Only

STATEMENT OF

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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) Gillibrand for Senate PO Box 150516 ADDRESS (number and street) (Check if address is changed) Brooklyn 11215 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address cjgrover@vlpc.com is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.kirstengillibrand.com (Check if address is changed) DATE 2024 C00413914 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) 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 Lowey, Keith, D., , Date 04 26 2024 Signature of Treasurer Lowey, Keith, D.,, 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

EC Form 1 (Revised 03/2022)	Page 2
TYPE OF COMMITTEE:	
Candidate Committee:	
(a) X 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 information below.)	e candidate
Name of Candidate Gillibrand, Kirsten, , ,	
Candidate Party Affiliation DEM Office Sought: House X Senate President	State NY 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 (Democratic or subordinate) committee of the Republican	c, , etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ed organization is a:
Corporation Corporation w/o Capital Stock Labor C	Organization
Membership Organization Trade Association Coopera	
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate committee. (i.e., nonconnected committee)	d 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.)	
(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 PA	AC).
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 committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
(j) 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.	or more political
Committees Participating in Joint Fundraiser	
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I	FEC Form 1 (Revised 0)	2/2009)			Page 3
٧	Irite or Type Committee Name				
	Gillibrand for Ser				
6.	-	ganization, Affiliated Committe	e, Joint Fundraising	Representative, or	Leadership PAC Sponsor
	Gillibrand Victory Fur	1 a 			
	Mailing Address	124 Washington Street			
		Suite 101			
		Foxboro		MA	02035
		CITY A		STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization	zation X Joint Fund	draising Representativ	ve Leadership PAC Sponso
			_		
7.	Custodian of Records: Identi books and records.	fy by name, address (phone numl	ber optional) and pos	sition of the person ir	n possession of committee
	Lowey, Keit	h, D., ,			
	Full Name	124 Washington Street			
	Mailing Address	124 Washington Street			
		Suite 101			
		Foxboro		MA MA	02035
		CITY A		STATE ▲	ZIP CODE ▲
	Title or Position ▼				
	Treasurer		Telephor	ne number 50	8 - 543 - 1720
8.	Treasurer: List the name and any designated agent (e.g., a	l address (phone number opti ssistant treasurer).	onal) of the treasurer	of the committee; a	nd the name and address of
	Full Name Lowey, Keir	h, D., ,			
		124 Washington Street			
	Mailing Address	Suite 101			
		Foxboro		MA	02035
	Title or Desition	CITY ▲		STATE ▲	ZIP CODE ▲
	Title or Position ▼ Treasurer			, 50	8 543 1720
			Telephor	ne number	

	FEC Form 1	(Revised 02/2009)	Page 4
	Full Name of Designated Agent		
N	Mailing Address		
		CITY ▲ STATE ▲	ZIP CODE ▲
Т	itle or Position		
L		Telephone number	
. B	anks or Other afety deposit box	Depositories: List all banks or other depositories in which the committee deposits ses or maintains funds.	s funds, holds accounts, rents
N	lame of Bank, D	epository, etc.	
		Amalgamated Bank	
N	failing Address	1825 K Street, NW	
		Washington	20006
		CITY ▲ STATE ▲	ZIP CODE ▲
N	lame of Bank, D	epository, etc.	
		Chain Bridge Bank, NA	
N	lailing Address	1445-A Laughlin Ave	
		McLean VA	22101
		CITY ▲ STATE ▲	ZIP CODE ▲

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(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	I Organization, Affiliated Committee, Joint F	undraising Representativ	re, or Leadership PAC Spons
Financial Innovation	Victory Committee		
Mailing Address	502 Monroe Street		
	1		
	Newport	KY	41071
Relationship:	CITY ▲	STATE A	. ZIP CODE ▲
		Joint Fundraising Represen	tative Leadership PAC Sp
Connecte esignated Agent: Identi			tative Leadership PAC Sp
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Connecte esignated Agent: Identi	ed Organization Affiliated Committee X		Leadership PAC Sp
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fu	ndraising Representativ	or Leadershin PAC Snon
New York Majority F	-		
Mailing Address	124 Washington St.		
	Suite 101		
	Foxboro	MA MA	02035
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
esignated Agent: Identif	y by name, address (phone number – optional))	
Full Name	y by name, address (phone number – optional)		
	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
Full Name L L L L L L L L L L L L L L L L L L L	CITY		ZIP CODE A
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	CITY		ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank,	CITY ▲ Pries: List all banks or other depositories in whaintains funds.	STATE Telephone Number ich the committee deposit	
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	ising Participant:				
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2.			FEC ID numbe	er C	
3.			FEC ID numbe	er C	
4.			FEC ID numbe	er C	
ame of Any Connec	ted Organization, Affiliat	ted Committee, Joint F	undraising Representa	tive, or Leadership P	AC Spons
Women Senators	Making History				1 1 1
	222 5				
Mailing Address	600 Pennsylvania A	Ave, SE			
	Suite 15180				
	_I Washington		DC	20003	
	VVasilington				
			STATE Joint Fundraising Represe		ODE ▲
Conne	octed Organization Af	ffiliated Committee X	Joint Fundraising Represe		
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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or(h). Joint Fundraisin	g Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
Name of Any Connected	Organization, Affiliated Committee, Join	t Fundraising Representativ	e, or Leadership PAC Sponsor
Gillibrand Baldwin Vid	ctory Fund		
	404 Week's at a 20most		
Mailing Address	124 Washington Street		
	Suite 101		
	Foxboro		02035
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	by name, address (phone number - option	onal)	
Full Name			
Mailing Address			
TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		Telephone Number	
			_
Banks or Other Deposito	ries: List all banks or other depositories in	which the committee deposit	ts funds, holds accounts, rents
safety deposit boxes or ma	intains funds.		
Name of Bank, Depository, etc.			<u> </u>
Mailing Address	1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
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	OITY A	OTATE :	710 0005 4
	CITY ▲	STATE ▲	ZIP CODE ▲

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h). Joint Fundraisi	ing Participant.		
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2.		FEC ID number	C
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ame of Any Connected	d Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spon
New York Senate Vi	ctory 2024		
	420 Mandard Ava NE		
Mailing Address	120 Maryland Ave NE		
	Washington	DC	20002
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecto	ed Organization Affiliated Committee X Joi	nt Fundraising Represent	ative Leadership PAC Sp
Connecto		nt Fundraising Represent	Leadership PAC Sp
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Take Back NY-3	Organization, Anniated Committee, Joint Full		e, or Leauership FAC Spons
Mailing Address	124 Washington St		
	Suite 101		
	Foxboro	MA	02035
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
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lame of Any Connected	Organization, Affiliated Committee, Joint Fu	ndraising Poprosontativ	o or Loadorchin BAC Spon
Justice 2024		indiaising nepresentativ	e, or Leadership TAO Spon
Mailing Address	600 Pennsylvania Ave SE		
	Suite 15180		
	Washington	DC	20003
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
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esignated Agent: Identif			ative Leadership PAC Sp
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