FORM MPAC MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID 2 Total pages filed: The MPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00016265 3 COMMITTEE NAME **OFFICE USE ONLY** Austin Apartment Association Political Action Committee Date Received **ELECTRONICALLY FILED** 02/05/2025 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 8620 Burnet Road Suite 475 Change of Address Austin, TX 78757 Date Hand-delivered or Date Postmarked MS / MRS / MR **CAMPAIGN FIRST** MI **TREASURER** Receipt # Amount Ms. **Emily** NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Blair CAMPAIGN APT / SUITE #; STREET ADDRESS (NO PO BOX PLEASE); CITY; STATE; ZIP CODE TREASURER 8620 Burnet Rd Suite 475 STREET **ADDRESS** (Residence or Business) Austin, TX 78757 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 8620 Burnet Rd Suite 475 MAILING **ADDRESS** Change of Address Austin, TX 78757 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (512) 323-0990 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 April 5 July 5 October 5 REPORT FILING **DEADLINE** February 5 May 5 August 5 November 5 March 5 September 5 December 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 12/26/2024 01/25/2025

GO TO PAGE 2

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

| L2 COMMITTEE NAME | | | 13 Filer ID | (Ethics Commission Filers) | |
|---|--|--|--------------------------------------|--|--|
| Austin Apartment Ass | sociation Political Action (| Committee | 00016265 | 5 | |
| 4 COMMITTEE ACTIVITY | 1. Candidates | A. Supported | | | |
| ACTIVITY | (Identify by name or, if applicable, classify by party.) | | | | |
| (Attach lists on plain paper to complete this report if necessary.) | | B. Opposed | | | |
| | 2 Magauras | A. Supported | | | |
| | Measures (Describe by date and location | A. Supported | | | |
| | of election and nature of issue.) | | | | |
| | | B. Opposed | | | |
| | | | | | |
| | | | | | |
| | Officeholders Assisted | | | | |
| | (Identify by name or, if applicable, classify by party.) | | | | |
| L5 CONTRIBUTION | | D POLITICAL CONTRIBUTIONS (OTHER THAN | | | |
| TOTALS | | OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) | \$ | 0.00 | |
| | check here if this report | qualifies for the higher itemization threshold | | | |
| | | 2. TOTAL POLITICAL CONTRIBUTIONS | | | |
| | · - ` ` | DGES, LOANS, OR GUARANTEES OF LOANS) | | 1,049.00 | |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZE | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | | | |
| | 4. TOTAL POLITICA | L EXPENDITURES | \$ | 0.00 | |
| | | | | 0.00 | |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL (OF THE REPORTIN | CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD | T DAY \$ | 132,767.48 | |
| OUTSTANDING LOAN TOTALS | | AMOUNT OF ALL OUTSTANDING LOANS AS OF REPORTING PERIOD | THE \$ | 0.00 | |
| IC AFFIDAVIT | | | | | |
| L6 AFFIDAVIT | | | | | |
| | | I swear, or affirm, under penalty of p true and correct and includes all info under Title 15, Election Code. | erjury, that the ormation require | accompanying report is d to be reported by me | |
| | | | | | |
| | | | mily Blair | | |
| | | Signature of C | ampaign Treas | urer | |
| AFFIX NOTAR | RY STAMP / SEAL ABOVE | | | | |
| Sworn to and subscrib | ed before me. by the said | , | this the | day | |
| | | which, witness my hand and seal of office. | - | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Signature of officer | administering oath | Printed name of officer administering oath | Title of off | cer administering oath | |

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

| | 3 | of 8 | | |
|--------------------|--|--------------|-------------------------|------|
| 17 COMMI | TTEE NAME | 18 Filer ID | (Ethics Commission File | rs) |
| Austin A | Apartment Association Political Action Committee | 00016265 | | |
| 19 SCHED NAME C | SUBTOTAL AMOU | NT | | |
| 1. X | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ 1,0 | 049.00 | |
| 2. X | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | | \$ | 0.00 |
| 3. X | 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 CORPORALABOR ORGANIZATION | ATION OR | \$ | |
| 6. | SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG | \$ | | |
| 7. | SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION | \$ | | |
| 8. | SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR | ORGANIZATION | \$ | |
| 9. X | SCHEDULE E: LOANS | | \$ | 0.00 |
| 10. X | SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION | S | \$ | 0.00 |
| 11. X | SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | | \$ | 0.00 |
| 12. X | SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTI | ONS | \$ | 0.00 |
| 13. X | SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | | \$ | 0.00 |
| 14. | SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION | ONS | \$ | |
| 15. | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER | RETURNED | \$ | |
| | | | • | |

