## STATEMENT OF

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FORM 1		OR	GANI	ZA <sup>·</sup>	TIO	N							Of	fice L	Jse Or	nly		
NAME OF     COMMITTEE (in	n full)		eck if name nanged)	•		ple:If t		, type		12	FE4	1M5		_				
INTELSAT	US LL	C POL	ITICAL	_ AC	CTIC	) NC	CO	MN	/IT	ŢΕ	E				1 1			<u>                                     </u>
ADDRESS (number and street)  (Check if address is changed)		7900 TYSOI	NS ONE PLA	ACE														
														ı				
		MCLEAN CITY	<u>                                     </u>							STA	TE 🛦		221	02	⊥ ⊥ ZI	 IP C0	DDE 4	<u>                                     </u>
COMMITTEE'S E-MA	AIL ADDRES	SS																
(Check if address is changed)		IntelsatP	AC@intels	sat.co	m 													
_		Optional Se	cond E-Mai	l Addre	ess													
COMMITTEE'S WEB  (Check if a is changed	address	PRESS (URL)																
2. DATE 03		20	23															
3. FEC IDENTIFIC	CATION NU	MBER ▶	C	C004	412403													
4. IS THIS STATEM	MENT X	NEW (N	) OF	₹		AN	ENDI	ED (A	)									
I certify that I have e	examined th	s Statement	and to the I	best of	my kn	owledg	je and	d belie	ef it is	s true	e, co	rrect	and	con	nplete	).		
Type or Print Name	of Treasurer	Yen, Chris,	, ,															
Signature of Treasure	er <i>Yen, C</i>	hris, , ,			[1	Electron	ically	Filed]	ı	Date		03	M /		21	′	202	23
NOTE: Submission of	false, errone	ous, or incomp						-	-					pena	alties	of 52	U.S.O	C. §30 <sup>-</sup>
Office Use Only					F	For furth Federal I Toll Free Local 20	Election 800-42	n Comn 24-9530	nissior						C F		<b>M 1</b>	

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TYPE OF COMMITTEE:									
Candidate Committee:									
(a) This committee is a principal campaign committee. (Complete the candidate information	ation below.)								
(b) This committee is an authorized committee, and is NOT a principal campaign committee information below.)	mittee. (Complete the candidate								
Name of Candidate									
Candidate Office Party Affiliation Sought: House Senate	State President District								
(c) This committee supports/opposes only one candidate, and is NOT an authorized co	ommittee.								
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	line 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 committee. (i.e., nonconnected committee)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party 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	addition, this committee is a Leadership PAC. (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.									
(h) This committee is a political committee with both contribution and non-contribution	accounts (Hybrid PAC).								
In addition, this committee is a Lobbyist/Registrant PAC.									
Joint Fundraising Representative:									
(i) This committee collects contributions, pays fundraising expenses and disburses net committees/organizations, at least one of which is an authorized committee of a fee									
(j) This committee collects contributions, pays fundraising expenses and disburses net committees/organizations, none of which is an authorized committee of a federal ca									
Committees Participating in Joint Fundraiser									
1.	С								

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۷	Vrite or Type Committee Name	е	
	INTELSAT US	S LLC POLITICAL ACTION COMMITTEE	
6.		Organization, Affiliated Committee, Joint Fundraising Representative, or Le	adership PAC Sponsor
	Intelsat Genesis Inc	;. 	
	Mailing Address	7900 Tysons One Place	
		McLean   VA   22	2102
		CITY ▲ STATE ▲	ZIP CODE ▲
	Relationship: X Connected	d Organization	Leadership PAC Sponsor
7.	Custodian of Records: Ider books and records.	ntify by name, address (phone number optional) and position of the person in pos	ssession of committee
	Grabowsk	ki, Isabel, , ,	
	Full Name		
	Mailing Address	7900 TYSONS ONE PLACE	
		MCLEAN	2102
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Custodian of Records	Telephone number	
8.	Treasurer: List the name all any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; and t assistant treasurer).	he name and address of
	Full Name Yen, Chris	S, , ,	
	of Treasurer		
	Mailing Address	7900 Tysons One Place	
		McLean   VA   22	2102

Treasurer Telephone number

ZIP CODE ▲

STATE ▲

CITY 🔺

Title or Position ▼

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Full Name of Designated Agent	Evans, Shawna, , ,		
Mailing Address	7900 Tysons One Place		
	McLean	VA L	22102
Title or Position <b>▼</b>	CITY ▲	STATE ▲	ZIP CODE ▲
Assistant Treasu	er ı	elephone number	
	Depositories: List all banks or other depositories in which ses or maintains funds.	the committee deposits fund	s, holds accounts, rents
Name of Bank, D	epository, etc.		
	Wells Fargo		
Mailing Address	PO Box 6995		
	Portland	OR S	97228
	CITY ▲	STATE ▲	ZIP CODE ▲
Name of Bank, D	epository, etc.		
Mailing Address			
	CITY ▲	STATE ▲	ZIP CODE ▲