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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. OVIO INC PAC 1811 E. NORTHROP BLVD ADDRESS (number and street) (Check if address is changed) CHANDLER 85286 ΑZ CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS mike@mccauleyassociatespc.com (Check if address X is changed) Optional Second E-Mail Address steve@mccauleyassociatespc.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2022 C00478404 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. Kump, Kaitlyn, , , Type or Print Name of Treasurer Kump, Kaitlyn,,, [Electronically Filed] 01 22 2022 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 Form	1 (Revised 02/2009)	Page 2
TYPE OF COM		
(a) T	his committee is a principal campaign committee. (Complete the candidate information below.	
	his committee is an authorized committee, and is NOT a principal campaign committee. (Comformation below.)	plete the candidate
Name of Candidate		
Candidate Party Affiliation	Office Sought: House Senate President	State
(c) T	his committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Comm	ittee: (National, State	(Democratic,
(d) T	his committee is a or subordinate) committee of the	Republican, etc.) Party
Political Acti	on Committee (PAC):	
(e) x T	his committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor	nnected organization is
	Corporation Corporation w/o Capital Stock	Labor Organization
[Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
	his committee supports/opposes more than one Federal candidate, and is NOT a separate sommittee. (i.e., nonconnected committee)	egregated 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 Fundrai	sing Representative:	
_	is committee collects contributions, pays fundraising expenses and disburses net proceeds for to	vo or more political
CC	ommittees/organizations, at least one of which is an authorized committee of a federal candidate.	
	is committee collects contributions, pays fundraising expenses and disburses net proceeds for to emmittees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political
Commit	tees Participating in Joint Fundraiser	
1	FEC ID number	
2	FEC ID number	
3		
4.		

FEC Form 1 (Revised (02/2009)	 Page 3
Write or Type Committee Name		<u> </u>
ZOVIO INC PA	С	
6. Name of Any Connected C	Organization, Affiliated Committee, Joint Fundraising Representative, or Leadersh	nip PAC Sponsor
Zovio Inc		
	1811 E. Northrop Blvd.	
Mailing Address		
	Chandler AZ 85286	
	CITY STATE	ZIP CODE
Relationship: 🗷 Connected	d Organization Affiliated Committee Joint Fundraising Representative Lea	dership PAC Sponsor
 Custodian of Records: Ider books and records. 	ntify by name, address (phone number optional) and position of the person in pos-	session of committee
McCauley,	Mike, , ,	ı
Full Name Mailing Address	420 East South Temple	
Ü	Ste 390	
	Salt Lake City UT 84111	
Title or Position	CITY STATE	ZIP CODE
CPA		202 7284
3. Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and the nar assistant treasurer).	ne and address of
Full Name Kump, Kait of Treasurer	tlyn, , ,	
Mailing Address	1811 E Northrop BLVD	
	Chandler	
Title or Position		ZIP CODE
PAC Treasurer		710 - 0540

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Full Name of Designated Agent	Kump, Kaitlyn, , ,	
Mailing Address	1811 E Northrop BLVD	
	Chandler AZ 8528	
Title or Position	CITY STATE	ZIP CODE
PAC Treasurer		710 - 0540
banks or Utner	r Depositories: List all banks or other depositories in which the committee deposits funds, h	noius accounts, rents
safety deposit bo Name of Bank, I	oxes or maintains funds. Depository, etc.	
safety deposit bo	oxes or maintains funds. Depository, etc. Comerica Bank PO Box 75000	
safety deposit bo Name of Bank, [oxes or maintains funds. Depository, etc. Comerica Bank PO Box 75000	
safety deposit bo Name of Bank, [oxes or maintains funds. Depository, etc. Comerica Bank PO Box 75000	
safety deposit bo Name of Bank, [Depository, etc. Comerica Bank PO Box 75000	
safety deposit bo Name of Bank, [Detroit CITY MI 4827	75
safety deposit bo Name of Bank, [Mailing Address	Detroit CITY MI 4827	75
safety deposit bo Name of Bank, [Mailing Address	Depository, etc. Comerica Bank PO Box 75000 Detroit CITY STATE Depository, etc.	75
Name of Bank, I	Depository, etc. Comerica Bank PO Box 75000 Detroit CITY STATE Depository, etc.	75
Name of Bank, I	Depository, etc. Comerica Bank PO Box 75000 Detroit CITY STATE Depository, etc.	75

: 97 'A = G7 9 @ G B9 CI G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCF HZ G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: F1N Transaction ID:

Amended for Custodian of Records

Form/Schedule: Transaction ID: