Only

(Revised 06/2012)

## STATEMENT OF

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**FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) GOLDEN GRAIN ENERGY LLC POLITICAL ACTION COMMITTEE 1822 43RD ST ADDRESS (number and street) (Check if address is changed) MASON CITY 50401 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address bpeters@ggecorn.com is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2007 C00414490 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 Sovereign, Dave, , Date 04 04 2024 Signature of Treasurer Sovereign, Dave, , , 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

Toll Free 800-424-9530

Local 202-694-1100

FEC Form 1 (Revised 03/2022)	age <b>2</b>					
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 Starty Affiliation Sought: House Senate President	ate					
Distr  (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	rict					
Name of Candidate						
Party Committee:						
(d) This committee is a (National, State or subordinate) committee of the Republican, etc.) Page 1	arty					
Political Action Committee (PAC):						
(e) X This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization	ization is a:					
X Corporation Corporation w/o Capital Stock Labor Organizat	tion					
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	=					

Title or Position ▼

NONE    Mailing Address	Г	_			
Write or Type Committee Name  GOLDEN GRAIN ENERGY LLC POLITICAL ACTION COMMITTEE  6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor NONE    NONE	1	FEC Form 1 (Revised (	2/2009)	Pa	age <b>3</b>
Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor NONE    Mailing Address	٧				.90 •
Mailing Address    Mailing Address		GOLDEN GRAIN	ENERGY LLC POLITICAL ACTION	ON COMMITTEE	
Mailing Address  CITY ▲ STATE ▲ ZIP CODE ▲  Relationship: Connected Organization Affiliated Organization Joint Fundraising Representative Leadership PAC Spons  7. Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.  Sovereign, Dave  Full Name I 15959 130th St.  Citry ▲ STATE ▲ ZIP CODE ▲  Title or Position ▼  Chairman/Treasurer Telephone number 563 - 547 - 3687  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 Sovereign, Dave  of Treasurer  Sovereign, Dave  full Name Sovereign, Dave  full Name Sovereign, Dave  of Treasurer  Insurer Sovereign, Dave  full Name Sovereign, Dave	6.	Name of Any Connected O	ganization, Affiliated Committee, Joint Fundraising Rep	presentative, or Leadership PAG	C Sponsor
CITY A STATE A ZIP CODE A  Relationship: Connected Organization Affiliated Organization Joint Fundraising Representative Leadership PAC Spone  7. Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.  Sovereign, Dave,  Full Name 15959 130th St.  CITY A STATE A ZIP CODE A  Title or Position ▼  Chairman/Treasurer Telephone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).  Full Name Sovereign, Dave,  Full Name Sovereign, Dave,  All State A ZIP CODE A  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 Sovereign, Dave,  Mailing Address 15959 130th St.  Mailing Address 15959 130th St.		NONE			
CITY A STATE A ZIP CODE A  Relationship: Connected Organization Affiliated Organization Joint Fundraising Representative Leadership PAC Spone  7. Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.  Sovereign, Dave,  Full Name 15959 130th St.  CITY A STATE A ZIP CODE A  Title or Position ▼  Chairman/Treasurer Telephone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).  Full Name Sovereign, Dave,  Full Name Sovereign, Dave,  All State A ZIP CODE A  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 Sovereign, Dave,  Mailing Address 15959 130th St.  Mailing Address 15959 130th St.					
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Sovereign, Dave, , , Full Name    15959 130th St.		Relationship: Connected	Organization Affiliated Organization Joint Fundraisi	ng Representative Leadersh	nip PAC Spons
Mailing Address    15959 130th St.	7.	books and records.		of the person in possession of co	mmittee
CITY ▲ STATE ▲ ZIP CODE ▲  Title or Position ▼  Chairman/Treasurer  Chairman/Treasurer  Telephone number  Telephone number  Telephone number  Source; 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 Sovereign, Dave, , , of Treasurer  Mailing Address  Source			,15959 130th St.		
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Title or Position ▼  Chairman/Treasurer  Telephone number  Telephone number  Telephone number  Telephone number  Telephone number  Telephone number  Sovereign, Dave, , , of Treasurer  Mailing Address  15959 130th St.			Cresco	IA 52136	-  , , ,
Chairman/Treasurer  Telephone number  Telephone			CITY ▲	STATE ▲ ZIP CC	DDE 🛦
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of Treasurer  Mailing Address  15959 130th St.	8.			ne committee; and the name and	address of
Mailing Address			Dave, , ,		
		Mailing Address	15959 130th St.		_
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<sub>I</sub> Cresco			<sub>I</sub> Cresco	IA   52136	

CITY 🔺

STATE ▲

Telephone number

563

ZIP CODE ▲

3687

547

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Full Name of Designated Agent		1 1 1 1 1 1 1	
Mailing Address			
	CITY A	STATE ▲	ZIP CODE ▲
Title or Position ▼	Telephone no	ımber	
. Banks or Other Depositories: List all banks or other safety deposit boxes or maintains funds.	depositories in which the commi	tee deposits funds, hold	ds accounts, rents
Name of Bank, Depository, etc.			
Wells Fargo Bank  10 N Wasington Avenue			
Mailing Address			
Mason City		IA   50401	
	DITY A	STATE ▲	ZIP CODE A
Name of Bank, Depository, etc.			
Mailing Address			
	CITY A	STATE ▲	ZIP CODE ▲