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) over the lines. is changed) AT&T Inc. Federal Political Action Committee (AT&T Federal PAC) 208 S. Akard Street ADDRESS (number and street) Suite 1812 (Check if address is changed) **Dallas** 75202 TX CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS angela.hanratty@att.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 20 2018 C00109017 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. Goeke, George B., , , Type or Print Name of Treasurer Goeke, George B., , , [Electronically Filed] 06 20 2018 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

ı	FEC Fo i	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE 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. (Con information below.)	nplete the candidate
Nam Cand	e of didate		
	didate / Affiliation	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name	e of didate		
Par	ty Con	nmittee: (National, State	(Democratic,
(d)		This committee is a or subordinate) committee of the	Republican, etc.) Party
Poli	tical A	ction Committee (PAC):	
(e)	×	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected organization is
		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 s committee. (i.e., nonconnected committee)	egregated 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)	П	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.	
(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	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.		
	3.		
	4.		

	-			
l	FEC Form 1 (Revised (02/2009)		Page 3
W	/rite or Type Committee Name			-
A	AT&T Inc. Fede	ral Political Action Committee	(AT&T Fed	leral PAC)
6.	Name of Any Connected C	rganization, Affiliated Committee, Joint Fundraising Rep	resentative, or Leader	rship PAC Sponsor
Α	T&T Inc.			
	Mailing Address	208 S. Akard Street		
	Mailing Address			
		, Dallas	TX 75202	
		CITY	STATE	ZIP CODE
	Relationship: x Connected	Organization Affiliated Committee Joint Fundraising	g Representative L	eadership PAC Sponsor
	Custodian of Records: Identification books and records.	tify by name, address (phone number optional) and posit	tion of the person in p	ossession of committee
	Hawkins, [Diane, , ,		
	Full Name	1120 20th Street NW		
	Mailing Address	1120 20th Street, NW		
		Suite 800		
		Washington	DC 20036	
	Title or Position	CITY	STATE	ZIP CODE
	Associate Director-F	Telephone nur	mber 202 – [463 - 4629
3.	Treasurer: List the name and any designated agent (e.g., a	I address (phone number optional) of the treasurer of the ssistant treasurer).	e committee; and the r	name and address of
	Full Name Goeke, Ge of Treasurer	orge B., , ,		
	Mailing Address	208 S. Akard Street		
	Š	Suite 1812		
		Dallas	TX 75202	
		CITY	STATE	ZIP CODE
	Title or Position Sr VP & Treasurer		1 214 1 1	757 4681
		Telephone nur	mber	- 4001

Full Name of Designated Agent	Galloway, Julianne, , ,	
Mailing Address	208 S. Akard Street	
	Suite 1824	
	Dallas TX 75202	
	CITY STATE	ZIP CODE
Title or Position VP & Asst Treas	asurer Telephone number 214 –	757 - 7539
Banks or Other	r Depositories: List all banks or other depositories in which the committee deposits funds, ho	ds accounts, rents
safety deposit bo	oxes or maintains funds.	
safety deposit bo Name of Bank, D	oxes or maintains funds.	
safety deposit bo Name of Bank, [oxes or maintains funds. Depository, etc. Frost National Bank	
safety deposit bo Name of Bank, [oxes or maintains funds. Depository, etc. Frost National Bank	
safety deposit bo Name of Bank, [oxes or maintains funds. Depository, etc. Frost National Bank 100 West Houston	
safety deposit bo Name of Bank, [Depository, etc. Frost National Bank 100 West Houston P.O. Box 1600	ZIP CODE
safety deposit bo Name of Bank, E Mailing Address	Depository, etc. Frost National Bank 100 West Houston P.O. Box 1600 San Antonio CITY STATE	
safety deposit bo Name of Bank, E Mailing Address	Depository, etc. Frost National Bank 100 West Houston P.O. Box 1600 San Antonio CITY STATE	
safety deposit bo Name of Bank, E Mailing Address	Depository, etc. Frost National Bank 100 West Houston P.O. Box 1600 San Antonio CITY STATE	
safety deposit bo Name of Bank, E Mailing Address Name of Bank, E	Depository, etc. Frost National Bank 100 West Houston P.O. Box 1600 San Antonio CITY STATE Depository, etc.	
safety deposit bo	Depository, etc. Frost National Bank 100 West Houston P.O. Box 1600 San Antonio CITY STATE Depository, etc.	
safety deposit bo Name of Bank, E Mailing Address Name of Bank, E	Depository, etc. Frost National Bank 100 West Houston P.O. Box 1600 San Antonio CITY STATE Depository, etc.	

