FEC FORM 1	STATEMEI ORGANIZ		PAGE 1 / 4
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5
			1MITTEE
	8150 N. Central Expwy		
ADDRESS (number and street)	Suite 1900		
is changed)	Dallas CITY ▲		TX 75206 STATE ▲ ZIP CODE ▲
COMMITTEE'S E-MAIL ADDF	RESS		
(Check if address is changed)	kpressler@kuprionthomas.	com	
	Optional Second E-Mail Ad	dress	
COMMITTEE'S WEB PAGE A (Check if address is changed)	DDRESS (URL)		
2. DATE 04	02 / Y Y Y Y 2024		
3. FEC IDENTIFICATION	NUMBER ► C C	00283523	
4. 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 i	it is true, correct and complete.
Type or Print Name of Treasu	rer Thomas, Sandra K., , ,		
Signature of Treasurer Th	omas, Sandra K., , ,		Date 04 / 02 / Y Y Y Y 2024
NOTE: Submission of false, erro		may subject the person signing TION SHOULD BE REPORTED	this Statement to the penalties of 52 U.S.C. §3010 WITHIN 10 DAYS.
Office Use Only		For further information Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100	

Image# 202404029627454586

04/02/2024 11 : 07

FE	C Form 1 (Revised 03/2022)	Page 2
5.	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 calinformation below.)	andidate
	Name of Candidate	
		State
	(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 Publican, etc	c.) Party
	Political Action Committee (PAC): (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.)	rganization is a:
	Corporation Corporation w/o Capital Stock Labor Orga	nization
	Membership Organization Trade Association Cooperative)
	In addition, this committee is a Lobbyist/Registrant PAC.	
	(f) X This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fu committee. (i.e., nonconnected committee)	ind 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 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.
 2.

FEC Form 1 (Revised 02/2009)	Page 3
Write or Type Committee Name	
DALLAS ENTREPRENEUR POLITICAL ACTION COMMITTEE	

6.	Name of Any Connected Or	ganization, Affiliated	Commit	tee, J	loint	Fur	dra	ising	Rep	ores	senta	tive,	or	Lea	ders	hip	PA	C S	pon	sor	
	Dallas Entrepreneurs	- Sessions 201	B Fund																		
]
	Mailing Address	1390 Chain Bridge Ro	j													1					
		Ste 515																			
		McLean									VA			221	01			-L			
			CITY	▲						ę	STATE					ZIF	P CC	DE			
	Relationship: Connected	Organization	ated Orgar	nizatio	n	×	Joint	Func	Iraisii	ng I	Repre	senta	ative			Lead	dersł	nip F	PAC	Spo	nso

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

Pressler, I	Keri, , ,		
Full Name			
Mailing Address	P.O. Box 824625		
	Dallas	TX 75382	
	CITY A	STATE 🔺	ZIP CODE
Title or Position ▼			
Custodian of Record		elephone number	

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 of Treasurer	Thomas, Sandra K., , ,
Mailing Address	8150 N. Central Expwy
	Suite 1900
	Dallas TX 75206
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	7
Treasurer	4211 4211

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent	Mellinger, Jill, , ,
Mailing Address	9210 Westview Circle
	Dallas TX 75231
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	,
Asst. Treasurer	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.

Park Cit	ies Bank		
Mailing Address	5307 E. Mockingbird, Ste. 200		
	Dallas	TX 75206	
	CITY A	STATE ▲	ZIP CODE
Name of Bank, Depository,	etc.		
Mailing Address	2200 Wilson Blvd.		
	Ste 100		
		VA 22201	
	CITY A	STATE ▲	ZIP CODE