Use

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) AGL RESOURCES INC. POLITICAL ACTION COMMITTEE, INC. (AGL PAC) 10 Peachtree Place, NE ADDRESS (number and street) (Check if address is changed) Atlanta 30309 GA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS mscott@aglresources.com (Check if address is changed) Optional Second E-Mail Address msawhill@aglresources.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 05 2016 C00145037 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. Sister Ward Type or Print Name of Treasurer Sister Ward [Electronically Filed] 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:

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

FEC FORM 1 (Revised 06/2012)

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TYPI	E OF C	OMMITTEE	. ugo =
Can	ndidate	Committee:	
(a)	Ш	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 / Affiliati	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Con	nmittee:	(5
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, 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 con-	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 scommittee. (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	Iraising 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.	wo or more political
(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.	vo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

FEC Form 1 (Revised		Page 3
Write or Type Committee Name		(AOL DAO)
	ES INC. POLITICAL ACTION COMMITTEE, INC.	
6. Name of Any Connected (Organization, Affiliated Committee, Joint Fundraising Representative, or Leadersh	nip PAC Sponsor
AGL Resources, Inc.		
	10 Peachtree Place, NE	
Mailing Address	To reachine riace, NE	
	Atlanta GA 30309	
	CITY STATE	ZIP CODE
Relationship: X Connected	d Organization Affiliated Committee Joint Fundraising Representative Lea	dership PAC Sponsor
 Custodian of Records: Idea books and records. 	ntify by name, address (phone number optional) and position of the person in pos-	session of committee
Full Name		
Mailing Address		
Title or Position	CITY STATE 2	ZIP CODE
	Telephone number	
3. Treasurer: List the name an any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and the nan assistant treasurer).	ne and address of
Full Name Sister War of Treasurer	d 	
Mailing Address	10 Peachtree Place, NE	
	Atlanta GA 30309	
Title or Position Dir,Government Relat		ZIP CODE 3202

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Full Name of		
Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
safety deposit bo Name of Bank, I		·
	oxes or maintains funds.	
Name of Bank, I	Depository, etc. Wells Fargo Bank 999 Peachtree Street NE Suite 100	ZIP CODE
Name of Bank, I	Wells Fargo Bank 999 Peachtree Street NE Suite 100 Atlanta CITY STATE	
Name of Bank, I	Depository, etc. Wells Fargo Bank 999 Peachtree Street NE Suite 100 Atlanta CITY STATE Depository, etc.	
Name of Bank, I	Wells Fargo Bank 999 Peachtree Street NE Suite 100 Atlanta CITY STATE	
Name of Bank, I	Depository, etc. Wells Fargo Bank 999 Peachtree Street NE Suite 100 Atlanta CITY STATE Depository, etc.	
Name of Bank, I	Depository, etc. Wells Fargo Bank 999 Peachtree Street NE Suite 100 Atlanta CITY STATE Depository, etc.	
Name of Bank, I	Depository, etc. Wells Fargo Bank 999 Peachtree Street NE Suite 100 Atlanta CITY STATE Depository, etc.	

FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

Page 5 FEC Form 1G (Revised 06/2011) List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ADDITIONAL] Name of Bank, Depository, etc. Mailing Address CITY 🗖 ZIP CODE 🛕 STATE **△** [ADDITIONAL] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Southern Company Employees PAC 241 Ralph McGill Boulevard NE Mailing Address BIN 10115 GΑ 30308 Atlanta **CITY** STATE 4 ZIP CODE Relationship: Joint Fundraising Representative Leadership PAC Sponsor Connected Organization Affiliated Committee [ADDITIONAL] **Designated Agent** Full Name Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ADDITIONAL] Joint Fundraiser Participant С FEC ID number