

FEC FORM 1

STATEMENT OF ORGANIZATION

Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines.

12FE4M5

National Rifle Association of America Political Victory Fund

ADDRESS (number and street) 11250 Waples Mill Road

(Check if address is changed)

Fairfax

CITY ▲

VA

STATE ▲

22030

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

pvfcompliance@nrahq.org

Optional Second E-Mail Address
kayla@crosbyott.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

www.nrapvf.org

2. DATE

04 / 20 / 2023

3. FEC IDENTIFICATION NUMBER ▶

C C00053553

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 it is true, correct and complete.

Type or Print Name of Treasurer Funderburk, Zac, , ,

Signature of Treasurer

Funderburk, Zac, , ,

[Electronically Filed]

Date

04 / 20 / 2023

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 Use Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 06/2012)

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 candidate information below.)

Name of Candidate

Candidate Party Affiliation Office Sought: House Senate President State 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 (Democratic, Republican, etc.) Party

Political Action Committee (PAC):

- (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:

Corporation Corporation w/o Capital Stock Labor Organization
 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.

2.

C

C

Write or Type Committee Name

National Rifle Association of America Political Victory Fund

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

National Rifle Association of America

Grid lines for organization name

Mailing Address 11250 Waples Mill Road

Grid lines for mailing address

Fairfax VA 22030

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship: Connected Organization Affiliated Organization Joint Fundraising Representative Leadership PAC Sponsor

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

Full Name Funderburk, Zac, , ,

Mailing Address 11250 Waples Mill Road

Grid lines for mailing address

Fairfax VA 22030

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Treasurer

Telephone 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 Funderburk, Zac, , ,

Mailing Address 11250 Waples Mill Road

Grid lines for mailing address

Fairfax VA 22030

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Treasurer

Telephone number

Full Name of Designated Agent | Glaze, Kayla, , ,

Mailing Address | 421 Office Park Drive
|
| Mountain Brook | AL | 35223 |
CITY ▲ STATE ▲ ZIP CODE ▲

Title or Position ▼ | Assistant 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.

Wells Fargo Bank, N.A.

Mailing Address | 1753 Pinnacle Drive
|
| McLean | VA | 22012 |
CITY ▲ STATE ▲ ZIP CODE ▲

Name of Bank, Depository, etc.

Bank of America

Mailing Address | 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

FEC Form 1S (Revised 02/2017)

5(g) or (h). Joint Fundraising Participant:

1.	<input type="text"/>	FEC ID number	<input type="text" value="C"/>
2.	<input type="text"/>	FEC ID number	<input type="text" value="C"/>
3.	<input type="text"/>	FEC ID number	<input type="text" value="C"/>
4.	<input type="text"/>	FEC ID number	<input type="text" value="C"/>

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Mailing Address

Relationship: CITY ▲ STATE ▲ ZIP CODE ▲
 Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

8. Designated Agent: Identify by name, address (phone number – optional)

Full Name
Mailing Address

TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲
 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.
Mailing Address

 -
CITY ▲ STATE ▲ ZIP CODE ▲

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

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4.	<input type="text"/>	FEC ID number	<input type="text" value="C"/>

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Relationship: CITY ▲ STATE ▲ ZIP CODE ▲
 Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

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Full Name
Mailing Address

TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲
 Telephone Number --

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Mailing Address

 CITY ▲ STATE ▲ ZIP CODE ▲