FEC

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STATEMENT OF ORGANIZATION

FORM 1		URGANIZ	ATION	
				Office Use Only
1. NAME OF COMMITTEE (in	n full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5
Truth to Pow	/er			
<u> </u>				
ADDRESS (number a	nd atraat)	1700 Tribute Road, Suite 201	1	
🗙 🚽 (Check if a	address			
is changed is changed	((Sacramento		CA 95815 STATE ▲ ZIP CODE ▲
COMMITTEE'S E-MA		S		
X < (Check if a is changed		TTP@deaneandcompany.c	com	
-		Optional Second E-Mail Ad	ldress	
COMMITTEE'S WEB	address	https://truthtopowerpac.com/		
2. DATE	1 / D 13	D / Y Y Y Y 2025		
3. FEC IDENTIFIC	CATION NU	MBER ► C c	00747766	
4. IS THIS STATEM	MENT	NEW (N) OR	× AMENDED (A)	
I certify that I have e	examined thi	s Statement and to the best	t of my knowledge and belief it	is true, correct and complete.
Type or Print Name	of Treasurer	Hoffman, Luke, , ,		
Signature of Treasure	er Hoffma	an, Luke, , ,		Date 01 / D D / Y Y Y Y 2025
NOTE: Submission of	false, errone		may subject the person signing the transmission of transmission of the transmission of the transmission of the transmission of the transmission of transmi	this Statement to the penalties of 52 U.S.C. §301 WITHIN 10 DAYS.
Office Use Only			For further information co Federal Election Commissio Toll Free 800-424-9530 Local 202-694-1100	ontact: FFC FORM 1

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5.	TYPE O	F COMMITTEE:	
	Candid	ate 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 information below.)	e the candidate
	Name Candic		
	Candic Party /	Affiliation Office Sought: House Senate President	State
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
	Nam Cano	e of lidate	
	Darty (Committee:	
	(d)	This committee is a (National, State (Democ	ratic, can, etc.) Party
	Dolition	I Action Committee (PAC):	
	(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.)	ected organization is a:
		Corporation Corporation w/o Capital Stock	or Organization
		Membership Organization Trade Association Coop	perative
		In addition, this committee is a Lobbyist/Registrant PAC.	
	(f) 🗙	This committee supports/opposes more than one Federal candidate, and is NOT a separate segreg committee. (i.e., nonconnected committee)	pated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		X 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 accounts (Hybrid	1 PAC).

Joint Fundraising Representative:

(i) 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.
(j) 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.
2.

In addition, this committee is a Lobbyist/Registrant PAC.

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Write or Type Committee Name

Truth to Power

6.	Name of Any Connected Or	ganization, Affiliated	d Committee,	Joint	Fundra	ising	Repre	sentative, or	Leadershi	p PAC Sponso	or
	Katherine Porter										
	Mailing Address	1700 Tribute Road, S	Suite 201								
		Sacramento						CA	95815		
			CITY A					STATE 🔺	Z	IP CODE 🔺	
	Relationship: Connected	Organization Affili	ated Organiza	tion	Join	t Fund	raising	Representativ	re 🗙 Lea	adership PAC Sp	ponsoi

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

Deane, Sh	awnda, , ,
Full Name	
Mailing Address	1700 Tribute Road, Suite 201
	Sacramento CA 95815
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position ▼	
Custodian of Records	Image: Telephone number 916 285 5733

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	Hoffman, Luke, , ,
of Treasurer	
Mailing Address	1700 Tribute Road, Suite 201
	Sacramento CA 95815
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	,
Treasurer	Image:

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Full Name of Designated Agent	Deane, Shawnda, , ,
Mailing Address	1700 Tribute Road, Suite 201
	Sacramento CA 95815
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	
Assistant Treasur	rer Telephone number 916 285 5733 1000 _ 00000 _ 0000 _ 0000 _ 0000 _ 0

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.

	First Foundation Bank		
Mailing Address	1601 Response Road, Suite 190		
	Sacramento	CA 95	815
	CITY A	STATE A	ZIP CODE
Name of Bank, D	epository, etc.		
Mailing Address			
	CITY A	STATE ▲	ZIP CODE