(Revised 06/2012)

FEC

Only

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. BASIN ELECTRIC POWER COOPERATIVE POLITICAL ACTION COMMITTEE (BASIN ELECTRIC PAC) 1717 E INTERSTATE AVE ADDRESS (number and street) (Check if address is changed) **Bismarck** 58503-0542 ND CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS measton@bepc.com (Check if address is changed) Optional Second E-Mail Address outsourcing@aristotle.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2024 C00220269 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 Easton, Madeline, , 04 04 2024 Signature of Treasurer Easton, Madeline, . . 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

Toll Free 800-424-9530

Local 202-694-1100

E	EC Form 1 (Revised 03/2022)	Page 2
	TYPE OF COMMITTEE:	
	Candidate 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 information below.)	candidate
	Name of Candidate	
	Candidate Office Party Affiliation Sought: House Senate President	State
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name of Candidate	
	Party Committee:	
	(d) This committee is a (National, State or subordinate) committee of the Republican, e	tc.) 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:
	Corporation Corporation w/o Capital Stock Labor Org	anization
	Membership Organization Trade Association X Cooperative	re
	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 committee. (i.e., nonconnected committee)	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.)	
	(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 net proceeds for two or a committees/organizations, at least one of which is an authorized committee of a federal candidate.	nore political
	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or recommittees/organizations, none of which is an authorized committee of a federal candidate.	more political
	Committees Participating in Joint Fundraiser	
	1 C	

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٧	Vrite or Type Committee Name		
	BASIN ELECTRIC POV	VER COOPERATIVE POLITICAL ACTION COMM	ITTEE (BASIN ELECTRIC PAC)
6.	Name of Any Connected Or	ganization, Affiliated Committee, Joint Fundraising Repres	sentative, or Leadership PAC Sponsor
	Basin Electric Power	Co-op	1
		1717 E Interstate Ave	
	Mailing Address	1717 E Incistate Ave	
		1	
		Bismarck	ND 58503-0542
		CITY ▲	STATE ▲ ZIP CODE ▲
	Relationship: X Connected	Organization Affiliated Organization Joint Fundraising	Representative Leadership PAC Sponso
			_
7.	Custodian of Records: Identi books and records.	fy by name, address (phone number optional) and position of	the person in possession of committee
	books and records.		
	Easton, Ma	deline, , ,	
	Full Name		
	Mailing Address	1717 E Interstate Ave	
		I	
		Pianasal	ND 50500 0540
		Bismarck	ND 58503-0542 - -
		CITY ▲ S	STATE ▲ ZIP CODE ▲
	Title or Position ▼		
	Custodian of Records		701 _ 557 _ 5416
		Telephone numb	per
_			
8.	Treasurer: List the name and any designated agent (e.g., a	I address (phone number optional) of the treasurer of the ossistant treasurer).	committee; and the name and address of
		,	
	Full Name Easton, Ma	deline, , ,	
	Oi lieasulei	1717 E Interstate Ave	
	Mailing Address	1717 E Illeistate Ave	
		1	
		Bismarck	ND 58503-0542
			13333 33.2
		CITY ▲	STATE ▲ ZIP CODE ▲
	Title or Position ▼		
	Treasurer	Telephone numb	per 701 - 557 - 5416

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Full Name of Designated Agent	Easton, Madeline, , ,	
Mailing Address	1717 E Interstate Ave	
	Bismarck ND	58503-0542
	CITY ▲ STATE ▲	ZIP CODE ▲
Title or Position		704
Designated Agen	Telephone number	701 - 557 - 5416
	Depositories: List all banks or other depositories in which the committee deposits tixes or maintains funds.	funds, holds accounts, rents
Name of Bank, D	epository, etc.	
	Bravera Bank	
Mailing Address	320 N 4th St	
	Bismarck	58501
	CITY ▲ STATE ▲	ZIP CODE ▲
Name of Bank, D	epository, etc.	
Mailing Address		
	CITY ▲ STATE ▲	ZIP CODE ▲

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

Form/Schedule: F1A Transaction ID:

This amendment is to update the committee's affiliated committee name.

Form/Schedule: Transaction ID:

FEC Form 1S (Revised 02/2017)

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

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ı ayc	O.		

h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
lama af Amy Commontad	Ourselinstein Affiliated Committee Laint Tune	lucioina Donyocontetivy	a ay Landayahin DAC Chan
-	Organization, Affiliated Committee, Joint Fundic Cooperative Association America's Electric		
Mailing Address	4301 Wilson Blvd		1 1 1 1 1 1 1 1 1 1
	Arlington	, VA	22203-1819
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
Connecte	d Organization X Affiliated Committee Join	nt Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identii	y by name, address (phone number – optional)		
esignated Agent: Identif	y by name, address (phone number – optional)		
	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	CITY A	STATE STATE Felephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank,	CITY A City A pries: List all banks or other depositories in which	Telephone Number	
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or m ame of Bank, epository, etc.	CITY A City A pries: List all banks or other depositories in which	Telephone Number	
Full Name Mailing Address TITLE OR POSITION	CITY A City A pries: List all banks or other depositories in which	Telephone Number	
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	CITY A City A pries: List all banks or other depositories in which	Telephone Number	