Only

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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. Sierra Club Independent Action 2101 Webster Street ADDRESS (number and street) Suite 1300 (Check if address is changed) Oakland 94612 CA CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS political.report@sierraclub.org (Check if address is changed) Optional Second E-Mail Address dave.thack@sierraclub.org COMMITTEE'S WEB PAGE ADDRESS (URL) http://www.sierraclubindependentaction.org (Check if address is changed) DATE 2023 C00483693 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. Trujillo-Wesler, Ari, , , Type or Print Name of Treasurer Trujillo-Wesler, Ari, , , [Electronically Filed] Date 03 2023 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

Local 202-694-1100

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|--|--|--|--|--|
| TYPE OF COMMITTEE: | | | | |
| Candidate Committee: | | | | |
| (a) This committee is a principal campaign committee. (Cor | nplete the candidate information below.) | | | |
| (b) This committee is an authorized committee, and is NOT information below.) | a principal campaign committee. (Complete the candidate | | | |
| Name of Candidate | | | | |
| Candidate Office Party Affiliation Sought: House | State President District | | | |
| (c) This committee supports/opposes only one candidate, a | nd is NOT an authorized committee. | | | |
| Name of Candidate | | | | |
| Party Committee: | | | | |
| (d) This committee is a (National, State or subordinate) co | (Democratic, Republican, etc.) Party | | | |
| Political Action Committee (PAC): | | | | |
| (e) This committee is a separate segregated fund. (Identify | connected organization on line 6.) Its connected organization is a | | | |
| Corporation Corpora | tion w/o Capital Stock Labor Organization | | | |
| Membership Organization Trade A | ssociation Cooperative | | | |
| In addition, this committee is a Lobbyist/Regis | trant PAC. | | | |
| (f) This committee supports/opposes more than one Feder committee. (i.e., nonconnected committee) | al candidate, and is NOT a separate segregated fund or party | | | |
| In addition, this committee is a Lobbyist/Regis | trant PAC. | | | |
| In addition, this committee is a Leadership PA | .C. (Identify sponsor on line 6.) | | | |
| (g) This committee is an independent expenditure-only political committee (Super PAC). In addition, this committee is a Lobbyist/Registrant PAC. | | | | |
| | | | | |
| In addition, this committee is a Lobbyist/Regis | trant 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 | | | |
| | | | | |

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|----|-------------------|--|---------------|--------------|--------------|------------|
| W | rite or Type Comn | | | | | |
| | | lub Independent Action | | | | |
| 6. | = | onnected Organization, Affiliated Committee, Joint Fundraising Represe | entative, | or Leaders | ship PAC S | ponsor |
| | NONE | | | | | |
| | | | | | | |
| | Mailing Address | | | | | |
| | | | | | | |
| | | | | | | |
| | | CITY ▲ Sī | TATE A | | ZIP CODE | A |
| | Relationship: | Connected Organization Affiliated Organization Joint Fundraising R | Representa | ative | Leadership | PAC Sponso |
| | | | | | | , |
| 7. | Custodian of Rea | cords: Identify by name, address (phone number optional) and position of the | he persor | n in possess | sion of comn | nittee |
| | | Thack, Dave, , , | | | | |
| | Full Name | | | | | |
| | Mailing Address | 50 F Street, NW | | | | |
| | | 8th Floor | | | | |
| | | Washington | DC | 20001 | - | |
| | | CITY ▲ ST | STATE A | | ZIP CODE | · • |
| | Title or Position | | //// <u> </u> | | 211 0001 | |
| | Asst General Cou | unsel Telephone numbe | er <u></u> | 202 | 675 | 2395 |
| 3. | | he name and address (phone number optional) of the treasurer of the coagent (e.g., assistant treasurer). | ommittee; | and the na | ame and ac | Idress of |
| | Full Name | Trujillo-Wesler, Ari, , , | | | | |
| | of Treasurer | | | | | |
| | Mailing Address | 2101 Webster Street | | | | |
| | | Suite 1300 | | | | |
| | | Oakland | CA | 94612 | - | _ _ |
| | | CITY ▲ ST | TATE A | | ZIP CODE | A |
| | Title or Position | | _ | | - 021 | |
| | Treasurer | | er 🗀 | 415 | 977 | 5755 |

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|--------------------------------------|--|--|
| Full Name of Designated Agent | Bingaman, Bob, , , | |
| Mailing Address | 50 F Street NW | |
| | 8th Floor | |
| | Washington | 20001 |
| | CITY ▲ STATE ▲ | ZIP CODE ▲ |
| Title or Position Assistant Treasur | | - 675 - 7904 - 1000 - 1 |
| Banks or Other safety deposit box | Depositories: List all banks or other depositories in which the committee deposits function or maintains funds. | ds, holds accounts, rents |
| Name of Bank, D | epository, etc. | |
| | Mechanics Bank | |
| Mailing Address | P.O. Box 5610 | |
| | | |
| | Hercules CA | 94547 |
| | CITY ▲ STATE ▲ | ZIP CODE ▲ |
| Name of Bank, D | epository, etc. | |
| | <u> </u> | |
| Mailing Address | | |
| | | |
| | | |
| | CITY ▲ STATE ▲ | ZIP CODE ▲ |