

FEC FORM 1

STATEMENT OF ORGANIZATION

Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

Cracker Barrel Old Country Store, Inc. PAC

ADDRESS (number and street) 307 Hartmann Drive
 (Check if address is changed) PO Box 787
Lebanon TN 37088-0787
CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS
 (Check if address is changed) pat.sheehy@crackerbarrel.com
Optional Second E-Mail Address
michael.zylstra@crackerbarrel.com

COMMITTEE'S WEB PAGE ADDRESS (URL)
 (Check if address is changed)

2. DATE 12 / 31 / 2013

3. FEC IDENTIFICATION NUMBER C C00252791

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 Treasurer Mr. Charlie Austin

Signature of Treasurer Mr. Charlie Austin [Electronically Filed] Date 12 / 31 / 2013

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.

5. 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 candidate information below.)

Name of Candidate _____

Candidate Party Affiliation Office Sought: House Senate President State
 District

- (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 (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) 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 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 Fundraising 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.

Committees Participating in Joint Fundraiser

1. _____ FEC ID number
2. _____ FEC ID number
3. _____ FEC ID number
4. _____ FEC ID number

Write or Type Committee Name

Cracker Barrel Old Country Store, Inc. PAC

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

Cracker Barrel Old Country Store, Inc.

Mailing Address Dept. 9425-4
 PO Box 787
 Lebanon TN 37088-0787
 CITY STATE ZIP CODE

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name Mr. Patrick Sheehy
 Mailing Address 307 Hartmann Drive
 PO Box 787
 Lebanon TN 37088-0787
 CITY STATE ZIP CODE
 Dir., Gov. Relations Telephone number 615 - 235 - 4161

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 Mr. Charlie Austin
 Mailing Address 305 Hartmann Drive
 PO Box 787
 Lebanon TN 37088-0787
 CITY STATE ZIP CODE
 Title or Position Regl. VP, Rest. Ops. Telephone number 615 - 444 - 5533

Full Name of Designated Agent

Michael Zylstra

Mailing Address

305 Hartmann Drive

PO Box 787

Lebanon

TN

37088-0787

CITY

STATE

ZIP CODE

Title or Position

VP, GC & Corp. Sec.

Telephone number

615

235

4066

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.

Wilson Bank & Trust

Mailing Address

623 West Main Street

Lebanon

TN

37087

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F1N

Transaction ID :

This filing amends several pieces of information in the committee's FEC-1, including its email address, PAC information and titles of named persons. It also adds an 'optional second e-mail address' with a view to further enhancing the reliability of electronic communications between the committee and the Commission.

Form/Schedule:

Transaction ID: