Only

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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) is changed) over the lines. BEER INSTITUTE PAC (BEER PAC) 440 FIRST ST NW ADDRESS (number and street) STE 350 (Check if address is changed) WASHINGTON 20001 DC CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address scastro@beerinstitute.org is changed) Optional Second E-Mail Address alange@beerinstitute.org COMMITTEE'S WEB PAGE ADDRESS (URL) www.beerinstitute.org (Check if address is changed) DATE 01 2024 C00582999 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 Starke, Anne, , 05 01 2024 Signature of Treasurer Starke, Anne, , , 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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. TY	TYPE OF COMMITTEE:					
Ca	Candidate Committee: (a) This committee is a principal campaign committee. (Complete the candidate information below.)					
(a)						
(b)	(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)					
Name of Candidate						
-	Candidate Office State Party Affiliation Sought: House Senate President					
F	District					
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.					
	Name of Candidate					
Pa	rty Committee:					
(d)	This committee is a (National, State or subordinate) committee of the Republican, etc.) Party					
Po	litical Action Committee (PAC):					
(e) X This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is						
	Corporation Corporation w/o Capital Stock Labor Organization					
	Membership Organization X Trade Association Cooperative					
	In addition, this committee is a Lobbyist/Registrant PAC.					
(f)						
	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)	(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.					
Joi	int Fundraising Representative:					
(i)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or 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 C					

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٧	Write or Type Committee Na	•					
	BEER INSTITU	UTE PAC (BEER PAC)					
6.		Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor					
	Beer Institute			, , , , , , , , , , , ,			
	Mailing Address	440 1st Street NW					
	Mailing Address	Suite 350					
		Washington [DC 20001				
			20001				
		CITY ▲ STA	ATE ▲	ZIP CODE ▲			
	Relationship: X Connec	cted Organization Affiliated Organization Joint Fundraising Re	presentative	Leadership PAC Spons			
7.	Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.						
		, Sandra, , ,					
	Full Name	,7914 Old Marsh Lane					
	Mailing Address	7314 Gld Marsh Edile					
		Alexandria	VA 22315				
		CITY ▲ STA	ATE A	ZIP CODE ▲			
	Title or Position ▼						
	Director Operations	Telephone number	202	661 - 5383			
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 Starke, of Treasurer	, Anne, , ,					
	Mailing Address	440 First Street NW					
		Suite 350					
		Washington	DC 20001				
	Tale on Booth	CITY ▲ STA	ATE A	ZIP CODE ▲			
	Title or Position ▼ SD Fed. Affairs	1	. 202	262 2007			
		Telephone number	·				

Telephone number

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Full Name of Designated Agent						
Mailing Address						
Title or Position ▼	CITY ▲ STATE ▲	ZIP CODE ▲				
	Telephone number					
Banks or Other Depositoric safety deposit boxes or main	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, Depository, e	Name of Bank, Depository, etc.					
Chain Bridge Bank, N. A.						
Mailing Address	1445-A Laughlin Avenue					
	McLean VA	22101				
	CITY ▲ STATE ▲	ZIP CODE ▲				
Name of Bank, Depository, etc.						
Mailing Address						
	CITY ▲ STATE ▲	ZIP CODE ▲				