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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. INTERSTATE NATURAL GAS ASSOCIATION OF AMERICA POLITICAL ACTION COMMITTEE 20 F Street NW ADDRESS (number and street) Suite 450 (Check if address is changed) WASHINGTON 20001 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS cjosman@ingaa.org (Check if address X is changed) Optional Second E-Mail Address mwilliams@ingaa.org COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2020 C00116145 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. Osman, Christopher, J.,, Type or Print Name of Treasurer Osman, Christopher, J.,, [Electronically Filed] 06 12 2020 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use

Toll Free 800-424-9530 Only Local 202-694-1100

(Revised 06/2012)

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	COMMITTEE e Committee:	
(a)	This committee is a principal campaign committee. (Complete the candidate information below	1.)
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Con information below.)	mplete the candidate
Name of Candidate		
Candidate Party Affilia	Office Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Co	nmittee: (National, State	(Democratic
(d)	This committee is a	(Democratic, Republican, etc.) Party
Political A	Action Committee (PAC):	
(e) x	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected organization is
	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 s committee. (i.e., nonconnected committee)	segregated fund or part
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fun	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for committees/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 tocommittees/organizations, none of which is an authorized committee of a federal candidate.	
Con	nmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
1		

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Write or Type Committee Name			
INTERSTATE NATURAL G	AS ASSOCIATION OF A	MERICA POLITIC	AL ACTION COMMITTEE
6. Name of Any Connected Organizat	ion, Affiliated Committee, Joint F	undraising Representati	ve, or Leadership PAC Sponsor
Interstate Natural Gas Associ	ciation of America		
20 F St	reet NW, Suite 450		
Mailing Address			
Washir	gton	DC	20001
	CITY	STATE	ZIP CODE
Relationship: x Connected Organiz	ation Affiliated Committee	Joint Fundraising Represe	entative Leadership PAC Sponsor
Relationship.	Anniated Committee	Joint Fundraising Represe	Leadership 1 No Sponsor
. Custodian of Records: Identify by n	ame, address (phone number op	otional) and position of the	e person in possession of committee
books and records.			
Williams, Morgan, ,	,		
20 F Si	reet NW		
Mailing AddressSuite 4	50		
L	naton	, DC	, ,20001
Title or Position	CITY	STATE	ZIP CODE
PAC Assistant		Telephone number	202 - 216 - 5926
Treasurer: List the name and addres any designated agent (e.g., assistant		e treasurer of the committ	ee; and the name and address of
Full Name Osman, Christophe	, J., ,		ı
of Treasurer	0.4.5		
Mailing Address 924 Lov	regrove St Apt B		
Baltimo	re	MD	21202
Title or Position	CITY	STATE	ZIP CODE
PAC Treasurer		Telephone number	202 - 216 - 5912

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Full Name of Designated Agent Strace	quadine, Anthony, , , Jr.		
Mailing Address	20 F Street NW		
	450		
	Washington CITY	DC 20 STATE	ZIP CODE
Title or Position Assistant Treasurer	Telephone	. 202 .	- 216 - 5915
safety deposit boxes or Name of Bank, Deposit	tory, etc.		
Name of Bank, Deposit	maintains funds.		
Name of Bank, Deposit	maintains funds. tory, etc.		228
Name of Bank, Deposit	remaintains funds. tory, etc. PO Box 6995		228
Name of Bank, Deposit	PO Box 6995 Portand CITY	OR 97	
Name of Bank, Deposit We Mailing Address	PO Box 6995 Portand CITY	OR 97	
Name of Bank, Deposit Mailing Address Name of Bank, Deposit	PO Box 6995 Portand CITY	OR 97	
Name of Bank, Deposit We Mailing Address	PO Box 6995 Portand CITY	OR 97	
Name of Bank, Deposit Mailing Address Name of Bank, Deposit	PO Box 6995 Portand CITY	OR 97	