Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) Conagra Brands, Inc. Good Government Association 222 W. Merchandise Mart Plaza ADDRESS (number and street) **Suite 1300** (Check if address is changed) Chicago 60654 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address megan.garcia@conagra.com is changed) Optional Second E-Mail Address fecinfo@pass1.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2025 C00087874 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 Murgatroyd, Dan,, 01 06 2025 Signature of Treasurer Murgatroyd, Dan, , , Date 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

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|---|--|----------------------|--|--|--|--|--|
| | 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 Party Affiliation Sought: House Senate President | 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 Republican, etc.) Page 1 | | | | | | | |
| Political Action Committee (PAC): | | | | | | | |
| | (e) X This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected | I organization is a: | | | | | |
| | X Corporation Corporation w/o Capital Stock Labor Or | ganization | | | | | |
| | Membership Organization Trade Association Cooperat | ive | | | | | |
| | X 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 par 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: | | | | | | |
| | 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. | | | | | | |
| | 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 | | | | | | |
| | 1C | | | | | | |
| | | | | | | | |

Treasurer

| | _ | | | | |
|----|--|--------------------------------------|------------------------------|----------------------------|--|
| 1 | FEC Form 1 (Revised 0) | 2/2009) | | Page 3 | |
| ٧ | Vrite or Type Committee Name | | | | |
| | Conagra Brands | , Inc. Good Government A | Association | | |
| 6. | Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor | | | | |
| | Conagra Brands, Inc. | | | | |
| | | | | | |
| | Mailing Address | 222 W. Merchandise Mart Plaza | | | |
| | | Suite 1300 | | | |
| | | Chicago | ı | 60654 | |
| | | CITY ▲ | STATE ▲ | ZIP CODE ▲ | |
| | Relationship: X Connected | Organization Affiliated Organization | Joint Fundraising Representa | tive Leadership PAC Sponso | |
| 7. | Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records. | | | | |
| | Garcia, Meç | gan, , , | | | |
| | Mailing Address | c/o PASS 1950 Roland Clarke Place | | | |
| | Mailing Address | Suite 300 | | | |
| | | Reston | VA | 20191 | |
| | | CITY ▲ | STATE ▲ | ZIP CODE ▲ | |
| | Title or Position ▼ | • | | | |
| | Custodian of Records | | Telephone number | 202 - 756 - 2450 | |
| 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 Murgatroyd of Treasurer | , Dan, B, , | | | |
| | Mailing Address | 222 W. Merchandise Mart Plaza | | | |
| | | Suite 1300 | | | |
| | | Chicago | IL IL | 60654 | |
| | Title or Position ▼ | CITY ▲ | STATE ▲ | ZIP CODE ▲ | |

5527

549

Telephone number

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|---|--|---------------------------------|-----------------------------|--|--|--|--|
| Full Name of Designated Rea Agent | ıktenwalt, Kate, , , | | | | | | |
| Mailing Address | 222 W. Merchandise Mart Plaza | | | | | | |
| | Suite 1300 | | | | | | |
| | Chicago | | 60654 | | | | |
| | CITY ▲ | STATE ▲ | ZIP CODE ▲ | | | | |
| Title or Position ▼ Assistant Treasurer | | Telephone number 3 | 12 - 549 - 5330 | | | | |
| Banks or Other Depo safety deposit boxes o | sitories: List all banks or other depositories in r maintains funds. | which the committee deposits fu | unds, holds accounts, rents | | | | |
| Name of Bank, Deposit | Name of Bank, Depository, etc. | | | | | | |
| U.S | U.S. Bank | | | | | | |
| Mailing Address | PO Box 64799 | | | | | | |
| | | | | | | | |
| | Saint Paul | MN | 55164 | | | | |
| | CITY ▲ | STATE ▲ | ZIP CODE ▲ | | | | |
| Name of Bank, Depository, etc. | | | | | | | |
| | | | | | | | |
| Mailing Address | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | CITY ▲ | STATE ▲ | ZIP CODE ▲ | | | | |

: 97 'A = G7 9 @ G5 B9 CI G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCF HZ G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: F1A Transaction ID:

This amendment is being filed to disclose a new PAC Treasurer.

Form/Schedule: Transaction ID: