Image# 202406179649045254				PAGE 1 / 5
FEC FORM 1	STATEME ORGANIZ			
				Office Use Only
I. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Emergent BioSolut	tions Inc. Employe	es PAC		
	300 Professional Drive, Suite	≥ 400		
ADDRESS (number and street)				
is changed)	Gaithersburg		MD20	)879 I I
			STATE ▲	
COMMITTEE'S E-MAIL ADDRE	ESS			
(Check if address is changed)	gettyk@ebsi.com			
is changed)	Optional Second E-Mail Ac	ldress		
COMMITTEE'S WEB PAGE AD (Check if address is changed)	DRESS (URL)			
	7 / Y Y Y Y 2024			
3. FEC IDENTIFICATION N	UMBER ► C C	00380303		
-				
4. IS THIS STATEMENT	NEW (N) OR	× AMENDED (A)		
certify that I have examined t	his Statement and to the best	t of my knowledge and belie	f it is true, correct an	d complete.
Type or Print Name of Treasure	er McGill, Rachel, , ,			
Signature of Treasurer McG	ill, Rachel, , ,		Date 06	17 2024
NOTE: Submission of false, error		may subject the person signi TION SHOULD BE REPORT	-	e penalties of 52 U.S.C. §301
Office Use Only		For further information Federal Election Comm Toll Free 800-424-9530 Local 202-694-1100	nission	FEC FORM 1 (Revised 06/2012)

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5. TYPE OF COMMITTEE:				
Candidate 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 candidate information below.)				
Name of Candidate				
Candidate Office Party Affiliation Sought: House Senate President	State			
Party Affiliation Sought: House Senate President	District			
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Name of Candidate				
(d) his committee is a	nocratic, ublican, etc.) Party			
(e) X This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	onnected organization is a:			
Corporation Corporation w/o Capital Stock	abor Organization			
Membership Organization Trade Association C	Cooperative			
X In addition, this committee is a Lobbyist/Registrant PAC.				
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate seg committee. (i.e., nonconnected committee)	gregated 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 (Hy	rbrid PAC).			

## Joint Fundraising Representative:

(i) 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.
 (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
 2.

In addition, this committee is a Lobbyist/Registrant PAC.

Relationship:

	FEC Form 1 (Revised 0	)2/2009)		Page <b>3</b>	
٧	Vrite or Type Committee Name				
	Emergent BioSo	lutions Inc. Employees PAC			
6.	Name of Any Connected O	rganization, Affiliated Committee, Joint Fundraising Representative, or Leadersh	nip P	AC Spons	or
	Emergent BioSolution	ns Inc.			
	Mailing Address	300 Professional Drive, Suite 400			
		Gaithersburg         MD         20879           Image: Image in the			

STATE 🔺

Joint Fundraising Representative

ZIP CODE 🔺

Leadership PAC Sponsor

7.	Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee
	books and records.

CITY **▲** 

Affiliated Organization

X Connected Organization

McGill, Ra	chel, , ,
Mailing Address	300 Professional Dr., Suite 400
	Gaithersburg
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position ▼	
Custodian of Records	Telephone number     202     -     235     -     3467

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	McGill, Rachel, , ,		
Mailing Address	300 Professional Dr., Suite 400		
	Gaithersburg         MD         20879		
	CITY ▲ STATE ▲ ZIP CODE ▲		
Title or Position ▼			
Treasurer	Image:		

FEC Form 1 (Revised 02	/2009)	Page <b>4</b>
Full Name of Designated Agent		
Mailing Address		
	CITY A STATE A	ZIP CODE
Title or Position ▼		
	Telephone number	·

9. 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, etc.

PN			
Mailing Address	800 17th St NW 3rd Floor		
	Washington	DC 20006	
	CITY A	STATE A	ZIP CODE ▲
Name of Bank, Depos	itory, etc.		
Mailing Address			
	CITY A	STATE A	ZIP CODE ▲

## :97 `A=G79 @@5 B9CIG`H9LH`F9 @5 H98 `HC`5 `F9DCFHžG7<98 I@9 `CF`=H9A=N5 H=CB

Form/Schedule: F1A Transaction ID :

This amended registration is being filed to disclose the new contact email of the PAC. Please update your records accordingly.

Form/Schedule: Transaction ID: