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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. WORKING FOR US POLITICAL ACTION COMMITTEE INC 1725 I Street, NW ADDRESS (number and street) Suite 900 (Check if address is changed) WASHINGTON 20006 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS WFUPAC@gmail.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) workingforuspac.org (Check if address is changed) DATE 2016 C00430876 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. Steven Rosenthal Type or Print Name of Treasurer Steven Rosenthal [Electronically Filed] 04 2016 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 Only Local 202-694-1100

(Revised 06/2012)

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TYP	E OF C	OMMITTEE	1 ago 2
Car	ndidate	e 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. (Cominformation below.)	plete the candidate
Nam Cand	e of didate		
	didate y Affiliati	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Con	nmittee:	/Damaau-+!-
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Poli	itical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor	nnected organization is a
		Corporation 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 secommittee. (i.e., nonconnected committee)	egregated 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	t Func	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.	vo 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.	vo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

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	rite or Type Committee Name		_
\	WORKING FOR	R US POLITICAL ACTION COMMITTEE INC	<u> </u>
6.	Name of Any Connected C	Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership	PAC Sponsor
N	ONE		
	Mailing Address		
	Mailing Address		
		CITY STATE ZIF	CODE
	Relationship: Connected	d Organization	ship PAC Sponsor
	Custodian of Records: Ider books and records.	ntify by name, address (phone number optional) and position of the person in posses	sion of committee
	Gary Gruv	rer	
	Full Name	₁ 1725 I Street, NW	
	Mailing Address		
		Washington DC , 20006	
		Washington DC 20006	
	Title or Position	CITY STATE ZIP	CODE
	Custodian of Records	Telephone number	
3.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and the name assistant treasurer).	and address of
	Full Name Steven Ro of Treasurer	senthal	
	Mailing Address	888 16th Street NW	
		Suite 333	
		Washington DC 20006	
	Title or Position	CITY STATE ZIP	CODE
	Treasurer		

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Full Name of Designated		
Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		2 0002
	Telephone number	
safety deposit b	er Depositories: List all banks or other depositories in which the committee deposits funds, hoxes or maintains funds. Depository, etc.	
safety deposit to Name of Bank,	Depository, etc. Amalgamated Bank 1825 K Street, NW	
safety deposit b	Depository, etc. Amalgamated Bank 1825 K Street, NW	
safety deposit to Name of Bank,	Depository, etc. Amalgamated Bank 1825 K Street, NW	
safety deposit to Name of Bank,	Depository, etc. Amalgamated Bank 1825 K Street, NW	
safety deposit to Name of Bank, Mailing Address	Depository, etc. Amalgamated Bank 1825 K Street, NW Washington DC 2000	06
safety deposit to Name of Bank, Mailing Address	Depository, etc. Amalgamated Bank 1825 K Street, NW Washington CITY STATE	06
safety deposit to Name of Bank, Mailing Address	Depository, etc. Amalgamated Bank 1825 K Street, NW Washington CITY STATE	06
safety deposit to Name of Bank, Mailing Address	Depository, etc. Amalgamated Bank 1825 K Street, NW Washington CITY STATE Depository, etc.	06
safety deposit to Name of Bank, Mailing Address Name of Bank,	Depository, etc. Amalgamated Bank 1825 K Street, NW Washington CITY STATE Depository, etc.	06
safety deposit to Name of Bank, Mailing Address Name of Bank,	Depository, etc. Amalgamated Bank 1825 K Street, NW Washington CITY STATE Depository, etc.	06