STATEMENT OF

FORM 1	ORGANIZ (See instruct			Office use only
NAME OF COMMITTEE (in f	(Check if name full) X is changed)	Example: If typying, typover the lines	ne 12FE4M5	Office use only
The Caterpilla	r Inc. Employee Political Action	Committee		
	400 N 5 Adams			
ADDRESS (number and s	street) 100 N.E. Adams			
(Check if address is changed)	Peoria			61629 1430
		CITY▲	STATE▲	ZIP CODE 📥
COMMITTEE'S E-MAI	L ADDRESS (Please provide only one	e-mail address)		
(Check if address is changed)	CAT_PAC@myfecn	otices.com		
is changed)				
COMMITTEE'S WEB I	PAGE ADDRESS (URL)			
(Check if address			111111	
is changed)				
2. DATE 0.4	/ D D / Y Y Y Y Y Y 2011			
3. FEC IDENTIFICA		C C00148031	-	
4. IS THIS STATEM	ENT NEW (N) OR	X AMENDED ((A)	
I certify that I have examin	ned this Statement and to the best of my kr	nowledge and belief it is true, co	rrect and complete	
Type or Print Name of	Treasurer Gary Vest			
Signature of Treasurer	Electronically Filed by Gary Ves	st	_ Date 0 4	/ D D
NOTE: Submission of fal	se, erroneous, or incomplete information m	ay subject the person signing the	·	
Office Use Only		For further inform Federal Election C Toll Free 800-424-	ommission 9530	FEC FORM 1 (Revised 02/2009)

	FE	EC Form 1 (Revised 02/2009)	Page 2					
5.	TYPE C	DF COMMITTEE (Check One)						
	Candid	ate 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 o Candida							
	Candida Party Af	ate Office House Senate Presiden	Stateit District					
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.							
	Name o							
	Party C	Committee:						
	(d)	(National, State This committee is a (or subordinate) committee of the	(Democratic, Republican,etc.) Party.					
	Politica	al Action Committee (PAC):						
	(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.)	ected organization is a:					
	1	X Corporation Corporation w/o Capital Stock	Labor Organization					
		Membership Organization Trade Association	Cooperative					
		X In addition, this committee is a Lobbyist/Registrant PAC.						
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.)						
	Joint Fu	undraising 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.	o 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.	o or more political					
		Committees Participating in Joint Fundraiser						
		1. FEC ID number						
		2. FEC ID number						
		3. FEC ID number						
		4. FEC ID number						

FEC Form 1 (Revise	d 02/2009)		Page 3		
Write or Type Committee Nam	ie				
The Caterpillar Inc. E	Employee Political Action Committee				
6. Name of Any Connected	Organization, Affiliated Committee, Joint F	undraising Representative, or Lead	ership PAC Sponsor		
Caterpillar, Inc.					
Mailing Address	100 N.E. Adams				
	Peoria Peoria		61629		
	CITY	STATE A	ZIP CODE		
Relationship:					
X Connected Organizat	ion Affiliated Committee	Joint Fundraising Representative	Leadership PAC Sponsor		
•	ert C. Thompson	cooks and records. C. Thompson 1425 K Street NW Suite 400			
	Washington	DC	20005 _		
Title or Position ♥	CITY A	STATE A	ZIP CODE A		
Assista	nt Treasurer	Telephone number	- <u>466</u> - <u>0666</u>		
name and address of	me and address (phone number option any designated agent (e.g., assistant tre y Vest 100 N.E. Adams Stree	easurer).	ittee; and the		
	Peoria		61629 – 1430		
Title or Position ♥	CITY A	STATE▲	ZIP CODE A		
Tax Ma	nager	Telephone number	_ 675 _ 4482		
		•			

	FEC Form 1	(Revised 02	2/2009)				Pag	e 4	
	Full Name of Designated Agent	_	Robert C. Thom	pson					
Mailing Address			1425 K Street NW Suite 400						
			Washington			DC	20005		
	Title or Position ▼			CITY A		STATE A	ZIP CODE	A	
	A	ssistant T	reasurer		Telephone nun	nber 202	466	0666	
9.	safety deposit box	nks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents fety deposit boxes or maintains funds. In the committee deposits funds, holds accounts, rents funds. In the committee deposits funds, holds accounts, rents funds. In the committee deposits funds, holds accounts, rents funds, holds accounts, ho							
	Mailing Address		230 S.W. Adam	s Street					
			Suite 100		1 1 1 1 1		1 1 1 1 1		
			Peoria			LIL L	61602 _		
				CITY 🗖		STATE △	ZIP CODE	A	
	Name of Bank, De	epository, etc.							
	Mailing Address								
				CITY 🗖		STATE▲	ZIP CODE	A	