PAGE 1/5 STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) The Caterpillar Inc. Employee Political Action Committee 100 N.E. Adams Street ADDRESS (number and street) (Check if address is changed) Peoria 61629-1430 IL CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS catpac@cat.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2013 C00148031 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. Michael C Morrison Type or Print Name of Treasurer Michael C Morrison [Electronically Filed] 20 2013 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. FEC FORM 1

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

ı	FEC Fo i	rm 1 (Revised 02/2009)	Page 2
TYPI	E OF C	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. (Cominformation below.)	plete the candidate
Nam Cand	e of lidate		
	lidate ⁄ Affiliatio	Office Sought: House Senate President	State District
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Cand	e of lidate		
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)	\times	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor	nnected organization is a:
		X 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 so 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)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.	vo or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number C	
	3.	FEC ID number	
	4.		

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Write or Type Committee N	Name	
The Caterpilla	ar Inc. Employee Political Action Committee	
6. Name of Any Connecte	ted Organization, Affiliated Committee, Joint Fundraising Representative, or Leaders	ship PAC Sponsor
Caterpillar Inc.		
	100 N.E. Adams Street	
Mailing Address		
	Peoria IL 61629	
	CITY STATE	ZIP CODE
Relationship: X Conne	ected Organization	eadership PAC Sponsor
reductionship.	Animated Committee South Fundament Representative Lea	addrainp i 700 oponsor
books and records.	Identify by name, address (phone number optional) and position of the person in potopher J. Meyers	ssession of committee
Full Name	,1425 K Street NW, Suite 400	
Mailing Address	1425 K Street IVW, Suite 400	
	Washington DC 20005	
Title or Position	CITY STATE	ZIP CODE
Assistant Treasurer	Telephone number 202 -	466
8. Treasurer: List the name any designated agent (e.	e and address (phone number optional) of the treasurer of the committee; and the nate.g., assistant treasurer).	ame and address of
I dii I diii e	nel C Morrison	
of Treasurer	100 N.E. Adams Street	
Mailing Address	100 N.L. Additis Street	
	Peoria	430 -
Title or Position	CITY STATE	ZIP CODE
Treasurer		675 1445

Telephone number

FEC Fo								
Full Name of Designated Agent	Christophe	r J. Meyers						
Mailing Addres	S	1425 K Street NW, Su	uite 400					
		Washington	CITY		DC STATE	20005	ZIP CODE	
Title or Position Assistant Trea				Telephone nur	mber	202	466	0671
Banks or Othe	er Depositorie	s: List all banks or oth	ner depositories in wh	ich the commit	tee deposits	s funds, hole	ds accounts	, rents
safety deposit Name of Bank	boxes or maint	tains funds.						
safety deposit	boxes or maint Depository, e	tains funds.	Trust		1 1 1 1	1 1 1 1		
safety deposit	boxes or maint Depository, e	tains funds. tc.						
safety deposit Name of Bank	boxes or maint Depository, e	tains funds. -Illinois Bank &						
safety deposit Name of Bank	boxes or maint Depository, e	tains funds. -Illinois Bank &			L L	61602		
safety deposit Name of Bank	boxes or maint Depository, e	tains funds. tc. -Illinois Bank & 230 S.W. Adams Stree			IL STATE	61602	ZIP CODE	
safety deposit Name of Bank	boxes or maint, Depository, e	tains funds. tc. -Illinois Bank &	et Suite 10			61602	ZIP CODE	
safety deposit Name of Bank Mailing Addres	boxes or maint, Depository, e	tains funds. tc. -Illinois Bank &	et Suite 10			61602	ZIP CODE	
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safety deposit Name of Bank Mailing Addres Name of Bank	boxes or maint, Depository, e 1st Mid- s	tains funds. tc. -Illinois Bank &	et Suite 10			61602	ZIP CODE	
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: 97 'A = G7 9 @ G B9 CI G'H9 LH F9 @ 5 H98 'HC '5 'F9 DC FHZ G7 < 98 I @ 'C F' + H9 A = N5 H+ C B

Form/Schedule: F1A
Transaction ID:

This amended registration is being filed to update the committee's email address. Please make the necessary changes to your records.

Form/Schedule: Transaction ID: