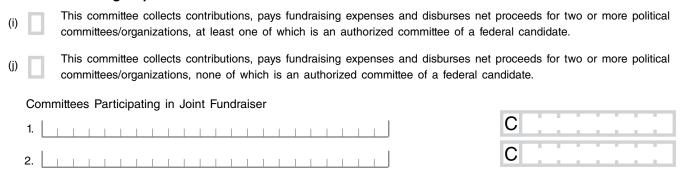
FEC FORM 1	STATEMEN ORGANIZ	_	0	PAGE 1 / 14
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
ADDRESS (number and street)	666 Grand Avenue			
(Check if address is changed)	P.O. Box 657			
is changed)	Des Moines		IA 503	306-0657
	CITY ▲		STATE A	ZIP CODE▲
COMMITTEE'S E-MAIL ADDRE	SS			
 (Check if address is changed) 	Steven.Piper@midamericar	n.com		
<i>,</i>	Optional Second E-Mail Add	dress		
(Check if address is changed)				
2. DATE 01 / 11				
3. FEC IDENTIFICATION N	JMBER ► C co	00081273		
4. IS THIS STATEMENT	NEW (N) OR	X AMENDED (A)		
I certify that I have examined th	nis Statement and to the best	of my knowledge and belief it	is true, correct and	l complete.
-				
Type or Print Name of Treasure	r Piper, Steven D, , ,			
Signature of Treasurer Piper	r, Steven D, , ,		Date 01	18 / Y Y Y Y Y 2024
NOTE: Submission of false, erron		may subject the person signing t FION SHOULD BE REPORTED		penalties of 52 U.S.C. §30109
Office Use Only		For further information c Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

FEC	Form 1	1 (Revised 03/2022)	Page 2
5.	TYPE O	DF COMMITTEE:	
	Candid	late 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.)	ne candidate
	Name Candic		
	Candic Party /	date Office Affiliation Sought: House Senate President	State
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
	Nam Cano	e of didate	
	Party C	Committee: (National, State (Democration or subordinate) committee of the (Democration or subordinate) committee of the	c, , etc.) Party
	Politica (e) X	al Action Committee (PAC): This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ed organization is a:
		Corporation Corporation w/o Capital Stock	Organization
		Membership Organization Trade Association Coopera	ative
		In addition, this committee is a Lobbyist/Registrant PAC.	
	(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate committee. (i.e., nonconnected committee)	ed 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 P	AC).

Joint Fundraising Representative:



In addition, this committee is a Lobbyist/Registrant PAC.

	FEC Form 1 (Revised 02/2009) P	age 3
V	Nrite or Type Committee Name	
	MidAmerican Energy Company PAC	
6.	Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PA	C Sponsor
	MidAmerican Energy Company	

Mailing Address	PO Box 657			
	L			
	Des Moines			50306
	CITY	″▲	STATE ▲	ZIP CODE
Relationship: X Connected	Organization Affiliated Org	anization Jo	int Fundraising Representat	ive 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.

Piper, Stev	en D, , ,
Full Name	
Mailing Address	9416 Enfield Dr
	Johnston IA 50131 IA 50131
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position ▼	
Treasurer	Telephone number 515 281 2789

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	Piper, Steven D, , ,
Mailing Address	9416 Enfield Dr
	Johnston
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	7
Treasurer	Image:

FEC Form 1 (Revised 02	2/2	200)9)																						Pa	ge 4	4		
Full Name of Designated Agent												 	 															1	
Mailing Address	L																												
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	L																				L					- [
									CI	ΤY								STA	٩ΤΕ				Z	IP (со	DE			
Title or Position ▼																													
													Tel	eph	ione	e n	uml	ber				 - [- [_			

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.

Banke	rs Trust Company		
Mailing Address	453 7th Street		
	Des Moines		99
	CITY 🔺	STATE A	ZIP CODE
Name of Bank, Depository	ν, etc.		
Mailing Address			
	CITY 🔺	STATE ▲	ZIP CODE ▲

:97 `A=G79 @@5 B9CIG`H9LH`F9 @5 H98 `HC`5 `F9DCFHžG7<98 I@9 `CF`=H9A=N5 H=CB

Form/Schedule: F1A Transaction ID :

The Russell PAC has filed its termination with the FEC and therefore, the Russell PAC is no longer affiliated with the MidAmerican Energy Company PAC. This amended Statement of Organization Form 1 removes the Russell PAC as an affiliate.

