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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) is changed) over the lines. Catherine Cortez Masto for Senate 8020 South Rainbow Blvd ADDRESS (number and street) Suite 100-112 (Check if address is changed) Las Vegas 89139 NV CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS ccm@mbacg.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.catherinecortezmasto.com (Check if address is changed) DATE 2021 C00575548 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. Snyder, Lili, , , Type or Print Name of Treasurer Snyder, Lili,,, [Electronically Filed] 10 15 2021 Signature of Treasurer Date 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 For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only

Local 202-694-1100

EEC Form 1 (Paying 02/2000)	Page 2
FEC Form 1 (Revised 02/2009) TYPE OF COMMITTEE	Page 2
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. (Cominformation below.)	plete the candidate
Name of Candidate Cortez Masto, Catherine, , ,	
Candidate Party Affiliation DEM Office Sought: House Fresident	State NV District
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate	
Party Committee:	(Dama aratic
	(Democratic, Republican, etc.) Party.
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nnected 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 se committee. (i.e., nonconnected committee)	egregated fund or party
In addition, this committee is a Lobbyist/Registrant PAC.	
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 committees/organizations, at least one of which is an authorized committee of a federal candidate.	vo or more political
(h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political
Committees Participating in Joint Fundraiser	
Committees Participating in Joint Fundraiser 1. FEC ID number	
L L EEC ID number	
1. FEC ID number C	

FFC Forms 1 (Deviced	02/2000)	Dama 2
FEC Form 1 (Revised Write or Type Committee Name		Page 3
	ez Masto for Senate	
		or Loadorchin DAC Sponsor
-	Organization, Affiliated Committee, Joint Fundraising Representative,	or LeaderShip PAC Sponsor
Cortez Masto Victory	-und 	
Mailing Address	611 Pennsylvania Ave SE	
	Suite 143	
	Washington DC	20003
	CITY STATE	ZIP CODE
Relationship: Connecte	d Organization Affiliated Committee Joint Fundraising Representation	tive Leadership PAC Sponsor
books and records. Mele, Ste	ntify by name, address (phone number optional) and position of the perven, , ,	erson in possession of committee
Full Name	,611 Pennsylvania Ave SE	
Mailing Address	Suite 143	
		20003
	Washington	20003
Title or Position	CITY STATE	ZIP CODE
Assistant Treasurer	Telephone number	
8. Treasurer: List the name an any designated agent (e.g.,	d address (phone number optional) of the treasurer of the committee; assistant treasurer).	and the name and address of
Full Name Snyder, Li	li, , ,	1
of Treasurer	8020 South Rainbow Blvd	
Mailing Address	Suite 100-112	
	,	180120
	Las Vegas NV STATE	89139
Title or Position , Treasurer	CIT STATE	ZIF CODE
	Telephone number	

FEC For i	rm 1 (Revised 02/2009) Page 4	
Full Name of Designated Agent	Mele, Steven, , ,	
Mailing Address	611 Pennsylvania Ave SE	
	Suite 143	
	Washington DC 20003 - CITY STATE ZIP CODE	
Title or Position Assistant Treas		<u> </u>
Banks or Other	er Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, ren	
	Depository, etc.	is
safety deposit be	Depository, etc. Amalgamated Bank	is
safety deposit be	Depository, etc. Amalgamated Bank 1825 K St NW	is
safety deposit be Name of Bank,	Depository, etc. Amalgamated Bank 1825 K St NW	is
safety deposit be Name of Bank,	Depository, etc. Amalgamated Bank 1825 K St NW	is
safety deposit be Name of Bank,	Depository, etc. Amalgamated Bank 1825 K St NW	is
safety deposit be Name of Bank,	Depository, etc. Amalgamated Bank 1825 K St NW Washington CITY STATE ZIP CODE	is
safety deposit be Name of Bank, Mailing Address	Depository, etc. Amalgamated Bank 1825 K St NW Washington CITY STATE ZIP CODE Depository, etc.	
safety deposit be Name of Bank, Mailing Address	Depository, etc. Amalgamated Bank 1825 K St NW Washington CITY STATE ZIP CODE Depository, etc. Janney Montgomery Scott LLC 1255 23rd St NW #810	
safety deposit be Name of Bank, Mailing Address	Depository, etc. Amalgamated Bank 1825 K St NW Washington CITY STATE ZIP CODE Depository, etc. Janney Montgomery Scott LLC 1255 23rd St NW #810	

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

FEC Form 1S (Revised 02/2017)

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or(h). Joint Fundraisir	ng Participant:		
1.		FEC ID number	С
2		FEC ID number	C
3.		FEC ID number	C
4		FEC ID number	С
Name of Any Connected Nevada Senate V	Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Sponsor
14cvada Geriate v			
Mailing Address	120 Maryland Avenue NE		
	Washington	, DC	20002
Relationship:	CITY A	STATE A	ZIP CODE ▲
		int Fundraising Representa	
Designated Agent: Identif	y by name, address (phone number – optional)		
Full Name			
Mailing Address			
		<u> </u>	
	CITY ▲	STATE A	ZIP CODE A
TITLE OR POSITION	V 0111 2	SIAIL A	ZII OODE A
		Telephone Number	
safety deposit boxes or ma	pries: List all banks or other depositories in whic aintains funds. Sboro Bank	h the committee deposit	s funds, holds accounts, rents
Mailing Address	5 N Main Street		
	Woodsboro	MD MD	21798

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

Page ____ **of** _____

1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
Blue Senate Cand			
Mailing Address	918 Pennsylvania Ave SE		
	Washington	DC	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
esignated Agent: Identify Full Name	by name, address (phone number – optional)		
	by name, address (phone number – optional)		
Full Name	by name, address (phone number – optional)		
Full Name	by name, address (phone number – optional)		
Full Name	CITY	STATE A	ZIP CODE A
Full Name	CITY A	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or material deposition are of Bank,	CITY A Te ries: List all banks or other depositories in which	elephone Number	
Full Name Mailing Address TITLE OR POSITION	CITY A Te ries: List all banks or other depositories in which	elephone Number	
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor defety deposit boxes or main arms of Bank,	CITY A Te ries: List all banks or other depositories in which	elephone Number	

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

Page _____ **of** _____

h). Joint Fundraisi n		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
Silver State Victor	ry 2022		
Mailing Address	2828 N Central Ave		
	FI 10		
	Phoenix	AZ	85004
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		Fundraising Representa	ative Leadership PAC S
Connected		Fundraising Representa	Leadership PAC S
Connected esignated Agent: Identify	d Organization Affiliated Committee	Fundraising Representa	Leadership PAC S
esignated Agent: Identify	d Organization Affiliated Committee	Fundraising Representa	Leadership PAC S
Connected esignated Agent: Identify Full Name	d Organization Affiliated Committee	Fundraising Representa	Leadership PAC S
esignated Agent: Identify	d Organization Affiliated Committee Joint by by name, address (phone number – optional)	Fundraising Representa	Leadership PAC S
esignated Agent: Identify Full Name Mailing Address	Affiliated Committee y by name, address (phone number – optional) CITY		
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or mail	Affiliated Committee y by name, address (phone number – optional) CITY CITY Teleprises: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma ame of Bank, epository, etc.	Affiliated Committee y by name, address (phone number – optional) CITY CITY Teleprises: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma	Affiliated Committee y by name, address (phone number – optional) CITY CITY Teleprises: List all banks or other depositories in which	STATE A	ZIP CODE A

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

Page ____ **of** _____

5(g) or (h).	Joint Fundraising	Participant:		
1.			FEC ID number	C
2.			FEC ID number	C
3.			FEC ID number	C
4.			FEC ID number	C
	e of Any Connected O ortez Masto Victo	rganization, Affiliated Committee, Joint Fundrais	sing Representative	e, or Leadership PAC Sponsor
	Mailing Address	611 Pennsylvania Ave SE		
		Ste 143		
		Washington	DC	20003
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	nated Agent: Identify but	by name, address (phone number – optional)		
Fu		oy name, address (phone number – optional)		
Fu	ull Name	oy name, address (phone number – optional)		
Fu	ull Name			
Fu Ma	ull Name	CITY A	STATE A	ZIP CODE A
Fu Ma	ull Name	CITY A	STATE A	
9. Banks safety Name	ull Name	CITY Tele	phone Number	ZIP CODE A
9. Banks safety Name	ailing Address FITLE OR POSITION s or Other Depositories deposit boxes or main e of Bank, sitory, etc.	CITY Tele	phone Number	ZIP CODE A

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

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h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spon
Silver Lining Victor	ory Fund 		
Mailing Address	611 Pennsylvania Ave SE		
Mailing Address	Ste 143		
	Washington	, DC	20003
Deleteration			
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee Join fy by name, address (phone number – optional)	nt Fundraising Represent	ative Leadership PAC Sp
		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	STATE	
esignated Agent: Identing Full Name	fy by name, address (phone number – optional) CITY		
esignated Agent: Identing Full Name Mailing Address	fy by name, address (phone number – optional) CITY T	STATE A	ZIP CODE A
esignated Agent: Identing Full Name Mailing Address	fy by name, address (phone number – optional) CITY CITY Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identii Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or marketed and ma	fy by name, address (phone number – optional) CITY CITY Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). Joint Fundraisin			
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
Progress 2022 Vio	tory Fund		
Mailing Address	600 Pennsylvania Ave SE		
Ü	#15180		
	Washington	DC	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		Fundraising Representa	ative Leadership PAC S
	Organization Affiliated Committee Joint by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC S
esignated Agent: Identify		Fundraising Representa	ative Leadership PAC S
esignated Agent: Identify Full Name		Fundraising Representa	ative Leadership PAC S
esignated Agent: Identify Full Name		Fundraising Representa	ative Leadership PAC S
esignated Agent: Identify Full Name	by name, address (phone number – optional)	Fundraising Representation	Leadership PAC S
esignated Agent: Identify Full Name Mailing Address	by name, address (phone number – optional) CITY		
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or ma	by name, address (phone number – optional) CITY CITY Te ies: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor affety deposit boxes or ma ame of Bank, epository, etc.	by name, address (phone number – optional) CITY CITY Te ies: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION	by name, address (phone number – optional) CITY CITY Te ies: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or ma ame of Bank, epository, etc.	by name, address (phone number – optional) CITY CITY Te ies: List all banks or other depositories in which	STATE A	ZIP CODE A