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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) Stand With Crypto Alliance, Inc. Political Action Committee 1390 Chain Bridge Road #515 ADDRESS (number and street) (Check if address is changed) McLean 22101 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address nick@standwithcryptoalliance.org is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2024 C00876631 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 Carr, Nick,, Date 04 19 2024 Signature of Treasurer Carr, Nick, , , 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:
Use			Federal Election Commission
Only			Toll Free 800-424-9530
•,			Local 202-694-1100

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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 Party Affiliation Office Sought: House Senate President	State						
(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 Republican,	etc.) Party						
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 Trade Association Cooperat	ive						
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)	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 PAI	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						
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							

Title or Position ▼

Treasurer

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۷	Vrite or Type Committee I						
	Stand With C	Crypto Alliance, Inc. Politica	I Action Committee				
6.	Name of Any Connect	Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor					
	Stand With Crypto Alliance, Inc.						
	Mailing Address	1390 Chain Bridge Road #515					
		McLean	VA VA	22101			
		CITY ▲	STATE ▲	ZIP CODE ▲			
	Relationship: X Conn	nected Organization Affiliated Organization	Joint Fundraising Representati	ve Leadership PAC Spons			
7.	Custodian of Records: books and records.	Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.					
	Carr,	, Nick, , ,					
	Full Name						
	Mailing Address	1390 Chain Bridge Road #515					
		McLean	VA VA	22101			
		CITY ▲	STATE ▲	ZIP CODE ▲			
	Title or Position ▼						
	Treasurer		Telephone number				
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 Carr,	, Nick, , ,					
	of Treasurer						
	Mailing Address	1390 Chain Bridge Road #515					
		McLean	VA VA	22101			
		CITY ▲	STATE ▲	ZIP CODE ▲			

Telephone number

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Full Name of Designated Lynaugh, Agent	Mason, , ,					
Mailing Address	1390 Chain Bridge Road #515					
	McLean	VA 2210	1			
Title or Position ▼	CITY A	STATE ▲	ZIP CODE ▲			
Assistant Treasurer		number				
. Banks or Other Depositori safety deposit boxes or main	es: List all banks or other depositories in which the commatains funds.	nittee deposits funds, ho	lds accounts, rents			
Name of Bank, Depository,	Name of Bank, Depository, etc.					
Chain B	ridge Bank					
Mailing Address	1445-A Laughlin Avenue					
		VA 00404				
	McLean	VA 22101				
	CITY A	STATE ▲	ZIP CODE ▲			
Name of Bank, Depository,	etc.					
Mailing Address						
	CITY ▲	STATE ▲	ZIP CODE ▲			