PAGE 1/4 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) KING RANCH INC POLITICAL ACTION COMMITTEE-FEDERAL THREE RIVERWAY SUITE 1600 ADDRESS (number and street) (Check if address is changed) **HOUSTON** 77056 TX CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS FEDPAC@KING-RANCH.COM (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 03 2020 C00121277 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. Janik, Tracy, Brett, Mr., Type or Print Name of Treasurer Janik, Tracy, Brett, Mr., [Electronically Filed] 06 03 2020 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:
.	Use			Federal Election Commission
				Toll Free 800-424-9530
	Only			Local 202-694-1100

	FEC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	
	aidate	Committee:	
(a)	ш	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	Ш	This committee is an authorized committee, and is NOT a principal campaign committee. (Compinformation below.)	lete the candidate
Nam Can	e of didate		
	didate y Affiliatio	Office on Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
Nam Cand	e of didate		
Par	ty Con	nmittee:	
(d)		· · · · · · · · · · · · · · · · · · ·	Democratic, epublican, etc.) Party.
Poli	itical A	ction Committee (PAC):	
(e)	×	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conn	ected 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 seg committee. (i.e., nonconnected committee)	regated 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	ıt Fund	raising 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 C	
	4.		

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EEC Form 4 (Doubted	02/2000)	Dogo 3
FEC Form 1 (Revised Write or Type Committee Nam		Page 3
	INC POLITICAL ACTION COMMITTEE	-FEDERAL
	Organization, Affiliated Committee, Joint Fundraising Representative, or Le	
NONE		
Mailing Address		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connecte	ed Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
 Custodian of Records: Idea books and records. 	entify by name, address (phone number optional) and position of the person	in possession of committee
Janik, Tra	acy, Brett, Mr.,	
Mailing Address	3 Riverway, Suite 1600	
Mailing Address		
	Houston TX 777	7056
Title or Position	CITY STATE	ZIP CODE
Treasurer		_ 681 _ 5700
8. Treasurer: List the name at any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; and t assistant treasurer).	the name and address of
	acy, Brett, Mr.,	1
of Treasurer	J3 Riverway, Suite 1600	
Mailing Address	- 1.1.7. 1.1.7. Out to 10.00	
	CITY STATE	ZIP CODE
Title or Position Treasurer	832	

Telephone number

FEC For	n 1 (Revised 02/2009)	Page 4
Full Name of Designated		
Agent		
Mailing Address		
	CITY STATE 2	ZIP CODE
Title or Position		
	Telephone number	
Banks or Other safety deposit b Name of Bank,	 Depositories: List all banks or other depositories in which the committee deposits funds, holds oxes or maintains funds. Depository, etc. 	accounts, rents
safety deposit b	Depository, etc. JPMorgan Chase Bank P.O. Box 182051	accounts, rents
safety deposit b Name of Bank,	Depository, etc. JPMorgan Chase Bank P.O. Box 182051 Columbus OH 43218	
safety deposit b Name of Bank, Mailing Address	Depository, etc. JPMorgan Chase Bank P.O. Box 182051 Columbus CITY STATE	ZIP CODE
safety deposit b Name of Bank,	Depository, etc. JPMorgan Chase Bank P.O. Box 182051 Columbus CITY STATE	
safety deposit b Name of Bank, Mailing Address	Depository, etc. JPMorgan Chase Bank P.O. Box 182051 Columbus CITY STATE	
safety deposit b Name of Bank, Mailing Address	Depository, etc. JPMorgan Chase Bank P.O. Box 182051 Columbus CITY STATE Depository, etc.	
safety deposit b Name of Bank, Mailing Address Name of Bank,	Depository, etc. JPMorgan Chase Bank P.O. Box 182051 Columbus CITY STATE Depository, etc.	
safety deposit b Name of Bank, Mailing Address Name of Bank,	Depository, etc. JPMorgan Chase Bank P.O. Box 182051 Columbus CITY STATE Depository, etc.	