FEC FORM 1

STATEMENT OF ORGANIZATION

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines. 12FE4X5

Senate Conservatives Fund.

ADDRESS (number and street) (Check if address is changed)

P.O. Box 388

Alexandria, VA 22313

COMMITTEE’S E-MAIL ADDRESS

COMMITTEE’S WEB PAGE ADDRESS (URL)

COMMITTEE’S FAX NUMBER

703-281-9817

2. DATE

3. FEC IDENTIFICATION NUMBER

4. IS THIS STATEMENT \ CHECK \ NEW (N) OR \ CHECK \ 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 Barry Wynn

Signature of Treasurer Barry Wynn Date 4/14/2008

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office Use Only

For further information contact: Federal Election Commission Toll Free 800-424-9330 Local 202-694-1100

FEC FORM 1

(Revised 12/2007)
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 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 (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

(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 Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:
(g) 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.

(h) 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. FEC ID number
2. FEC ID number
3. FEC ID number
4. FEC ID number
5. FEC ID number
Write or Type Committee Name

Senate Conservatives Fund

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

MINT PAC

Mailing Address: P.O. Box 25943

<table>
<thead>
<tr>
<th>Address</th>
<th>CITY</th>
<th>STATE</th>
<th>ZIP CODE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Alexandria</td>
<td>VA</td>
<td>22313</td>
</tr>
</tbody>
</table>

Relationship:
Connected Organization: Affiliated Committee

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: Lisa Lisker

Mailing Address: 228 S. Washington Street, Suite 115

<table>
<thead>
<tr>
<th>Address</th>
<th>CITY</th>
<th>STATE</th>
<th>ZIP CODE</th>
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<tbody>
<tr>
<td></td>
<td>Alexandria</td>
<td>VA</td>
<td>22314</td>
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Title or Position: Assistant Treasurer

Telephone number: 703-549-7705

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: Barry Wynn

Mailing Address: 359 S. Pine Street, F.O. Box 1724

<table>
<thead>
<tr>
<th>Address</th>
<th>CITY</th>
<th>STATE</th>
<th>ZIP CODE</th>
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<tr>
<td></td>
<td>Spartanburg</td>
<td>SC</td>
<td>29302</td>
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Title or Position: Treasurer

Telephone number: 864-582-3356
Write or Type Committee Name

Senate Conservatives Fund

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

[Name]

Mailing Address: P.O. Box 12425
Columbia, SC 29211

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: Lisa Lisker
Mailing Address: 228 S. Washington Street, Suite 115
Alexandria, VA 22314
Title or Position: Assistant Treasurer

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: Barry Wynn
Mailing Address: P.O. Box 1724
Spartanburg, SC 29302
Title or Position: Treasurer

Telephone number:

| Full Name of 
Designated Agent | Lisa Lisker |
<table>
<thead>
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</thead>
<tbody>
<tr>
<td>Mailing Address</td>
<td>228 S. Washington Street, Suite 115, Alexandria, VA 22314</td>
</tr>
<tr>
<td>Title or Position</td>
<td>Assistant Treasurer</td>
</tr>
<tr>
<td>Telephone number</td>
<td>703-549-7705</td>
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</table>

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.

<table>
<thead>
<tr>
<th>Name of Bank, Depository, etc.</th>
<th>Wachovia</th>
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<tbody>
<tr>
<td>Mailing Address</td>
<td>330 N. Washington Street, Alexandria, VA 22314</td>
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<table>
<thead>
<tr>
<th>Name of Bank, Depository, etc.</th>
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<tr>
<td>Mailing Address</td>
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<tr>
<td>CITY</td>
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<tr>
<td>STATE</td>
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<tr>
<td>ZIP CODE</td>
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<tr>
<td>Service</td>
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<td>------------------------------------------</td>
</tr>
<tr>
<td>1. Hand Delivered</td>
</tr>
<tr>
<td>2. USPS First Class Mail</td>
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<tr>
<td>3. USPS Registered/Certified</td>
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<td>4. USPS Priority Mail</td>
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<td>5. USPS Express Mail</td>
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<td>6. Postmark Illegible</td>
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<td>7. No Postmark</td>
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<tr>
<td>8. Overnight Delivery Service (Specify):</td>
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<tr>
<td>9. Received from House Records &amp; Registration Office</td>
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<tr>
<td>10. Received from Senate Public Records Office</td>
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<tr>
<td>11. Received from Electronic Filing Office</td>
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<tr>
<td>12. Other (Specify):</td>
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</table>

PREPARER: JMV8
DATE PREPARED: 4/15/08
(3/2005)