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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. Southern California Fund 777 S. Figueroa Street ADDRESS (number and street) Suite 4050 (Check if address is changed) Los Angeles 90017 CA CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS pcdfilings@kaufmanlegalgroup.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2023 C00361410 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. Fraioli, Michael, , , Type or Print Name of Treasurer Fraioli, Michael, , , [Electronically Filed] 03 2023 Signature of Treasurer Date 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 Only

Local 202-694-1100

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TYPE OF COMMITTEE:				
ndidate Committee:				
(a) This committee is a principal campaign committee. (Complete the candidate info	ormation below.)			
(b) This committee is an authorized committee, and is NOT a principal campaign c information below.)	committee. (Complete the candidate			
Name of Candidate				
Candidate Party Affiliation Office Sought: House Senate	State President District			
(c) This committee supports/opposes only one candidate, and is NOT an authorize	d 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 NO committee. (i.e., nonconnected committee)	T a separate 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
In addition, this committee is a Lobbyist/Registrant PAC.				
Joint Fundraising Representative:				
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.				
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.	C			
	C			

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W	rite or Type Committee	Name	
	Southern Ca	alifornia Fund	
6.		ted Organization, Affiliated Committee, Joint Fundraising Represe	entative, or Leadership PAC Sponsor
	Sherman, Brad,	<b>,,</b>	
	Mailing Address	777 S. Flgueroa St.	
		Ste. 4050	
		Los Angeles	CA   90017  -
		CITY ▲ ST	TATE ▲ ZIP CODE ▲
	Relationship: Conr	nected Organization	epresentative x Leadership PAC Sponso
	Ticiationship.	Allillated Organization Control valuations 1	Leadership 170 Oponse
7.	Custodian of Records: books and records.	: Identify by name, address (phone number optional) and position of the	ne person in possession of committee
	Kauf	fman, Stephen, , ,	
	Full Name		
	Mailing Address	777 S. Flgueroa St.	
		Ste. 4050	
		Los Angeles	CA   90017
	Title or Desition —	CITY ▲ ST	TATE ▲ ZIP CODE ▲
	Title or Position ▼		040 450 0505
	Counsel	Telephone numbe	er 213 - 452 - 6565
8.		me and address (phone number optional) of the treasurer of the co (e.g., assistant treasurer).	ommittee; and the name and address of
	Full Name Fraid	oli, Michael, , ,	
	of Treasurer		
	Mailing Address	1323915	
		Ste. 4050	
		Ste. 4050	CA   90017
		Ste. 4050	
	Title or Position ▼	Ste. 4050	CA 90017

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Full Name of Designated Agent						
Mailing Address						
Title or Position ▼	CITY ▲	STATE ▲	ZIP CODE ▲			
		Telephone number				
Banks or Other Deposit safety deposit boxes or n	ories: List all banks or other depositories in anintains funds.	which the committee deposits fur	nds, holds accounts, rents			
Name of Bank, Depositor	Name of Bank, Depository, etc.					
California Bank & Trust						
Mailing Address	550 S. Hope St.					
	Suite #100					
	Los Angeles	CA	90071			
	CITY ▲	STATE ▲	ZIP CODE ▲			
Name of Bank, Depository, etc.						
Mailing Address						
	CITY ▲	STATE ▲	ZIP CODE ▲			