Only

PAGE 1/5

STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) Meat Institute Political Action Committee ('Meat PAC') 4201 Wilson Boulevard ADDRESS (number and street) Suite 0604 (Check if address is changed) Arlington 22203 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address nfretz@meatinstitute.org is changed) Optional Second E-Mail Address meatpac@meatinstitute.org COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2025 C00024281 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. Type or Print Name of Treasurer Fretz, Nathaniel, , Mr. 06 24 2025 Signature of Treasurer Fretz, Nathaniel, , Mr., 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

_	_				
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 be	low.)				
(b) This committee is an authorized committee, and is NOT a principal campaign committee. (disposition information below.)	Complete the candidate				
Name of Candidate					
Candidate Office Party Affiliation Sought: House Senate Pres	State sident 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 or subordinate) committee of the	(Democratic, Republican, etc.) Party				
Political Action Committee (PAC):					
(e) X This committee is a separate segregated fund. (Identify connected organization on line 6.)	Its connected organization is				
(c) A commence of a separate segment when the commence of the					
Corporation Corporation w/o Capital Stock	Labor Organization				
Membership Organization X 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 separat committee. (i.e., nonconnected committee)	te segregated 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	s (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 political 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 committees/organizations, none of which is an authorized committee of a federal candidate.					
Committees Participating in Joint Fundraiser					
1C					

VP, Gov. Affairs

	FEC Form 1	1 (Revised 02/2009)	Page 3		
V	Vrite or Type Comm				
	Meat Insti	itute Political Action Committee ('Meat PAC')	_		
6.	Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor				
	Meat Institut	te 			
	Mailing Address	4201 Wilson Boulevard			
		Suite 0604			
		Arlington VA 222	03		
		CITY ▲ STATE ▲	ZIP CODE ▲		
	Relationship:	Connected Organization Affiliated Organization Joint Fundraising Representative	Leadership PAC Sponse		
7.	Custodian of Red books and record	cords: Identify by name, address (phone number optional) and position of the person in poss	ession of committee		
		Fretz, Nathaniel, , Mr.,			
	Full Name				
	Mailing Address	4201 Wilson Boulevard			
		Suite 0604			
		Arlington VA 222	03 		
		CITY ▲ STATE ▲	ZIP CODE ▲		
	Title or Position	▼			
	VP, Gov. Affairs		- 587 - 4200		
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	Fretz, Nathaniel, , Mr.,			
	Mailing Address	4201 Wilson Boulevard			
		Suite 0604			
		Arlington VA 222	03		
		CITY ▲ STATE ▲	ZIP CODE ▲		
	Title or Position	▼			

587

202

Telephone number

4200

FEC Form 1	(Revised 02/2009)		Page 4
Full Name of Designated Agent	Fretz, Nathaniel, , ,		
Mailing Address	4201 Wilson Boulevard		
	Suite 0604		
	Arlington	VA 222	03
Title or Position	CITY ▲	STATE ▲	ZIP CODE ▲
VP, Gov. Affairs	1	elephone number 202 -	. 587 - 4200
	Depositories: List all banks or other depositories in which kes or maintains funds.	the committee deposits funds, h	olds accounts, rents
Name of Bank, D	epository, etc.		
	Sandy Springs Bank		
Mailing Address	17801 Georgia Avenue		
	Olney	MD 2083	32
	CITY ▲	STATE ▲	ZIP CODE ▲
Name of Bank, D	epository, etc.		
	<u> </u>		
Mailing Address			
	CITY ▲	STATE ▲	ZIP CODE ▲

: 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: F1N Transaction ID:

Organization's name has changed.

Form/Schedule: Transaction ID: