Image# 201701039040910735				
FEC FORM 1	STATEMEI ORGANIZ			PAGE 1 / 4
1. NAME OF	(Check if name	Example:If typing, type	1000446	
COMMITTEE (in full)	is changed)	over the lines.	12FE4M5	
Interactive Adver	tising Bureau Po	litical Action Cor	nmittee	
ADDRESS (number and street)	888 17th Street NW			
(Check if address	Suite 312			
is changed)	Washington			.0006
	CITY A		STATE 🔺	ZIP CODE▲
COMMITTEE'S E-MAIL ADDRE				
 (Check if address is changed) 	dave@iab.com			
10 01141.304)	Optional Second E-Mail Ad	dress		
	alex@iab.com			
COMMITTEE'S WEB PAGE AD (Check if address is changed)	DRESS (URL)			
2. DATE 01 / 03				
3. FEC IDENTIFICATION N	JMBER ► C c	00443309		
4. IS THIS STATEMENT	NEW (N) OR	× AMENDED (A)		
I certify that I have examined the	nis Statement and to the best	of my knowledge and belief i	t is true, correct a	nd complete.
Type or Print Name of Treasure	r Grimaldi, David, , ,			
Signature of Treasurer	aldi, David, , ,	[Electronically Filed]	Date 01	/ D D / Y Y Y Y 03 / 2017
NOTE: Submission of false, erron		may subject the person signing ON SHOULD BE REPORTED V		ne penalties of 2 U.S.C. §437g.
Office Use Only		For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

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	FEC Fo	rm 1 (Revised 02/2009)	Page 2
TYP	E OF C	OMMITTEE	
Car	ndidate	Committee:	
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Com information below.)	plete the candidate
Nam Cano	ne of didate		
	didate y Affiliati	on Office Sought: House Senate President	State District
(C)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
Nam Cano	ie of didate		
Par	ty Con	mittee:	
(d)			(Democratic, Republican, etc.) Par
Poli	itical A	ction Committee (PAC):	
(e)	×	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor	nected 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 se committee. (i.e., nonconnected committee)	gregated fund or par
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	nt Func	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	vo or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.	FEC ID number	

FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

Interactive Advertising Bureau Political Action Committee

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Interactive Advertisin	g Bureau																
Mailing Address	116 East 27th Street																
	7th Floor																
	New York							NY		1	0016			-L			
		CITY						STAT	E			ZI	РС	DDE			
Relationship: 🗴 Connect	ed Organization	ated Committe	ee	Join	t Fur	ndrais	ing R	epres	enta	itive		_eade	ership	o PA	IC S	pon	sor
 Custodian of Records: Id books and records. 	entify by name, address	(phone numb	er (option	al) a	nd po	sitior	n of th	ne pe	ersor	n in p	osse	ssior	ו of	com	nmitt	ee.

Propes, Al	ex, , ,
Full Name	
Mailing Address	450 K Street NW
	Apt. 1003
	Washington DC 20001
Title or Position	CITY STATE ZIP CODE
Custodian	Telephone 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 of Treasurer	Grimaldi, David, , ,
Mailing Address	1618-C Beekman PI. NW
	Washington DC 20009 -
	CITY STATE ZIP CODE
Title or Position	Telephone number 202 800 0771

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Full Name of Designated Agent																											
Mailing Address		L																									
		L																									
		L																		L							
							СП	ΓY									ST/	ΑΤΕ				ZII	PC	COD	ÞΕ		
Title or Position																											
						ĺ						Tele	eph	ione	e ni	uml	ber										

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name	of	Bank,	Depository,	etc.
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Wells F	Fargo Bank		
Mailing Address	1700 Pennsylvania Avenue NW		
	Washington	DC 20006 – –	
	CITY	STATE ZIP CODE	Ξ
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY	STATE ZIP CODE	Ξ