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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. SONY PICTURES ENTERTAINMENT, INC. PAC 10202 W. WASHINGTON BLVD. ADDRESS (number and street) (Check if address is changed) **CULVER CITY** 90232 CA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS CARY@POLITICALLAW.COM (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 09 2014 C00282038 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. **CARY DAVIDSON** Type or Print Name of Treasurer CARY DAVIDSON [Electronically Filed] 07 2014 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 Only

Local 202-694-1100

	FEC Fo	rm 1 (Revised 02/2009)	Page <b>2</b>
		OMMITTEE  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
Nam Cand	e of didate		
	didate / Affiliati	on Sought: House Senate President	State CA District
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Con	nmittee:	Danasantia
(d)			Democratic, Republican, etc.) Party.
Poli	tical A	ction Committee (PAC):	
(e)	X	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cont	nected 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 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.)	
Join	t Fund	Iraising 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	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4		

Title or Position Treasurer

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Write or Type Committee		•
SONY PICTI	URES ENTERTAINMENT, INC. PAC	
		or Loadarchin DAC Spancar
	cted Organization, Affiliated Committee, Joint Fundraising Representative,	or Leadership PAC Sponsor
SONY PICTURES	SENTERTAINMENT, INC.	
Nation Address	10202 W. WASHINGTON BLVD.	
Mailing Address		
	CULVER CITY CA	90232
	CITY STATE	ZIP CODE
<ol><li>Custodian of Records books and records.</li></ol>	: Identify by name, address (phone number optional) and position of the p	
Full Name L	RY DAVIDSON  515 S. FIGUEROA ST., STE. 1110	
Full Name		
Full Name		90071
Full Name	515 S. FIGUEROA ST., STE. 1110	90071 ZIP CODE
Full Name  Mailing Address	515 S. FIGUEROA ST., STE. 1110  LOS ANGELES  CITY  STATE	
Full Name  Mailing Address  Title or Position  Custodian of Records	515 S. FIGUEROA ST., STE. 1110  LOS ANGELES  CITY  STATE	ZIP CODE  213 - 624 - 6200
Full Name  Mailing Address  Title or Position  Custodian of Records  I I I I I I I I I I I I I I I I I I I	S15 S. FIGUEROA ST., STE. 1110  LOS ANGELES  CITY  STATE  Telephone number  Telephone number  Telephone number	ZIP CODE  213 - 624 - 6200
Full Name  Mailing Address  Title or Position  Custodian of Records  Lulu Lulu Lulu Lulu Lulu Lulu Lulu Lul	CITY STATE  CITY Telephone number  Telephone number optional) of the treasurer of the committee; e.g., assistant treasurer).	ZIP CODE  213 - 624 - 6200
Full Name  Mailing Address  Title or Position  Custodian of Records	CA  CITY  STATE  Telephone number  ne and address (phone number optional) of the treasurer of the committee; e.g., assistant treasurer).  Y DAVIDSON	ZIP CODE  213 - 624 - 6200
Full Name  Mailing Address  Title or Position  Custodian of Records	CA  CITY  STATE  Telephone number  ne and address (phone number optional) of the treasurer of the committee; e.g., assistant treasurer).  Y DAVIDSON	ZIP CODE  213 - 624 - 6200

213

Telephone number

624

6200

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Full Name of Designated	FLORA YIN	
Agent		
Mailing Address	515 S. FIGUEROA ST., STE. 1110	
	LOS ANGELES CA 900	71
	CITY STATE	ZIP CODE
Title or Position  Assistant Treas	nurer	624 6200
Assistant fleas		- 624 - 6200
safety deposit bo Name of Bank, I	oxes or maintains funds.  Depository, etc.	
Name of Bank, I	Depository, etc.  CALIFORNIA BANK & TRUST  ,550 S. FLOWER ST., #100	
	Depository, etc.  CALIFORNIA BANK & TRUST  ,550 S. FLOWER ST., #100	
Name of Bank, I	Depository, etc.  CALIFORNIA BANK & TRUST  ,550 S. FLOWER ST., #100	71
Name of Bank, I	Depository, etc.  CALIFORNIA BANK & TRUST  550 S. FLOWER ST., #100	71 ZIP CODE
Name of Bank, I	CALIFORNIA BANK & TRUST  550 S. FLOWER ST., #100  LOS ANGELES  CA 900'  CITY  STATE	
Name of Bank, I	CALIFORNIA BANK & TRUST  550 S. FLOWER ST., #100  LOS ANGELES  CA 900'  CITY  STATE	
Name of Bank, I	Depository, etc.  CALIFORNIA BANK & TRUST  550 S. FLOWER ST., #100  LOS ANGELES  CITY  STATE  Depository, etc.	
Name of Bank, I	Depository, etc.  CALIFORNIA BANK & TRUST  550 S. FLOWER ST., #100  LOS ANGELES  CITY  STATE  Depository, etc.	
Name of Bank, I	Depository, etc.  CALIFORNIA BANK & TRUST  550 S. FLOWER ST., #100  LOS ANGELES  CITY  STATE  Depository, etc.	

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: 97 'A = G7 9 @ G B9 C I G'H9 L H'F9 @ 5 H98 'HC'5 'F9 DCF HZ'G7 < 98 I @ 'CF' ± H9 A ± N5 H± C B

Form/Schedule: F1A Transaction ID:

CHANGING ASSISTANT TREASURER

Form/Schedule: Transaction ID: