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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) National Automobile Dealers Association Political Action Committee 8484 Westpark Drive; Suite 500 ADDRESS (number and street) (Check if address is changed) **Tysons** 22102 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS abramley@nada.org (Check if address is changed) Optional Second E-Mail Address skasulaitis@nada.org COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2023 C00040998 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. Laughridge, Matt, , Mr., Type or Print Name of Treasurer Laughridge, Matt, , Mr., [Electronically Filed] 02 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

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

(Revised 06/2012)

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TYPE OF COMMITTEE:			
Candidate Committee:			
(a) This committee is a principal campaign committee. (Complete the candidate info	ormation below.)		
(b) This committee is an authorized committee, and is NOT a principal campaign of information below.)	ommittee. (Complete the candidate		
Name of Candidate			
Candidate Party Affiliation Office Sought: House Senate	State President District		
(c) This committee supports/opposes only one candidate, and is NOT an authorized	d 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 as		
Corporation Corporation w/o Capital Stock	Labor Organization		
Membership Organization	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 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 I	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	on accounts (Hybrid PAC).		
In addition, this committee is a Lobbyist/Registrant PAC.			
Joint Fundraising Representative:			
(i) This committee collects contributions, pays fundraising expenses and disburses committees/organizations, at least one of which is an authorized committee of a	·		
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		

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Write or Type Committee Name

National	Automobile	Dealers	Association	Political	Action	Committee
rational		Dualuis.	ASSOCIATION	i Onticai	ACTION	

	rtational / tator	Hobito Boatoro / todoota	dioir i oildoar / todoi	0011111111100			
6.	=	Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor National Automobile Dealers Association					
	Trational Automobile	Dealers Association					
	Mailing Address	8484 Westpark Drive; Suite 500					
		Tysons	VA22	102			
		CITY ▲	STATE ▲	ZIP CODE ▲			
	Relationship: X Connected	d Organization Affiliated Organization	Joint Fundraising Representative	Leadership PAC Sponso			
	_			_			
_							
7.	Custodian of Records: Iden books and records.	tify by name, address (phone number option	onal) and position of the person in pos	ssession of committee			
	Kasulaitis,	Stephen, , ,					
	Full Name						
	Mailing Address	8484 Westpark Drive, Suite 500					
		Tysons	VA22	102			
		CITY ▲	STATE ▲	ZIP CODE ▲			
	Title or Position ▼						
	Controller		Telephone number 703	- 821 - 7296			
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 Laughridge	e, Matt, , Mr.,					
	of Treasurer						
	Mailing Address	816 Joe Frank Harris Pkwy SE					
		Cartersville	GA 30	120			
		CITY ▲	STATE ▲	ZIP CODE ▲			
	Title or Position ▼						
	Dealer		Telephone number 888	496			

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Full Name of Designated Agent	Cowden, Joseph L., , ,				
Mailing Address	8484 Westpark Drive; Suite 500				
	Tysons	VA	22102		
Tiale ou Desirious	CITY ▲	STATE ▲	ZIP CODE ▲		
Title or Position	▼Telephone r	number	703 - 821 - 7000		
	Depositories: List all banks or other depositories in which the common oxes or maintains funds.	nittee deposits	funds, holds accounts, rents		
Name of Bank, [Depository, etc.				
	SunTrust Bank				
Mailing Address	1445 New York Ave, NW 3rd FI				
	Washington	DC	20005		
	CITY ▲	STATE ▲	ZIP CODE ▲		
Name of Bank, [Depository, etc.				
Mailing Address					
	CITY ▲	STATE ▲	ZIP CODE ▲		

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

Form/Schedule: F1A Transaction ID:

Treasurer change and custodial of record addition

Form/Schedule: Transaction ID: