Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. HURCHILL DOWNS INCORPORATED FPAC 600 North Hurstbourne Parkway ADDRESS (number and street) Suite 400 (Check if address is changed) LOUISVILLE 40208 KY CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS ekumene.lysonge@kyderby.com (Check if address is changed) Optional Second E-Mail Address llibby.milligan@gmail.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 03 2012 C00331942 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. Ekumene Lysonge Type or Print Name of Treasurer Ekumene Lysonge [Electronically Filed] 12 2012 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 (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

	FFC Fo	rm 1 (Revised 02/2009)	Page <b>2</b>				
TYPI	E OF C	OMMITTEE	. wyo <b>2</b>				
Can	ididate	e Committee:					
(a)	Ш	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. (Con information below.)	nplete the candidate				
Nam Cand	e of didate						
	didate / Affiliati	on Office Sought: House Senate President	State				
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.					
Name Cand	e of didate						
Par	ty Con	nmittee:	(Damas anatis				
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.				
Poli	tical A	ction Committee (PAC):					
(e)	$\times$	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected organization is a				
		X 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 party 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.)					
Join	t Fund	Iraising Representative:					
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for t committees/organizations, at least one of which is an authorized committee of a federal candidate.	wo or more political				
(h)		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.	wo or more political				
	Com	Committees Participating in Joint Fundraiser					
	1.	FEC ID number					
	2.	FEC ID number					
	3.	FEC ID number					
	4.						

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Write or Type Committee Na		Page 3
•		
CHURCHILL	DOWNS INCORPORATED FPAC	
6. Name of Any Connected	d Organization, Affiliated Committee, Joint Fundraising Representati	ve, or Leadership PAC Sponsor
Churchill Downs, Inc	1	
Mailing Address	700 Central Avenue	
Maining Address		
	Louisyille , , KY	40208
		]
	CITY STATE	ZIP CODE
Relationship: X Connec	eted Organization Affiliated Committee Joint Fundraising Represe	entative Leadership PAC Sponsor
7. Custodian of Records: lo books and records.	dentify by name, address (phone number optional) and position of the	e person in possession of committee
Ekumer Full Name	ne Lysonge	
Mailing Address	600 North Hurstbourne Parkway	
Maining Address	Suite 400	
	Louisville	, ,40222
	Edusviiic	
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	502 636 4505
8. <b>Treasurer:</b> List the name any designated agent (e.g.	and address (phone number optional) of the treasurer of the committ ., assistant treasurer).	ee; and the name and address of
	e Lysonge	
of Treasurer		
Mailing Address	600 North Hurstbourne Parkway	
	Suite 400	
	Louisville	40222
	CITY STATE	ZIP CODE
Title or Position , Treasurer		502   636   4505

502

Telephone number

636

4505

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Full Name of Designated	Omar Amin			
Agent				
Mailing Address	700 Central Avenue			
	Louisville		KY 40208	
	CITY	ST	ГАТЕ	ZIP CODE
Title or Position Treasurer		Telephone numbe	r   502  -	638   3920
		•		
	<b>Depositories:</b> List all banks or other depositories or maintains funds.  epository, etc.	ines in which the committee	•	
safety deposit bo	epository, etc.			
safety deposit bo	kes or maintains funds. epository, etc.			
safety deposit bo Name of Bank, I	epository, etc.			
safety deposit bo Name of Bank, I	epository, etc.		KY 40202	
safety deposit bo Name of Bank, I	PNC    500 West Jefferson Street			ZIP CODE
safety deposit bo Name of Bank, I	PNC    500 West Jefferson Street   Louisville   CITY		KY 40202	ZIP CODE
safety deposit be Name of Bank, I Mailing Address	PNC    500 West Jefferson Street   Louisville   CITY		KY 40202	ZIP CODE
safety deposit be Name of Bank, I Mailing Address	PNC    500 West Jefferson Street   Louisville   CITY		KY 40202	ZIP CODE
safety deposit be Name of Bank, I Mailing Address	PNC    500 West Jefferson Street   Louisville   CITY		KY 40202	ZIP CODE
safety deposit be Name of Bank, I Mailing Address	PNC    500 West Jefferson Street   Louisville   CITY		KY 40202	ZIP CODE
safety deposit be Name of Bank, I Mailing Address	PNC    500 West Jefferson Street   Louisville   CITY		KY 40202	ZIP CODE