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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. National Democratic Training Committee PAC PO Box 65322 ADDRESS (number and street) (Check if address is changed) Washington DC 20035 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS Brian@pcmsllc.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) https://www.traindemocrats.org/ (Check if address is changed) DATE 2022 C00603084 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. Foucart, Brian, , , Type or Print Name of Treasurer Foucart, Brian, , , [Electronically Filed] Date 06 2022 Signature of Treasurer NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only

Local 202-694-1100

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TYPE OF COMMITTEE:				
Candidate Committee:				
(a) This committee is a principal campaign committee. (Complete the candidate information	ion below.)			
This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)				
Name of Candidate				
Candidate Party Affiliation Office Sought: House Senate	State President District			
(c) This committee supports/opposes only one candidate, and is NOT an authorized con				
Name of Candidate				
Party Committee:				
(d) This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party			
Political Action Committee (PAC):				
(e) This committee is a separate segregated fund. (Identify connected organization on lin	ne 6.) Its connected 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 segregated fu committee. (i.e., nonconnected committee)				
In addition, this committee is a Lobbyist/Registrant PAC.				
In addition, this committee is a Leadership PAC. (Identify sponsor on line 6	5.)			
(g) This committee is an independent expenditure-only political committee (Super PAC).				
In addition, this committee is a Lobbyist/Registrant PAC.				
(h) x This committee is a political committee with both contribution and non-contribution ac	ccounts (Hybrid PAC).			
In addition, this committee is a Lobbyist/Registrant PAC.				
Joint Fundraising Representative:				
	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.			
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.				
Committees Participating in Joint Fundraiser				
1. [, , , , , , , , , , , , , , , , ,]	C			
	C			

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V	Write or Type Committee Name National Demo	cratic Training Committee	PAC		
6.		rganization, Affiliated Committee, Joint Fundrais		ership PAC Sponsor	
	Democratic Strategy	Institute		1	
	Mailing Address	910 17th St NW			
		Ste 925			
		Washington	DC 2000	06 1	
			OTATE .	710 0005 4	
		CITY A	STATE ▲	ZIP CODE ▲	
	Relationship: Connected	Organization X Affiliated Organization Joint	Fundraising Representative	Leadership PAC Spons	
	Custodian of Records: Ident	ify by name, address (phone number optional) and	d nosition of the person in poss	ession of committee	
••	books and records.	ty by name, address (phone names) — optional) and	a position of the polosin in possi		
	Foucart, Br	an, , ,			
	Full Name				
	Mailing Address	PO Box 65322			
		Washington	DC 2003	35	
		CITY ▲	STATE ▲	ZIP CODE ▲	
	Title or Position ▼	5111 =	OIAIL =	211 0001 =	
	Treasurer	Tolo	nhono numbor 202 -	628 1581	
			phone number		
8.	Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).				
	Full Name Foucart, Br	nan, , ,			
	of Treasurer				
	Mailing Address	PO Box 65322			
		Washington	DC 2003	35 	
	Tale on Decition	CITY ▲	STATE ▲	ZIP CODE ▲	
	Title or Position ▼				
	Treasurer		phone number 202 -	628 - 1581	

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Full Name of Designated Agent					
Mailing Address					
Title on Decition -	CITY ▲ STATE ▲	ZIP CODE ▲			
Title or Position ■					
	Depositories: List all banks or other depositories in which the committee deposits funds, hold kes or maintains funds.	ds accounts, rents			
Name of Bank, D	epository, etc.				
Mailing Address	Amalgamated Bank				
	Washington DC 20006 CITY ▲ STATE ▲	ZIP CODE A			
Name of Bank, Depository, etc.					
	Janney Montgomery Scott LLC c/o TD Bank				
Mailing Address	918 Bethlehem Pike				
	Mongomeryville PA 18936				
	CITY ▲ STATE ▲	ZIP CODE ▲			