

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 1
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) KEEP AMERICA GREAT PAC, INC.			FEC IDENTIFICATION NUMBER ▼ C C00896365	
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on			MM / DD / YYYY	
Full Name of Payee Barrel Placements		Date of Public Distribution/Dissemination MM / DD / YYYY 03 / 17 / 2026		
Mailing Address PO Box 811		Amount 590191.10		
City Alexandria	State VA	Zip Code 22313-0811	Transaction ID : E4038D7F144EE4D0A955	
Purpose of Expenditure Media Buy		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 03 / 17 / 2026	
Name of Federal Candidate Morris, Nate, ,		☐ Support ☒ Oppose	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: KY	
Calendar Year-To-Date Per Election for Office Sought		5162659.95	Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶	
Full Name of Payee Storytellers Group LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 03 / 18 / 2026		
Mailing Address PO Box 1832		Amount 5665.00		
City Gallatin	State TN	Zip Code 37066-1832	Transaction ID : E529FDE3D4E9C41CEA34	
Purpose of Expenditure Text Blast		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 03 / 18 / 2026	
Name of Federal Candidate Barr, Garland, Andy, ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: KY	
Calendar Year-To-Date Per Election for Office Sought		5168324.95	Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures.....		595856.10		
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures.....		595856.10		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature GOODE, MICHAEL, , ,		Date MM / DD / YYYY 03 / 19 / 2026		