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. BLUEGRASS COMMITTEE 228 S Washington St ADDRESS (number and street) (Check if address Ste 115 is changed) Alexandria 22314 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS LSteinberg@blueandco.com (Check if address is changed) Optional Second E-Mail Address llisker@hdafec.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 18 2023 C00235655 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. Steinberg, Larry, , , Type or Print Name of Treasurer Steinberg, Larry, , , [Electronically Filed] 04 2023 Signature of Treasurer 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

FEC Form 1 (Revised 03/2022)	Page <b>2</b>
. TYPE OF COMMITTEE:	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate info	ormation below.)
(b) This committee is an authorized committee, and is NOT a principal campaign c information below.)	committee. (Complete the candidate
Name of Candidate	
Candidate Office Party Affiliation Sought: House Senate	State President District
(c) This committee supports/opposes only one candidate, and is NOT an authorized	d committee.
Name of Candidate	
Party Committee:	
(d) This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party
Political 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 NO committee. (i.e., nonconnected committee)	T a separate segregated 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 Pa	AC).
In addition, this committee is a Lobbyist/Registrant PAC.	
(h) This committee is a political committee with both contribution and non-contributi	ion accounts (Hybrid PAC).
In addition, this committee is a Lobbyist/Registrant PAC.	
Joint Fundraising Representative:	
(i) This committee collects contributions, pays fundraising expenses and disburses committees/organizations, at least one of which is an authorized committee of a	·
(j) This committee collects contributions, pays fundraising expenses and disburses committees/organizations, none of which is an authorized committee of a federal	·
Committees Participating in Joint Fundraiser	
1. [	C
	C

	FEC Form 1 (Revised 0	02/2009)			Page <b>3</b>
٧	Vrite or Type Committee Name				
	BLUEGRASS (				
6.	<u>-</u>	rganization, Affiliated Committee, Jo MAJORITY LEADER COMN		resentative, or Lea	adership PAC Sponsor
	Mailing Address	228 S WASHINGTON ST STE 115			
		ALEXANDRIA		VA 22	314
		CITY ▲		STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization	Joint Fundraisin	g Representative	Leadership PAC Sponso
7.	Custodian of Records: Ident books and records.	tify by name, address (phone number	optional) and position (	of the person in pos	ssession of committee
	Lisker, Lisa	a, , ,			
	Full Name	<u> </u>			
	Mailing Address	228 S. Washington St., Ste. 115			
		Alexandria		VA 22	314
		CITY ▲		STATE ▲	ZIP CODE ▲
	Title or Position ▼				
	Assistant Treasurer		Telephone nur	mber 703	549 7705
3.	Treasurer: List the name an any designated agent (e.g., a	d address (phone number optional) assistant treasurer).	of the treasurer of the	e committee; and the	ne name and address of
	Full Name Steinberg,	Larry, , ,			
	of Treasurer				
	Mailing Address	1200 North Meridian St.			
		Suite 400			
		Carmel		IN 46	032
		CITY ▲		STATE ▲	ZIP CODE ▲
	Title or Position ▼				
	Treasurer		Telephone nur	mber 317	- 428 - 6857

FEC Form 1	(Revised 02/2009)		Page <b>4</b>
Full Name of	Lisker, Lisa, , ,		
Designated Agent			
Mailing Address	228 S. Washington St., Ste. 115		
	Alexandria	VA L	22314
Title or Position	CITY ▲	STATE ▲	ZIP CODE ▲
Assistant Treasu		ımber	703   -   549   -   7705
	<b>Depositories:</b> List all banks or other depositories in which the commit xes or maintains funds.	tee deposits	funds, holds accounts, rents
Name of Bank, D	Depository, etc.		
	Republic Bank & Trust		
Mailing Address	2801 Bardstown Rd.		
	Louisville	KY	40205
	CITY A	STATE ▲	ZIP CODE ▲
Name of Bank, D	Depository, etc.		
	Truist/BB&T		
Mailing Address	1909 K St., NW		
	Washington	DC	20006
	CITY ▲	STATE ▲	ZIP CODE ▲

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

5(g)	or(h). <b>Joint Fundraising</b>	Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4		FEC ID number	С
6.		Organization, Affiliated Committee, Joint Fundra	ising Representativ	e, or Leadership PAC Sponsor
	Mailing Address	228 S WASHINGTON ST.  STE. 115		
		ALEXANDRIA	VA	22314
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
8.	Designated Agent: Identify	by name, address (phone number - optional)	Fundraising Represent	ative Leadership PAC Sponsor
	Davis, Keir Full Name	.th, , , ,		
	Mailing Address	228 S. Washington St., Ste. 115		
		Alexandria	VA	22314
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
	Assistant Treasurer	Tel-	ephone Number	703 - 549 - 7705
9.	safety deposit boxes or main Name of Bank,	ies: List all banks or other depositories in which the ntains funds.	he committee deposi	ts funds, holds accounts, rents
9.	safety deposit boxes or mail		he committee deposi	ts funds, holds accounts, rents
9.	safety deposit boxes or main Name of Bank,		he committee deposi	ts funds, holds accounts, rents
9.	Name of Bank, Depository, etc.		he committee deposi	es funds, holds accounts, rents
9.	Name of Bank, Depository, etc.		he committee deposi	es funds, holds accounts, rents

