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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. Kentucky Moving Forward 300 East Main Street ADDRESS (number and street) Suite 210 (Check if address is changed) Lexington 40507 KY CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS geoff@advocacywins.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.kentuckymovingforward.com (Check if address is changed) DATE 2016 C00624064 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. Steve Wilson Type or Print Name of Treasurer Steve Wilson [Electronically Filed] 80 16 2016 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

ŗ	FFC Fo	rm 1 (Revised 02/2009)	Page <b>2</b>			
TYPE	E OF C	OMMITTEE	1 49 <del>6</del> <b>4</b>			
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. (Complinformation below.)	ete the candidate			
Name Cand	e of lidate					
	lidate Affiliatio	Office Sought: House Senate President	State			
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Name Cand						
Part	y Con	nmittee:				
(d)			emocratic, epublican, etc.) Party			
Poli	tical A	ction Committee (PAC):				
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.)	ected 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 separate segrecommittee. (i.e., nonconnected committee)	regated 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	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			
	Committees 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		
Kentucky Mc	oving Forward	
<u> </u>	cted Organization, Affiliated Committee, Joint Fundraising Representative, or	Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Con	nected Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
Custodian of Records books and records.	s: Identify by name, address (phone number optional) and position of the person	on in possession of committee
Alan Full Name	Long	
	713 West Main Street	
Mailing Address		
	Richmond	40475
Title or Position	CITY STATE	ZIP CODE
Custodian of Records	859	_ 626 _ 9040
	ne and address (phone number optional) of the treasurer of the committee; an (e.g., assistant treasurer).	d the name and address of
Full Name Steve	e Wilson	1
of Treasurer	710 West Main Street	
Mailing Address		
	3rd Floor	40000
		40202 7ID CODE
Title or Position Treasurer	CITY STATE 502	ZIP CODE

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Full Name of Designated	Alan Long		
Agent		740 West Mais Otrest	
Mailing Address		713 West Main Street	
		Richmond	40475
		CITY STATE	ZIP CODE
Title or Position Assistant Treas	urer		626 9040
safety deposit be		to	
Name of Bank,	Depository, e	Central Bank	
	Depository, e	P.O. Box 2367	
Name of Bank,	Depository, e	Central Bank	
Name of Bank,	Depository, e	P.O. Box 2367  501 South L Rogers Wells Blvd.	12142 1- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Name of Bank,	Depository, e	P.O. Box 2367  501 South L Rogers Wells Blvd.	12142 ZIP CODE
Name of Bank,	South C	P.O. Box 2367  501 South L Rogers Wells Blvd.  Glasgow  CITY  STATE	
Name of Bank,  Mailing Address	South C	P.O. Box 2367  501 South L Rogers Wells Blvd.  Glasgow  CITY  STATE	
Name of Bank,  Mailing Address	Depository, e	P.O. Box 2367  501 South L Rogers Wells Blvd.  Glasgow  CITY  STATE	
Name of Bank,  Mailing Address  Name of Bank,	Depository, e	P.O. Box 2367  501 South L Rogers Wells Blvd.  Glasgow  CITY  STATE	
Name of Bank,  Mailing Address  Name of Bank,	Depository, e	P.O. Box 2367  501 South L Rogers Wells Blvd.  Glasgow  CITY  STATE	

## : 97 A = G7 9 @ G5 B9 CI G H9 L H F 9 @ 5 H9 8 HC 5 F 9 DC F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: F1N Transaction ID:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Form/Schedule: Transaction ID: