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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) is changed) over the lines. Mattel Inc. Political Action Committee 333 Continental Blvd. ADDRESS (number and street) M1-0806 (Check if address is changed) El Segundo 90245 CA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS PAC@mattel.com (Check if address is changed) Optional Second E-Mail Address |fecinfo@pass1.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 25 2014 C00340224 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. Mandana Sadigh Type or Print Name of Treasurer Mandana Sadigh [Electronically Filed] 04 2014 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 Only

Local 202-694-1100

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TYPE OF COMMITTEE Candidate Committee:					
(a) This committee is a principal campaign committee. (Complete the candidate information be	low.)				
(b) This committee is an authorized committee, and is NOT a principal campaign committee. (information below.)	Complete the candidate				
Name of Candidate					
Candidate Office Party Affiliation Sought: House Senate Presider	State				
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee	э.				
Name of Candidate					
Party Committee: (National, State	·				
(d) This committee is a or subordinate) committee of the	(Democratic, Republican, etc.) Party.				
Political Action Committee (PAC):					
(e) X This committee is a separate segregated fund. (Identify connected organization on line 6.) Its	s connected organization is a				
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 separat committee. (i.e., nonconnected committee)	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 Lobbyist/Registrant PAC.					
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 to committees/organizations, at least one of which is an authorized committee of a federal candid	•				
(h) This committee collects contributions, pays fundraising expenses and disburses net proceeds f committees/organizations, none of which is an authorized committee of a federal candidate.	or two or more political				
Committees Participating in Joint Fundraiser					
1. FEC ID number C					
2. FEC ID number C					
3. FEC ID number C					
4.					

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W	/rite or Type Committee Name	e			
[Mattel Inc. Polit	tical Action Committee			
6.	Name of Any Connected (Organization, Affiliated Committee, Joint Fundraising Representative, or Leadersh	nip PAC Sponsor		
M	lattel Inc.				
L		333 Continental Blvd.			
	Mailing Address				
		El Segundo CA 90245			
		CITY STATE	ZIP CODE		
		SIAIE	ZII CODL		
	Relationship: X Connecte	d Organization Affiliated Committee Joint Fundraising Representative Lea	dership PAC Sponsor		
' .	Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.				
	Corinne M	flurat			
	Full Name	,c/o Mattel 333 Continental Blvd.			
	Mailing Address	M1-0806			
		El Segundo CA 90245			
	Title or Position	CITY STATE 2	ZIP CODE		
	PAC Asst Treasurer	Telephone number 310 - 2	252 6628		
3.	Treasurer: List the name an any designated agent (e.g.,	d address (phone number optional) of the treasurer of the committee; and the nan assistant treasurer).	ne and address of		
	Full Name Mandana of Treasurer	Sadigh			
	Mailing Address	c/o Mattel 333 Continental Blvd.			
		M1-1426			
		El Segundo CA 90245 CITY STATE Z			
	Title or Position		ZIP CODE		
_	PAC Treasurer		252 - 3035		

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Full Name of Designated Agent	Corinne Murat	
Mailing Address	c/o Mattel 333 Continental Blvd.	
	M1-0806	
	El Segundo CA 90245 CITY STATE	ZIP CODE
Title or Position PAC Asst Treas	rurer Telephone number 310 - L	252 6628
9. Banks or Other safety deposit bo Name of Bank, E	Depositories: List all banks or other depositories in which the committee deposits funds, holdoxes or maintains funds. Depository, etc. Bank of America	ds accounts, rents
Mailing Address	1655 Grant St. Bldg A 10th Flr	
	Concord CA 94520	
	CITY STATE	ZIP CODE
	Panacitary ata	
Name of Bank, D	pepository, etc.	
Name of Bank, [Jepository, etc.	
Name of Bank, D		

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: 97 'A = G7 9 @ G5 B9 CI G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCF HZ G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: F1A Transaction ID:

The amended registration is filed to update the PAC custodian.

Form/Schedule: Transaction ID: