Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. NY Progressive Action PAC2 - Federal 225 Broadway Suite 1902 ADDRESS (number and street) (Check if address is changed) New York 10007 NY CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS aschwartz@afjlaw.com (Check if address is changed) Optional Second E-Mail Address aschwartz@advocatesny.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 02 2018 C00688762 FEC IDENTIFICATION NUMBER > 3. X 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. Schwartz, Arthur, Z,, Type or Print Name of Treasurer Schwartz, Arthur, Z,, [Electronically Filed] 10 03 2018 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

Local 202-694-1100

	FEC Fo	rm 1 (Revised 02/2009)	Page 2		
	E OF COMMITTEE				
	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		
Nam Can	ne of didate				
	didate y Affiliati	Office Sought: House Senate President	State		
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District		
Nam Can	ne of didate				
Par	ty Con	nmittee:			
(d)		· · · · · · · · · · · · · · · · · · ·	Democratic, Republican, etc.) Party.		
Poli	itical A	ction Committee (PAC):			
(e)	×	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its confi	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.			
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (i.e., nonconnected committee)	gregated 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.)			
Join	nt Fund	raising Representative:			
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw 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		
	Committees 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 Name	. ago c
NY Progressive Action PAC2 - Federal	
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Lead	dership PAC Sponsor
NY Progressive Action Network, Inc	
225 Broadway Mailing Address	
Suite 1902	
New York NY 1000	77
CITY STATE	ZIP CODE
Relationship: X Connected Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
Custodian of Records: Identify by name, address (phone number optional) and position of the person in books and records.	possession of committee
Schwartz, Arthur, Z, ,	1
Full Name	
Mailing Address Suite 1902	
New York , NY , 1000	7
New Tork	<u></u>
Title or Position CITY STATE	ZIP CODE
Treasurer 212 — Telephone number 211 —	. 285 - 1400
3. Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the any designated agent (e.g., assistant treasurer).	e name and address of
Full Name Schwartz, Arthur, Z, ,	1
of Treasurer	
Mailing Address	
Suite 1902	
New York NY 1000	
CITY STATE Title or Position	ZIP CODE
Treasurer 212 - Telephone number 212 -	285 1400

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Full Name of Designated Agent	Schwartz, Arthur, Z., ,					
Mailing Address	225 Broadway					
	Suite 1902					
	New York CITY STATE ZI	P CODE				
Title or Position Treasurer		85 - 1400				
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	52 Broadway					
	New York NY 10004					
	CITY STATE ZI	IP CODE				
Name of Bank, D	Depository, etc.					
Mailing Address						
	CITY STATE ZI	IP CODE				