Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 X COMMITTEE (in full) is changed) over the lines. Big Sky Values P.O. Box 1330 ADDRESS (number and street) (Check if address is changed) Helena 59624 MT CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS sue@bluewavepolitics.com (Check if address X is changed) Optional Second E-Mail Address shayne@bluewavepolitics.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2021 C00741611 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. Jackson, Sue, , , Type or Print Name of Treasurer Jackson, Sue,,, [Electronically Filed] 04 2021 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

Local 202-694-1100

FF0 =	4 (Davided 00/0000)	D 0
	orm 1 (Revised 02/2009) COMMITTEE	Page 2
	e 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. (Compinformation below.)	plete the candidate
Name of Candidate		
Candidate Party Affiliat	ion Office Sought: House Senate President	State District
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Cor		_
(d)		Democratic, Republican, etc.) Party
Political A	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nected organization is
_	Corporation Corporation w/o Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f) x	This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (i.e., nonconnected committee)	gregated 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 Fund	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw committees/organizations, at least one of which is an authorized committee of a federal candidate.	o 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.	o or more political
Com	nmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.		

TEC TOTAL T (NEV	rised 02/2009)	Page 3
Write or Type Committee		
Big Sky Valu	ies	
. Name of Any Connec	cted Organization, Affiliated Committee, Joint Fundraising Representative, or Le	adership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
	Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponso
books and records.	: Identify by name, address (phone number optional) and position of the person	in possession of committee
Jack	sson, Sue, , ,	
	P.O. Box 1330	
Mailing Address	1	
	Helena MT 59	0624
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	- 592 - 9826
Treasurer: List the nan any designated agent (ne and address (phone number optional) of the treasurer of the committee; and t e.g., assistant treasurer).	the name and address of
Full Name Jack of Treasurer	son, Sue, , ,	
Mailing Address	P.O. Box 1330	
	Helena	624
Title or Position , Treasurer	CITY STATE	ZIP CODE 592 9826

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Full Name of Designated Agent	Thoman, Shayne, , ,	
Mailing Address	PO Box 1330	
	Helena MT 59624	
	CITY STATE ZIP	CODE
Title or Position Assistant Treas	surer 919 592	9826
safety deposit b	r Depositories: List all banks or other depositories in which the committee deposits funds, holds achooses or maintains funds. Depository, etc. Amalgamated Bank	
safety deposit b	Depository, etc. Amalgamated Bank 1825 K Street NW	ccounts, rents
safety deposit by Name of Bank,	Depository, etc. Amalgamated Bank 1825 K Street NW	ccounts, rents
safety deposit by Name of Bank,	Depository, etc. Amalgamated Bank 1825 K Street NW Washington DC 20006	P CODE
safety deposit by Name of Bank,	Depository, etc. Amalgamated Bank 1825 K Street NW Washington CITY STATE ZIF	
safety deposit by Name of Bank, Mailing Address	Depository, etc. Amalgamated Bank 1825 K Street NW Washington CITY STATE ZIF	
safety deposit by Name of Bank, Mailing Address	Depository, etc. Amalgamated Bank 1825 K Street NW Washington CITY STATE ZIF Depository, etc.	
safety deposit by Name of Bank, Mailing Address Name of Bank,	Depository, etc. Amalgamated Bank 1825 K Street NW Washington CITY STATE ZIF Depository, etc.	
safety deposit by Name of Bank, Mailing Address Name of Bank,	Depository, etc. Amalgamated Bank 1825 K Street NW Washington CITY STATE ZIF Depository, etc.	

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Form/Schedule: F1A
Transaction ID:

Consistent with the stipulated judgment in Carey v. FEC, this committee intends to establish a separate bank account to deposit and withdraw funds raisedin unlimited amounts from individuals, corporations, labor organizations, and/or other political committees. The funds maintained in this separate account will not be used to make contributions, whether direct, in-kind, or via coordinated communications, or coordinated expenditures, to federal candidates or committees.

Form/Schedule: Transaction ID: