| Image# 10931783561 |  |
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| FEC<br>FORM 1   | STATEMENT OF<br>ORGANIZATION<br>(See instructions)   | Office use only                         |
|---|--|---|
| 1. NAME OF<br>COMMITTEE (in t                         | iull) (Check if name Example: If typying, type over the lines  | 12FE4M5                                 |
| XTO Energy In   | c. Fed PAC   |   |
| ADDRESS (number and s                                 | 810 Houston Street   |   |
| (Check if address is changed)                         | Fort Worth   | TX 76102 _                              |
|   | CITY   | STATE ZIP CODE                          |
| COMMITTEE'S E-MAI<br>(Check if address<br>is changed) | L ADDRESS (Please provide only one e-mail address)   |   |
| COMMITTEE'S WEB                                       | PAGE ADDRESS (URL)   |   |
| (Check if address<br>is changed)                      |  |   |
| 2. DATE 1.1   | / D D / Y Y Y<br>08 / 2010   |   |
| 3. FEC IDENTIFICA                                     | TION NUMBER C C00308718  |   |
| 4. IS THIS STATEM                                     | ENT NEW (N) OR X AMENDED (A)   | -                                       |
| I certify that I have examin                          | ned this Statement and to the best of my knowledge and belief it is true, correct an   | d complete                              |
| Type or Print Name of                                 | Treasurer Nancy Cushman  |   |
| Signature of Treasurer                                | Electronically Filed by Nancy Cushman  | Date <b>M M M M D D D D D D D D D D</b> |
| NOTE: Submission of fal                               | se, erroneous, or incomplete information may subject the person signing this State<br>ANY CHANGE IN INFORMATION SHOULD BE REPORTED V |   |
| Office<br>Use<br>Only                                 | For further information of<br>Federal Election Commiss<br>Toll Free 800-424-9530   |   |

| Federal Election Commission                  | FEC FORM 1        |
|--|-------------------|
| Toll Free 800-424-9530<br>Local 202-694-1100 | (Revised 02/2009) |

(h)

|             |                          | orm 1 (Revised 02/2009)  | Page 2                                  |
|-------------|--------------------------|--|---|
| . TYF       | PE OF CO                 | MMITTEE (Check One)  |   |
| Can         | didate Co                | ommittee:  |   |
| (a)         | Ц                        | 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 t information below.)                      | he candidate                            |
|             | ne of<br>ndidate         |  |   |
|             | ndidate<br>ty Affiliatic | on Office Sought: House Senate President   | State District                          |
| (c)         |                          | This committee supports/opposes only one candidate, and is NOT an authorized committee.  |   |
|             | ne of<br>ndidate         |  |   |
| Part<br>(d) | ty Comm                  | ittee: (National, State   This committee is a (or subordinate) committee of the  | (Democratic,<br>Republican,etc.) Party. |
| Poli        | itical Acti              | on Committee (PAC):  |   |
| (e)         | X                        | This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected                                   | ed organization is a:                   |
|             |                          | X Corporation Corporation w/o Capital Stock  | bor Organization                        |
|             |                          | Membership Organization Trade Association C  | ooperative                              |
| (1)         |                          | In addition, this committee is a Lobbyist/Registrant PAC.  |   |
| (f)         |                          | This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate committee. (i.e., nonconnected committee) | d 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 Fundrai                | sing Representative:   |   |
| (g)         |                          | This committee collects contributions, pays fundraising expenses and disburses net proceeds for two of                                     | r more political                        |

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 | C |
|----|----------|---------------|---|
| 2. |          | FEC ID number | C |
| 3. |          | FEC ID number | C |
| 4. | <u> </u> | FEC ID number | C |

FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

**XTO Energy Inc. Fed PAC** 

| 6. | Name of Any Connected Or                  | ganization, Affiliated Committee, Joint                                  | Fundraising Representative, or Le | adership PAC Sponsor   |
|----|---|--|-----------------------------------|------------------------|
|    | XTO Energy inc.                           |  |                                   |                        |
|    |   |  |                                   |                        |
|    | Mailing Address                           | 810 Houston Street   |                                   |                        |
|    |   |  |                                   |                        |
|    |   | Forth Worth  | <b>ТХ</b>                         | <b>76102</b> ] _ [ ]   |
|    |   | СІТУ   | STATE 🛦                           | ZIP CODE 🔺             |
|    | Relationship:<br>X Connected Organization | Affiliated Committee   | Joint Fundraising Representative  | Leadership PAC Sponsor |
| 7. | possession of Committee                   |  | mber optional), and position o    | f the person in        |
|    | Full Name                                 | ica Bank, PAC Services   |                                   |                        |
|    | Mailing Address                           | P.O. Box 75000   |                                   |                        |
|    |   | MC 2250  |                                   |                        |
|    |   | Detroit  | MI                                | 48275 _ 2250           |
|    | Title or Position ¥                       | CITY A   | STATE                             |                        |
|    | Recordkee                                 | eper   | Telephone number248               |                        |
| 8. | name and address of any<br>Full Name      | and address (phone number option<br>designated agent (e.g., assistant to |                                   | mittee; and the        |

| of Treasurer        | Nancy Cushinan |                      |                     |              |
|---------------------|----------------|----------------------|---------------------|--------------|
| Mailing Address     |                | P.O. Box 75000, MC 2 | 250                 |              |
|                     |                | Detroit              | MI                  | 48275 _ 2250 |
| Title or Position ♥ |                | CITY A               | STATE               |              |
| Trea                | asurer         |                      | Telephone number248 |              |

