FEC

Only

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) Comcast Corporation & NBCUniversal Political Action Committee - Federal 1701 JFK Blvd, 49th Floor ADDRESS (number and street) (Check if address is changed) Philadelphia 19103 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address Madison_Eggert-Crowe@comcast.com is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2024 C00248716 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. Type or Print Name of Treasurer Eggert-Crowe, Madison, , 03 28 2024 Signature of Treasurer Eggert-Crowe, Madison, , , Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. 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

FEC Form 1 (Revised 03/2022)	Page 2
. TYPE OF COMMITTEE:	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate inform	nation below.)
(b) This committee is an authorized committee, and is NOT a principal campaign com information below.)	mittee. (Complete the candidate
Name of Candidate '''', '''', '''', '''', '''', '''', '''', '''', ''''', '''', ''''', ''''', ''''', ''''', ''''', ''''', ''''''	
Candidate Office Party Affiliation Sought: House Senate	State President District
(c) This committee supports/opposes only one candidate, and is NOT an authorized c	
Name of Candidate	
Party Committee:	
(d) This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party
Political Action Committee (PAC):	
(e) X This committee is a separate segregated fund. (Identify connected organization on	line 6.) Its connected organization is a:
X 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 committee. (i.e., nonconnected committee)	separate segregated fund or party
In addition, this committee is a Lobbyist/Registrant PAC.	
In addition, this committee is a Leadership PAC. (Identify sponsor on line	9 6.)
(g) This committee is an independent expenditure-only political committee (Super PAC).
In addition, this committee is a Lobbyist/Registrant PAC.	
(h) This committee is a political committee with both contribution and non-contribution	accounts (Hybrid PAC).
In addition, this committee is a Lobbyist/Registrant PAC.	
Joint Fundraising Representative:	
(i) This committee collects contributions, pays fundraising expenses and disburses ne committees/organizations, at least one of which is an authorized committee of a fe	•
(j) This committee collects contributions, pays fundraising expenses and disburses ne committees/organizations, none of which is an authorized committee of a federal committee.	
Committees Participating in Joint Fundraiser	
1.	C
2.	C

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	FEC Form 1 (Revised 0	2/2009)	Page 3
V	Vrite or Type Committee Name		
	Comcast Corpor	ation & NBCUniversal Political Action Committee	e - Federal
6.	Name of Any Connected Or	ganization, Affiliated Committee, Joint Fundraising Representative, or Leaders	ship PAC Sponsor
	Comcast Corporation		
	Mailing Address	1701 JFK Blvd, 49th Floor	
	ag / taal.coo		
		Philadelphia PA 19103	
		CITY ▲ STATE ▲	ZIP CODE ▲
	Relationship: X Connected	Organization Affiliated Organization Joint Fundraising Representative	Leadership PAC Sponso
	netationship.	Jiganization Allillated Organization John Fundralsing Representative	Leadership FAC Sponso
7.	Custodian of Records: Identi	fy by name, address (phone number optional) and position of the person in possess	ion of committee
	books and records.		
	Jusyte, Gre	ta, , ,	
	Full Name		
	Mailing Address	1701 JFK Blvd	
	Ç	49th Floor	
		Philadelphia PA 19103	
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Custodian of Records	Telephone number 215 -	286 6613
		Telephone number	
	Tuesday 1 (2) (0) (1)		
3.	any designated agent (e.g., a	I address (phone number optional) of the treasurer of the committee; and the nassistant treasurer).	ame and address of

Full Name Eggert-Crowe, Madison, , , of Treasurer 1701 JFK Blvd Mailing Address 49th Floor _IPhiladelphia 19103 ZIP CODE ▲ CITY A STATE ▲ Title or Position ▼ 215 286 5561 Treasurer Telephone number

FEC Form 1	(Revised 02/2009)		Page 4
Full Name of Designated Agent	Pighini, Ernest, , ,		
Mailing Address	1701 JFK Boulevard		
	District the second sec	DA 1016	12
	Philadelphia	PA 1910	
Title or Position	CITY ▲	STATE ▲	ZIP CODE ▲
Assistant Treasur	rer 	one number 215 -	286 - 8036
. Banks or Other safety deposit box	Depositories: List all banks or other depositories in which the cases or maintains funds.	ommittee deposits funds, ho	olds accounts, rents
Name of Bank, D	epository, etc.		
	Wells Fargo Bank		
Mailing Address	1700 Market Street		
	Philadelphia	PA 1910	3
	CITY ▲	STATE ▲	ZIP CODE ▲
Name of Bank, D	epository, etc.		
Mailing Address			
	CITY ▲	STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

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

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h). Joint Fundraising	i di dolpant.			
1.		FEC	ID number	C
2.		FEC	ID number	С
3.		FEC	ID number	С
4.		FEC	ID number	C
ame of Any Connected C	Organization, Affiliated Committee, Joint	Fundraising Re	epresentativ	e, or Leadership PAC Spon
Mailing Address	1		1 1 1 1	
-				
Relationship:	CITY A		STATE A	ZIP CODE ▲
Connected	Organization Affiliated Committee	Joint Fundraisi	ng Represent	ative Leadership PAC Sp
esignated Agent: Identify	by name, address (phone number – option		ng Hepresent	ative Leadership PAC Sp
	by name, address (phone number – option		ng Hepresent	ative Leadership PAC Sp
esignated Agent: Identify , McCue, Ji	by name, address (phone number – option		ng Hepresent	ative Leadership PAC Sp
esignated Agent: Identify McCue, Ji Full Name	by name, address (phone number – option		ng Hepresent	ative Leadership PAC S
esignated Agent: Identify McCue, Ji Full Name	by name, address (phone number – option		PA	Leadership PAC Sp
esignated Agent: Identify McCue, Ji Full Name	by name, address (phone number – option m, , , ,			
esignated Agent: Identify McCue, Ji Full Name Mailing Address	by name, address (phone number – option m, , , ,		PA STATE A	19103
esignated Agent: Identify McCue, Ji Full Name Mailing Address TITLE OR POSITION Assistant Treasurer	by name, address (phone number – option m, , , 1701 JFK Boulevard Philadelphia CITY	Telephone	PA STATE A	19103 ZIP CODE A
esignated Agent: Identify McCue, Ji Full Name Mailing Address TITLE OR POSITION Assistant Treasurer	by name, address (phone number – option m, , , 1701 JFK Boulevard Philadelphia CITY es: List all banks or other depositories in	Telephone	PA STATE A	19103 ZIP CODE A
esignated Agent: Identify McCue, Ji Full Name Mailing Address TITLE OR POSITION Assistant Treasurer anks or Other Depositori	by name, address (phone number – option m, , , 1701 JFK Boulevard Philadelphia CITY es: List all banks or other depositories in	Telephone	PA STATE A	19103 ZIP CODE A
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