

**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

Building Owners and Managers Association International Political Action Committee

ADDRESS (number and street)

1101 15th St., NW

☐ (Check if address is changed)

Suite 800

Washington

CITY ▲

DC

STATE ▲

20005

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

☐ (Check if address is changed)

enaden@boma.org

Optional Second E-Mail Address

disenberg@boma.org

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐ (Check if address is changed)

www.boma.org

2. DATE

MM / DD / YYYY
06 / 03 / 2016

3. FEC IDENTIFICATION NUMBER ►

C C00106435

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 Emily Naden

Signature of Treasurer

Emily Naden

[Electronically Filed]

Date

MM / DD / YYYY
06 / 03 / 2016

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
OnlyFor 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 | C | _____ |
| 2. | _____ | FEC ID number | C | _____ |
| 3. | _____ | FEC ID number | C | _____ |
| 4. | _____ | FEC ID number | C | _____ |

Write or Type Committee Name

Building Owners and Managers Association International Political Action Committee**6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor****Building Owners and Managers Association International**

Mailing Address

1101 15th Street NW

Suite 800

Washington

DC

20005

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

Emily Naden

Mailing Address

1101 15th Street,NW

Suite 800

Washington

DC

20005

Title or Position

CITY

STATE

ZIP CODE

Director Federal Aff

Telephone number

205

326

6326

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

Emily Naden

Mailing Address

1101 15th Street, NW

Suite 800

Washington

DC

20005

Title or Position

CITY

STATE

ZIP CODE

Director, Federal Af

Telephone number

202

326

6326

Full Name of
Designated
Agent

Mailing Address

Title or Position

Telephone number

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.

SunTrust Bank

Mailing Address

PO Box 622227

Orlando

FL

32862-2227

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
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Form/Schedule: F1A

Transaction ID :

Karen Penafiel, our current VP of Adovacy and PAC treasurer is leaving for a new job at the end of June. Emily
Naden will replace her as PAC Admin

Form/Schedule:

Transaction ID: