(Revised 06/2012)

FEC

Only

STATEMENT OF

PAGE 1/5

ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Majority Keepers 600 Pennsylvania Ave SE ADDRESS (number and street) Unit 15180 (Check if address is changed) Washington 20003 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS fec@capcompliance.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2021 C00772400 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. Nissen, Melissa, , , Type or Print Name of Treasurer Nissen, Melissa, , , [Electronically Filed] 04 13 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

Toll Free 800-424-9530

Local 202-694-1100

	FEC Fo	rm 1 (Revised 02/2009)	Page 2			
		OMMITTEE				
	ndidate	te Committee:				
(a) This committee is a principal campaign committee. (Complete the candidate information below.)						
(b)	Ш	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)				
Nam Can	ne of didate					
	didate y Affiliatio	Office Sought: House Senate President	State			
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Nam Can	ne of didate					
Par	ty Com	nmittee:				
(d)			(Democratic, Republican, etc.) Party.			
Pol	itical A	ction Committee (PAC):				
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nected organization is a			
		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)	gregated 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.)				
Join	nt Fund	raising 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.	o 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.	o or more political			
	Com	mittees Participating in Joint Fundraiser				
	1.	Cindy Axne for Congress FEC ID number C C000	646844			
	2.	Angie Craig for Congress FEC ID number C C009	575209			
	3.		349913			
	4.	Lauren Underwood for Congress FEC ID number C C006	52719			

FEC Form 1 (Revi	sed 02/2009)		Page 3
Write or Type Committee			
Majority Kee	pers		
Name of Any Connec	ted Organization, Affiliated Committee, Joint	Fundraising Representative, o	or Leadership PAC Sponsor
NONE			
Mailing Address			
			1
	CITY	STATE	ZIP CODE
Custodian of Records books and records.	: Identify by name, address (phone number o	optional) and position of the per	rson in possession of committ
	en, Melissa, , ,		
Full Name	;;;, iviciissa, , ,		
Mailing Address	600 Pennsylvania Ave SE Unit 15180		
	Washington	DC	20003
Title or Position	CITY	STATE	ZIP CODE
Treasurer		Telephone number 20	02 544 - 6960
Treasurer: List the nam any designated agent (e	e and address (phone number optional) of the e.g., assistant treasurer).	ne treasurer of the committee; a	and the name and address of
Full Name Nisse of Treasurer	n, Melissa, , ,		
Mailing Address	600 Pennsylvania Ave SE		
	Unit 15180		
	Washington	DC DC	20003
Title or Position	CITY	STATE	ZIP CODE
Treasurer		Telephone number 20	2 544 6960

	m 1 (Revised 02/2009)	Page 4					
Full Name of Designated							
Agent							
Mailing Address							
	CITY STATE	ZIP CODE					
Title or Position		1_1 1					
	Telephone number						
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.							
	Depository, etc. Amalgamated Bank 1825 K St NW						
Name of Bank,	Depository, etc. Amalgamated Bank 1825 K St NW						
Name of Bank,	Depository, etc. Amalgamated Bank 1825 K St NW						
Name of Bank,	Depository, etc. Amalgamated Bank 1825 K St NW	ZIP CODE					
Name of Bank,	Depository, etc. Amalgamated Bank 1825 K St NW Washington CITY STATE	ZIP CODE					
Name of Bank, Mailing Address	Depository, etc. Amalgamated Bank 1825 K St NW Washington CITY STATE	ZIP CODE					
Name of Bank, Mailing Address	Depository, etc. Amalgamated Bank 1825 K St NW Washington CITY STATE	ZIP CODE					
Name of Bank, Mailing Address	Depository, etc. Amalgamated Bank 1825 K St NW Washington CITY STATE Depository, etc.	ZIP CODE					
Name of Bank, Mailing Address Name of Bank,	Depository, etc. Amalgamated Bank 1825 K St NW Washington CITY STATE Depository, etc.	ZIP CODE					
Name of Bank, Mailing Address Name of Bank,	Depository, etc. Amalgamated Bank 1825 K St NW Washington CITY STATE Depository, etc.	ZIP CODE					

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

FEC Form 1S (Revised 02/2017)

Page _5 **of** 5___

5(g)	or(h). Joint Fundraisi n	ng Participant:					
		ki for Congress	FEC ID n	umber (C00656686		
	2.		FEC ID n	umber (
	3.		FEC ID n	umber (
	4.		FEC ID n	umber (
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Repres	sentative,	or Leadership PAC Sponsor		
	Mailing Address						
	Relationship:	CITY ▲	S	TATE ▲	ZIP CODE ▲		
	Connected	d Organization Affiliated Committee Join	t Fundraising R	epresentativ	Leadership PAC Sponsor		
8.	Designated Agent: Identify by name, address (phone number – optional) Full Name						
	Mailing Address						
			OT	\TC 4	710 0005 4		
	TITLE OR POSITION	▼ CITY ▲	STA	ATE A	ZIP CODE ▲		
	TITLE OR POSITION	•	STA		ZIP CODE ▲		
9.		Tories: List all banks or other depositories in which	elephone Num	ber			
9.	Banks or Other Deposito	Tories: List all banks or other depositories in which	elephone Num	ber			
9.	Banks or Other Deposito safety deposit boxes or manner of Bank,	Tories: List all banks or other depositories in which	elephone Num	ber			
9.	Banks or Other Deposito safety deposit boxes or many Name of Bank, Depository, etc.	Tories: List all banks or other depositories in which	elephone Num	ber			
9.	Banks or Other Deposito safety deposit boxes or many Name of Bank, Depository, etc.	Tories: List all banks or other depositories in which	elephone Num	ber			