Only

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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) Windstream Holdings II, LLC Political Action Committee 4001 Rodney Parham Road ADDRESS (number and street) (Check if address is changed) Little Rock 72212-2459 AR CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS cathy.jarrett@windstream.com (Check if address is changed) Optional Second E-Mail Address outsourcing@aristotle.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 01 2021 C00425975 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. Smith, Drew, , , Type or Print Name of Treasurer Smith, Drew,,, [Electronically Filed] 02 2021 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

_		1 (Paying 1 (Paying 02/2000)	Doro O				
		OMMITTEE	Page 2				
		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 Candi							
Candi Party	idate Affiliatio	Office Sought: House Senate President	State				
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.					
Name Candi							
Party	y Com	mittee:					
(d)		· · · · · · · · · · · · · · · · · · ·	Democratic, epublican, etc.) Party				
Polit	ical A	ction Committee (PAC):					
(e)	×	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conn	ected 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 seg committee. (i.e., nonconnected committee)	regated fund or part				
		In addition, this committee is a Lobbyist/Registrant PAC.					
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)					
Joint	Fund	raising Representative:					
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	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.	or more political				
	Com	mittees Participating in Joint Fundraiser					
	1.	FEC ID number					
	2.	FEC ID number					
	3.	FEC ID number					
	4.						

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Write or Type Committee Na	me		
Windstream H	loldings II, LLC Politi	cal Action Com	mittee
6. Name of Any Connected	d Organization, Affiliated Committee,	loint Fundraising Representat	ive, or Leadership PAC Sponsor
Windstream Holding	s II, LLC		
Mailing Address	4001 N Rodney Parham Rd		
	Little Rock	AR	72212-2459
	CITY	STATE	ZIP CODE
Relationship: x Connec	cted Organization Affiliated Committee	Joint Fundraising Represe	entative Leadership PAC Sponsor
<ol><li>Custodian of Records: lo books and records.</li></ol>	dentify by name, address (phone numbe	r optional) and position of th	e person in possession of committee
Mason,	Dave, , ,		
Full Name	,205 Pennsylvania Ave SE		
Mailing Address			
			22222 4424
	Washington	DC	20003-1164
Title or Position	CITY	STATE	ZIP CODE
Custodian of Records		Telephone number	202 - 553 - 7303
8. <b>Treasurer:</b> List the name any designated agent (e.g	and address (phone number optional) ., assistant treasurer).	of the treasurer of the commit	tee; and the name and address of
Full Name Smith, D	Orew, , ,		
Mailing Address	4001 N Rodney Parham Rd		
		<u>                                     </u>	
	Little Rock	AR	
Tille on De '''	CITY	STATE	ZIP CODE
Title or Position Treasurer		Telephone number	501 748 - 5555

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Full Name of Designated Agent	Whitehead, Thomas, W, ,					
Mailing Address	1275 K St NW 3rd FI Ste 350					
	Ste 350					
	Washington CITY	DC   STATE	20005 ZIP CODE			
Title or Position Designated Age	ıt 	ne number 703				
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.  Bank of America						
Mailing Address	901 Main St.					
	Dallas	TX	75203			
	CITY	STATE	ZIP CODE			
Name of Bank, D	epository, etc.					
	<u> </u>					
Mailing Address						

## : 97 'A = G7 9 @ G B9 C I G'H9 L H'F9 @ 5 H98 'HC'5 'F9 DC F HZ G7 < 98 I @ 'C F' + H9 A = N5 H + C B

Form/Schedule: F1A Transaction ID:

Amending to change PAC name to correctly reflect connected organization name

Form/Schedule: Transaction ID: