Only

PAGE 1 / 13 -

FEC FORM 1		STATEME ORGANIZ			'
					Office Use Only
 NAME OF COMMITTEE (ir 	n full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Berkshire F	lathav	way Energy PA	C		
ADDRESS (number a	nd street)	666 Grand Avenue			
(Check if a is changed	address	P.O. Box 657			
is changed	<i>.</i> ,	Des Moines CITY		STATE ▲	0306-0657
COMMITTEE'S E-MA	AIL ADDRE	ESS			
(Check if a is changed		sdpiper@midamerica	n.com		
C	,	Optional Second E-Mail A	Address		
COMMITTEE'S WEB (Check if a is changed)	address				
2. DATE 0					
3. FEC IDENTIFIC	CATION N	UMBER ▶	C00324483		
4. IS THIS STATEM	MENT	NEW (N) OR	x AMENDED (A)		
I certify that I have e	examined th	his Statement and to the be	st of my knowledge and belief	it is true, correct ar	nd complete.
Type or Print Name	of Treasure	Piper, Steven, D, ,			
Signature of Treasure	er <i>Piper</i>	r, Steven, D, ,	[Electronically Filed]	Date 06	27 2018
NOTE: Submission of	false, erron		on may subject the person signing		e penalties of 2 U.S.C. §437g.
Office Use			For further information Federal Election Commis Toll Free 800-424-9530		FEC FORM 1 (Revised 06/2012)

Toll Free 800-424-9530

Local 202-694-1100

FEC Form	1 (Revised 02/2009)	Page 2
TYPE OF COI		
(a)	This committee is a principal campaign committee. (Complete the candidate information below.)
	This committee is an authorized committee, and is NOT a principal campaign committee. (Con information below.)	plete the candidate
Name of Candidate		
Candidate Party Affiliation	Office Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Comn	nittee: (National, State	(Democratic,
(d)	This committee is a or subordinate) committee of the	Republican, etc.) Party
Political Act	ion Committee (PAC):	
(e) x	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected organization is
	Corporation Corporation w/o Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
	This committee supports/opposes more than one Federal candidate, and is NOT a separate scommittee. (i.e., nonconnected committee)	egregated 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.)	
Joint Fundra	aising Representative:	
_	This committee collects contributions, pays fundraising expenses and disburses net proceeds for t	wo or more political
ш ,	committees/organizations, at least one of which is an authorized committee of a federal candidate.	
	This committee collects contributions, pays fundraising expenses and disburses net proceeds for the committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political
Comm	ittees Participating in Joint Fundraiser	
1.	FEC ID number	
2. <u> </u>	FEC ID number	
3.		
4.		

FFC Form 1 (Povised (03/3000/	Daga 2
FEC Form 1 (Revised C		Page 3
	_	
	away Energy PAC	
6. Name of Any Connected O	Organization, Affiliated Committee, Joint Fundraising Representative,	, or Leadership PAC Sponsor
Berkshire Hathaway E	nergy Company	
Mailing Address	PO Box 657	
	Des Moines IA	50306-0657
	CITY STATE	ZIP CODE
Relationship: x Connected	d Organization Affiliated Committee Joint Fundraising Representa	ative Leadership PAC Sponsor
 Custodian of Records: Iden books and records. 	ntify by name, address (phone number optional) and position of the p	erson in possession of committee
Piper, Stev	ven, D, ,	
Full Name LILL Mailing Address	9416 Enfield Drive	
·	1	
	Johnston IA	50131
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	515
B. Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; assistant treasurer).	; and the name and address of
Full Name Piper, Stev	/en, D, ,	
Mailing Address	9416 Enfield Drive	
	Johnston	50131
	CITY STATE	ZIP CODE
Title or Position Treasurer	Telephone number	515 - 281 - 2789

FEC Forr	1 (Revised 02/2009)	Page 4
Full Name of Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position	Telephone number	[-] [
Name of Bank, Mailing Address	xes or maintains funds. Depository, etc. Bankers Trust Company 665 Locust	
	Des Moines IA 50309	
	CITY STATE	ZIP CODE
Name of Bank,	Depository, etc.	
Mailing Address		
Mailing Address		
Mailing Address		

: 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 Russell PAC has filed its termination with the FEC and therefore, the Russell PAC is no longer affiliated with the Berkshire Hathaway Energy PAC. This amended Statement of Organization Form 1 removes the Russell PAC as an affiliate.

Form/Schedule: Transaction ID:

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

FEC Form 1S (Revised 02/2017)

5(g)	or(h). Joint Fundraisin	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
6.		Organization, Affiliated Committee, Joint Fundra		, or Leadership PAC Sponsor
	ACME Brick Com	pany Good Government Fund for Fed	leral Elections	
	Mailing Address	PO Box 425		
		Fort Worth	TX TX	76101
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	d Organization X Affiliated Committee Joint I	Fundraising Representa	tive Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
		1		
				1
		CITY ▲	STATE ▲	ZIP CODE ▲
	TITLE OR POSITION	▼		
		Tol.	anhana Numbar	1-1 1-1 1
		Tel	ephone Number	
9	Banks or Other Deposito			s funds holds accounts rents
9.	Banks or Other Deposito safety deposit boxes or ma	ries: List all banks or other depositories in which the		s funds, holds accounts, rents
9.		ries: List all banks or other depositories in which the		s funds, holds accounts, rents
9.	Name of Bank,	ries: List all banks or other depositories in which the		s funds, holds accounts, rents
9.	Name of Bank, Depository, etc.	ries: List all banks or other depositories in which the		s funds, holds accounts, rents
9.	Name of Bank, Depository, etc.	ries: List all banks or other depositories in which the		s funds, holds accounts, rents

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

FEC Form 1S (Revised 02/2017)

	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	l Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
BNSF Railway C	ompany RAILPAC (BNSF RAILPAC)		
Mailing Address	PO Box 961039		
	1		
	Fort Worth	, TX	76161
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
esignated Agent: Identi	fy by name, address (phone number - optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)		
	fy by name, address (phone number – optional)		
Full Name	fy by name, address (phone number – optional)		
Full Name	fy by name, address (phone number – optional)		
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	CITY A	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank,	CITY A CITY A pries: List all banks or other depositories in which	elephone Number	
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	CITY A CITY A pries: List all banks or other depositories in which	elephone Number	
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank,	CITY A CITY A pries: List all banks or other depositories in which	elephone Number	
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	CITY A CITY A pries: List all banks or other depositories in which	elephone Number	

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

	g Participant:				
1.			FEC I	D number	С
2.			FEC I	D number	С
3.			FEC I	D number	С
4.			FEC I	D number	C
=	_		_	_	e, or Leadership PAC Spo
GOVERNMENT E	MPLOYEES IN	ISURANCE CON	MPANY POL	ITICAL /	ACTION COMMITTI
	I ONE GEICO PLAZ	^			
Mailing Address	ONE GEICO PLAZ	<u> </u>			
	WASHINGTON			DC	20076
Relationship:		CITY A		STATE ▲	ZIP CODE A
Connected	Organization X A	ffiliated Committee	Joint Fundraisin	g Represent	tative Leadership PAC
esignated Agent: Identify	by name, address (phone number – optior	nal)		
esignated Agent: Identify Full Name	by name, address (phone number – option	nal)	1 1 1 1	
	by name, address (phone number – option	nal)		
Full Name	by name, address (phone number – option	nal)		
Full Name	by name, address (nal)		
Full Name				STATE A	ZIP CODE A
Full Name					
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor	▼ ies: List all banks or	CITY A	Telephone N	lumber	
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or ma	▼ ies: List all banks or	CITY A	Telephone N	lumber	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor of the deposition boxes or main arms of Bank,	▼ ies: List all banks or	CITY A	Telephone N	lumber	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor aftery deposit boxes or material deposition are of Bank,	▼ ies: List all banks or	CITY A	Telephone N	lumber	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or ma ame of Bank, epository, etc.	▼ ies: List all banks or	CITY A	Telephone N	lumber	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or ma ame of Bank, epository, etc.	▼ ies: List all banks or	CITY A	Telephone N	lumber	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page ____ **of** _____13___

h). Joint Fundraisi	. .	FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	I Organization, Affiliated Committee, Joint Fundra		
Mailing Address	4747 McLane Parkway		
	Temple	TX	76503
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		Fundraising Representa	ative Leadership PAC Sp
	Affiliated Committee Joint fy by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
		Fundraising Representa	Leadership PAC S
esignated Agent: Identi		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representa	Leadership PAC S
esignated Agent: Identi			Leadership PAC S
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
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esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY Te pries: List all banks or other depositories in which the	STATE A lephone Number	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of Bank,	fy by name, address (phone number – optional) CITY Te pries: List all banks or other depositories in which the	STATE A lephone Number	ZIP CODE A
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi	g		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
	d Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
MidAmerican End	ergy Company PAC		
AA-Waa Aalalaa	666 Grand Avenue		
Mailing Address	P.O. Box 657		
			50000 0057
	Des Moines	IA	50306-0657
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee Joint fy by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Sp
		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)	t Fundraising Represent	
esignated Agent: Identi	fy by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY To	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
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esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management and ma	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
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esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

FEC Form 1S (Revised 02/2017)

5(g)	or(h). Joint Fundraisin	g Participant:		
	1.	 	FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
6.		Organization, Affiliated Committee, Joint Fundr		, or Leadership PAC Sponsor
	PacifiCorp - Pacifi	c Power/Rocky Mountain Power PA) 	
		825 NE Multnomah		
	Mailing Address			
		Suite 2000 LCT		
		Portland	OR	97232
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	d Organization X Affiliated Committee Joint	Fundraising Representa	tive Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number – optional)		
		, ,		ı
	Full Name			
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
			elephone Number	
9.	Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories in which intains funds.	the committee deposits	s funds, holds accounts, rents
9.	safety deposit boxes or ma		the committee deposits	s funds, holds accounts, rents
9.		uintains funds.	the committee deposits	s funds, holds accounts, rents
9.	Name of Bank,	uintains funds.		s funds, holds accounts, rents
9.	Name of Bank, Depository, etc.	uintains funds.		s funds, holds accounts, rents
9.	Name of Bank, Depository, etc.	uintains funds.		s funds, holds accounts, rents

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundrais i	ng Farticipant.		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
	d Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
NETJETS, Inc. P	'AC		
	4111 Bridgeway Avenue		
Mailing Address	4111 Bildgeway Avenue		
	Columbus	OH L	43219
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization X Affiliated Committee Join	nt Fundraising Represent	ative Leadership PAC Sp
	ed Organization Affiliated Committee Join	nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	ative Leadership PAC Sp
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esignated Agent: Identi	ify by name, address (phone number – optional)		
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esignated Agent: Identification Full Name	ify by name, address (phone number – optional) CITY Ories: List all banks or other depositories in which	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	l Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spon
NV Energy Politic	cal Action Committee		
	P.O. Box 81500		
Mailing Address	1.0. 50. 01000		
	Las Vegas	NV NV	89180
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		nt Fundraising Represent	ative Leadership PAC Sp
	Affiliated Committee Join Join fy by name, address (phone number – optional)	nt Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Representa	Leadership PAC Sp
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