

# FEC FORM 1

# STATEMENT OF ORGANIZATION

Office Use Only

1. NAME OF COMMITTEE (in full)  (Check if name is changed) Example: If typing, type over the lines.

12FE4M5

Environmental Defense Action Fund PAC

ADDRESS (number and street) 257 Park Ave S

(Check if address is changed)

New York

CITY ▲

NY

STATE ▲

10010-7304

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

wobrien@EDFAction.org

Optional Second E-Mail Address

kbuchanan.inc@gmail.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE

MM / DD / YYYY  
07 / 12 / 2019

3. FEC IDENTIFICATION NUMBER ►

C C00471540

4. 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.

Type or Print Name of Treasurer O'Brien, William, , ,

Signature of Treasurer

O'Brien, William, , ,

[Electronically Filed]

Date

MM / DD / YYYY  
07 / 12 / 2019

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 Use Only

For further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100

FEC FORM 1  
(Revised 06/2012)

5. TYPE OF COMMITTEE

**Candidate 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. (Complete the candidate information below.)

Name of Candidate \_\_\_\_\_

Candidate Party Affiliation  Office Sought:  House  Senate  President State   
 District

- (c)  This committee supports/opposes only one candidate, and is NOT an authorized committee.

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 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 6.)

**Joint Fundraising Representative:**

- (g)  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.
- (h)  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. \_\_\_\_\_ FEC ID number
2. \_\_\_\_\_ FEC ID number
3. \_\_\_\_\_ FEC ID number
4. \_\_\_\_\_ FEC ID number

Write or Type Committee Name

# Environmental Defense Action Fund PAC

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

Environmental Defense Action Fund

Mailing Address 257 Park Ave S  
 17th Floor  
 New York NY 10010-7304  
 CITY STATE ZIP CODE

Relationship:  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Sponsor

**7. Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name Buchanan, Katherine, M, ,  
 Mailing Address 1751 Potomac Greens Dr  
 Alexandria VA 22314-6233  
 CITY STATE ZIP CODE  
 Compliance Telephone number 202 - 423 - 4742

**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 O'Brien, William, , ,  
 Mailing Address 257 Park Ave S  
 New York NY 10010-7304  
 CITY STATE ZIP CODE  
 Title or Position Treasurer Telephone number 212 - 616 - 1222

Full Name of Designated Agent

Gorman, Erin, , ,

Mailing Address

1875 Connecticut Ave., NW

Washington

DC

20009-5728

CITY

STATE

ZIP CODE

Title or Position

Assistant Treasurer

Telephone number

202

572

3310

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.

Wells Fargo

Mailing Address

375 Park Avenue

New York

NY

10152-0002

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Citibank, N.A.

Mailing Address

One Penns Way

Ops 2

New Castle

NY

19720-2408

CITY

STATE

ZIP CODE