Image# 2024	02069619678273
-------------	----------------

02/06/2024 15 : 54

PAGE 1 / 4 🗕

STATEMENT	OF
ORGANIZATI	ON

FEC FORM 1		STATEMEI ORGANIZ		_										AGE	.,
1. NAME OF		(Check if name		mple:If		type		12F	E4№	15	Office	e Use (Only		
COMMITTEE (in		is changed)	ove	r the line	es.										
Cornel West	for Pre	esident													
ADDRESS (number a	nd street)	PO Box 1577, 8253A Backlic	k Rd.												
X (Check if a is changed		1			1 1		I			I	1 1	I			
is changed	<i>.</i>)	Newington		1 1				VA	1	2	2122				
		CITY ▲						STAT	E▲				ZIP C	ODE	
COMMITTEE'S E-MA		SS													
X < (Check if a is changed		compliance@weinbergpart	ners.con	ז 											
	-)	Optional Second E-Mail Ad	dress												
(Check if a is changed		cornelWest2024.com													
2. DATE 02		D / Y Y Y Y 2024													
3. FEC IDENTIFIC	CATION NU	IMBER ► C c	0084350	8											
4. IS THIS STATEN	MENT	NEW (N) OR	×	AN	IENDE	D (A)									
I certify that I have e	examined th	is Statement and to the best	t of my l	knowled	ge and	belief	it is	true,	corre	ect a	nd co	omple	te.		
Type or Print Name	of Treasure	McKinney, Josiah, , ,													
Signature of Treasure		nney, Josiah, , ,					Da	ate		02 ^M	1	D D 06	/	ү 20	24
NOTE: Submission of	false, errone	ous, or incomplete information ANY CHANGE IN INFORMA									ne pe	nalties	3 of 5	2 U.S.	C. §30
Office Use Only				For furt Federal Toll Free Local 20	ner info Election 800-42	rmatior Commi 4-9530	cont							RM ⁻ /2012)	1

FEC Form 1 (Revised 03/2022) 5. TYPE OF COMMITTEE: **Candidate Committee:**

(a) X	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 Cand	
Cand	
(c)	Affiliation IND Sought: House Senate President District This committee supports/opposes only one candidate, and is NOT an authorized committee.
	me of ndidate
Party (d)	Committee: This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party
Politic	al Action Committee (PAC):
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
	Corporation Corporation w/o Capital Stock Labor Organization
	Membership Organization 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 separate segregated fund or party 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 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 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 (i) 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 (j) committees/organizations, none of which is an authorized committee of a federal candidate. Committees Participating in Joint Fundraiser С 1. С 2.

FEC Form 1 (Revised 02/2009)	Page 3
Write or Type Committee Name	
Cornel West for President	

6.	Name of Any Connected Or	rganization, Affiliated	Committee, Joint F	Fundraising Representative, o	or Leadership PAC Sponsor
	Mailing Address				
			CITY 🔺	STATE 🔺	ZIP CODE
	Relationship: Connected	Organization Affiliat	ted Organization	Joint Fundraising Representat	ive 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.

McKinney,	Josiah, , ,
Full Name	
Mailing Address	PO Box 1577, 8253A Backlick Rd.
	Newington VA 22122 Image: Im
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position ▼	
Treasurer	Telephone number 202 - 929 - 1610

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	McKinney, Josiah, , ,						
Mailing Address	PO Box 1577, 8253A Backlick Rd.						
	Newington VA 22122						
	CITY ▲ STATE ▲ ZIP CODE ▲						
Title or Position ▼							
Treasurer	Image:						

FEC Form 1 (Revised 02	2/2009)	Page 4
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.

	Amalgamated Bank		
Mailing Address	275 7th Ave		
	New York	NY 10001	
	CITY ▲	STATE A	ZIP CODE ▲
Name of Bank, [Depository, etc.	 	
Mailing Address			
	CITY ▲	STATE A	ZIP CODE ▲