FEC

Only

STATEMENT OF

PAGE 1/6 •

ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Tammy for Illinois PO Box 10793 ADDRESS (number and street) (Check if address is changed) Chicago 60610 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address compliance@tammyduckworth.com is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.tammyduckworth.com (Check if address is changed) DATE 2024 C00574889 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. Type or Print Name of Treasurer Lowey, Keith, D., , Date 05 09 2024 Signature of Treasurer Lowey, Keith, D.,, NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. 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

Local 202-694-1100

FEC Form 1 (Revised 03/2022)	Page 2
TYPE OF COMMITTEE:	
Candidate Committee:	
(a) X This committee is a principal campaign committee. (Complete the candidate information be	elow.)
(b) This committee is an authorized committee, and is NOT a principal campaign committee. (information below.)	Complete the candidate
Name of Candidate Duckworth, L. Tammy, , ,	
Candidate Party Affiliation Office Sought: House Senate Pre	State IL sident District
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee	e.
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 Wo 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 separal committee. (i.e., nonconnected committee)	te segregated fund or party
In addition, this committee is a Lobbyist/Registrant PAC.	
In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
(g) This committee is an independent expenditure-only political committee (Super PAC).	
In addition, this committee is a Lobbyist/Registrant PAC.	
(h) This committee is a political committee with both contribution and non-contribution account	ts (Hybrid PAC).
In addition, this committee is a Lobbyist/Registrant PAC.	
Joint Fundraising Representative:	
(i) This committee collects contributions, pays fundraising expenses and disburses net process committees/organizations, at least one of which is an authorized committee of a federal call.	•
(j) This committee collects contributions, pays fundraising expenses and disburses net proceed committees/organizations, none of which is an authorized committee of a federal candidate	·
Committees Participating in Joint Fundraiser	
1C	
2.	

	FEC Form 1 (Revised 0	2/2009)	Page 3
٧	Vrite or Type Committee Name		
	Tammy for Illinoi		Javahin BAO On an ann
).	Duckworth Victory Fu	rganization, Affiliated Committee, Joint Fundraising Representative, or Lead	ersnip PAC Sponsor
	Duckworth victory Fu		
	Mailing Address	124 Washington Street	
		Suite 101	
		Foxboro MA 0203	35
		CITY ▲ STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization X Joint Fundraising Representative	Leadership PAC Sponso
<u>.</u>	Custodian of Records: Idention books and records.	fy by name, address (phone number optional) and position of the person in posso	ession of committee
	Lowey, Kei	th, D., ,	
	Full Name		
	Mailing Address	124 Washington Street, Suite 101	
		Foxboro MA 0203	35
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Treasurer	Telephone number	543 1720
3.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and the assistant treasurer).	name and address of
	Full Name Lowey, Kei	th, D., ,	
	of Treasurer	10.11 1. 1. 2. 1. 2. 1. 10.	
	Mailing Address	124 Washington Street, Suite 101	
		Foxboro MA 0203	35
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Treasurer	Telephone number = 508	543 - 1720

Full Name of Designated Agent Mailing Address CITY ▲ STATE ▲ ZIP CODE ▲ Title or Position ▼ Telephone number Telep		FEC Form 1	(Revised 02/2009)	Page 4
CITY ▲ STATE ▲ ZIP CODE ▲ Title or Position ▼ Telephone number		Designated		
Title or Position ▼ 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. Amalgamated Bank		Mailing Address		
Title or Position ▼ 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. Amalgamated Bank				
Title or Position ▼ 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. Amalgamated Bank				
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. Amalgamated Bank Mailing Address I825 K St NW Washington CITY A STATE A ZIP CODE A Name of Bank, Depository, etc. Self-Help Federal Credit Union Mailing Address ILL 60619 Chicago				ZIP CODE ▲
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. Amalgamated Bank Mailing Address 1825 K St NW		Title or Position		
Name of Bank, Depository, etc. Amalgamated Bank Mailing Address 1825 K St NW			Telephone number	
Amalgamated Bank Mailing Address Mashington DC 20006 -	•	Banks or Other safety deposit box	Depositories: List all banks or other depositories in which the committee deposits funds, holdes or maintains funds.	ds accounts, rents
Mailing Address 1825 K St NW		Name of Bank, D	epository, etc.	
Washington CITY ▲ STATE ▲ ZIP CODE ▲ Name of Bank, Depository, etc. Self-Help Federal Credit Union Mailing Address Chicago IL 60619		Mailing Address		
Name of Bank, Depository, etc. Self-Help Federal Credit Union Mailing Address 645 East 87th Street Chicago IL 60619 ———————————————————————————————————		ag / .aaeee		1
Name of Bank, Depository, etc. Self-Help Federal Credit Union Mailing Address Chicago IL 60619			Washington DC 20006	
Mailing Address 645 East 87th Street			CITY ▲ STATE ▲	ZIP CODE ▲
Mailing Address 645 East 87th Street		Name of Bank, D	epository, etc.	
Chicago IL 60619			Self-Help Federal Credit Union	
		Mailing Address	645 East 87th Street	
CITY ▲ STATE ▲ ZIP CODE ▲			Chicago	
			CITY ▲ STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

