STATEMENT OF

PAGE 1/5 =

FORM 1		0	RGAN	IIZAT	1OI	1					C	Office (Jse Onl	v		
1. NAME OF COMMITTEE (in	full)		Check if names changed)		Example over the	e:If typin	g, type	[12F	E4M	-			<u>y</u>		
DEPOSITOR	RY TRU	JST AI	ND CLE	ARIN	G C	ORPO	DRA ⁻	ΤΙΟ	N P	AC	- C	TC	C F	PAC); T	ΗE
ADDRESS (number a	nd street)	1455 PE	NNSYLVANIA	AVE. NW												
(Check if a is changed		SUITE 725														
·	,	Washington CITY						DC 20004-103 STATE ▲				36 ZIP CODE ▲				
COMMITTEE'S E-MA	AL ADDRES	SS														
(Check if address is changed)			rcing@aris													
			Second E-M ac@dtcc.c		S								<u> </u>			
COMMITTEE'S WEB (Check if a is changed	address	DRESS (UI	RL)													
2. DATE 06	M / D 14		y y y 2023													
3. FEC IDENTIFIC	CATION NU	MBER ▶		C0049	7917											
4. IS THIS STATEN	MENT	NEW	(N) C	PR	×	AMENI	DED (A))								
I certify that I have e	examined thi	is Stateme	nt and to the	e best of m	ny knov	vledge a	nd belie	of it is	true,	corre	ct and	d com	ıplete.			
Type or Print Name of	of Treasurer	Cosgrov	e, Susan, , ,													
Signature of Treasure	er Cosgra	ove, Susan, ,	,		[Ele	ctronicall	y Filed]	D	ate	0	6 6	/ D	14	/ Y	2023	Y Y
NOTE: Submission of	false, errone		omplete inforn ANGE IN INF	-			-	-				pena	lties o	f 52 l	J.S.C.	§30109.
Office Use					Fed	further in leral Electi Free 800-	on Comm	nission	act:				C F(

Local 202-694-1100

FEC Form 1 (Revised 03/2022)	Page 2					
TYPE OF COMMITTEE:						
Candidate Committee:						
(a) This committee is a principal campaign committee. (Comple	e the candidate information below.)					
(b) This committee is an authorized committee, and is NOT a print information below.)	rincipal campaign committee. (Complete the candidate					
Name of Candidate						
Candidate Office Party Affiliation Sought: House	State Senate President District					
(c) This committee supports/opposes only one candidate, and i	s NOT an authorized committee.					
Name of Candidate						
Party Committee:						
(d) This committee is a (National, State or subordinate) comm	(Democratic, ittee of the Republican, etc.) Party					
Political Action Committee (PAC):						
(e) This committee is a separate segregated fund. (Identify con	nected organization on line 6.) Its connected organization is a					
x Corporation Corporation	w/o Capital Stock Labor Organization					
Membership Organization Trade Assoc	iation Cooperative					
In addition, this committee is a Lobbyist/Registran	: PAC.					
(f) This committee supports/opposes more than one Federal ca committee. (i.e., nonconnected committee)	indidate, and is NOT a separate segregated fund or party					
In addition, this committee is a Lobbyist/Registran	: PAC.					
In addition, this committee is a Leadership PAC. (dentify sponsor on line 6.)					
(g) This committee is an independent expenditure-only political	committee (Super PAC).					
In addition, this committee is a Lobbyist/Registran	PAC.					
(h) This committee is a political committee with both contribution	n and non-contribution accounts (Hybrid PAC).					
In addition, this committee is a Lobbyist/Registran	PAC.					
Joint Fundraising Representative:						
(i) This committee collects contributions, pays fundraising expecommittees/organizations, at least one of which is an author	·					
(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more politic committees/organizations, none of which is an authorized committee of a federal candidate.						
Committees Participating in Joint Fundraiser						
1.	C					
- 1	C					

Title or Position ▼

Treasurer

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٧	Vrite or Type Committee N	lame		
	DEPOSITORY	TRUST AND CLEARING	CORPORATION PAC	- DTCC PAC; THE
6.		ed Organization, Affiliated Committee, Jo	oint Fundraising Representative,	or Leadership PAC Sponsor
	The Depository I	rust and Clearing Corporation		
	Mailing Address	55 Water St		
		FI 22		
		New York	NY	10041-0024
		CITY ▲	STATE ▲	ZIP CODE ▲
	Relationship: X Conne	ected Organization Affiliated Organization	Joint Fundraising Represent	Leadership PAC Sponso
7.	n in possession of committee			
	Cosgr	rove, Susan, , ,		
	Full Name			
	Mailing Address	1315 S Belt Line Rd		
		Coppell	TX T	75019-4785
		CITY ▲	STATE ▲	ZIP CODE ▲
	Title or Position ▼	-		
	Custodian of Records		Telephone number	212 - 855 - 7612
8.	Treasurer: List the nam any designated agent (e	ne and address (phone number optional) e.g., assistant treasurer).	of the treasurer of the committee	; and the name and address of
	Full Name Cosgr	rove, Susan, , ,		
	of Treasurer			
	Mailing Address	1315 S Belt Line Rd		
		Coppell	TX	75019-4785
		CITY ▲	STATE ▲	ZIP CODE ▲

212

Telephone number

855

7612

FEC	Form 1 (Revised	02/2009)				Page 4
Full Name Designate Agent		Alison, H, ,			1 1 1 1 1 1	
Mailing Ad	ldress	1455 Pennsylvania Ave	• NW			
		Ste 725				
		Washington			DC 200	004-1036
Title or Po	sition ▼		CITY A	S	STATE A	ZIP CODE ▲
	Treasurer			Telephone numb	er 202	_ 383 _ 2673
Banks or safety dep	Other Depositor osit boxes or mai	ies: List all banks or othen tains funds.	er depositories in w	hich the committee	deposits funds,	nolds accounts, rents
Name of E	Bank, Depository,	etc.				
	Truist					
Mailing Ad	dress	1909 K Street NW				
		Washington			DC 200	06
			CITY A	S	STATE A	ZIP CODE ▲
Name of E	Bank, Depository,	etc.				
Mailing Ad	dress					
			CITY A	S	TATE ▲	ZIP CODE ▲

: 97 'A = G7 9 @ G B9 C I G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCF HZ G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: F1A Transaction ID:

Amended to reflect depository name change and treasurer contact information change.

Form/Schedule: Transaction ID: