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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) Lumen Technologies, Inc. Political Action Committee 660 North Capitol Street ADDRESS (number and street) Suite 240 (Check if address is changed) Washington 20001 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS brian.adkins@lumen.com (Check if address is changed) Optional Second E-Mail Address steven.k.brewer@lumen.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2021 C00419911 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. Adkins, Brian, , , Type or Print Name of Treasurer Adkins, Brian, , , [Electronically Filed] 15 2021 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

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	COMMITTEE 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					
Candidate Party Affiliat	Office Sought: House Senate President	State			
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Name of Candidate					
Party Cor		Democratic,			
(d)		Republican, etc.) Party.			
Political A	action Committee (PAC):				
(e) x	nected organization is a				
	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 se 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 Fund	draising 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 tw 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					

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Write or Type Committee Nar	me		
Lumen Techno	ologies, Inc. Political	Action Committe	ee
6. Name of Any Connected	Organization, Affiliated Committee, J	oint Fundraising Representati	ve, or Leadership PAC Sponsor
Lumen Technologies	, Inc.		
Mailing Address	100 CenturyLink Drive		
Ç			
	Monroe	LA	71203
	CITY	STATE	ZIP CODE
Relationship: Connect	ed Organization Affiliated Committee	Joint Fundraising Represe	ntative Leadership PAC Sponsor
 Custodian of Records: Id books and records. 	entify by name, address (phone number	r optional) and position of the	e person in possession of committee
Adkins, I	Brian, , ,		
Full Name	660 North Capitol Street, NW		
Mailing Address			
	Suite 240		
	Washington	DC	20001
Title or Position	CITY	STATE	ZIP CODE
Custodian of Records		Telephone number	202 870 9626
Treasurer: List the name a any designated agent (e.g.,	and address (phone number optional) , assistant treasurer).	of the treasurer of the committee	ee; and the name and address of
Full Name Adkins, E	Brian, , ,		
Mailing Address	660 North Capitol Street, NW		
	Suite 240		
	Washington	DC	20001
Title on D. W.	CITY	STATE	ZIP CODE
Title or Position Treasurer		Telephone number	202 870 9626

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Full Name of Designated Agent						
Mailing Address						
	CITY STATE Z	IP CODE				
Title or Position	Telephone number					
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. Capital One Bank						
Mailing Address	1804 N 18th St					
	Monroe LA 71201					
	CITY STATE Z	ZIP CODE				
Name of Bank, I	Depository, etc.					
Mailing Address						
	CITY STATE Z	ZIP CODE				