

Tenant-In-Common Association PAC  
Two Meridian Plaza  
10401 North Meridian Street  
Suite 202  
Indianapolis, IN 46290

RECEIVED  
FEDERAL ELECTION  
COMMISSION  
PUBLIC DISCLOSURE  
DIVISION

2009 FEB -6 P 12:02

January 21, 2009

**RE: Amended Statement of Organization - FEC C00428326**

Federal Election Commission  
999 E Street N.W.  
Washington, DC 20463

Dear Sir or Madam:

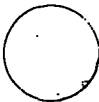
Please find enclosed an Amended Statement of Organization for the Tenant-In-Common Association Political Action Committee or TICA PAC. The document will reflect a change in the PAC Assistant Treasurer. With the filing of this amendment, Gregory Ellis will no longer be listed as the PAC Assistant Treasurer. If you have any questions or comments, don't hesitate to contact the TICA PAC at 317-663-4173.

Thank you,



Gregory R. Ellis  
PAC Administrator/Assistant Treasurer,  
Tenant-In-Common Association PAC

Enclosure (1)



29030021234

1 Annual

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FEC  
FORM 1

STATEMENT OF  
ORGANIZATION

2009 FEB -6 P 12:04

Office Use Only

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

12FE4M5

TENANT IN COMMON ASSOCIATION (TICA)  
POLITICAL ACTION COMMITTEE

ADDRESS (number and street) TWO MERIDIAN PLAZA  
10401 NORTH MERIDIAN ST, SUITE 202  
INDIANAPOLIS IN 46290-

(Check if address is changed)

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

KMFINLEY@TICASSOC.ORG

COMMITTEE'S WEB PAGE ADDRESS (URL)

WWW.TICASSOC.ORG

COMMITTEE'S FAX NUMBER

317-815-0871

2. DATE 01 21 2009

3. FEC IDENTIFICATION NUMBER

000428326

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

GREGORY R. ELLIS

Signature of Treasurer

Gregory R. Ellis

Date

01 21 2009

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 Use Only

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

FEC FORM 1  
(Revised 12/2007)

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5. TYPE OF COMMITTEE

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	<input type="checkbox"/>
2.	_____	FEC ID number	<input type="checkbox"/>
3.	_____	FEC ID number	<input type="checkbox"/>
4.	_____	FEC ID number	<input type="checkbox"/>
5.	_____	FEC ID number	<input type="checkbox"/>

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Write or Type Committee Name

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

TENANT IN COMMON ASSOCIATION (TICA)

Mailing Address 10401 NORTH MERIDIAN STREET SUITE 202 INDIANAPOLIS IN 46290- 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 DEBORAH LONE

Mailing Address TWO MERIDIAN PLAZA 10401 NORTH MERIDIAN ST, SUITE 202 INDIANAPOLIS IN 46290- CITY STATE ZIP CODE

Title or Position

CUSTODIAN OF RECORDS Telephone number 317-663-4177

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 MARK G KOSANKE

Mailing Address 1120 EAST LONG LAKE ROAD SUITE 250 TROY MI 48065- CITY STATE ZIP CODE

Title or Position

TREASURER Telephone number 248-740-8500

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Full Name of Designated Agent

KATHERINE M. FINLEY

Mailing Address

TWO MERIDIAN PLAZA

10401 NORTH MERIDIAN ST, SUITE 202

INDIANAPOLIS

IN

46290-

CITY

STATE

ZIP CODE

Title or Position

ASST. TREASURER

Telephone number

317-663-4173

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.

REGIONS BANK

Mailing Address

ONE INDIANA SQUARE

SUITE 714

INDIANAPOLIS

IN

46204-

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE


ZIP CODE

29030021238

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
The FEC added this page to the end of this filing to indicate how it was received.

29030021239

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> USPS First Class Mail	Postmarked 1/23/09
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
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Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

  
PREPARER  
(3/2005)

2/6/09  
DATE PREPARED