Only

## STATEMENT OF

PAGE 1 / 5 =

FORM 1		0	RGAN	IZA <sup>-</sup>	TIC	N							Offic	e Use	Only			
1. NAME OF COMMITTEE (ir	n full)		Check if nam changed)	е		ple:If t		type		12	FE4	M5	Oille	Le Ose	Offig			
American Ch	nemist	ry Cour	ncil PAC	, ,														
				1 1	1 1		1 1		l			1 1	1	1 1	1 1	1	1 1	
ADDRESS (number and street)		700 2nd \$	Street, NE															
(Check if a is changed																		
J	,	Washing	ton 							DO	;  TE <b>_</b>	L	2000	2-810		- L	<u> </u>	
COMMITTEE'S E-MA	AII ADDRI									0.71						002.		
(Check if a	address		em_pac@smt	tp.americ	canche	mistry.	com	ı	1 1	1 1	1	1 1	1	1 1	1 1	1	1 1	, I
is changed	d)		Second E-Ma		ss													
		outsourcii	ng@aristotle.co	om														
001414777770	D405 45	DDE00 (1)	N. Y															
COMMITTEE'S WEB		,	RL) w.americhemp	ac.com														
is changed																		
2. DATE 0		3 / Y	y y y 2024															
3. FEC IDENTIFIC	CATION N	UMBER <b>&gt;</b>		C002	252338													
4. IS THIS STATEM	MENT	NEW	(N) <b>O</b>	R	×	AM	IENDE	ED (A)										
certify that I have e	examined t	his Stateme	nt and to the	best of	my kr	owled	ge and	l belie	f it is	true	, cor	rect a	and (	compl	ete.			
Type or Print Name	of Treasure	er <u>Parker, \</u>	∕ates, , ,															
Signature of Treasure	er P <u>ark</u>	er, Yates, , ,							[	Date		м м 08	′	13	D /		2024	Y
NOTE: Submission of	false, error		omplete inform					-	-					enalti	es of	52 U.	S.C. §	30109
Office Use						For furti Federal Foll Free	Election	Comm	ission				F			<b>RM</b> 6/2012		

Toll Free 800-424-9530

Local 202-694-1100

E	EC 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 information below.)	candidate					
	Name of Candidate						
	Candidate Office Sought: House Senate President	State District					
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	District					
	Name of Candidate						
	Party Committee:						
	(d) This committee is a (National, State or subordinate) committee of the Republican,						
	Political Action Committee (PAC):						
	(e) X This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	d organization is a:					
	Corporation Corporation w/o Capital Stock Labor Or	ganization					
	Membership Organization X Trade Association Cooperat	iive					
	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 committee. (i.e., nonconnected committee)	I 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 PA	C).					
	In addition, this committee is a Lobbyist/Registrant PAC.						
	Joint Fundraising Representative:						
	(i) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, at least one of which is an authorized committee of a federal candidate.	more political					
	(j) 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						

I	FEC Form 1 (Revised 0	2/2009)	Page <b>3</b>
٧	Vrite or Type Committee Name		
		stry Council PAC	
6.	-	ganization, Affiliated Committee, Joint Fundraising Representa	itive, or Leadership PAC Sponsor
	American Chemistry	Council	
	Mailing Address	700 2nd St NE	
		1	
		Washington	20002-8100
		CITY ▲ STATE	E ▲ ZIP CODE ▲
	Relationship: X Connected	Organization Affiliated Organization Joint Fundraising Repre	esentative Leadership PAC Sponso
7.	Custodian of Records: Idention books and records.	fy by name, address (phone number optional) and position of the p	verson in possession of committee
	Parker, Yat	es, , ,	
	Full Name	700 0nd Otrost NIC	
	Mailing Address	700 2nd Street NE	
		Washington	20002-8100
		CITY ▲ STATE	E ▲ ZIP CODE ▲
	Title or Position ▼		
	Custodian of Records	Telephone number	202 - 249 - 7000
8.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the communications treasurer).	nittee; and the name and address of
	Full Name Parker, Yat	es,,,	
	of Treasurer	<sub>1</sub> 700 2nd Street NE	
	Mailing Address	700 ZIM GREET NE	
		Washington	20002-8100
		CITY ▲ STATE	E ▲ ZIP CODE ▲
	Title or Position ▼		
	Treasurer	Telephone number	202 249 - 7000

FEC <b>Fo</b> r	m 1 (Revised 02/2009)		Page <b>4</b>
Full Name of Designated Agent	Pappas, Bill, , ,		
Mailing Addre	700 2nd Street NE		
	Washington	DC 2000	2-8100
	Washington	2000	-
Title or Posit		STATE A	ZIP CODE ▲
Assistant Tre		per 202 –	249 - 7000
	her Depositories: List all banks or other depositories in which the committee t boxes or maintains funds.	deposits funds, ho	olds accounts, rents
Name of Ban	k, Depository, etc.		
	Bank of America		
Mailing Addre	iss 100 North Tryon Street		
	Charlotte	NC 2825	5
	CITY ▲ S	STATE A	ZIP CODE ▲
Name of Ban	k, Depository, etc.		
Mailing Addre	ess		
	CITY ▲ S	STATE A	ZIP CODE ▲

## : 97 'A = G7 9 @ G B9 CI G'H9 LH F9 @ 5 H98 'HC '5 'F9 DC FHZ G7 < 98 I @ 'C F' + H9 A = N5 H+ C B

Form/Schedule: F1A Transaction ID:

This amendment updates the PAC's Treasurer, Custodian of Records, and Assistant Treasurer.

Form/Schedule: Transaction ID: