Image# 14941316667				06/13/2014 13 : 36
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	STATEMEN	NT OF		
FEC	ORGANIZA	ATION		
FORM 1	_			Office Use Only
1. NAME OF	(Check if name	Example: If typing, type	12FE4M5	
COMMITTEE (in full)	× is changed)	over the lines.	121 11113	
Intellectual Ventu	res DCP, Inc. P/	AC (Intellectual V	entures F	
ADDRESS (number and street)	1100 H Street, NW			
(Check if address is changed)	Suite 900			
lo onangoa)	Washington			0005
	CITY A		STATE A	ZIP CODE
COMMITTEE'S E-MAIL ADDRES	35			
(Check if address	PLGroup@perkinscoie.	com		
is changed)				
	Optional Second E-Mail Add	Iress		
COMMITTEE'S WEB PAGE ADD	DRESS (URL)			
 (Check if address is changed) 				
<i>3</i> ,	1			
2. DATE 06 13				
3. FEC IDENTIFICATION NU		00557165		
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
I certify that I have examined th	is Statement and to the best	of my knowledge and belief it i	s true, correct ar	nd complete.
Type or Print Name of Treasurer	Russell C. Merbeth			
Pussal	l C. Merbeth		M M	/ D D / Y Y Y
Signature of Treasurer		[Electronically Filed]	Date 06	13 2014
NOTE: Submission of false, errone	ous, or incomplete information	may subject the person signing th	is Statement to the	e penalties of 2 U.S.C. §437g.
		ON SHOULD BE REPORTED WI		
Office Use		For further information co Federal Election Commission		FEC FORM 1
Only		Toll Free 800-424-9530 Local 202-694-1100		(Revised 06/2012)

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I	FEC Fo	rm 1 (Revised 02/2009)	Page 2
TYPE	E OF C	OMMITTEE	
Can	ndidate	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. (Comple information below.)	te the candidate
Nam Canc	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 lidate		
Part	ty Con	nmittee:	
(d)			emocratic, publican, etc.) Party.
Poli	tical A	ction Committee (PAC):	
(e)	X	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conne	cted organization is a
		Corporation X Corporation w/o Capital Stock	abor 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 segre committee. (i.e., nonconnected committee)	egated 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.)	
Join	t Fund	raising 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.	or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.	FEC ID number	

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FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

Intellectual Ventures DCP, Inc. PAC (Intellectual Ventures PAC)

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Intellectual Ventures I	DCP, Inc.							
Mailing Address	3150 139th Avenue, SE							
	Bellevue		WA 9800	5 				
	CITY		STATE	ZIP CODE				
Relationship: X Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor								
 Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records. 								
Russell C	. Merbeth							

_ · ·	
Full Name	
Mailing Address	1100 H Street, NW
	Suite 900
	Washington DC 20005
Title or Position	CITY STATE ZIP CODE
Treasurer	Telephone number

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name	Russell C. Merbeth
of Treasurer	
Mailing Address	1100 H Street, NW
	Suite 900
	Washington
	CITY STATE ZIP CODE
Title or Position Treasurer	Telephone number

Full Name of Designated Agent	Kyle Mahon	ney																				
Mailing Address		1100 H Street, NW																				
		Suite 900																				
		Washington									D]	Ľ	200	05			-L			
			CI	TΥ							STA	ΓE					ZIF	CC	DE			
Title or Position	urer					-	Felep	hon	ie n	uml	ber	l				-			- [_			

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

An	nalgamated Bank		
Mailing Address	1825 K Street, NW		
	Washington		20006
	CITY	STATE	ZIP CODE
Name of Bank, Depos	sitory, etc.		
Mailing Address			
	CITY	STATE	ZIP CODE