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

5(g) or (h)	). Joint Fundraising	Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
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6. <b>Na</b>	me of Any Connected C	Organization, Affiliated Committee, Joint Fundrai	sing Representative	e, or Leadership PAC Sponsor
1	MAKING INVESTN	MENTS TOWARD CONSERVATIVE	HEROES PAC	
-				
_		228 S. WASHINGTON ST.		
	Mailing Address			
		STE. 115		
		ALEXANDRIA	VA	22314
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	Organization X Affiliated Committee Joint F	undraising Representa	ative Leadership PAC Sponsor
	alamakad Assauk, Islandik.			
8. <b>Des</b>		by name, address (phone number – optional)		
8. <b>Des</b>	signated Agent: Identify  Full Name	by name, address (phone number – optional)		
8. <b>Des</b>		by name, address (phone number – optional)		
8. <b>Des</b>	Full Name	by name, address (phone number – optional)		
8. <b>Des</b>	Full Name	by name, address (phone number – optional)		
8. <b>Des</b>	Full Name	CITY	STATE ▲	ZIP CODE A
8. <b>De</b> s	Full Name	CITY A	STATE A	
9. <b>Ba</b> ı	Full Name Mailing Address  TITLE OR POSITION To the control of the control	CITY   CITY   Tele  es: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦
9. <b>Ba</b> ı safe	Full Name	CITY   CITY   Tele  es: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦
9. <b>Ba</b> ı safe	Full Name  Mailing Address  TITLE OR POSITION  Inks or Other Depositori fety deposit boxes or main me of Bank,	CITY   CITY   Tele  es: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦
9. <b>Ba</b> ı safe	Full Name Mailing Address  TITLE OR POSITION To the positoriety deposit boxes or main me of Bank, pository, etc	CITY   CITY   Tele  es: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦
9. <b>Ba</b> ı safe	Full Name Mailing Address  TITLE OR POSITION To the positoriety deposit boxes or main me of Bank, pository, etc	CITY   CITY   Tele  es: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦

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

h). <b>Joint Fundrais</b> i		FFC ID	C
1.		FEC ID number	
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connecte	d Organization, Affiliated Committee, Joint Fund	raising Representative	e. or Leadership PAC Spon
MCCONNELL, M			
	2318 DUNDEE ROAD		
Mailing Address			
	LOUISVILLE	L KY	40205
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		t Fundraising Representa	Leadership PAC Sp
	Affiliated Committee Joint fy by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC S
esignated Agent: Ident		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Ident		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Ident		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Ident	fy by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC Sp
esignated Agent: Ident Full Name Mailing Address	fy by name, address (phone number – optional)  CITY		
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   To	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   To  ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   To  ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or name of Bank,	fy by name, address (phone number – optional)  CITY   CITY   To  ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or name of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   To  ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or name of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   To  ories: List all banks or other depositories in which	STATE A	ZIP CODE A

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

FEC Form 1S (Revised 02/2017)

5(g) o	or(h). <b>Joint Fundraisin</b> g	յ Participant։		
	1.		FEC ID number	С
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
6.	•	Organization, Affiliated Committee, Joint Fundra	aising Representativ	e, or Leadership PAC Sponsor
	Mailing Address	228 S. WASHINGTON ST.		
		ALEXANDRIA	VA	22314
	Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	Connected	Organization Affiliated Committee	Fundraising Represent	ative Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
			lephone Number	
	safety deposit boxes or mai	ies: List all banks or other depositories in which t ntains funds.	the committee deposit	s funds, holds accounts, rents
	Depository, etc.			
	Mailing Address			

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

	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
lame of Any Connected	I Organization, Affiliated Committee, Joint F	undraising Representativ	e, or Leadership PAC Spons
Mailing Address	228 S Washington St Ste 115		
	Alexandria	VA VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	fy by name, address (phone number - optiona		
Full Name			
Full Name			
	CITY A	STATE A	ZIP CODE A
Mailing Address	CITY A	STATE A Telephone Number	ZIP CODE A
Mailing Address  TITLE OR POSITION	ories: List all banks or other depositories in w	Telephone Number	
Mailing Address  TITLE OR POSITION  Banks or Other Deposite afety deposit boxes or make the deposit boxes or make the depository, etc.	ories: List all banks or other depositories in w	Telephone Number	