FEC FORM 1	STATEMEI ORGANIZ	_	Offic	PAGE 1 / 4
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Caithness Corpo	oration PAC			
ADDRESS (number and street)	565 Fifth Avenue			
(Check if address is changed)	29th Floor			
is changed)	New York		NY 1001 STATE ▲	7
COMMITTEE'S E-MAIL ADDF	RESS			
(Check if address is changed)	gconboy@cenyc.com			
	Optional Second E-Mail Ad	dress		
COMMITTEE'S WEB PAGE A	DDRESS (URL)			
2. DATE 01 /	01 / Y Y Y Y 2011			
3. FEC IDENTIFICATION	NUMBER ► C c	00371062		
4. 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 Treasu	rer Ross D. Ain			
Signature of Treasurer	ss D. Ain	[Electronically Filed]	Date 06	D D / Y Y Y Y 15 / 2016
NOTE: Submission of false, erro	oneous, or incomplete information ANY CHANGE IN INFORMATI	may subject the person signing t ON SHOULD BE REPORTED W		penalties of 2 U.S.C. §437g.
Office Use Only		For further information c Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

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TYPE OF	COMMITTEE
Candidat	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. (Complete the candidate information below.)
Name of Candidate	L
Candidate Party Affilia	tion Office Sought: House Senate President District
(C)	This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name of Candidate	
Party Co	mmittee:
(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
	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 segregated fund or party committee. (i.e., nonconnected committee)
	In addition, this committee is a Lobbyist/Registrant PAC.
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)
Joint Fun	draising Representative:
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
(h)	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.
Cor	nmittees Participating in Joint Fundraiser
1.	FEC ID number
2.	FEC ID number
3.	FEC ID number
4.	FEC ID number

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Write or Type Committee Name

Caithness Corporation PAC

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Caithness Corr	oration	
Mailing Address	565 5th Avenue, 29th floor	
	New York	NY 10017
	CITY	STATE ZIP CODE
Relationship: X	Connected Organization Affiliated Committee Joint Fi	undraising Representative Leadership PAC Sponsor
7. Custodian of Rec books and records	ords: Identify by name, address (phone number optional)	and position of the person in possession of committee
- " · · · ·	Ross D. Ain	
Full Name	c/o Caithness Corp.	
Mailing Address		
	565 5th Ave., 29th fl.	
	New York	NY 10017
Title or Position	CITY	STATE ZIP CODE
	Telep	ohone number

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer	Ross D. Ain
Mailing Address	c/o Caithness Corp.
	565 5th Ave., 29th fl.
	New York NY 10017
	CITY STATE ZIP CODE
Title or Position Treasurer	Telephone number

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Full Name of Designated Agent	James D. Bishop, Jr.
Mailing Address	c/o Caithness Corporation
	565 5th Ave., 29th fl.
	New York NY 10017
	CITY STATE ZIP CODE
Title or Position	rer Telephone number = 921 9099

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

J.P. I	Morgan Chase		
Mailing Address	4 Chase Metrotech Center		
	14th floor		
	Brooklyn	NY 11245	
	CITY	STATE ZIP CODE	
Name of Bank, Depositor	y, etc.		
Mailing Address			
	CITY	STATE ZIP CODE	