GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC COVER SHEET PG 1

The GPAC Instruction Guide explains how to complete this form. 1 Filer ID (Ethics Commission Filers) 00068428						2 Total pages filed: 6		
3 COMMITTEE NAME					┢	OFFICE USE ONLY		
	Texas Leadership Foundation PAC							
	·					Date Received ELECTRONICALLY FILED 01/10/2025		
4	COMMITTEE	ADDRESS / PO BOX; APT / SUITE #; CI	TY;	STATE; ZIP CODE				
	ADDRESS	POB 117264			ŀ	Date Hand-delivered or Date Postmarked		
	Change of Address							
		Carrollton, TX 75011-7264			ľ	Receipt # Amount		
						Date Processed		
						Date Imaged		
5	CAMPAIGN	MS/MRS/MR FIRST			N	ЛІ		
	TREASURER NAME	Mr. Burt R.						
	NAME							
		NICKNAME LAST				SUFFIX		
		Solomons						
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #; CITY	(;	STATE; ZIP CODE		
	TREASURER STREET	PO Box 117264						
	ADDRESS							
	(Residence or Business)	Carrollton, TX 75011-7264						
7	CAMPAIGN	STREET OR PO BOX;		APT / SUITE #; CIT	TY;	STATE; ZIP CODE		
	TREASURER MAILING	PO Box 117264						
	ADDRESS							
	Change of Address	Carrollton, TX 75011-7264						
8	CAMPAIGN	AREA CODE PHONE NUMBER	FX	TENSION				
ľ	TREASURER	(214) 957-0185	L /(
	PHONE	()						
9	REPORT	X January 15	0th (day before election		Dissolution (Attach PAC-DR)		
	TYPE			ay before election		10th day after campaign treasurer		
		July 15		-		termination		
			Runo	ff				
10	PERIOD	Month Day Year		Month Day		Year		
	COVERED	07/01/2024 Т	HR	DUGH 12/31/20	24			
11	ELECTION	ELECTION DATE	D#i			Other		
		Month Day Year	Prim	ary Runoff		Other		
			Gen	eral Special				
			ľÖ	PAGE 2				
For	orms provided by Texas Ethics Commission www.ethics.state.tx.us Version V4.1.0.5dd2ace2							

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)		
Texas Leadership Foundation PAC 0006						
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00		
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	0.00		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00		
	4. TOTAL POLITICA	L EXPENDITURES	\$	0.00		
CONTRIBUTION BALANCE	5. TOTAL POLITICAL C OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	200,000.00		
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	THE \$	0.00		
16 AFFIDAVIT		I swear, or affirm, under penalty of per true and correct and includes all inforr under Title 15, Election Code.	rjury, that the a mation required	ccompanying report is to be reported by me		
		Mr. Burt R	. Solomons			
	Signature of Campaign Treasurer					
AFFIX NOTARY	STAMP / SEAL ABOVE					
		, tł	nis the	day		
of	_, 20, to certify v	which, witness my hand and seal of office.				
Signature of officer ad	ministering oath	Printed name of officer administering oath	Title of offic	er administering oath		
Forms provided by Texas E	Ethics Commission	www.ethics.state.tx.us		Version V4.1.0.5dd2ace2		

FORM GPAC COVER SHEET PG 3

17 COM	IMITTE	(Ethics Commission Filers)						
Теха	as Lea							
19 SCH		SUBTOTAL AMOUNT						
NAM	EOFS							
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 0.00				
2.	Х	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 0.00				
3.	Х	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$ 0.00				
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	R	\$				
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA LABOR ORGANIZATION	TION OR	\$				
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$				
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$				
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR C	ORGANIZATION	\$				
9.	X	SCHEDULE E: LOANS		\$ 0.00				
10.	Х	\$ 0.00						
11.	Х		\$ 0.00					
12.	Х	DNS	\$ 0.00					
13.	Х		\$ 0.00					
14.	Х	\$ 150,000.00						
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$				
	· · ·							

SUBTOTALS - GPAC

PLEDGED CONTRIBUTIONS The Instruction Guide explains how to complete this form. 1 Total pages Schedule B: Sch: 1/1 Rpt: 4/6

The Instruction Guide explains how to complete this form.						Sch: 1/1 Rpt: 4/6				
2	FILER NAME					3	Filer ID	(Ethics C	Commission Filers)	
	Texas Lead	lersl	hip Foundation PAC				00068428			
4	TOTAL OF UNITEMIZED PLEDGES					\$			0.00	
5	Date	6	Full name of pledgor	out-of-state PAC (ID#:_)	8	Amount of pledge (\$)	9 	In-kind description (If applicable)	
		7	Pledgor Address;	City; State; Zip Code			Check if trave	I I I I el outside	of Texas. Complete Sch	edule T.
10 Principal occupation / Job title (See Instructions)				11 Employer (See Instru	ctic	ons)				

SCHEDULE **B**

LOANS		SCHEDUL	_E E
The Instruction Guide explains how to complete this form.		al pages Schedule E: h: 1/1 Rpt: 5/6	
2 FILER NAME Texas Leadership Foundation PAC	3 Filer ID 000684	(Ethics Commission I 128	Filers)
⁴ TOTAL OF UNITEMIZED LOANS		\$	0.00
5 Date of loan 7 Name of lender out-of-state PAC (ID#:)	9 Loan Amount (\$)	
6 Is lender a 8 Lender address; City; State; Zip Code financial institution?		10 Interest Rate11 Maturity Date	
12 Principal occupation / Job title (See Instructions) 13 Employer (See Instructions)	5)		
14 Description of Collateral 15 Check if personal funds we None	ere deposited	d into political account (See Instructions)	
16 GUARANTOR 17 Name of guarantor INFORMATION INFORMATION		19 Amount Guarantee	ed (\$)
not applicable 18 Guarantor address; City; State; Zip Code			
20 Principal occupation 21 Employer (See Instructions)	5)		

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

1

4

6

8

SCHEDULE I The Instruction Guide explains how to complete this form. (Ethics Commission Filers) Total pages Schedule I: 2 FILER NAME 3 Filer ID **Texas Leadership Foundation PAC** 00068428 Sch: 1/1 Rpt: 6/6 Date 5 Payee name 11/14/2024 Christan Community Action, Inc. Amount (\$) Payee Address; City; State; Zip 7 200 South Mill St. 75,000.00 Expenditure from Lewisville, TX 75057 corporate funds (a) Category (See instructions for examples of acceptable categories) PURPOSE (b) Description (See instructions regarding type of information required.) OF Contributions/Donations Made By donation to 501c3 non-profit charity organization EXPENDITURE Candidate/Officeholder/Political Committee Date Payee name 11/14/2024 **Metrocrest Services** Payee Address; City; State; Zip Amount (\$) 1145 N. Josey Ln 75 000 00

75,000.00		
Expenditure from corporate funds	Carrollton, TX 75006	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description (See instructions regarding type of information required.) donation to 501c3 non-profit charity organization