FEC

Only

STATEMENT OF **ORGANIZATION**

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FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) Friends of John Thune PO Box 841 ADDRESS (number and street) (Check if address is changed) Sioux Falls 57101-SD CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address nweyers@johnthune.com is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.johnthune.com (Check if address is changed) DATE 2024 C00409581 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 Weyers, Nicole Treasurer,, Weyers, Nicole Treasurer, , , Date 02 29 2024 Signature of Treasurer 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

E	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.)	candidate
	Name of Candidate Thune, John, R., ,	
	Candidate Party Affiliation REP Office Sought: House X Senate President	State SD District 00
	(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,	
	Political Action Committee (PAC):	
	(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	d organization is a:
	Corporation Corporation w/o Capital Stock Labor Or	ganization
	Membership Organization Trade Association Cooperat	ive
	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 committee. (i.e., nonconnected committee)	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 PAC	C).
	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 or committees/organizations, at least one of which is an authorized committee of a federal candidate.	more political
	(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, none of which is an authorized committee of a federal candidate.	more political
	Committees Participating in Joint Fundraiser	
	1	

J	FEC Form 1 (Revised 0)	2/2009)			Page 3
٧	Vrite or Type Committee Name				
_	Friends of John		Liter Fordericker Box		adambia PAO O
6.	Thune Victory Comm	ganization, Affiliated Committee	e, Joint Fundraising Repi	resentative, or Le	adership PAC Sponsor
	Thane victory comin				
	Mailing Address	228 S Washington St			
		Ste 115			
		Alexandria		VA	2314-5404
		CITY ▲		STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organiz	ation X Joint Fundraisin	g Representative	Leadership PAC Sponso
					_
7.	Custodian of Records: Identi books and records.	fy by name, address (phone numb	er optional) and position	of the person in po	ssession of committee
	Weyers, Nic	cole, A, ,			
	Full Name				
	Mailing Address	PO Box 841			
		Sioux Falls		SD 57	7101-0841
		CITY ▲		STATE ▲	ZIP CODE ▲
	Title or Position ▼			OTATE =	211 0002 =
	Custodian of Records		Telephone nur	mber	-
8.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optionssistant treasurer).	onal) of the treasurer of the	e committee; and t	he name and address of
	1	cole Treasurer, , ,			
	of Treasurer	PO Box 841			
	Mailing Address				
		Sioux Falls		SD 57	7101-0841
		CITY ▲		STATE ▲	ZIP CODE ▲
	Title or Position ▼				
	Treasurer	<u> </u>	Telephone nur	mber 605	_ 221 _ 1010

FEC Form 1	(Revised 02/2009)		Page 4
Full Name of Designated Agent	Weyers, Nicole, A, ,		
Mailing Address	PO Box 841		
	Sioux Falls	SD	57101-0841
Title or Position	CITY ▲	STATE ▲	ZIP CODE ▲
Designated Ager			
Designated Ager	Telephone	number	
	Depositories: List all banks or other depositories in which the common maintains funds. Depository, etc.	mittee deposits fu	unds, holds accounts, rents
	BB&T		
Mailing Address	1909 K St NW		
	Washington	DC	20006
	CITY ▲	STATE ▲	ZIP CODE ▲
Name of Bank, D	pepository, etc.		
	Chain Bridge Bank		
Mailing Address	1445-A Laughlin Ave		
	McLean	VA	22101
	CITY ▲	STATE ▲	ZIP CODE ▲

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

Form/Schedule: F1A Transaction ID:

Response to RFAI dated 2/28/24. Attached is amended FEC Form 1 Statement of Organization replacing report filed December 19, 2023.

Form/Schedule: Transaction ID:

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

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(h). Joint Fundraisi	ng Participant:			
1.		FE	C ID number	С
2.		FE	C ID number	С
3.		FE	C ID number	С
4.		 FE	C ID number	С
Take Back the Sena	Organization, Affiliated Committee	, Joint Fundraising	Representative	e, or Leadership PAC Spons
Mailing Address	425 2nd St NE			
	Washington		DC	20002-4914
Relationship:	CITY A		STATE A	ZIP CODE ▲
Connecte	d Organization Affiliated Committee		aising Represent	ative Leadership PAC Sp
Connecte	d Organization Affiliated Committ		aising Represent	ative Leadership PAC Sp
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Connecte resignated Agent: Identi Full Name Mailing Address	Affiliated Committee Ty by name, address (phone number	- optional)		
Connecte resignated Agent: Identi Full Name Mailing Address TITLE OR POSITION canks or Other Deposite afety deposit boxes or management of the content	Affiliated Committed Ty by name, address (phone number of the committed o	- optional) Telepho	STATE A	ZIP CODE A
Connected Resignated Agent: Identification of Position Identification Ident	Affiliated Committed Ty by name, address (phone number of the committed o	- optional) Telepho	STATE A	ZIP CODE A

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

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		FEC ID	number	C
		FEC ID	number	С
		FEC ID	number	C
		FEC ID	number	C
ted Organization, Af	filiated Committee, Joint	Fundraising Rep	resentative	, or Leadership PAC Spon
ry Committee				
228 S Washing	gton St			
Ste 115				
Alexandria			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	22314-5404
	CITY A		STATE A	ZIP CODE ▲
entify by name, addre	ss (phone number – optior	al)		
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	ry Committee 228 S Washing Ste 115	228 S Washington St Ste 115 Alexandria CITY	eted Organization, Affiliated Committee, Joint Fundraising Repriry Committee 228 S Washington St Ste 115 Alexandria CITY	sted Organization, Affiliated Committee, Joint Fundraising Representative ry Committee 228 S Washington St Ste 115 Alexandria VA STATE

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	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
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ame of Any Connected 2024 Republican Se	d Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spon
Mailing Address	228 S Washington Street		
	Ste 115		
	Alexandria	VA	22314-5404
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	ed Organization Affiliated Committee X J fy by name, address (phone number – optional)	oint Fundraising Represent	ative Leadership PAC Sp
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esignated Agent: Identi			ative Leadership PAC Sp
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esignated Agent: Identi	fy by name, address (phone number – optional)		Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)		
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or market.	fy by name, address (phone number – optional) CITY CITY ories: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in what naintains funds.	STATE A Telephone Number	ZIP CODE A

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

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h). Joint Fundraisin	3 · ·······		
1		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fun	draising Representati	ve, or Leadership PAC Spons
Mailing Address			
Relationship:	CITY A	STATE 4	ZIP CODE A
	d Organization Affiliated Committee Jo v by name, address (phone number – optional)	int Fundraising Represer	tative Leadership PAC Spo
esignated Agent: Identify		int Fundraising Represer	Leadership PAC Spaniative
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esignated Agent: Identify Full Name Mailing Address	by name, address (phone number – optional)		
esignated Agent: Identify Full Name	ries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identify Full Name	ries: List all banks or other depositories in which sintains funds.	STATE A Telephone Number	ZIP CODE A