Only

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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) is changed) over the lines. Cooper Victory Fund 301 Hillsborough St ADDRESS (number and street) Ste 950 (Check if address is changed) Raleigh 27603 NC CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address cooper@capcompliance.com is changed) Optional Second E-Mail Address sfalmlen@nexusstrategies.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2025 C00913574 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 Falmlen, Scott,, Date 07 28 2025 Signature of Treasurer Falmlen, Scott, , , 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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FE	EC Form 1 (Revised 03/2022)	Page 2
5.	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 can information below.)	didate
	Name of Candidate	
	Party Affiliation Sought: House Senate President	State
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	strict
	Name of Candidate	_
	Party Committee:	
	(d) This committee is a (National, State (Democratic, or subordinate) committee of the Republican, etc.)	Party
	Political Action Committee (PAC): (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization Corporation Corporation Wo Capital Stock Labor Organization Membership Organization Trade Association Cooperative In addition, this committee is a Lobbyist/Registrant PAC. This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund 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.) This committee is an independent expenditure-only political committee (Super PAC). In addition, this committee is a Lobbyist/Registrant PAC. This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC). In addition, this committee is a Lobbyist/Registrant PAC.	zation
	Joint Fundraising Representative: (i) X This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or mor 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 mor	·
	committees/organizations, none of which is an authorized committee of a federal candidate.	
	Committees Participating in Joint Fundraiser 1. Cooper for North Carolina C C00913566	
	2. DSCC C00042366	

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٧	Vrite or Type Committee Name	•	
	Cooper Victory F	und	
6.	Name of Any Connected Or	ganization, Affiliated Committee, Joint Fundraising Representative, o	or Leadership PAC Sponsor
	NONE		
	Mailing Address		
		CITY ▲ STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization Joint Fundraising Representation	ive Leadership PAC Sponsor
7.	Custodian of Records: Identi	fy by name, address (phone number optional) and position of the person	in possession of committee
	Zamore, Ju	dith	
	Full Name	, , , , , , , , , , , , , , , , ,	
	Mailing Address	600 Pennsylvania Ave SE #15180	
		Washington	20003
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Assistant Treasurer	Telephone number	02 6960
8.	Treasurer: List the name and any designated agent (e.g., a	address (phone number optional) of the treasurer of the committee; assistant treasurer).	and the name and address of
	Full Name Falmlen, So of Treasurer	cott, , ,	
		₁ 301 Hillsborough St	
	Mailing Address	Ste 950	
		Raleigh	27603
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Treasurer	9′	19 - 829 - 1132

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Full Name Designate Agent		
Mailing A	ldress	
	CITY ▲ STATE ▲	ZIP CODE ▲
Title or P	osition ▼	
	Telephone number	
. Banks or safety dep	Other Depositories: List all banks or other depositories in which the committee deposits funds, osit boxes or maintains funds.	holds accounts, rents
Name of	Bank, Depository, etc.	
	Amalgamated Bank	
Mailing Ad	dress 1825 K St NW	
	Washington DC 20	006
	CITY ▲ STATE ▲	ZIP CODE ▲
Name of	Bank, Depository, etc.	
		1
NA - Tr A -	· · · · · · · · · · · · · · · · · · ·	
Mailing Ad	dress	
	CITY ▲ STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). Joint Fundrais	•		
1. NORTH CAROLINA I	DEMOCRATIC PARTY - FEDERAL	FEC ID number	C C00165688
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connecte	d Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spons
Mailing Address			
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	ted Organization Affiliated Committee J tify by name, address (phone number – optional)	oint Fundraising Represent	ative Leadership PAC Sp
			ative Leadership PAC Sp
esignated Agent: Ident			ative Leadership PAC Sp
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esignated Agent: Ident			ative Leadership PAC Sp
esignated Agent: Ident	tify by name, address (phone number – optional)		ative Leadership PAC Sp
esignated Agent: Identification of the Full Name Mailing Address TITLE OR POSITIO	tify by name, address (phone number – optional)		
esignated Agent: Identification of the Full Name Mailing Address TITLE OR POSITIO	tify by name, address (phone number – optional)	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification of the Full Name Mailing Address TITLE OR POSITIO	tify by name, address (phone number – optional) N ▼ CITY ▲ tories: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification of Bank,	tify by name, address (phone number – optional) CITY CITY tories: List all banks or other depositories in whimaintains funds.	STATE A Telephone Number ch the committee deposi	ZIP CODE A
esignated Agent: Identification of Bank, epository, etc.	tify by name, address (phone number – optional) CITY tories: List all banks or other depositories in whimaintains funds.	STATE A Telephone Number ch the committee deposi	ZIP CODE A ts funds, holds accounts, rent
esignated Agent: Identification of Bank,	tify by name, address (phone number – optional) CITY tories: List all banks or other depositories in whimaintains funds.	STATE Telephone Number ch the committee deposi	ZIP CODE A ts funds, holds accounts, rent
esignated Agent: Identification of Bank, epository, etc.	tify by name, address (phone number – optional) CITY tories: List all banks or other depositories in whimaintains funds.	STATE Telephone Number ch the committee deposi	ZIP CODE A ts funds, holds accounts, rent