Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Cortez Masto Victory Fund 611 Pennsylvania Avenue SE ADDRESS (number and street) (Check if address Suite 143 is changed) Washington DC 20003 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS ccm@mbacg.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2023 C00635482 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. Snyder, Lili, , , Type or Print Name of Treasurer Snyder, Lili, , , [Electronically Filed] 01 2023 Signature of Treasurer Date 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

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5.	TYPE C	F COMMITTEE:					
	Candid	Candidate Committee:					
	(a)	This committee is a principal campaign committee. (Complete the candidate information	tion below.)				
	(b)	This committee is an authorized committee, and is NOT a principal campaign comminformation below.)	ittee. (Complete the candidate				
	Name Candid						
	Candid Party	Affiliation Office Sought: House Senate	State President District				
	(c)	4.) <b>-</b>					
	Nam Can	e of lidate					
	Party (	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 lin	ne 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.)						
	(g)	(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 PAC).						
	In addition, this committee is a Lobbyist/Registrant PAC.						
	Joint Fundraising Representative:						
	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more politic						
		committees/organizations, at least one of which is an authorized committee of a federal candidate.  This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political					
	(j)	committees/organizations, none of which is an authorized committee of a federal car	•				
		mittees Participating in Joint Fundraiser					
	1	Catherine Cortez Masto for Senate	C C00575548				
	. /	All For Our Country Leadership PAC	C C00629212				

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۷	Vrite or Type Committee N					
6.	Name of Any Connecte	Cortez Masto Victory Fund  Ime of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor				
	NONE					
	Mailing Address					
		CITY ▲ STATE	ZIP CODE ▲			
	Relationship: Conne	ected Organization	esentative Leadership PAC Sponso			
			_			
<u>.</u>	Custodian of Records: books and records.	dentify by name, address (phone number optional) and position of the po	erson in possession of committee			
	Snyde	r, Lili, , ,				
	Full Name					
	Mailing Address	611 Pennsylvania Avenue SE				
		Suite 143				
		Washington				
		CITY ▲ STATE	E ▲ ZIP CODE ▲			
	Title or Position ▼					
	Treasurer	Telephone number				
3.	Treasurer: List the name any designated agent (e	e and address (phone number optional) of the treasurer of the comm.g., assistant treasurer).	nittee; and the name and address of			
	Full Name Snyde	r, Lili, , ,				
	of Treasurer					
	Mailing Address	611 Pennsylvania Avenue SE				
		Suite 143				
		Washington	20003			
		CITY ▲ STATE	ZIP CODE ▲			
	Title or Position ▼	ïtle or Position ▼				
	Treasurer	Telephone number				

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Full Name of Designated Agent	Fleming, Ryan, , ,							
Mailing Address	611 Pennsylvania Avenue SE							
	Suite 143							
	Washington	DC 200	003					
Till D iii	CITY ▲	STATE ▲	ZIP CODE ▲					
Title or Position								
Assistant Treasu	ei 	ephone number						
Banks or Other safety deposit bo	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	epository, etc.							
	Amalgamated Bank							
Mailing Address	1825 K Street NW							
	Washington	DC 2000	06					
	CITY ▲	STATE ▲	ZIP CODE ▲					
Name of Bank, Depository, etc.								
Mailing Address								
	CITY ▲	STATE ▲	ZIP CODE ▲					