

FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

Office use only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines 12FE4M5

CITIGROUP INC. POLITICAL ACTION COMMITTEE - FEDERAL/STATE (CITIGROUP PAC-FEDERAL/STATE)

ADDRESS (number and street) 1101 PENNSYLVANIA AVE. NW

(Check if address is changed) SUITE 1000

WASHINGTON DC 20004

CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS
pac@citi.com

COMMITTEE'S WEB PAGE ADDRESS (URL)
N/A

COMMITTEE'S FAX NUMBER

2. DATE 06 / 12 / 2008

3. FEC IDENTIFICATION NUMBER C C00039305

4. 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

Type or Print Name of Treasurer THERESA A RUSSELL

Signature of Treasurer Electronically Filed by THERESA A RUSSELL Date 06 / 18 / 2008

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. S437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS

Office Use Only				
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For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 12/2007)

5. TYPE OF COMMITTEE (Check One)

Candidate 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 of Candidate _____

Candidate Party Affiliation Office Sought: House Senate President State
 District

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

Party Committee:

- (d) This committee is a (National, State (or subordinate) committee of the (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
 - Corporation Corporation w/o Capital Stock Labor Organization
 - Membership Organization Trade Association Cooperative
- (f) 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 Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising 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) 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.

Committees Participating in Joint Fundraiser

1. _____	FEC ID number	C _____
2. _____	FEC ID number	C _____
3. _____	FEC ID number	C _____
4. _____	FEC ID number	C _____
5. _____	FEC ID number	C _____

Write or Type Committee Name

CITIGROUP INC. POLITICAL ACTION COMMITTEE - FEDERAL/STATE (CITIGROUP PAC-FEDERAL/STATE)

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

CITIGROUP INC.

Mailing Address **399 PARK AVENUE**

NEW YORK **NY** **10043**

CITY **STATE** **ZIP CODE**

Relationship:

Connected Organization Affiliated Committee Leadership PAC Sponsor Joint Fundraising Representative

7. Custodian of Records: Identify by name, address, (phone number -- optional), and position of the person in possession of Committee books and records.

Full Name **THERESA A. RUSSELL**

Mailing Address **c/o PASS**

1020 NORTH FAIRFAX STREET

ALEXANDRIA **VA** **22314**

TREASURER **CITY** **STATE** **ZIP CODE**

Telephone number **703** - **684** - **2915**

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 of Treasurer **THERESA A. RUSSELL**

Mailing Address **TWO COURT SQUARE**

4TH FLOOR/ZONE 13

LONG ISLAND CITY **NY** **11120**

TREASURER **CITY** **STATE** **ZIP CODE**

Telephone number **347** - **648** - **0301**

Full Name of Designated Agent

HOWARD DARMSTADTER

Mailing Address

425 PARK AVENUE

NEW YORK

NY

10043

Title or Position

CITY

STATE

ZIP CODE

ASSISTANT TREASURER

Telephone number

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.

CITIBANK N.A.

Mailing Address

111 WALL STREET

NEW YORK

NY

10043

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

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.

[ADDITIONAL]

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

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

CITIGROUP INC. POLITICAL ACTION COMMITTEE - FEDERAL

[ADDITIONAL]

Mailing Address

1101 PENNSYLVANIA AVE. NW

SUITE 1000

WASHINGTON

DC

20004

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship:

Connected Organization

Affiliated Committee

Leadership PAC Sponsor

Joint Fundraising Representative

Designated Agent

[ADDITIONAL]

Full Name

RONALD W. STEPHENS

Mailing Address

11440 CARMEL COMMONS BLVD.

CHARLOTTE

NC

28226

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

ASSISTANT TREASURER

Telephone number

Joint Fundraiser Participant

[ADDITIONAL]

FEC ID number

C

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.

[ADDITIONAL]

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

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

[ADDITIONAL]

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship:

Connected Organization

Affiliated Committee

Leadership PAC Sponsor

Joint Fundraising Representative

Designated Agent

[ADDITIONAL]

Full Name

LISA BURLEIGH

Mailing Address

TWO COURT SQUARE

4TH FLOOR/ZONE 13

LONG ISLAND CITY

NY

11120

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

ASSISTANT TREASURER

Telephone number

347

648

0304

Joint Fundraiser Participant

[ADDITIONAL]

FEC ID number

C

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.

[ADDITIONAL]

Mailing Address

_____ - _____

CITY ▲

STATE ▲

ZIP CODE ▲

[ADDITIONAL]

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

Mailing Address

_____ - _____

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship:

Connected Organization

Affiliated Committee

Leadership PAC Sponsor

Joint Fundraising Representative

[ADDITIONAL]

Designated Agent

Full Name

S. COLIN DOWLING

Mailing Address

1101 PENNSYLVANIA AVENUE NW

SUITE 1000

WASHINGTON

DC

20004 -

Title or Position ▼

ASSISTANT TREASURER

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number _____ - _____ - _____

[ADDITIONAL]

Joint Fundraiser Participant

FEC ID number

C _____

Image# 28931897843

Form/Schedule: **F1A**
Transaction ID:

This amended registration is being filed to disclose the appointment of a new Assistant Treasurer for the PAC (Lisa Burleigh).
