

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

GTM NOMINEE FUND: OH-09

ADDRESS (number and street)

228 S WASHINGTON ST STE 115

Check if different
than previously
reported. (ACC)

ALEXANDRIA

VA

22314

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C

C00894535

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

April 15
Quarterly Report (Q1)July 15
Quarterly Report (Q2)October 15
Quarterly Report (Q3)January 31
Year-End Report (YE)July 31 Mid-Year
Report (Non-election
Year Only) (MY)Termination Report
(TER)(b) Monthly
Report
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)
(Non-Election
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)
(Non-Election
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of(d) 30-Day
POST-Election
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Lisker, Lisa, , ,

Signature of Treasurer

Lisker, Lisa, , ,

Date

M M M /

D D D /

Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

GTM NOMINEE FUND: OH-09

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y
01 01 2025

To:

M M / D D / Y Y Y Y Y
03 31 2025**I. Receipts****COLUMN A**
Total This Period**COLUMN B**
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

0.00

0.00

(ii) Unitemized

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

0.00

0.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

0.00

0.00

12. Transfers From Affiliated/Other

Party Committees.....

19167.01

19167.01

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))

19167.01

19167.01

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

19167.01

19167.01

DETAILED SUMMARY PAGE of Disbursements

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Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	0.00	0.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	0.00

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	0.00	0.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	0.00	0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 6 OF 8
(check only one)

☐ 11a	☐ 11b	☐ 11c	☒ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

GTM NOMINEE FUND: OH-09

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GROW THE MAJORITY

Mailing Address 228 S WASHINGTON ST STE 115

City
ALEXANDRIAState
VAZip Code
22314FEC ID number of contributing
federal political committee.

C

C00858373

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

19167.01

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2025

Transaction ID : SA12.4100

Amount of Each Receipt this Period

19167.01

☐ Memo Item

Distribution of Net Joint Funds: See Memos

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Siebel, Thomas, M., ,

Mailing Address 3000 Portola Rd.

City
WoodsideState
CAZip Code
94062FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

C3.ai

CEO

Receipt For:

☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1384.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 28 / 2025

Transaction ID : SA12.4100.0

Amount of Each Receipt this Period

1384.62

☒ Memo Item

GTM Transfer Memo

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Anwar, S. Javaid, , ,

Mailing Address 110 N. Marienfeld

City
MidlandState
TXZip Code
79701FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Midland Energy

CEO

Receipt For:

☐
☐

Primary

General

Other (specify)

Aggregate Year-to-Date ▼

1769.23

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 03 / 2025

Transaction ID : SA12.4100.1

Amount of Each Receipt this Period

1769.23

☒ Memo Item

GTM Transfer Memo

SUBTOTAL of Receipts This Page (optional)..... ►

19167.01

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 7 OF 8

☐ 11a	☐ 11b	☐ 11c	☒ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

GTM NOMINEE FUND: OH-09

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Bravo, Orlando, , ,

Mailing Address 5800 North Bay Rd.

City
Miami BeachState
FLZip Code
33140FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
RetiredOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2053.85

Date of Receipt

MM / DD / YYYY
02 / 05 / 2025**Transaction ID : SA12.4100.2**

Amount of Each Receipt this Period

2053.85

☒ Memo Item

GTM Transfer Memo

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Favre, Art, E., ,

Mailing Address 610 Highland Crossing St.

City
Baton RougeState
LAZip Code
70810FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Performance Contractors Inc.Occupation (for Individual)
Contractor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2746.15

Date of Receipt

MM / DD / YYYY
03 / 05 / 2025**Transaction ID : SA12.4100.3**

Amount of Each Receipt this Period

2746.15

☒ Memo Item

GTM Transfer Memo

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Langone, Kenneth, G., ,

Mailing Address 375 Park Ave.

City
New YorkState
NYZip Code
10152FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
InvemedOccupation (for Individual)
Founder/CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

MM / DD / YYYY
02 / 10 / 2025**Transaction ID : SA12.4100.4**

Amount of Each Receipt this Period

3500.00

☒ Memo Item

GTM Transfer Memo

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 8

(check only one)

☐ 11a	☐ 11b	☐ 11c	☒ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

GTM NOMINEE FUND: OH-09

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Thiel, Peter, , ,Mailing Address 3200 W. Sunset Blvd.
Ste. 1110City
West HollywoodState
CAZip Code
90026FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Founders FundOccupation (for Individual)
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 04 / 2025

Transaction ID : SA12.4100.5

Amount of Each Receipt this Period

3500.00

☒ Memo Item

GTM Transfer Memo

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Fox, Saul, , ,

Mailing Address 1111 Lincoln Rd.

City
Miami BeachState
FLZip Code
33139FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self EmployedOccupation (for Individual)
Fund Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 04 / 2025

Transaction ID : SA12.4100.6

Amount of Each Receipt this Period

3500.00

☒ Memo Item

GTM Transfer Memo

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Dunn, Timothy, M., ,

Mailing Address PO Box 52268

City
MidlandState
TXZip Code
79710FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Crownquest Operating LLCOccupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 07 / 2025

Transaction ID : SA12.4100.7

Amount of Each Receipt this Period

3500.00

☒ Memo Item

GTM Transfer Memo

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

19167.01