: 97 'A = G7 9 @ G5 B9 CI G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCFHZ'G7 < 98 I @ 'CF' ± H9 A ± N5 H± CB

Form/Schedule: F1A Transaction ID:

This amendment is to add the Time Warner Inc. PAC as an affiliated committee.

Form/Schedule: Transaction ID:

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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5(g) o	r(h). Joint Fundraising	p Participant:		
	1.		FEC ID number	С
	2.		FEC ID number	C
	3.		FEC ID number	С
	4		FEC ID number	С
6.		Organization, Affiliated Committee, Joint Fundra		
	Mailing Address	6889 W. Snowville Road		
		Room 3W-047	OU	. 44141
	Relationship:	Brecksville	OH	
	Helationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Organization X Affiliated Committee Joint F	Fundraising Represent	ative Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)		
8.	Designated Agent: Identify Full Name	by name, address (phone number – optional)		
8.		by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name		CTATE A	7ID CODE A
8.	Full Name	CITY A	STATE A	ZIP CODE A
8.	Full Name	CITY		ZIP CODE A
9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositorisafety deposit boxes or mai	CITY A Tele ies: List all banks or other depositories in which the	STATE ▲ ephone Number	
9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositorisafety deposit boxes or mai Name of Bank, Depository, etc.	CITY A Tele ies: List all banks or other depositories in which the	STATE ▲ ephone Number	
9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositorisafety deposit boxes or mai	CITY A Tele ies: List all banks or other depositories in which the	STATE ▲ ephone Number	
9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositorisafety deposit boxes or mai Name of Bank, Depository, etc.	CITY A Tele ies: List all banks or other depositories in which the	STATE ▲ ephone Number	
9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositorisafety deposit boxes or mai Name of Bank, Depository, etc.	CITY A Tele ies: List all banks or other depositories in which the	STATE ▲ ephone Number	

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). Joint Fundraisir	3				
1.				FEC ID number	
2				FEC ID number	C
3.				FEC ID number	С
4.				FEC ID number	С
	_	filiated Committee,	Joint Fundra	sing Representati	ve, or Leadership PAC Spor
Time Warner Inc.	PAC				
Mailina Adalaa	800 Connecticu	ut Avenue, NW			
Mailing Address	Suite 1200				
	Washington			ı DC ı	20006
Deletionahin		OITY :			
Relationship:		CITY A		STATE A	ZIP CODE ▲
Connecte	d Organization	Affiliated Committee	.loint F	undraising Represer	ntative Leadership PAC S
Connected	d Organization	Affiliated Committee	e Joint F	undraising Represer	tative Leadership PAC S
				Fundraising Represer	tative Leadership PAC S
esignated Agent: Identif				Fundraising Represer	Leadership PAC S
esignated Agent: Identif				Fundraising Represer	Leadership PAC S
esignated Agent: Identif	y by name, addres		optional)		Leadership PAC S
esignated Agent: Identify Full Name Mailing Address	y by name, addres	ss (phone number –	optional)		
esignated Agent: Identif	y by name, addres	ss (phone number –	optional)		
Full Name Mailing Address TITLE OR POSITION	y by name, addres	ss (phone number –	- optional)	STATE A	
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor of the deposit boxes or maintenance and the state of	y by name, addres	ss (phone number –	- optional)	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposito fety deposit boxes or ma	y by name, addres	ss (phone number –	- optional)	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposito fety deposit boxes or ma	y by name, addres	ss (phone number –	- optional)	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor dety deposit boxes or material depository, etc.	y by name, addres	ss (phone number –	- optional)	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor detection between the second s	y by name, addres	ss (phone number –	- optional)	STATE A	ZIP CODE A