Form/Schedule: Transaction ID:

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g) or (h).	Joint Fundraising	Participant:		
1.			FEC ID number	C
2.			FEC ID number	C
3.			FEC ID number	С
4. [FEC ID number	C
Name	of Any Connected O	Organization, Affiliated Committee, Joint Fundra	aising Representativ	e, or Leadership PAC Sponsor
		Good Government Fund for Federal Election		
Ν	Nailing Address	PO Box 425		
		Fort Worth		76101
F	Relationship:		STATE 🔺	ZIP CODE
Ful	I Name			
		<u> </u>		
IVIA	iling Address			
		CITY ▲		
Tľ	TLE OR POSITION			
		Te	lephone Number	
safety o Name o Deposit	or Other Depositorie deposit boxes or main of Bank, tory, etc.	es: List all banks or other depositories in which that in the funds.	the committee deposi	ts funds, holds accounts, re
	Maining Address			
	Maining Address		↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓	

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5(g) or (h).	Joint Fundraising	Participant:		
1.			FEC ID numb	per C
2.			FEC ID numb	ber C
з. [FEC ID numb	per C
4. [FEC ID numb	ber C
6. Name	of Any Connected Or	ganization, Affiliated Committee, Joint Fund	raising Poprocont	tativa or Landership BAC Spansor
		y RAILPAC (BNSF RAILPAC)		
Ν	Iailing Address	PO Box 961039		
		Fort Worth	T>	<pre> 76161 </pre>
F	Relationship:	CITY 🔺	STAT	E A ZIP CODE A
8. Design	ated Agent: Identify b	y name, address (phone number – optional)		
Ful	Name			
Ма	iling Address			
Τľ	TLE OR POSITION V	CITY A	STATE	▲ ZIP CODE ▲
			elephone Number	
safety o Name o	or Other Depositorie deposit boxes or maint of Bank, tory, etc.	s: List all banks or other depositories in which tains funds.	the committee de	posits funds, holds accounts, rents
	Mailing Address			
	l			
1	l			

	(h). Joint Fundraising	g Participant:		
	1.		FEC ID number	
	2.		FEC ID number C	
	3.		FEC ID number C	
	4.		FEC ID number C	
_				
6. N		Organization, Affiliated Committee, Joint Fundra		nsor
		es Insurance Company Political Action Com		
	Mailing Address	One Geico Plaza		
		Washington	DC 20076	
	Relationship:	CITY A	STATE A ZIP CODE A	
	Connected	Organization X Affiliated Committee	Fundraising Representative	Sponsor
_				
8. D	esignated Agent: Identify	by name, address (phone number - optional)		
	1			
	Full Name			
	Full Name			
	Mailing Address			
_	Mailing Address			
9. B Sa	Mailing Address	Te	ephone Number	
sa	Mailing Address	Te	ephone Number	⊥
sa	Mailing Address TITLE OR POSITION TITLE OR POSITION Title OR POSITION Tanks or Other Depositor afety deposit boxes or ma lame of Bank, Depository, etc.	Te	ephone Number	<pre></pre>
sa	Mailing Address TITLE OR POSITION TITLE OR POSITION Tanks or Other Depositor afety deposit boxes or ma lame of Bank,	Te	ephone Number	<pre></pre>
sa	Mailing Address TITLE OR POSITION TITLE OR POSITION Title OR POSITION Tanks or Other Depositor afety deposit boxes or ma lame of Bank, Depository, etc.	Te	ephone Number	<pre></pre>
sa	Mailing Address TITLE OR POSITION TITLE OR POSITION Title OR POSITION Tanks or Other Depositor afety deposit boxes or ma lame of Bank, Depository, etc.	Te	ephone Number	<pre></pre>

5(g) or (h).	Joint Fundraising	Participant:		
1.			FEC ID number	C
2.			FEC ID number	С
3.			FEC ID number	С
4.			FEC ID number	C
6. Name	of Any Connected (Organization, Affiliated Committee, Joint Fundrais	sing Benresentative	or Leadershin PAC Sponsor
		Federal Political Action Committee		
I	Mailing Address	4747 McLane Parkway		
		Temple	ТХ	76503
I	Relationship:		STATE A	ZIP CODE
	Connected	Organization × Affiliated Committee	Indraising Representa	tive Leadership PAC Sponsor
8. Design	nated Agent: Identify	by name, address (phone number – optional)		
	nated Agent: Identify	by name, address (phone number – optional)		
Fu		by name, address (phone number – optional)		
Fu	II Name	by name, address (phone number - optional)		
Fu	II Name	by name, address (phone number - optional)		
Fu	II Name <u> </u> ailing Address			
Fu	II Name			
Fu	II Name <u> </u> ailing Address			
Fu Ma T 9. Banks	II Name		phone Number	
Fu Ma T 9. Banks safety	ailing Address		phone Number	
Fu Ma T 9. Banks safety Name	II Name		phone Number	
Fu Ma T 9. Banks safety Name	II Name	CITY ▲ CITY ▲ Telep es: List all banks or other depositories in which the ntains funds.	phone Number	
Fu Ma T 9. Banks safety Name	II Name	CITY ▲ CITY ▲ Telep es: List all banks or other depositories in which the ntains funds.	phone Number	
Fu Ma T 9. Banks safety Name	II Name	CITY ▲ CITY ▲ Telep es: List all banks or other depositories in which the ntains funds.	phone Number	

