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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) National Sorghum Producers Political Action Committee 4201 N Interstate 27 ADDRESS (number and street) (Check if address is changed) Lubbock 79403 TX CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS marsha@malachi310llc.com (Check if address is changed) Optional Second E-Mail Address john@sorghumgrowers.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2011 C00475673 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. Richardson, Larry, , , Type or Print Name of Treasurer Richardson, Larry, , , [Electronically Filed] 01 2018 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

|             | FFC <b>Fo</b>  | rm 1 (Rayisad 02/2000)   | Page <b>2</b>                            |  |  |  |
|-------------|--|--|--|--|--|--|
|             |  | OMMITTEE   | i aye Z                                  |  |  |  |
| Can         | didate 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.)  |  |  |  |  |
| Nam<br>Cand | e of<br>didate   |  |  |  |  |  |
|             | didate<br>/ Affiliati  | Office Sought: House Senate President  | State                                    |  |  |  |
| (c)         |  | This committee supports/opposes only one candidate, and is NOT an authorized committee.  |  |  |  |  |
| Nam<br>Cand | e of<br>didate   |  |  |  |  |  |
| Par         | ty Con   | nmittee:   | (Damas anatis                            |  |  |  |
| (d)         |  | This committee is a (National, State or subordinate) committee of the  | (Democratic,<br>Republican, etc.) Party. |  |  |  |
| Poli        | tical A  | ction Committee (PAC):   |  |  |  |  |
| (e)         | ×  | This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-  | nnected 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)         | (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregation 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.)   |  |  |  |  |
| Join        | t Fund   | raising Representative:  |  |  |  |  |
| (g)         |  | This committee collects contributions, pays fundraising expenses and disburses net proceeds for transmittees/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.        | wo or more political                     |  |  |  |
|             | Committees Participating in Joint Fundraiser   |  |  |  |  |  |
|             | 1.   | FEC ID number  |  |  |  |  |
|             | 2.   | FEC ID number  |  |  |  |  |
|             | 3.   | FEC ID number  |  |  |  |  |
|             | 4.   |  |  |  |  |  |

|    | -  |  |                              |                 |                        |
|----|--|--|------------------------------|-----------------|------------------------|
| _  | FEC Form 1 (Revised (                                      | 02/2009)   |                              |                 | Page <b>3</b>          |
| V  | /rite or Type Committee Name                               | 2  |                              |                 |                        |
| 1  | National Sorghi  | um Producers Politica  | I Action Com                 | mittee          |                        |
| 6. | Name of Any Connected C                                    | Organization, Affiliated Committee, Joint                      | Fundraising Representa       | tive, or Leader | ship PAC Sponsor       |
| N  | ational Sorghum Pro  | ducers   |                              |                 |                        |
| L  |  |  |                              |                 |                        |
|    | Mailing Address  | 4201 N Interstate 27   |                              |                 |                        |
|    | J  |  |                              |                 |                        |
|    |  | Lubbock  | TX                           | 79403           | -                      |
|    |  | CITY   | STAT                         | _               | ZIP CODE               |
|    | Relationship: <b>x</b> Connected                           | d Organization Affiliated Committee                            | Joint Fundraising Repres     | sentative L     | eadership PAC Sponsor  |
|    | Custodian of Records: Ider books and records.              | ntify by name, address (phone number o                         | optional) and position of th | ne person in po | ossession of committee |
|    | Lust, Tim, Full Name                                       |  |                              |                 |                        |
|    | Mailing Address  | 4201 N Interstate 27   |                              |                 |                        |
|    |  |  |                              |                 |                        |
|    |  | Lubbock  | TX                           | 79403           |                        |
|    | Title or Position  | CITY   | STATE                        |                 | ZIP CODE               |
|    | Custodian  |  | Telephone number             | 806             | 749   -   3478         |
| 3. | Treasurer: List the name and any designated agent (e.g., a | d address (phone number optional) of the assistant treasurer). | ne treasurer of the commi    | ttee; and the n | ame and address of     |
|    | Full Name Richardson of Treasurer                          | n, Larry, , ,  |                              |                 |                        |
|    | Mailing Address  | PO Box 60  |                              |                 |                        |
|    |  |  |                              |                 |                        |
|    |  | Vega   | TX                           | 79092           |                        |
|    | Title or Position  | CITY   | STATE                        |                 | ZIP CODE               |
|    | Treasurer  |  | Telephone number             | 806             | 749   -   3478         |

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|------------------------------------|--|---------------|--|--|--|--|
|                                    |  |               |  |  |  |  |
| Full Name of Designated            | Duff, John, N, ,   |               |  |  |  |  |
| Agent                              | 4201 N Interstate 27   |               |  |  |  |  |
| Mailing Address                    |  |               |  |  |  |  |
|                                    |  | ,             |  |  |  |  |
|                                    | Lubbock TX 79403   |               |  |  |  |  |
|                                    | CITY STATE   | ZIP CODE      |  |  |  |  |
| Title or Position Assistant Treast | urer   | 749 3478      |  |  |  |  |
| safety deposit bo                  | 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.  City Bank |               |  |  |  |  |
| Mailing Address                    | PO Box 5060  |               |  |  |  |  |
|                                    |  |               |  |  |  |  |
|                                    | Lubbock TX 79408   | 3             |  |  |  |  |
|                                    | CITY STATE   | ZIP CODE      |  |  |  |  |
| Name of Bank, [                    | Depository, etc.   |               |  |  |  |  |
|                                    |  |               |  |  |  |  |
| Mailing Address                    |  |               |  |  |  |  |
|                                    |  |               |  |  |  |  |
|                                    |  |               |  |  |  |  |
|                                    | CITY STATE   | ZIP CODE      |  |  |  |  |