FEC

Only

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) National Rifle Association of America Political Victory Fund 11250 Waples Mill Road ADDRESS (number and street) (Check if address is changed) Fairfax 22030 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address pvfcompliance@nrahq.org is changed) Optional Second E-Mail Address kayla@crosbyott.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2023 C00053553 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 Funderburk, Zac,, Date 04 12 2024 Signature of Treasurer Funderburk, Zac, , , 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)	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. (Complete the car information below.)	ndidate
Name of Candidate	<u> </u>
Candidate Office	State
Party Affiliation Sought: House Senate President	District
(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
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization	janization is a:
Corporation Corporation w/o Capital Stock Labor Organi	zation
X 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 fun committee. (i.e., nonconnected committee)	d 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 (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 mo committees/organizations, at least one of which is an authorized committee of a federal candidate.	re political
(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or mo committees/organizations, none of which is an authorized committee of a federal candidate.	re political
Committees Participating in Joint Fundraiser	
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	FEC Form 1 (Revise	d 02/2009)	Page 3
۷	Vrite or Type Committee Na	me	
	National Rifle	Association of America Political Victory Fun	d
6.	Name of Any Connected	l Organization, Affiliated Committee, Joint Fundraising Representative	, or Leadership PAC Sponsor
	National Rifle Asso	ociation of America	
	Mailing Address	11250 Waples Mill Road	
		Fairfax	22030
	Belationship: X Connec	CITY STATE Affiliated Organization Joint Fundraising Represen	
7.		CITY ▲ STATE ▲ ted Organization Joint Fundraising Represent entify by name, address (phone number optional) and position of the person	tative Leadership PAC Sponso
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FEC Fo	orm 1 (Revised 02/2009)	Page 4
Full Name of Designated Agent Mailing Addi	Glaze, Kayla, , , 421 Office Park Drive	35223
Till B	CITY ▲ STATE ▲	ZIP CODE ▲
Title or Posi		
	ther Depositories: List all banks or other depositories in which the committee deposits fundation boxes or maintains funds.	ls, holds accounts, rents
Name of Ba	nk, Depository, etc.	
Mailing Addr		22012
Name of Ba	nk, Depository, etc.	
	Bank of America	
Mailing Addr	ress 100 North Tryon Street	
	Charlotte NC	28255
	CITY ▲ STATE ▲	ZIP CODE ▲

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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(h). Joint Fundraisi	ng rantopant.		
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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(h). Joint Fundraisi	ig Participant.			
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4.			FEC ID number	C
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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4.	Prganization, Affiliate	d Committee, Joint F	J FEC I	D number	С
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Mailing Address					
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Mailing Address					
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			Telephone I	Number	
Banks or Other Depositori safety deposit boxes or main		other depositories in wh	nich the comm	ittee deposit	s funds, holds accounts, rer
Name of Bank, Depository, etc. Mailing Address	Bank PO Box 1082				
Name of Bank, TrustCo				NY	12301