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Image# 14952933595

FEC FORM 3Y

REPORT OF RECEIPTS AND DISBURSEMENTS

TORW 3X	For Other Than An Au	thorized Committee		Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, over the lines.	type 12FE4M5	
Great-West Life & A	nnuity Insurance Comp	pany Political Actio	n Committee	
ADDRESS (number and street)	8515 E. Orchard Road			
Check if different than previously reported. (ACC)	Greenwood Village		СО	80111
2. FEC IDENTIFICATION	NUMBER ▼ CI	TY▲	STATE ▲	ZIP CODE ▲
C C00263723		IS THIS REPORT X (N)	OR AME	ENDED
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports:	Report Due On:			0 (M8) Nov 20 (M11) (Non-Election year Only) 0 (M9) Dec 20 (M12) (Non-Election
April 15		r 20 (M4) Jul	20 (M7) Oct 20	O (M10) Jan 31 (YE)
Quarterly Report July 15 Quarterly Report	(C) 12-Day PRE-Election	Primary (12P)	General (1	
October 15 Quarterly Report	Report for the:	Convention (120	Special (12	in the
January 31 Year-End Report July 31 Mid-Yea		on on		State of
Report (Non-elec Year Only) (MY)	ction (d) 30-Day	X General (30G)	Runoff (30	R) Special (30S)
Termination Rep (TER)		on on 11	04 2014	in the State of CO
5. Covering Period	10 01 2014	through	M M / D D / 11 24	2014
I certify that I have examined	I this Report and to the best o	f my knowledge and beli	ef it is true, correct and	complete.
Type or Print Name of Treaso	urer Mr Robert Onstad			
Signature of Treasurer $\frac{M}{2}$	r Robert Onstad	[Electronically Fi	ed] Date 12	04 / 2014
NOTE: Submission of false, en	roneous, or incomplete information	on may subject the person	signing this Report to the	penalties of 2 U.S.C. §437g.
Office Use Only				FEC FORM 3X Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name

Great-West Life & Annuity Insurance Company Political Action Committee

2014 2014 Report Covering the Period: 10 24 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 69275.26 January 1, 2014 (b) Cash on Hand at 58970.84 Beginning of Reporting Period..... 9524.26 1420.49 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 60391.33 78799.52 6(a) and 6(c) for Column B)..... 7413.32 25821.51 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 52978.01 52978.01 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D)

×

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Great-West Life & Annuity Insurance Company Political Action Committee

I. Receipts	COLUMN A	COLUMN B
i. neceipts	Total This Period	Calendar Year-to-Date
Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees	1400.00	8555.00
(i) Itemized (use Schedule A)	1400.00	333.00
(ii) Unitemized	, , , , 20.00	964.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	, 1420.00	9519.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines	·	
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)▶	1420.00	9519.00
. Transfers From Affiliated/Other		
Party Committees	0.00	0.00
	0.00	
All Loans Received	0.00	0.00
. Loan Repayments Received	0.00	0.00
. Offsets To Operating Expenditures		
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
. Refunds of Contributions Made		
to Federal Candidates and Other		
Political Committees	0.00	0.00
Other Federal Receipts	7 7	
(Dividends, Interest, etc.)	0.49	5.26
Transfers from Non-Federal and Levin Funds	0.49	0.20
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
(IIOIII Scriedule 113)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(b) Leviii i unus (iioiii Schedule 113)		7
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	1420.49	9524.26
. Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	1420.49	9524.26

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1.	Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Calcinal Tour-to-Date
	(i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating		
	Expenditures(c) Total Operating Expenditures	0.00	0.00
	(add 21(a)(i), (a)(ii), and (b))▶	0.00	0.00
	Transfers to Affiliated/Other Party		0.00
	Contributions to	0.00	0.00
	Federal Candidates/Committees and Other Political Committees	1500.00	19500.00
	Independent Expenditures	0.00	0.00
	(use Schedule E)	3.00	5.00
	(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
	Loan Repayments Made	0.00	0.00
	Loans Made	0.00	0.00
	Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	0.00	0.00
			0.00
	(b) Political Party Committees	0.00	0.00
	(such as PACs)	0.00	0.00
	(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))▶	0.00	0.00
	Other Disbursements	5913.32	6321.51
	Federal Election Activity (2 U.S.C. §431(20))		
	(a) Allocated Federal Election Activity		
	(from Schedule H6) (i) Federal Share	0.00	0.00
	(7 - 555-5.		0.00
	(ii) "Levin" Share(b) Federal Election Activity Paid Entirely	0.00	0.00
	(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add	0.00	0.00
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00
	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	7413.32	25821.51
	(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	7413.32	25821.51

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003) III. Net Contributions/Operating Ex-

penditures

(from Line 11(d), page 3)

(from Line 28(d)).....

(subtract Line 34 from Line 33)

(add Line 21(a)(i) and Line 21(b))▶

(from Line 15, page 3).....

(subtract Line 37 from Line 36)

33. Total Contributions (other than loans)

35. Net Contributions (other than loans)

36. Total Federal Operating Expenditures

37. Offsets to Operating Expenditures

38. Net Operating Expenditures

34. Total Contribution Refunds

of Disbursements

Page 5 **COLUMN A** COLUMN B **Total This Period** Calendar Year-to-Date 1420.00 9519.00 0.00 0.00 1420.00 9519.00 0.00 0.00 0.00 0.00 0.00 0.00

FF	64	NO	126	3

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FO	R LINE	NU	MBER	:	PAGE	6	OF	9
(ch	eck only	or	ne)					
>	1 1a		11b		11c	12		
	13		14		15	16		17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Great-West Life & Annuity Inst	urance Company Political Action C	ommittee
Full Name (Last, First, Middle Initial) Mr. ROBERT ONSTAD		Date of Receipt
Mailing Address 6328 Middleton Avenue		11 24 _ 2014 _
City	State Zip Code	Transaction ID : PR188844011528
Castle Rock	CO 80104-3275	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	60.00
Name of Employer	Occupation	
Great-West Life & Annuity Insurance Co		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	P/R Deduction (\$15.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) 3. Mr. Peter D. Tilley		Date of Receipt
Mailing Address 6952 East Nichols Place		11 24 2014
City	State Zip Code	Transaction ID : PR65736911528
Centennial	CO 80112-3131	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	
Great-West Life & Annuity Insurance Co	Vice President, Asset & Liability	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	P/R Deduction (\$25.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) C. Mr. Charles Nelson		Date of Receipt
Mailing Address 1187 E. Jesse Ct.		11 24 2014
City Highlands Ranch	State Zip Code CO 80126-4725	Transaction ID : PR65739111528 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	800.00
Name of Employer	Occupation	
Great-West Life & Annuity Insurance Co	Senior Vice President, Retirement Serv	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	4800.00	P/R Deduction (\$200.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)		960.00
TOTAL This Period (last page this line number	er only)	

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FC	PAGE	=	7	OF	9			
(ch	neck only	one)						
	X 11a	11b		11c		12		
	13	14		15		16		17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Great-West Life & Annuity Insu	urance Company Political Action Co	ommittee
Full Name (Last, First, Middle Initial) A. Mr. Ron Laeyendecker		Date of Receipt
Mailing Address 9521 S. Dolton Way		11 24 2014
City	State Zip Code	Transaction ID: PR65739911528
Highlands Ranch	CO 80126-4925	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer	Occupation	1
Great-West Life & Annuity Insurance Co	Vice President, Life Insurance Markets	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2400.00	P/R Deduction (\$100.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) 3. Ms. SARA RICHMAN		Date of Receipt
Mailing Address 9393 S. Wolfe St.	7' 0 '	11 24 2014
City Highlands Ranch	State Zip Code CO 80129-5767	Transaction ID : PR65741411528
	50.25 6.6	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer	Occupation	
Great-West Life & Annuity Insurance Co	Assistant Vice-President, Life Insuran	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	P/R Deduction (\$10.00 Bi-Weekly)
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		M = M / D = D / Y = Y = Y
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)		440.00
TOTAL This Period (last page this line number	r only)	1400.00

SCHEDULE B (FEC Form 3X)		FOR LINE I	NUMBER:	PAGE 8 OF 9
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b		24 25 2 28c 29 3
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam		d by any perso	on for the purpose of s	oliciting contributions
NAME OF COMMITTEE (In Full)	ic and address of any pointed	r committee to	3011CIT COTITION TO	III Sucii committee.
Great-West Life & Annuity Insurance	o Company Political	Action Co	mmittoo	
Great-west Life & Armulty insurant	e Company Political	ACTION CC	mmuee	
Full Name (Last, First, Middle Initial)				
A. Mike Crapo For Us Senate			Date of Disburseme	nt
Mailing Address P.O. Box 1948			11 / D D D 12	2014
City	State Zip Code			
Boise	ID 83701		Transaction ID: 10	0010206
Purpose of Disbursement		011	Amount of Each Dis	bursement this Period
Candidate Name		Category/		4500.00
Sen. Mike Crapo		Type		1500.00
∑ Senate	nent For: 2014 Primary			
State: ID District:				
Full Name (Last, First, Middle Initial)				
3.			Date of Disburseme	nt
Mailian Adduses			M M / D D	/ Y = Y = Y
Mailing Address				
City	State Zip Code			
Purpose of Disbursement			Amount of Each Dis	bursement this Period
Candidate Name		Category/		
Office Sought: House Disbursem	pent For:	Type		
Senate	Primary General Other (specify) ▼			
State: District:	·			
Full Name (Last, First, Middle Initial)			Date of Disburseme	nt
Mailing Address			M M / D D	/ Y T Y T Y T Y
City	State Zip Code			
	<u> </u>			
Purpose of Disbursement				
Candidate Name		Category/	Amount of Each Dis	bursement this Period
Office Sought: House Disbursem	nent For:	Туре		7
Senate	Primary General			
State: District:	Other (specify) ▼			
Z				
SUBTOTAL of Disbursements This Page (optional)		·····		1500.00
TOTAL This Period (last page this line number only).				1500.00
TOTAL THIS I CHOW (last page this line number only).				7

SCHEDULE B (FEC Form 3X)	Has assessed a Late (FOR LINE I	PAGE 9 OF 9		
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)	24 25 26	
	Detailed Summary Page	27	28a 28b	28c X 29 30	
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam					
NAME OF COMMITTEE (In Full)	o and address of any politic	oai committee to	Someti Continuutions Ift	om saon committee.	
Great-West Life & Annuity Insurance	ce Company Politica	al Action Co	ommittee		
Full Name (Last, First, Middle Initial)			Dete of Diri	. mt	
A. US Bank			Date of Disburseme		
Mailing Address P.O. Box 1800			10 15	2014	
,	State Zip Code		Transaction ID : 1	0010181	
	MN 55101		mansaction ID . T		
Purpose of Disbursement		001	Amount of Each Dis	sbursement this Period	
Candidate Name		Category/			
		Type		44.83	
Office Sought: House Disbursem					
	Other (specify) General				
State: President District:	Other (specify) ▼				
Full Name (Last, First, Middle Initial)					
B. Vocus, Inc.			Date of Disburseme	ent	
			M = M / D = D	/ Y = Y = Y = Y	
Mailing Address 4296 Forbes Boulevard			10 28	2014	
	State Zip Code MD 20706		Transaction ID: 1	0022514	
Landham Purpose of Disbursement	20100				
		001	Amount of Each Dis	sbursement this Period	
Candidate Name		Category/ Type		5868.49	
Office Sought: House Disbursem					
	Primary General				
President State: District:	Other (specify) ▼				
Full Name (Last, First, Middle Initial)					
c.			Date of Disburseme	ent	
Mailing Address			M M / D D	/	
Mailing Address					
City	State Zip Code				
Purpose of Disbursement					
			Amount of Each Dis	sbursement this Period	
Candidate Name		Category/			
Office Sought: House Disbursem	ent For:	Туре			
	Primary General				
	Other (specify)				
State: District:					
'					
SUBTOTAL of Disbursements This Page (optional)		·····		5913.32	
				5913.32	
TOTAL This Period (last page this line number only).				5913.3Z	