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|--|---|---------------------------------------|--------------------|----------|
| Full Name of<br>Designated<br>Agent  | Anne Weiskittel   |                                       |                    |          |
| Mailing Address  | 810 Houston Street  |                                       |                    |          |
|  | Fort Worth  | TX_                                   | 76102              |          |
| Title or Position ▼  | CITY A  | STATE 🛦                               | ZIP                | CODE A   |
| Asst.  | Freasurer   | Telephone number                      | 17870              | 2800     |
| safety deposit boxes or r  | naintains funds.  | ich the committee deposits fu         | nds, holds account | s, rents |
| safety deposit boxes or r<br>Name of Bank, Deposito  | naintains funds.  | ich the committee deposits fu         | nds, holds account | s, rents |
| Banks or Other Depos<br>safety deposit boxes or r<br>Name of Bank, Deposito                      | naintains funds.<br>ry, etc.<br>omerica Bank  | ich the committee deposits fu         | nds, holds account |          |
| safety deposit boxes or r<br>Name of Bank, Deposito  | naintains funds.<br>ry, etc.<br>omerica Bank  |                                       |                    |          |
| safety deposit boxes or r<br>Name of Bank, Deposito  | naintains funds.<br>ry, etc.<br>omerica Bank<br>P.O. Box 75000<br>P.O. Box 75000  |                                       |                    |          |
| safety deposit boxes or r<br>Name of Bank, Deposito  | naintains funds.<br>ry, etc.<br><b>omerica Bank</b><br>P.O. Box 75000<br>Detroit<br>CITY A  | · · · · · · · · · · · · · · · · · · · |                    | <br>     |
| safety deposit boxes or r<br>Name of Bank, Deposito  | naintains funds.<br>ry, etc.<br><b>omerica Bank</b><br>P.O. Box 75000<br>Detroit<br>CITY A  |                                       |                    | <br>     |
| safety deposit boxes or r<br>Name of Bank, Deposito  | naintains funds.<br>ry, etc.<br><b>Omerica Bank</b><br>P.O. Box 75000<br><b>P.O. Box 75000</b><br><b>Detroit</b><br><b>CITY A</b><br>ry, etc. |                                       |                    | <br>     |
| safety deposit boxes or r<br>Name of Bank, Deposito<br>Mailing Address<br>Name of Bank, Deposito | naintains funds.<br>ry, etc.<br><b>Omerica Bank</b><br>P.O. Box 75000<br><b>P.O. Box 75000</b><br><b>Detroit</b><br><b>CITY A</b><br>ry, etc. |                                       |                    | <br>     |
| safety deposit boxes or r<br>Name of Bank, Deposito<br>Mailing Address<br>Name of Bank, Deposito | naintains funds.<br>ry, etc.<br><b>Omerica Bank</b><br>P.O. Box 75000<br><b>P.O. Box 75000</b><br><b>Detroit</b><br><b>CITY A</b><br>ry, etc. |                                       |                    | <br>     |

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|--|--|-----------------------------|---------------------|
| Banks or Other Depositorion safety deposit boxes or main |  | •                           | -                   |
| Name of Bank, Depository, e                              | tc.  |                             | [ ADDITIONAL ]      |
|  |  |                             |                     |
| Mailing Address  |  |                             |                     |
|  |  |                             |                     |
|  |  |                             |                     |
|  |  | STATE <b>⊿</b>              | ZIP CODE            |
|  |  |                             | [ ADDITIONAL ]      |
| Name of Any Connected O                                  | rganization, Affiliated Committee, Joint Fundraising | g Representative, or Leader | ship PAC Sponsor    |
| Exxon Mobil Corporat                                     | ion Political Action Committee (ExxonMobil           | PAC)                        |                     |
|  |  |                             |                     |
| Mailing Address  | PO Box 20503   |                             |                     |
|  |  |                             |                     |
|  | Indianapolis   |                             | <b>46220</b>        |
| Relationship:  | CITY   | STATE 🛦                     | ZIP CODE            |
| Connected Organization                                   | X Affiliated Committee Joint Fundraisin              | g Representative            | dership PAC Sponsor |
| Designated Agent   |  |                             | [ ADDITIONAL ]      |
| Full Name  |  |                             |                     |
| Mailing Address  |  |                             |                     |

| Title or Position ♥         | STATE                |                |
|-----------------------------|----------------------|----------------|
|                             | <br>Telephone number |                |
| oint Fundraiser Participant |                      | [ ADDITIONAL ] |
|                             | FEC ID number        |                |