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

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h). Joint Fundraisi	ig Farticipant.		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
-	Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spons
Illinois Victory 2016			
Mailing Address	120 Maryland Ave NE		
	Washington	DC	20002
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte		nt Fundraising Representa	ative Leadership PAC Sp
Connecte	ed Organization Affiliated Committee X Join	nt Fundraising Represent	ative Leadership PAC Sp
Connecte esignated Agent: Identi	ed Organization Affiliated Committee X Join	nt Fundraising Represent	ative Leadership PAC Sp
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esignated Agent: Identi	ed Organization Affiliated Committee X Join	nt Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi	Affiliated Committee X Join fy by name, address (phone number – optional)	st Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address	Affiliated Committee X Join fy by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or markets.	Affiliated Committee X Join fy by name, address (phone number – optional) CITY CITY Cries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	Affiliated Committee X Join fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

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

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Page	of °	

TITLE OR POSITION CITY A STATE A ZIP CODE A Telephone Number CITY A STATE A ZIP CODE A Telephone Number CITY A STATE A ZIP CODE A Telephone Number CITY A STATE A ZIP CODE A Telephone Number Title OR POSITION Title OR POSITION Title OR Positions: List all banks or other depositories in which the committee deposits funds, holds accounts, renderly deposit boxes or maintains funds. Title OR Positions Title OR Position	h). Joint Fundraisi	ig Participant:		
3.	1.		FEC ID number	С
A	2.		FEC ID number	С
ame of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Spon Illinois Virginia Victory Fund Mailing Address 124 Washington St Suite 101 Foxboro Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee ✓ Joint Fundraising Representative Leadership PAC S esignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number	3.		FEC ID number	С
Mailing Address 124 Washington St	4.		FEC ID number	С
Mailing Address 124 Washington St	ame of Any Connected	Organization, Affiliated Committee, Joint Fun	draising Representativ	e. or Leadership PAC Spons
Suite 101 Foxboro Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC S esignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number	-	_		· · · · · · · · · · · · · · · · · · ·
Suite 101 Foxboro Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC S esignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number				
Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization	Mailing Address	124 Washington St		
Relationship: CITY A STATE A ZIP CODE A Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC S esignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION CITY A STATE A ZIP CODE A Telephone Number		Suite 101		
Connected Organization	Polotic veliti			
esignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number — — — — — — — — — — — — — — — — — — —	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number ———————————————————————————————————			int Fundraising Represent	ative Leadership PAC Sp
Telephone Number Telephone Nu	esignated Agent: Identi		int Fundraising Represent	ative Leadership PAC Sp
Telephone Number Telephone Nu	esignated Agent: Identi		int Fundraising Represent	ative Leadership PAC Sp
Telephone Number Telephone Nu	esignated Agent: Identi		int Fundraising Represent	ative Leadership PAC Sp
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affety deposit boxes or maintains funds. ame of Bank, Woodsboro Bank epository, etc. Mailing Address [7360 Guilford Drive]	esignated Agent: Identi Full Name Mailing Address	y by name, address (phone number – optional)		
Frederick MD 21704 —	esignated Agent: Identi Full Name Mailing Address	by by name, address (phone number – optional) CITY	STATE A	
	Full Name Mailing Address TITLE OR POSITION anks or Other Deposite the deposite boxes or mame of Bank, epository, etc.	cories: List all banks or other depositories in whice aintains funds.	STATE A Telephone Number	ZIP CODE A
CITY ▲ STATE ▲ ZIP CODE ▲	Full Name Mailing Address TITLE OR POSITION anks or Other Deposite the deposite boxes or mame of Bank, epository, etc.	cories: List all banks or other depositories in whice aintains funds. 7360 Guilford Drive 17360 Guilford Driv	STATE A Telephone Number	ZIP CODE A s funds, holds accounts, rent