STATEMENT OF

FORM 1	ORGANIZATIO (See instructions)	N	Office use only
NAME OF COMMITTEE (in	(Check if name Exan is changed) over	nple: If typying, type the lines 12FE4N	
WARNER MUS	CIC GROUP CORP PAC		
ADDRESS (number and	75 ROCKEFELLER PLAZA		
(Check if address is changed)	NEW YORK	NY	10019
	CITY	STATE▲	ZIP CODE 📥
(Check if address is changed)	L ADDRESS (Please provide only one e-mail addre	ess)	
COMMITTEE'S WEB	PAGE ADDRESS (URL)		
(Check if address is changed)	NOWEBPAGE		
2. DATE 0.3	/ D D / Y Y Y Y Y Y Y Z O O 9		
3. FEC IDENTIFICA	TION NUMBER C C00	411074	
4. IS THIS STATEM		AMENDED (A)	
I certify that I have exami	ned this Statement and to the best of my knowledge and Treasurer Leslie J. Kerman	d belief it is true, correct and complete	
Signature of Treasurer	Electronically Filed by Leslie J. Kerman	Date	03 / 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of fa	se, erroneous, or incomplete information may subject the		_
Office Use Only		For further information contact: Federal Election Commission Toll Free 800-424-9530	FEC FORM 1 (Revised 02/2009)

	F	FEC F	Form 1 (Revised 02/2009)	Page 2				
5.			DMMITTEE (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 the candidate information below.)					
	Name Candi							
	Candi Party	idate Affiliatio	on Office House Senate President	State District				
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.					
	Name Candi							
	Party	Comm						
	(d)		This committee is a (National, State (or subordinate) committee of the	(Democratic, Republican,etc.) Party.				
	Politic	cal Act	ion Committee (PAC):					
	(e)	X	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ed organization is a:				
		(f)	X Corporation Corporation w/o Capital Stock La	bor Organization				
			Membership Organization Trade Association Co	poperative				
			X 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 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 F	Fundra	ising Representative:					
	(g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.							
	(h)	(h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.						
		Com	mittees Participating in Joint Fundraiser					
			1. FEC ID number C					
			2. FEC ID number					
			3. FEC ID number					
			FEC ID number C					

FEC Form 1 (Revised 0	2/2009)		Page 3
Write or Type Committee Name			
WARNER MUSIC GROU	JP CORP PAC		
6. Name of Any Connected Or	ganization, Affiliated Committee, Joint Fundra	aising Representative, or Leade	rship PAC Sponsor
WARNER MUSIC GROU	PCORP		
Mailing Address	75 Rockefeller Plaza		
	New York	NY L	10019
	CITY▲	STATE ≜	ZIP CODE
Relationship: X Connected Organization	Affiliated Committee Joint	Fundraising Representative	Leadership PAC Sponsor
possession of Committee	entify by name, address, (phone number - e books and records. J. Kerman 6849 Old Dominion Drive	- optional), and position of the	e person in
	Suite 222		
	McLean	VA	22101
Title or Position ▼ Ass't. Tre	CITY A asurer	STATE A Telephone number 571	ZIP CODE 1
name and address of any	and address (phone number optional) of designated agent (e.g., assistant treasur		tee; and the
Mailing Address	1025 F Street, N.W.		
	10th Floor		
	Washington		20004
Title or Position ♥	CITY A	STATE ▲	ZIP CODE A
Treasure	r	Telephone number	_ 857 _ 9645

FEC Form 1 (Re	vised 02/2009)		Page 4		
Full Name of Designated Agent	Leslie J. Kerman				
Mailing Address	6849 Old Dominion Drive				
	Suite 222				
	McLean	VA	22101 –		
Title or Position ▼	CITY A	STATE A	ZIP CODE A		
Ass't.	. Treasurer Tel	ephone number	6339741		
 Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rensafety deposit boxes or maintains funds. Name of Bank, Depository, etc. 					
	PNC Bank 				
Mailing Address	6805 Old Dominion Drive				
	McLean	VA L	22101		
	CITY 🛕	STATE ⊿	ZIP CODE 🛕		
Name of Bank, Deposit	tory, etc.				
Lı					
Mailing Address					
	CITY 🔼	STATE▲	ZIP CODE 🛕		