Image# 10931088135

FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	ORGANIZATION	
i Oitim i	(See instructions)	Office use only
NAME OF COMMITTEE (in f	(Check if name Example: If typying, type is changed) over the lines	12FE4M5
Political Educa	ational Fund of the Building and Construction Trades Dep	-
ADDRESS (number and s	815 16th St., NW, Suite 600	
(Check if address		
is changed)	Washington	DC 20006 -
	CITY▲	STATE▲ ZIP CODE ▲
COMMITTEE'S E-MAII	L ADDRESS (Please provide only one e-mail address)	
(Check if address is changed)	kathy@bctd.org	
COMMITTEE'S WEB I	PAGE ADDRESS (URL)	
(Check if address is changed)		
2. DATE M M M 1.1	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
3. FEC IDENTIFICA	TION NUMBER C C00003160	
4. IS THIS STATEM	ENT NEW (N) OR X AMENDED (A)	
I certify that I have examin	ned this Statement and to the best of my knowledge and belief it is true, correct	and complete
- - - - - - - - - -	Treasurer Sean McGarvey	
Type or Print Name of T	reasurer	
Signature of Treasurer	Electronically Filed by Sean McGarvey	Date 08 / DDD / YYYYD
NOTE: Submission of fals	se, erroneous, or incomplete information may subject the person signing this S ANY CHANGE IN INFORMATION SHOULD BE REPORTED	
Office Use Only	For further informatio Federal Election Comm Toll Free 800-424-9530	ission FEC FORM 1

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5.			OMMITTEE (Check One) 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. (Complete the information below.)	ne candidate			
	Name Candi						
	Candi Party	idate Affiliatio	on Office House Senate President	State District			
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.				
	Name Candi						
	Party	Comm					
	(d)		This committee is a (National, State (or subordinate) committee of the	(Democratic, Republican,etc.) Party.			
P	Politic	cal Act	tion Committee (PAC):				
	(e)	X	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 X La	bor Organization			
			Membership Organization Trade Association Co	poperative			
			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)	d 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.)				
_	Joint F	Fundra	ising Representative:				
	(g)			r more political			
	(0)	ш	sing Representative: This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more policommittees/organizations, at least one of which is an authorized committee of a federal candidate.				
	(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.				
		Com	mittees Participating in Joint Fundraiser				
			1. FEC ID number				
			2. FEC ID number				
			3. FEC ID number				
			. FEC ID number C				

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Write or Type Committee Na					
Political Education	al Fund of the Building and Construction Trades Department, AF	L-CIO			
6. Name of Any Connecte	ed Organization, Affiliated Committee, Joint Fundraising Representative, or	Leadership PAC Sponsor			
ALLIANCE FOR RET	IRED AMERICANS POLITICAL ACTION FUND				
Mailing Address	815 16TH STREET NW 4TH FL - NORTH				
	WASHINGTON	20006			
	CITY▲ STATE ▲	ZIP CODE			
Relationship: Connected Organiz	ration X Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor			
	Custodian of Records: Identify by name, address, (phone number optional), and position of the person in possession of Committee books and records.				
Full Name	ean McGarvey				
Mailing Address	815 16th Street, NW				
	Suite 600				
	Washington DC	20006			
Title or Position ▼	CITY A STATE A	ZIP CODE A			
Treas	Telephone number 20	02 - 347 - 1461			
name and address of	ame and address (phone number optional) of the treasurer of the confiant designated agent (e.g., assistant treasurer).	mmittee; and the			
01 110d3d101	815 16th Street, NW				
Mailing Address	Suite 600				
	Washington DC	20006 –			
Title or Position ♥	CITY A STATE A				
Treas	surer Telephone number	02 _ 347 _ 1461			

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Full Name of Designated Agent					
Mailing Addres	s				
Title or Position ▼	CITY A	STATE A	ZIP CODE A		
		Felephone number –			
9. Banks or Other safety deposit bo.	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, D					
Mailing Address					
	CITY 🗖	STATE. ⊿	ZIP CODE 🛕		
Name of Bank, D	epository, etc.				
Mailing Address					
	CITY 🔼	STATE △	ZIP CODE 🛕		

Banks or Other Depositories: safety deposit boxes or maintain		ittee deposits funds, hold	ls accounts, rents
Name of Bank, Depository, etc.	e rande.		[ADDITIONAL]
Mailing Address			
	CITY 🗖	STATE_	ZIP CODE 🛕
Name of Any Connected Orga AFL-CIO Workers' Voices	anization, Affiliated Committee, Joint Fundraising Re	presentative, or Leader	[ADDITIONAL] ship PAC Sponsor
ALZ SIG TOTALS, TOTALS			
Mailing Address	815 16th Street, NW		
Maining / Idai 000			
	Washington	LDC	20006
lationship:	CITY▲	STATE A	ZIP CODE
Connected Organization	X Affiliated Committee Joint Fundraising Re	presentative Lead	dership PAC Sponsor
Designated Agent			[ADDITIONAL]
Full Name			
Mailing Address			
Title or Position ▼	CITY A	STATE. ▲	ZIP CODE A
	Teleph	none number	
Joint Fundraiser Participant			[ADDITIONAL]
	F	EC ID number	