FEC FORM 1	STATEMEI ORGANIZ					
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	ffice Use Only		
ADDRESS (number and street)	onal Inc. Political		e			
is changed)	Coppell CITY ▲		TX 75 STATE ▲	019-4880 – ZIP CODE ▲		
COMMITTEE'S E-MAIL ADDF	RESS					
(Check if address is changed)	outsourcing@aristotle. Optional Second E-Mail Ad dan.fuller@brinker.c	dress				
COMMITTEE'S WEB PAGE A (Check if address is changed)	DDRESS (URL)					
2. DATE 09	19 / Y Y Y Y 2022					
3. FEC IDENTIFICATION NUMBER ► C C00241851						
4. IS THIS STATEMENT	NEW (N) OR	× AMENDED (A)				
I certify that I have examined Type or Print Name of Treasu	this Statement and to the best rer Fuller, Daniel, , ,	of my knowledge and belief it	is true, correct and	d complete.		
Signature of Treasurer	ller, Daniel, , ,	[Electronically Filed]	Date 09	/ D D / Y Y Y Y Y 19 2022		
NOTE: Submission of false, error	pneous, or incomplete information ANY CHANGE IN INFORMA	may subject the person signing the TION SHOULD BE REPORTED		penalties of 52 U.S.C. §30109.		
Office Use Only		For further information cc Federal Election Commissio Toll Free 800-424-9530		FEC FORM 1 (Revised 06/2012)		

Image# 202209199528534417

09/19/2022 14 : 43

EC Form 1 (Revised 03/2022)	Page 2
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. (Comp information below.)	lete the candidate
Name of Candidate	
CandidateOfficeParty AffiliationSought:HouseSenatePresident	
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
Name of	
Name of Candidate	
(d) This committee is a	iocratic, iblican, etc.) Party
Political Action Committee (PAC):	
(e) x This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected organization is a:
Corporation w/o Capital Stock	abor Organization
Membership Organization Trade Association C	ooperative
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate seg committee. (i.e., nonconnected committee)	regated 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 (Hyl	brid PAC).
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 more political 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 more political committees/organizations, none of which is an authorized committee of a federal candidate.
 (j) Committees Participating in Joint Fundraiser
 2.

FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

Brinker International Inc. Political Action Committee

6.	Name of Any Connected Or Brinker International	•	Committee,	Joint F	Fundraising	Representative, or	Leadership PAC Sponsor
	Mailing Address	3000 Olympus Blvd					
		Coppell					75019-4880
			CITY 🔺			STATE A	ZIP CODE
	Relationship: X Connected	Organization Affilia	ated Organizati	ion	Joint Fund	aising Representative	e Leadership PAC Sponso

7. **Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Phillips, Ju	stin, , ,				
Full Name					
Mailing Address	205 Pennsylvania Ave SE				
Washington					
	CITY ▲ STATE ▲ ZIP CODE ▲				
Title or Position ▼					
Custodian of Records	Telephone number 202 - 543 - 8345				

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	Fuller, Daniel, , ,					
of Treasurer						
Mailing Address	3000 Olympus Blvd					
Coppell TX 75019-4880						
	CITY A STATE A ZIP CODE A					
Title or Position ▼						
Treasurer 972 770 9581 Telephone number 972 1 1						

FEC Form 1 (Revised 02	009)				Page 4
Full Name of Designated Agent					
Mailing Address					
		(CITY A	STATE 🔺	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.

Chain	Bridge Bank, N.A.		
Mailing Address	1445-A Laughlin Avenue		
	McLean	VA 22101	
	CITY 🔺	STATE 🔺	ZIP CODE
Name of Bank, Depository	; etc. :rica Bank		
Mailing Address	PO Box 75000		
	Detroit	MI 48275	
	CITY 🔺	STATE A	ZIP CODE

:97 `A=G79 @@5 B9CIG`H9LH`F9 @5 H98 `HC`5 `F9DCFHžG7<98 I@9 `CF`+H9A=N5 H=CB

Form/Schedule: F1A Transaction ID :

Amending to add a bank account

Form/Schedule: Transaction ID: