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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) CMS Energy Corporation Employees for Better Government- Federal One Energy Plaza ADDRESS (number and street) (Check if address is changed) 49201 MI CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS hillary.kipp@cmsenergy.com (Check if address is changed) Optional Second E-Mail Address kelly.duncan@quorum.us COMMITTEE'S WEB PAGE ADDRESS (URL) www.EmployeesforBetterGovernment.com (Check if address is changed) DATE 2022 C00075473 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. Kvoriak, Carolee, , , Type or Print Name of Treasurer Kvoriak, Carolee, , , [Electronically Filed] 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

Toll Free 800-424-9530 Only Local 202-694-1100

(Revised 06/2012)

	FEC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	
	naidate	Committee:	
(a)	ш	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	Ш	This committee is an authorized committee, and is NOT a principal campaign committee. (Compinformation below.)	lete the candidate
	ne of didate		
	didate y Affiliatio	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
	ne of didate		
Par	rty Con	nmittee:	
(d)		· · · · · · · · · · · · · · · · · · ·	Democratic, Republican, etc.) Party.
Pol	itical A	ction Committee (PAC):	
(e)	×	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.	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 secommittee. (i.e., nonconnected committee)	gregated 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.)	
Joir	nt Fund	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two 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 two 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	ne	
CMS Energy C	Corporation Employees for Better Governmer	nt- Federal
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representative, or Leadershi	p PAC Sponsor
CMS Energy Corpora	ation	
Mailing Address	One Energy Plaza	
J	EP8-220	
	Jackson MI 49201	_ -
	CITY STATE Z	IP CODE
Relationship: X Connect	ed Organization Affiliated Committee Joint Fundraising Representative Lead	ership PAC Sponsor
7. Custodian of Records: Ide books and records.	entify by name, address (phone number optional) and position of the person in posse	ession of committee
Duncan, Full Name	Kelly, , ,	
Mailing Address	One Thomas Circle	
J	6th Floor	
	Washington DC 20005	
Title or Position	CITY STATE Z	IP CODE
Record Keeper	Telephone number 248 – 9.	41 7231
Treasurer: List the name a any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; and the nam assistant treasurer).	e and address of
	Carolee, , ,	1
of Treasurer	Consumers Energy	
Mailing Address	One Energy Plaza	
	Jackson MI 149201	
		P CODE
Title or Position Treasurer	517 78	

517

Telephone number

788

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Full Name of Designated Agent	Kipp, Hillary, , ,	
Mailing Address	124 W. Allegan	
3	Suite 1800	
	Jackson MI 49201	-
	CITY STATE ZIP	CODE
Title or Position PAC Manager		
Banks or Other safety deposit bo Name of Bank, [Depositories: List all banks or other depositories in which the committee deposits funds, holds access or maintains funds. Depository, etc.	occurre, reme
safety deposit bo	exes or maintains funds.	
safety deposit bo	oxes or maintains funds. Depository, etc.	
safety deposit bo Name of Bank, [Depository, etc. Comerica Bank P.O. Box 75000	
safety deposit bo Name of Bank, [Depository, etc. Comerica Bank	
safety deposit bo Name of Bank, [Detroit Depository, etc. Comerica Bank P.O. Box 75000 Detroit MI 48275	P CODE
safety deposit bo Name of Bank, [Depository, etc. Comerica Bank P.O. Box 75000 Detroit MI 48275 CITY STATE ZIP	
safety deposit bo Name of Bank, [Mailing Address	Depository, etc. Comerica Bank P.O. Box 75000 Detroit MI 48275 CITY STATE ZIP	
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safety deposit bo Name of Bank, [Mailing Address Name of Bank, [Depository, etc. Comerica Bank P.O. Box 75000 Detroit CITY STATE ZIP Depository, etc.	

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

Form/Schedule: F1A Transaction ID:

Amending committee address, email and record keeper

Form/Schedule: Transaction ID: