Only

(Revised 06/2012)

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. NATIONAL CATTLEMEN'S BEEF ASSOCIATION POLITICAL ACTION COMMITTEE (NCBA-PAC) 1275 Pennsylvania Avenue NW ADDRESS (number and street) Suite 801 (Check if address is changed) Washington 20004 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS alee@beef.org (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 20 2016 C00028787 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. Mr Doug Evans Type or Print Name of Treasurer Mr Doug Evans [Electronically Filed] 07 20 2016 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. Office For further information contact: FEC FORM 1 Federal Election Commission Use

Toll Free 800-424-9530

Local 202-694-1100

FEC Fo r	rm 1 (Revised 02/2009)	Page 2
TYPE OF C	OMMITTEE 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. (Cominformation below.)	plete the candidate
Name of Candidate		
Candidate Party Affiliation	on Office Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Com	nmittee: (National, State	(Democratic,
(d)	This committee is a or subordinate) committee of the	Republican, etc.) Party.
Political A	ction Committee (PAC):	
(e) X	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected organization is a
	Corporation Corporation w/o Capital Stock	Labor Organization
	Membership Organization X 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 secommittee. (i.e., nonconnected committee)	egregated 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	Iraising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for to	vo or more political
(h)	committees/organizations, at least one of which is an authorized committee of a federal candidate. This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political
Com	mittees Participating in Joint Fundraiser	
1.	FEC ID number C	
1. 2.	FEC ID number C	

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FEC Form 1 (Revised 02/2009) Write or Type Committee Name		Page 3
•	OCIATION POLITICAL ACTION COMMITTEE	(NCBA-PAC)
	Committee, Joint Fundraising Representative, or Leadership	
		THE Spoilson
National Cattlemen's Beef Association		
9110 East Nichols Ave	nue	
Suite 300		
Centennial	CO 80012	
	CITY STATE ZI	P CODE
Relationship: X Connected Organization Affilia	ated Committee Joint Fundraising Representative Leade	ership PAC Sponsor
 Custodian of Records: Identify by name, address books and records. 	(phone number optional) and position of the person in posse	ssion of committee
Anna Lee		
Full Name	.,	
Mailing Address 1275 Pennsylvania NV	N	
Suite 801		
Wqashngton	DC 20004	
Title or Position	CITY STATE ZII	P CODE
PAC Director	Telephone number 202 87	9 9129
 Treasurer: List the name and address (phone number any designated agent (e.g., assistant treasurer). 	per optional) of the treasurer of the committee; and the name	and address of
Full Name Mr Doug Evans of Treasurer		
Mailing Address 9110 EAST NICHOLS	AVENUE	
CENTENNIAL	CO 80112	
Title on Decition	CITY STATE ZIF	CODE
Title or Position Chief Financial Offi	Telephone number 303 - 694	4 0305

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Full Name of Designated Agent	Anna Lee	
Mailing Address	1275 Pennsylvania Ave. NW Suite 80	
	Washington DC 20004 CITY STATE ZII	P CODE
Title or Position PAC Director		
safety deposit bo Name of Bank, D	Depositories: List all banks or other depositories in which the committee deposits funds, holds a exes or maintains funds. Depository, etc.	ioooaine, ronto
safety deposit bo	oxes or maintains funds.	
safety deposit bo Name of Bank, E	oxes or maintains funds. Depository, etc. Wells Fargo Bank	
safety deposit bo Name of Bank, E	Wells Fargo Bank 1301 Pennsylvania Ave, NW Washington DC 20004	P CODE
safety deposit bo Name of Bank, E	Wells Fargo Bank 1301 Pennsylvania Ave, NW Washington CITY STATE ZI	
safety deposit bo Name of Bank, E Mailing Address	Wells Fargo Bank 1301 Pennsylvania Ave, NW Washington CITY STATE ZI	
Name of Bank, Dame of Bank, Da	Wells Fargo Bank 1301 Pennsylvania Ave, NW Washington CITY STATE ZI	
safety deposit bo Name of Bank, E Mailing Address	Wells Fargo Bank 1301 Pennsylvania Ave, NW Washington CITY STATE ZI	
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Name of Bank, Dame of Bank, Da	Wells Fargo Bank 1301 Pennsylvania Ave, NW Washington CITY STATE ZI	

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Form/Schedule: F1A Transaction ID:

New Address, bank change, custodian of records, included affiliate organization, and change in committee email, corrected spelling of association added address and relationship.

Form/Schedule: Transaction ID: