Only

## STATEMENT OF

PAGE 1 / 4

**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) General Mills, Inc. Political Action Committee One General Mills Boulevard ADDRESS (number and street) (Check if address is changed) Minneapolis 55426 MN CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS Drew.Felz@GenMills.com (Check if address is changed) Optional Second E-Mail Address robin@sextonpac.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2022 C00062646 FEC IDENTIFICATION NUMBER 3. 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. Unglaub, Wendy, , , Type or Print Name of Treasurer Unglaub, Wendy, , , [Electronically Filed] Date 05 2022 Signature of Treasurer 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 (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

| FEC 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 candidate information below.)  |  |  |  |  |
| Name of Candidate  |  |  |  |  |
| Candidate Office Party Affiliation Sought: Ho  | use Senate President 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   | (Democratic, Republican, etc.) Party   |  |  |  |
| Political Action Committee (PAC):  |  |  |  |  |
| (e) This committee is a separate segregated fund. (Ident   | ify connected organization on line 6.) Its connected organization is a                                       |  |  |  |
| X Corporation Corp   | oration w/o Capital Stock Labor Organization   |  |  |  |
| 5 5  | Association Cooperative  |  |  |  |
| In addition, this committee is a Lobbyist/Re   | gistrant PAC.  |  |  |  |
| (f) This committee supports/opposes more than one Federal committee. (i.e., nonconnected committee)  | deral candidate, and is NOT a separate segregated fund or party  |  |  |  |
| In addition, this committee is a Lobbyist/Re   | gistrant 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/Re   | gistrant PAC.  |  |  |  |
| (h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC).   |  |  |  |  |
| In addition, this committee is a Lobbyist/Re   | gistrant PAC.  |  |  |  |
| Joint Fundraising Representative:  |  |  |  |  |
| (i) This committee collects contributions, pays fundraisin committees/organizations, at least one of which is an   | g expenses and disburses net proceeds for two or more political authorized committee of a federal candidate. |  |  |  |
| 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  | C  |  |  |  |
| -  | C  |  |  |  |

| I<br>  | FEC Form 1 (Revised 0                          | )2/2009)                                   |                                  | Page <b>3</b>               |
|--|--|--|----------------------------------|-----------------------------|
| V  | Vrite or Type Committee Name                   | Inc. Political Action Co                   | mmittee                          |                             |
| 6.   | Name of Any Connected O                        | rganization, Affiliated Committee, Joint F |                                  | or Leadership PAC Sponsor   |
|  | General Mills, Inc.                            |  |                                  |                             |
|  |  |  |                                  |                             |
|  | Mailing Address                                | 1 General Mills Boulevard                  |                                  |                             |
|  |  |  |                                  |                             |
|  |  | Minneapolis                                | MN MN                            | 55426-1347                  |
|  |  | CITY ▲                                     | STATE ▲                          | ZIP CODE ▲                  |
|  | Relationship: X Connected                      | Organization Affiliated Organization       | Joint Fundraising Representati   | Leadership PAC Sponso       |
| <del></del> 7.   | Custodian of Records: Ident books and records. | ify by name, address (phone number optio   | onal) and position of the person | in possession of committee  |
|  | Baum, Erik                                     | a, , ,                                     |                                  |                             |
|  | Full Name Mailing Address                      | 601 13th Street NW                         |                                  |                             |
|  | Manning / taareee                              | Suite 510 South                            |                                  |                             |
|  |  | Washington                                 | DC                               | 20005                       |
|  |  | CITY ▲                                     | STATE ▲                          | ZIP CODE ▲                  |
|  | Title or Position ▼  Custodian of Records      |  | Telephone number                 | 02                          |
| 8. <b>Treasurer:</b> List the name and address (phone number optional) of the treasurer of the committee; and the name and address any designated agent (e.g., assistant treasurer). |  |  |                                  | and the name and address of |
|  | Full Name Unglaub, W                           | /endy, , ,                                 |                                  |                             |
|  | of Treasurer                                   |  |                                  |                             |
|  | Mailing Address                                | 1 General Mills Boulevard                  |                                  |                             |
|  |  |  |                                  |                             |
|  |  | Minneapolis                                | MN L                             | 55426-1347                  |
|  | Title or Position <b>▼</b>                     | CITY ▲                                     | STATE ▲                          | ZIP CODE ▲                  |
|  | Treasurer                                      |  | Telephone number                 | 53  -  764  -  7600         |

| FEC Form 1                          | (Revised 02/2009)   | Page <b>4</b>                  |  |  |  |  |
|-------------------------------------|---|--------------------------------|--|--|--|--|
| Full Name of<br>Designated<br>Agent | DuToit, Danielle, , ,   |                                |  |  |  |  |
| Mailing Address                     | 1 General Mills Boulevard   |                                |  |  |  |  |
|                                     |   |                                |  |  |  |  |
|                                     | Minneapolis   | MN 55426-1347                  |  |  |  |  |
| Title or Position                   | CITY ▲  | STATE ▲ ZIP CODE ▲             |  |  |  |  |
| Assistant Treasu                    | rer   | ephone number 763 - 764 - 7600 |  |  |  |  |
|                                     | 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, D                     | Name of Bank, Depository, etc.  |                                |  |  |  |  |
|                                     | Bremer Bank   |                                |  |  |  |  |
| Mailing Address                     | 372 St. Peter Street  |                                |  |  |  |  |
|                                     |   |                                |  |  |  |  |
|                                     | St. Paul  | MN 55102                       |  |  |  |  |
|                                     | CITY ▲  | STATE ▲ ZIP CODE ▲             |  |  |  |  |
| Name of Bank, Depository, etc.      |   |                                |  |  |  |  |
|                                     |   |                                |  |  |  |  |
| Mailing Address                     |   |                                |  |  |  |  |
|                                     |   |                                |  |  |  |  |
|                                     |   |                                |  |  |  |  |
|                                     | CITY ▲  | STATE ▲ ZIP CODE ▲             |  |  |  |  |