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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. DGA Action 1225 Eye Street, NW ADDRESS (number and street) **Suite 1100** (Check if address is changed) Washington 20005 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS compliance@dga.net (Check if address X is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2021 C00503789 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) 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. Hill, Stephen, , , Type or Print Name of Treasurer Hill, Stephen,,, [Electronically Filed] 02 18 2021 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 (Revised 06/2012) Toll Free 800-424-9530 Only

Local 202-694-1100

	FEC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	
	naidate	Committee:	
(a)	Ш	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	Ш	This committee is an authorized committee, and is NOT a principal campaign committee. (Compinformation below.)	plete the candidate
	ne of didate		
	didate y Affiliatio	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
	ne of didate		
Par	ty Con	nmittee:	
(d)		· · · · · · · · · · · · · · · · · · ·	Democratic, Republican, etc.) Party.
Pol	itical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cont	nected 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.	
(5)			areasted fund or porty
(f)	×	This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (i.e., nonconnected committee)	gregated fulld of party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joir	nt Fund	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.	o or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two 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.		

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Write or Type Committee Na	me	
DGA Action		
Name of Any Connected	d Organization, Affiliated Committee, Joint Fundraising Representative, or Leader	ship PAC Sponsor
Democratic Action		
<u> </u>	<u> </u>	<u> </u>
	1225 Eye Street, NW	
Mailing Address	Suite 1100	
	Washington DC 20005	
	CITY STATE	ZIP CODE
Relationship: Connec	cted Organization 🗶 Affiliated Committee 🔲 Joint Fundraising Representative 🔲 Le	eadership PAC Spons
_		
Hill, Ste	phen,,,	
Full Name	1225 Eye Street, NW Suite 1100 Washington DC 20005	
Full Name	1225 Eye Street, NW Suite 1100	ZIP CODE
Full Name	1225 Eye Street, NW Suite 1100 Washington DC 20005	ZIP CODE 772 - 5600
Full Name Mailing Address Title or Position Treasurer	1225 Eye Street, NW Suite 1100 Washington CITY STATE Telephone number 202 and address (phone number optional) of the treasurer of the committee; and the number	772 - 5600
Full Name Mailing Address Title or Position Treasurer Treasurer: List the name a	1225 Eye Street, NW Suite 1100 Washington CITY STATE Telephone number 202 and address (phone number optional) of the treasurer of the committee; and the naw, assistant treasurer).	772 - 5600
Title or Position Treasurer Treasurer: List the name a any designated agent (e.g. Full Name Hill, Step	1225 Eye Street, NW Suite 1100 Washington CITY STATE Telephone number 202 and address (phone number optional) of the treasurer of the committee; and the naw, assistant treasurer).	772 - 5600
Title or Position Treasurer List the name a any designated agent (e.g. Full Name of Treasurer	1225 Eye Street, NW Suite 1100 Washington CITY STATE Telephone number and address (phone number optional) of the treasurer of the committee; and the na., assistant treasurer).	772 - 5600
Title or Position Treasurer List the name a any designated agent (e.g. Full Name of Treasurer	1225 Eye Street, NW Suite 1100 Washington CITY STATE Telephone number and address (phone number optional) of the treasurer of the committee; and the naw, assistant treasurer).	772 - 5600
Title or Position Treasurer List the name a any designated agent (e.g. Full Name of Treasurer	1225 Eye Street, NW Suite 1100 Washington CITY STATE Telephone number and address (phone number optional) of the treasurer of the committee; and the naw, assistant treasurer). phen, , , 1225 Eye Street, NW Suite 1100	772 5600

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Full Name of Designated Agent	Hill, Stephen, , ,	
Mailing Address	1225 Eye Street, NW	
	Suite 1100	
	Washington DC 20005	
Tial	CITY STATE	ZIP CODE
Title or Position Treasurer	Telephone number	772 - 5600
Banks or Other	rrer	
safety deposit bo	oxes or maintains funds. Depository, etc.	
safety deposit bo Name of Bank, I	oxes or maintains funds.	
safety deposit bo	Depository, etc. Amalgamated Bank	
safety deposit bo Name of Bank, I	Depository, etc. Amalgamated Bank	
safety deposit bo Name of Bank, I	Depository, etc. Amalgamated Bank 275 Seventh Avenue New York New York New York	ZIP CODE
safety deposit bo Name of Bank, I	Depository, etc. Amalgamated Bank 275 Seventh Avenue New York CITY STATE	
safety deposit bo Name of Bank, I Mailing Address	Depository, etc. Amalgamated Bank 275 Seventh Avenue New York CITY STATE	
safety deposit be Name of Bank, I Mailing Address	Depository, etc. Amalgamated Bank 275 Seventh Avenue New York CITY STATE	
safety deposit bo Name of Bank, I Mailing Address	Depository, etc. Amalgamated Bank 275 Seventh Avenue New York CITY STATE	
Safety deposit be Name of Bank, I Mailing Address	Depository, etc. Amalgamated Bank 275 Seventh Avenue New York CITY STATE	

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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(h). Joint Fundraisi	ig Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
Jobs and Opport	l Organization, Affiliated Committee, Joint Fun unity	ndraising Representativ	re, or Leadership PAC Spons
Mailing Address	1225 Eye Street, NW		
3	Suite 1100		
	Washington	DC	20005
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization X Affiliated Committee Jo	oint Fundraising Represent	tative Leadership PAC Sp
Connecte		oint Fundraising Represent	tative Leadership PAC Sp
Connected Agent: Identif	ed Organization X Affiliated Committee Jo	pint Fundraising Represent	tative Leadership PAC Sp
Connected Agent: Identification Full Name	ed Organization X Affiliated Committee Jo	oint Fundraising Represent	tative Leadership PAC Sp
Connected Agent: Identification Full Name	ed Organization X Affiliated Committee Jo	oint Fundraising Represent	Leadership PAC Sp
Connected Agent: Identification Full Name	Affiliated Committee Jo	oint Fundraising Represent	Leadership PAC Sports and Leadership PAC Spo
Pesignated Agent: Identification Full Name Mailing Address	Affiliated Committee Jo		
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	Affiliated Committee Journal J	STATE Telephone Number	ZIP CODE A
Connected Pesignated Agent: Identification of Bank, Depository, etc.	Affiliated Committee Journal J	STATE Telephone Number	ZIP CODE A