| | MONETARY POLITICAL CONTRIBUTIONS | | | | | SCHEDULE A1 | | |
|-------------------|----------------------------------|--|------------------------|----------------------------|---|-----------------------------|-----------|--|
| | The Instru | ction Guide explains how | rm. | 1 | . Total pages Schedule A1: Sch: 1/3 Rpt: 4/8 | | | |
| 2 | FILER NAME | A Delliter I A | | | 3 | Filer ID (Ethics Commission | n Filers) | |
| | · · | ment Association Political Act | | | ┖ | 00016265 | | |
| 4 Date 01/17/2025 | | | | | 7 | Amount of Contribution (\$) | \$50.00 | |
| | | Dripping Springs , TX 786 | 20 | | | | | |
| 8 | | pation / Job title (See Instructions | s) <u></u> | Employer (See Instructions | s) | | | |
| | District Mana | ager ———————————————————————————————————— | | Morgan Group | | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | | |
| | 01/17/2025 | Frazza-Stowers, Giovann | a (Ms.) | | | | \$150.00 | |
| | | Contributor address; City; Si | ate; Zip Code | | | | | |
| | | Round rock, TX 78665 | | | | | | |
| | Principal occu | cupation / Job title (See Instructions) Employer (See Instructions | | | 5) | | | |
| | Director of P | erformance | | RPM Living | | | | |
| | Date | Date Full name of contributor out-of-state PAC (ID#:) | |) | | Amount of Contribution (\$) | | |
| | 01/17/2025 Garvey, Heather | | | | | | \$50.00 | |
| | | Contributor address; City; Si | ate; Zip Code | | | | | |
| | | Bastrop, TX 78602 | | | | | | |
| | Principal occu | pation / Job title (See Instructions | 3) | Employer (See Instructions | 5) | | | |
| | Regional Dir | ector | | CWS Apartment Homes | 3 | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | | |
| 01/17/2025 | | Martin, Taylor Contributor address; City; Si | ate; Zip Code | | | | \$99.00 | |
| | | Austin, TX 78758 | | | | | | |
| | Principal occu | pation / Job title (See Instructions | 3) | Employer (See Instructions | <u>-</u> S) | | | |
| | Community M | Manager | | Kairoi Management | | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | | |
| | 01/17/2025 | Merrill, Taryn | | | | | \$50.00 | |
| | | Contributor address; City; Si | ate; Zip Code | | | | | |
| | | Manor, TX 78653 | | | | | | |
| | Principal occu | pation / Job title (See Instructions | s) | Employer (See Instructions | s) | | | |
| | Manager of A | Affordable Housing - Texas D | ivision | Greystar | | | | |
| | | | • | | | | | |

| | MONEI | ARY POLITICAL C | ONTRIBUTIO | 'N | S | | SCHEDUL | E A1 |
|---|---|---|---|-----------|--|-----------------------------|---|-------------|
| | The Instru | ction Guide explains how | ction Guide explains how to complete this form. | | | | Total pages Schedule A1: Sch: 2/3 Rpt: 5/8 | |
| 2 | FILER NAME Austin Aparti | tment Association Political Action | on Committee | | | 3 | Filer ID (Ethics Commission 00016265 | າ Filers) |
| 4 | Date 01/17/2025 | Full name of contributor Reid, MichaelContributor address; City; Sta | out-of-state PAC (ID#: ate; Zip Code | |) | 7 | Amount of Contribution (\$) | \$150.00 |
| _ | Dringing one | Austin, TX 78723 | <u>. </u> | _ | Francis (Con Instructions | | | |
| 8 | Regional Ma | upation / Job title (See Instructions) anager | | | Employer (See Instructions Apartment Management | | ofessionals | |
| | Date 01/17/2025 | Full name of contributor Rocha, Travis Contributor address; City; Sta | out-of-state PAC (ID#: | | | | Amount of Contribution (\$) | \$50.00 |
| | Principal occu | Austin, TX 78730 upation / Job title (See Instructions) |) | | Employer (See Instructions |)) | | |
| | Community I | | | | Bell Partners | _ | | |
| | Date 01/17/2025 | | | | | | Amount of Contribution (\$) | \$50.00 |
| | | Leander , TX 78641 | | | | | | |
| | | upation / Job title (See Instructions) count Executive |) | | Employer (See Instructions Knight Commercial | i) | | |
| | Date 01/17/2025 | Full name of contributor Vernon, Kelsea Contributor address; City; Sta San Marcos, TX 78666 | | | | | Amount of Contribution (\$) | \$300.00 |
| | Principal occu Regional Ma | upation / Job title (See Instructions) anager | | | Employer (See Instructions RPM Living | i) | | |
| | Date O1/17/2025 Full name of contributor out-of-state PAC (ID#:) Walker, Arjenae Contributor address; City; State; Zip Code Round Rock, TX 78681 | | |) | | Amount of Contribution (\$) | \$50.00 | |
| | Principal occu Regional Ma | upation / Job title (See Instructions) anager | | | Employer (See Instructions Rainier Management |) | | |
| | | | | | | | | |

| | MONETARY POLITICAL CONTRIBUTIONS | | | | | SCHEDULE A1 |
|---|---|--|---|----------------------------|-------------------------------------|---|
| | The Instruction Guide explains how to complete this form. | | | | | Total pages Schedule A1: Sch: 3/3 Rpt: 6/8 |
| 2 | FILER NAME Austin Apart | ER NAME stin Apartment Association Political Action Committee | | | | Filer ID (Ethics Commission Filers) 00016265 |
| 4 | Date 01/16/2025 5 Full name of contributor out-of-state PAC (ID#:) Wright, Ana 6 Contributor address; City; State; Zip Code | | | 7 | Amount of Contribution (\$) \$50.00 | |
| 8 | Principal occu | Lockhart, TX 78644 upation / Job title (See Instructions) | 9 | Employer (See Instructions | <u> </u> | |
| • | | operty Manager | | Greystar | -, | |
| | | | | | | |

| PLE | OGED CONTRIBU | TIONS | | | SCHEDULE E | 3 |
|----------------|------------------------------------|----------------------|----------------------|--------|--|--------|
| T | he Instruction Guide ex | plains how to comp | lete this form. | 1 | Total pages Schedule B: Sch: 1/1 Rpt: 7/8 | |
| 2 FILER N | AME | | | 3 | Filer ID (Ethics Commission Filers) | |
| Austin A | partment Association Politic | al Action Committee | | | 00016265 | |
| 4 TOTAL | OF UNITEMIZED PLEDO | GES | | | \$ | 0.00 |
| 5 Date | 6 Full name of pledgor | out-of-state PAC (ID | #: | _) 8 | Amount of 9 In-kind description | |
| | | | | | pledge (\$) (If applicable) | |
| | 7 Pledgor Address; | City; State; Zip Cod | le | | | |
| | | | | | | |
| | | | | - | Check if travel outside of Texas. Complete Scheo | lulo T |
| 10 Princinal | occupation / Job title (See Instru | ıctions) | 11 Employer (See Ins | L | | uie i |
| 10 i illicipai | occupation / oob title (occ motiv | 20110113) | Employer (See ins | Suucuc | טוס) | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

| | LOANS | | | | | SCHEDULE E | • |
|----|--|--------------------------------|----------------------|--|-------------------|--|----|
| | The Instruction | on Guide explains ho | w to complete this f | form. 1 Total pages Schedule E: Sch: 1/1 Rpt: 8/8 | | | |
| | FILER NAME Austin Apartment Association Political Action Committee | | | | | (Ethics Commission Filers) | |
| 4 | TOTAL OF UN | NITEMIZED LOANS | | | I | \$ 0. | 00 |
| 5 | Date of loan | 7 Name of lender | out-of-state PA | C (ID#: | | 9 Loan Amount (\$) | |
| 6 | Is lender a financial institution? | 8 Lender address; | City; State; | Zip Code | | 10 Interest Rate | |
| | | | | | | 11 Maturity Date | |
| 12 | Principal occupati | on / Job title (See Instructio | ns) | 13 Employer (See Instr | uctions) | | |
| 14 | Description of Col | lateral | | 15 Check if personal fu | nds were deposite | d into political account (See Instructions) | |
| 16 | GUARANTOR INFORMATION | 17 Name of guarantor | | | | 19 Amount Guaranteed (\$) | |
| | not applicable | 18 Guarantor address; | City; State; | Zip Code | | | |
| | Principal occupati | on | | 21 Employer (See Instr | uctions) | | |
| | | | | | | | |