FEC

Only

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. AEROVIRONMENT, INC PAC 241 18TH STREET SOUTH ADDRESS (number and street) **SUITE 415** (Check if address is changed) Arlington 22202-3414 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address outsourcing@aristotle.com is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2024 C00797530 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 Phillips, Justin, , Date 02 23 2024 Signature of Treasurer Phillips, Justin, , , 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)	ge 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. (Complete the candidate information below.)						
Name of Candidate						
Candidate Office State Senate President	-					
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.						
Name of Candidate						
Party Committee: (d) This committee is a (National, State or subordinate) committee of the Republican, etc.) Party Committee:	rty					
Political Action Committee (PAC):						
(e) X This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is as						
X Corporation Corporation w/o Capital Stock Labor Organization	on					
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:						
(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.						
Committees Participating in Joint Fundraiser						
1 C	픺					

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٧	Irite or Type Committee Name			
	AEROVIRONME	•		
6.	-	rganization, Affiliated Committee, Joint Fo	undraising Representat	ive, or Leadership PAC Sponsor
	Aerovironment, Inc.			
	Mailing Address	241 18th Street South		
		#415 		
		Arlington	VA	
		CITY ▲	STATE	ZIP CODE ▲
	Relationship: X Connected	Organization Affiliated Organization	Joint Fundraising Repres	sentative Leadership PAC Sponso
7.	Custodian of Records: Identification books and records.	fy by name, address (phone number optior	nal) and position of the pe	erson in possession of committee
	Schumache	er, Chad, , ,		
	Full Name			
	Mailing Address	241 18th St S		
		Ste 415		
		Arlington	VA VA	22202-3414
		CITY ▲	STATE	ZIP CODE ▲
	Title or Position ▼			
	Custodian of Records		Telephone number	805 796 8036
8.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the assistant treasurer).	e treasurer of the commi	ittee; and the name and address of
	Full Name Phillips, Just of Treasurer	stin, , ,		
		₁ 205 Pennsylvania Ave., SE		
	Mailing Address			
		Washington	DC	20003-1107
		CITY ▲	STATE	ZIP CODE ▲
	Title or Position ▼			
	Treasurer		Telephone number	202

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Full Name of Designated Agent Mailing Address	Checca, Rocky, , , , 241 18th St S Ste 415 Arlington	VA 22202-3414 —					
Title or Position	CITY ▲	STATE ▲ ZIP CODE ▲					
Designated Age	nt .	lephone number 805 - 796 - 6	6683				
	Depositories: List all banks or other depositories in which exposes or maintains funds.	the committee deposits funds, holds accounts, rel	nts				
Name of Bank,	Name of Bank, Depository, etc.						
Mailing Address	Chain Bridge Bank						
Mailing Address	McLean	VA 22101					
	CITY ▲	STATE ▲ ZIP CODE ▲					
Name of Bank,	Depository, etc.						
	JP Morgan						
Mailing Address	3 Park Plaza						
	Floor 9						
	Irvine	CA 92614					
	CITY ▲	STATE ▲ ZIP CODE ▲					

: 97 'A = G7 9 @ G B9 CI G'H9 LH F9 @ 5 H98 'HC '5 'F9 DC FHZ G7 < 98 I @ 'C F' + H9 A = N5 H+ C B

Form/Schedule: F1A Transaction ID:

Updated to reflect new appointed Treasurer and to add a second financial institution.

Form/Schedule: Transaction ID: