23230
	CITY	STATE ▲	ZIP CODE
Relationship:			
X Connected Organization	Affiliated Committee Join	nt Fundraising Representative	Leadership PAC Sponsor
possession of Committee Full Name Richard	entify by name, address, (phone number books and records. d McDonnell 101 Constitution Avenue		of the person in
Mailing Address	Ste. 400W	5, 14VV	
	Washington	DC	20001
Title or Position ♥ Custodian	CITY A of Records	STATE Telephone number 202	ZIP CODE 1 2 - 354 - 1500
	and address (phone number optional designated agent (e.g., assistant treas Drisco		nmittee; and the
Mailing Address	101 Constitution Avenu	e, NW	
	Ste. 400W		
	Washington		20001
Title or Position ♥	CITY A	STATE.	
•	OII I A	J	ZIP CODE A

	2/2009)		Page 4
Full Name of Designated Agent	Richard McDonnell		
Mailing Address	101 Constitution Avenue,	NW	
	Ste. 400W		
	Washington		20001 –
Title or Position ▼	CITY A	STATE 🛦	ZIP CODE A
Assistant T	reasurer	Telephone number 202	354 1500
Banks or Other Depositories safety deposit boxes or maintai Name of Bank, Depository, etc	ns funds.	h the committee deposits funds, ho	olds accounts, rents
Chain	Bridge Bank		
Mailing Address	1445-A Laughlin Avenue		
Mailing Address	1445-A Laughlin Avenue		
Mailing Address	1445-A Laughlin Avenue McLean		22101 _
Mailing Address		VA STATE △	22101 _ _ _ _ _ _ _ _ _
Mailing Address Name of Bank, Depository, etc.	McLean CITY A		
Name of Bank, Depository, etc	McLean CITY A		
Name of Bank, Depository, etc	McLean CITY ust Bank PO Box 85024		ZIP CODE 🛕
Name of Bank, Depository, etc	McLean CITY ust Bank PO Box 85024	STATE 4	ZIP CODE _
Name of Bank, Depository, etc	McLean CITY ust Bank PO Box 85024	STATE 4	ZIP CODE _

safety deposit boxes or maintai	ris iurias.		
Name of Bank, Depository, etc.			[ADDITIONAL]
Mailing Address			
			_
	CITY 🛕	STATE	ZIP CODE 🛕
	nanization, Affiliated Committee, Joint Fundraising Reministrators and Managers Political Action Co	-	[ADDITIONAI
Mailing Address	101 Constitution Ave NW		
	Suite 400W		1 1 1 1 1 1 1
	Washington	PC	20001
ationshin:	CITY▲	STATE A	ZIP CODE
ationship: Connected Organization	CITY▲ X Affiliated Committee Joint Fundraising Re		ZIP CODE ▲
Connected Organization			
Connected Organization Designated Agent			dership PAC Sponsor
Connected Organization Designated Agent Full Name			dership PAC Sponsor
Connected Organization Designated Agent			dership PAC Sponsor
Connected Organization Designated Agent Full Name			dership PAC Sponsor
Connected Organization Designated Agent Full Name			dership PAC Sponsor
Connected Organization Designated Agent Full Name			dership PAC Sponsor
Designated Agent Full Name Mailing Address	X Affiliated Committee Joint Fundraising Re	epresentative Lea	dership PAC Sponsor [ADDITIONAL]
Designated Agent Full Name Mailing Address	X Affiliated Committee Joint Fundraising Re	epresentative Lea	dership PAC Sponsor [ADDITIONAL]

Banks or Other Depositor safety deposit boxes or main		nmittee deposits funds, hold	s accounts, rents
Name of Bank, Depository,		I	ADDITIONAL]
Mailing Address			
		. .	
	CITY 🛕	STATE ⊿	ZIP CODE 🛕
-	Organization, Affiliated Committee, Joint Fundraising F	Representative, or Leader	[ADDITIONAL ship PAC Sponsor
			<u> </u>
Mailing Address	101 Constitution Ave NW		
Walling / Radioses	Suite 400W		
	Washington	, DC,	20001
ationship:	CITY▲	STATE A	ZIP CODE 🛦
Connected Organization	X Affiliated Committee Joint Fundraising I	Representative Lead	lership PAC Sponsor
Designated Agent			[ADDITIONAL]
	2321 Concord Parkway		
	Concord	NC	28027 _
Title or Position ▼	CITY A	STATE ▲	ZIP CODE A
Design	nated Agent Tele	phone number	788 5085
Joint Fundraiser Participa	int		[ADDITIONAL]
		FEC ID number	