

FEC FORM 1

STATEMENT OF ORGANIZATION

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2016 JUL 25 AM 10:05 Office Use Only

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

12FE4M5

RIO TINTO AMERICA INC PAC

ADDRESS (number and street)

H700 DAYBREAK PARKWAY

(Check if address is changed)

SOUTH JORDAN

CITY

UT

STATE

84095

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE

07 / 20 / 2016

3. FEC IDENTIFICATION NUMBER

C00243675

4. IS THIS STATEMENT

NEW (N) OR

NEW (N)

OR

AMENDED (A)

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

Justin Woytek

Signature of Treasurer

[Handwritten Signature]

Date

07 / 20 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Table with 5 columns and 1 row for Office Use Only.

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

FEC FORM 1 (Revised 06/2012)

Write or Type Committee Name

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

[Empty grid line]

[Empty grid line]

Mailing Address

[Empty grid line]

[Empty grid line]

[Empty grid line]

[Empty grid line]

[Empty grid line]

[Empty grid line]

CITY

STATE

ZIP CODE

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

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

[Empty grid line]

Mailing Address

[Empty grid line]

[Empty grid line]

[Empty grid line]

[Empty grid line]

[Empty grid line]

[Empty grid line]

Title or Position

CITY

STATE

ZIP CODE

[Empty grid line]

Telephone number

[Empty grid line]

[Empty grid line]

[Empty grid line]

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

JUSTIN WOYTEK

Mailing Address

8051 EAST MAPLEWOOD AVENUE

GREENWOOD VILLAGE

CO

80111

CITY

STATE

ZIP CODE

Title or Position

MGR FINANCIAL REPORT

Telephone number

303

713

5511

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Federal Election Commission
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PREPARER
 (3/2015)

MP

7/25/2016
 DATE PREPARED

20160720 10:00:00 AM