5(g) or (h).	Joint Fundraising	Participant:		
1.			FEC ID number	С
2.			FEC ID number	C
3.			FEC ID number	С
4.			FEC ID number	С
6. Name	of Any Connected O	rganization, Affiliated Committee, Joint Fundrai	sing Benresentativ	e or Leadershin PAC Sponsor
	-	nergy Company PAC		
	Mailing Address	666 Grand Avenue		
		P.O. Box 657		
				50306-0657
ľ	Relationship:		STATE A	
		by name, address (phone number – optional)		
Fu	III Name			
Ma	ailing Address			
т	TILE OR POSITION	CITY A	STATE A	ZIP CODE
L		Tele	phone Number	
safety Name	deposit boxes or main of Bank, sitory, etc.	es: List all banks or other depositories in which th tains funds.	e committee deposit	ts funds, holds accounts, rents
	Mailing Address			

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5(g) or (h	n). Joint Fundraising	J Participant:		
	1		FEC ID number	С
	2.		FEC ID number	С
	3.		FEC ID number	C
	4.		FEC ID number	С
6. N a	amo of Any Connected (Organization, Affiliated Committee, Joint Fundra	icina Poprocontativ	o or Loodorphin PAC Sponsor
5. ING	-	ower/Rocky Mountain Power PAC		
I				
	Mailing Address	825 NE Multnomah		
		Suite 2000 LCT		
		Portland		97232
	Relationship:		STATE A	
	Connected	Organization × Affiliated Committee	Fundraising Represent	ative Leadership PAC Sponsor
3. D e	Full Name	by name, address (phone number – optional)		
	Mailing Address	1		
	TITLE OR POSITION		STATE A	ZIP CODE
			ephone Number	
sa Na	anks or Other Depositori fety deposit boxes or mai	ies: List all banks or other depositories in which t intains funds.	he committee deposit	s funds, holds accounts, rents
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De	epository, etc.			

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5(g) d	or (h). Joint Fundraising	g Participant:			
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	2.		FEC I	D number	C
	3.		FEC I	D number	C
	4.		FEC I	D number	С
6.	Name of Any Connected	Organization, Affiliated Committee, Joint	Fundraising Be	nresentativ	or Leadershin PAC Sponsor
0.	NETJETS, Inc. PAC				
	Mailing Address	4111 Bridgeway Avenue			
		Columbus		ОН	43219
	Relationship:	CITY 🔺		STATE 🔺	ZIP CODE
	Connected	d Organization X Affiliated Committee	Joint Fundraisir	g Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identify	v by name, address (phone number - optior	nal)		
	Full Name				
	Mailing Address				
	TITLE OR POSITION			STATE 🔺	ZIP CODE
			Telephone N	lumber	
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-EC	Form	1S	(Revised	02/2017)
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5(g) c	or (h). Joint Fundraising	y Participant:		
	1.		FEC ID number	С
	2.		FEC ID number	С
	3.		FEC ID number	C
	4.		FEC ID number	C
6.	Name of Any Connected (Drganization, Affiliated Committee, Joint Fundra	nicina Roprocontativ	or Leadershin DAC Shonsor
0.	NV Energy Political Ac	-		
	Mailing Address	P.O. Box 81500		
		Las Vegas	NV	89180
	Relationship:		STATE A	
	Connected	Organization × Affiliated Committee	Fundraising Representa	ative
8.	Designated Agent: Identify	by name, address (phone number - optional)		
8.	Designated Agent: Identify Full Name	by name, address (phone number – optional)		
8.		by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number - optional)		
8.	Full Name			
8.	Full Name Mailing Address TITLE OR POSITION			
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		lated Committee, Joint	Eundraising	Representativ	e, or Leadership F	AC Sponsor
ing Address	29400 Lakeland	Boulevard				
	Wickliffe			OH	44092	-
tionship:		CITY 🔺		STATE A	ZIP C	
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y Audress						
OR POSITION N	L L			STATE A		
	ol Corp Employer	ame	and Corp Employees PAC ing Address 29400 Lakeland Boulevard Underse Wickliffe Wickliffe CITY A Connected Organization X Affiliated Committee ame ind Agent: Identify by name, address (phone number – optication)	bl Corp Employees PAC ing Address 29400 Lakeland Boulevard ing Address Wickliffe Wickliffe Wickliffe Onnected Organization Affiliated Committee Joint Fundrai ame Image: Identify by name, address (phone number – optional) ame	bl Corp Employees PAC ing Address 29400 Lakeland Boulevard ing Address Wickliffe Wickliffe Wickliffe OH STATE ▲ Affiliated Committee Joint Fundraising Represent ame Image: Interview of the second secon	ing Address 29400 Lakeland Boulevard Wickliffe Wickliffe CITY STATE ZIP C Connected Organization Affiliated Committee Joint Fundraising Representative Leadersl Affiliated Committee Affil