FEC FORM 1	STATEMEN ORGANIZA	_	PAGE 1 / 8 -
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5
)	
ADDRESS (number and street)	P.O. BOX 509		
Check if address			
is changed)			VA 22216 STATE ▲ ZIP CODE ▲
COMMITTEE'S E-MAIL ADD	RESS		
(Check if address is changed)	MAGAPAC@REDCURVE.C	ОМ 	
	Optional Second E-Mail Addr	ess	
COMMITTEE'S WEB PAGE A (Check if address is changed)	Address (URL)		
2. DATE 01 /	31 / Y Y Y Y 32025		
3. FEC IDENTIFICATION	NUMBER ► C coo	580100	
4. IS THIS STATEMENT	NEW (N) OR	× AMENDED (A)	
I certify that I have examined	d this Statement and to the best o	f my knowledge and belief	it is true, correct and complete.
Type or Print Name of Treas	urer <u>CRATE, BRADLEY, T., MR.,</u>		
Signature of Treasurer C	RATE, BRADLEY, T., MR.,		Date 01 / 01 / 2025
NOTE: Submission of false, err	oneous, or incomplete information m ANY CHANGE IN INFORMATI		g this Statement to the penalties of 52 U.S.C. §30 D WITHIN 10 DAYS.
Office Use Only		For further information Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100	

01/31/2025 10 : 36

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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: (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 or	ganization is a:						
	Corporation Corporation w/o Capital Stock Labor Organ	nization						
	Membership Organization Trade Association Cooperative							
	In addition, this committee is a Lobbyist/Registrant PAC.							
	(f) X This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fur committee. (i.e., nonconnected committee)	nd 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 PAC).							
	In addition, this committee is a Lobbyist/Registrant PAC.							

Joint Fundraising Representative:



FEC Form 1	(Revised	02/2009)	

Write or Type Committee Name

MAKE AMERICA GREAT AGAIN PAC

Name of Any Connected Or	ganization, Affiliate	d Committe	ee, Join	t Fu	ndrai	sing	Repre	sentati	ve, o	r Lea	ders	ship	PAC	Spor	nsor	
				TTE	E											
<u> </u>																
Mailing Address	P.O. BOX 13570															
					1			VA		22	219					
		CITY 🔺						STATE	▲			ZIP	COL	DE 🔺		
Relationship: Connected	Organization Affil	iated Organi	zation	×	Joint	Fundr	aising	Repres	entati	ve		Lead	ershi	p PAC	Spor	nsoi
	Mailing Address	TRUMP MAKE AMERICA GREAT A Mailing Address P.O. BOX 13570 ARLINGTON	TRUMP MAKE AMERICA GREAT AGAIN CO Mailing Address	TRUMP MAKE AMERICA GREAT AGAIN COMMI Mailing Address P.O. BOX 13570 ARLINGTON CITY ▲	TRUMP MAKE AMERICA GREAT AGAIN COMMITTE Mailing Address P.O. BOX 13570 ARLINGTON CITY ▲	TRUMP MAKE AMERICA GREAT AGAIN COMMITTEE Mailing Address P.O. BOX 13570 ARLINGTON CITY ▲	TRUMP MAKE AMERICA GREAT AGAIN COMMITTEE Mailing Address P.O. BOX 13570 ARLINGTON CITY ▲	TRUMP MAKE AMERICA GREAT AGAIN COMMITTEE	TRUMP MAKE AMERICA GREAT AGAIN COMMITTEE Mailing Address P.O. BOX 13570 ARLINGTON CITY ▲ STATE	TRUMP MAKE AMERICA GREAT AGAIN COMMITTEE Mailing Address P.O. BOX 13570 ARLINGTON VA CITY ▲ STATE ▲	TRUMP MAKE AMERICA GREAT AGAIN COMMITTEE Mailing Address P.O. BOX 13570 ARLINGTON VA CITY ▲ STATE ▲	TRUMP MAKE AMERICA GREAT AGAIN COMMITTEE Mailing Address P.O. BOX 13570 ARLINGTON VA 22219 CITY ▲ STATE ▲	TRUMP MAKE AMERICA GREAT AGAIN COMMITTEE Mailing Address P.O. BOX 13570 ARLINGTON VA 22219 CITY ▲ STATE ▲ ZIP	TRUMP MAKE AMERICA GREAT AGAIN COMMITTEE Mailing Address P.O. BOX 13570 ARLINGTON VA 22219 CITY ▲ STATE ▲ ZIP COL	TRUMP MAKE AMERICA GREAT AGAIN COMMITTEE Mailing Address P.O. BOX 13570 ARLINGTON VA 22219 CITY ▲ STATE ▲ ZIP CODE ▲	Mailing Address P.O. BOX 13570 Mailing Address P.O. BOX 13570 ARLINGTON VA 22219 CITY ▲ STATE ▲ ZIP CODE ▲

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

CRATE, BI	ADLEY, T., MR.,	
Full Name		
Mailing Address	P.O. BOX 509	
	ARLINGTON	
	CITY ▲ STATE ▲ ZIP CODE ▲	
Title or Position ▼		
	Telephone number 617 - 303 - 6800	

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	CRATE, BRADLEY, T., MR.,
Mailing Address	P.O. BOX 509
	ARLINGTON VA 22216 Image: Ima
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	
	Telephone number 617 303 6800

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Full Name of Designated Agent		
Mailing Address		
	CITY A STATE A Z	ZIP CODE 🔺
Title or Position ▼		
	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.

	CHAIN BRIDGE BANK, N.A.			
Mailing Address	1445-A LAUGHLIN AVENU	IE 		
			VA 22101	
	Cl	TY 🔺	STATE A	ZIP CODE
Name of Bank, [Pepository, etc.			
Mailing Address				
	CI	TY 🔺	STATE 🔺	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

5(g) or (h).	Joint Fundraising	Participant:				
1.				FEG	C ID number	С
2.				FEG	C ID number	C
3.				FEG	C ID number	С
4.				FEO	C ID number	С
6. Name	of Any Connected O	rganization, Affiliat	ed Committee, Joint	Fundraising	Representativ	e, or Leadership PAC Sponsor
I	Mailing Address	P.O. BOX 13570				
					VA	22219
I	Relationship:		CITY 🔺		STATE 🔺	ZIP CODE
	Connected	Organization Af	filiated Committee	≺ Joint Fundra	ising Represent	ative Leadership PAC Sponsor
8. Desigi	nated Agent: Identify I	by name, address (p	phone number – optio	nal)		
	nated Agent: Identify I	by name, address (p	phone number – optio	nal)		
Fu		by name, address (p	phone number – optio	nal)		
Fu	II Name	by name, address (p	Dhone number – optio	nal)		
Fu	II Name	by name, address (p	Dhone number – optio	nal)		
Fu	II Name		ohone number – optio	nal)		<pre></pre>
Fu	II Name				STATE	· · · · · · · · · · · · · · · · · · ·
Fu	II Name					· · · · · · · · · · · · · · · · · · ·
Fu Ma T 9. Banks	II Name				e Number	
Fu Ma T 9. Banks safety	II Name				e Number	
Fu Ma T 9. Banks safety Name	II Name				e Number	
Fu Ma T 9. Banks safety Name	II Name				e Number	
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Fu Ma T 9. Banks safety Name	II Name				e Number	

EC	Form	1S	(Revised	02/2017)
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(g) or (h).	Joint Fundraising	g Participant:				
1.				FEC	ID number	С
2.				FEC	ID number	C
3.				FEC	ID number	С
4.				FEC	ID number	С
Name	e of Any Connected (Organization, Affi	liated Committee, Joint	Fundraising F	Representativ	e, or Leadership PAC Sponsor
SA						
I	Mailing Address	P.O. BOX 509				
		ARLINGTON			VA	22216
	Relationship:				STATE	
	Connected	Organization X	Affiliated Committee	Joint Fundrais	sing Represent	ative Leadership PAC Sponso
	nated Agents Identify	by name addres	s (phone number – optior			
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		by hame, addres	s (phone number – option	nai)		
	ull Name			nai)		
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Fu	ull Name					· · · · · · · · · · · · · · · · · · ·
Fu Ma T Banks	ull Name			Telephone	Number	$I = \begin{bmatrix} 1 & 1 & 1 & 1 & 1 & 1 & 1 \\ 1 & 1 & 1 &$
Fu Ma T Banks safety	ailing Address			Telephone	Number	
Fu Ma T Banks safety Name	ull Name			Telephone	Number	
Fu Ma T Banks safety Name	ailing Address			Telephone	Number	
Fu Ma T Banks safety Name	ull Name lailing Address TITLE OR POSITION s or Other Depositorian a deposit boxes or mained of Bank, sitory, etc.			Telephone	Number	
Fu Ma T Banks safety Name	ull Name lailing Address TITLE OR POSITION s or Other Depositorian a deposit boxes or mained of Bank, sitory, etc.			Telephone	Number	

EC Foi	m 1S	(Revised	02/2017)
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5(g) or ((h). Joint Fundraisin	g Participant:				
	1.			FI	EC ID number	C
	2.			FI	EC ID number	С
	3.			FI	EC ID number	C
	4.			FI	EC ID number	С
_						
6. N	lame of Any Connected		d Committee, Joint	t Fundraising	g Representativ	e, or Leadership PAC Sponsor
	Mailing Address	P.O. BOX 509				
					VA	22216
	Relationship:		CITY A		STATE A	ZIP CODE A
	Connected	d Organization 🗙 Affil	iated Committee	Joint Fund	raising Represent	ative
		by name, address (pr				
8. D	Esignated Agent: Identify		·····			
	Full Name					
	Full Name					
	Full Name					
	Full Name		CITY			<pre></pre>
	Full Name				STATE	<pre></pre>
_	Full Name		· · · · · · · · · · · · · · · · · · ·		ne Number	
9. B i	Full Name		· · · · · · · · · · · · · · · · · · ·		ne Number	
9. B i Sa	Full Name Mailing Address TITLE OR POSITION		· · · · · · · · · · · · · · · · · · ·		ne Number	
9. B i Sa	Full Name Mailing Address TITLE OR POSITION		· · · · · · · · · · · · · · · · · · ·		ne Number	
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FEC Form 1S (Revised 02/2017)

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(g) or (h).	Joint Fundraising	Participant:				
1.				FE	C ID number	C
2.				FE	C ID number	С
3.					C ID number	C
4.				FE	C ID number	С
		Dunan institut A ffili	ata di Oananaitta a Ilain	. Frankrik in in	Dennesentetin	n ar Landarskin DAO Onener
	UMP, DONALD J		ated Committee, Join	t Fundraising	Representativ	e, or Leadership PAC Sponsor
I	Mailing Address	P.O. BOX 509				
		ARLINGTON				
I	Relationship:		CITY A		STATE A	ZIP CODE A
	Connected	Organization	Affiliated Committee	Joint Fundr	aising Represent	ative × Leadership PAC Sponsor
Desig	nated Agent: Identify	by name address	(phone number – opti	onal)		
	nated Agent: Identify	by name, address	(phone number – optic	onal)		
Fu		by name, address	(phone number – optio	onal)		
Fu	II Name	by name, address	(phone number – optio	onal)		
Fu	II Name	by name, address	(phone number – optio	onal)		
Fu	III Name		(phone number – option	onal)		
Fu	II Name				STATE ▲	
Fu	III Name					
Fu Ma T Banks	III Name			Telephor	ne Number	
Fu Ma T Banks safety Name	ailing Address			Telephor	ne Number	
Fu Ma T Banks safety Name	ailing Address			Telephor	ne Number	
Fu Ma T Banks safety Name	ailing Address			Telephor	ne Number	
Fu Ma T Banks safety Name	ailing Address			Telephor	ne Number	