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08/28/2024 18 : 08

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STATEMENT	OF
ORGANIZATI	ON

FORM 1		ORGANIZ		<b>N</b>							
							Offic	ce Use	Only		
1. NAME OF COMMITTEE (in	full)	(Check if name is changed)		nple:If typing, type the lines.	12F	E4M	5		]		
Josh Riley fo	or Cong										
ADDRESS (number a	nd street)	1220 L St NW								.	
(Check if a is changed		Ste 100, Box 384									
, , , , , , , , , , , , , , , , , , ,	,	Washington CITY ▲			L DC	 E ▲	2000	5		DDE 🔺	
COMMITTEE'S E-MA		S									
(Check if a is changed		victoria@sprucestreetcomp	o.com								
		Optional Second E-Mail Ad	dress								
COMMITTEE'S WEB	address	RESS (URL)	m 								
2. DATE 08	M / D 28	2024									
3. FEC IDENTIFIC	CATION NU	MBER ► C c	0079376	)							
4. IS THIS STATEN		NEW (N) OR	×	AMENDED (A)							
I certify that I have e	examined thi	s Statement and to the best	t of my k	nowledge and belief it	is true,	correc	t and o	comple	ete.		
Type or Print Name	of Treasurer	Perrone, Victoria, , ,									
Signature of Treasure	er Perror	ne, Victoria, , ,			Date	M 08	B <sup>M</sup> /	28		2024	Y Y
NOTE: Submission of	false, errone	ous, or incomplete information ANY CHANGE IN INFORMA						enaltie	es of 52	U.S.C.	§30109
Office Use Only				For further information c Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100			F	-	FOR sed 06/2		

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FEC Form 1 (Revised 03/2022)	Page <b>2</b>
5. TYPE OF COMMITTEE:	
Candidate Committee:	
(a) X 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 information below.)	e. (Complete the candidate
Name of Riley, Josh, , , Candidate	
Candidate Office Senate F	State NY President
Party Affiliation DEM Sought: X House Senate F	District 19
(c) This committee supports/opposes only one candidate, and is NOT an authorized commi	ttee.
Name of Candidate	
Party Committee:       (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	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 NOT a sepa committee. (i.e., nonconnected committee)	arate 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.)	

This committee is an independent expenditure-only political committee (Super PAC). (g)

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

This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC). (h)

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

## Joint Fundraising Representative:

2.

This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political (i) 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 (j) committees/organizations, none of which is an authorized committee of a federal candidate. Committees Participating in Joint Fundraiser С 1. С 

Relationship:

	FEC Form 1 (Revised	02/2009	)																								ſ	Pag	je <b>3</b>	}	
٧	Vrite or Type Committee Nam	е																													
	Josh Riley for C	congr	ess	5																											
6.	Name of Any Connected	Organiza	ation,	, Aff	ilia	ted	Со	nmi	ittee	ə, J	Join	nt F	une	dra	isin	g I	Rep	res	en	tati	ve,	or	Le	ad	ers	ship	) P/	٩C	Spo	ons	or
	Josh Riley Victory F	und																													
																														<u> </u>	
	Mailing Address	1220	LSt	W	I		I			1		I	1	1	I	I	1	1	I	I	I	1	1	1		I		1	I	1	

20005

ZIP CODE

Leadership PAC Sponsor

DC

STATE

X Joint Fundraising Representative

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

CITY

Affiliated Organization

Ste 100, Box 384

Washington

Connected Organization

Perrone, Vi	ctoria, , ,			
Full Name				
Mailing Address	1220 L St NW			
	Ste 100, Box 384			
	Washington		DC 20005	
	CITY ▲		STATE 🔺	ZIP CODE
Title or Position ▼				
Treasurer		Telephone nur	mber 484 - [	432 - 5290

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 of Treasurer	Perrone, Victoria, , ,
Mailing Address	1220 L St NW
	Ste 100, Box 384
	Washington         DC         20005
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	
Treasurer	Image:

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Full Name of Designated Agent		
Mailing Address		
	CITY A STATE A	ZIP CODE
Title or Position ▼		
	Telephone number	

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.

	Amalgamated Bank		
Mailing Address	1825 K Street, NW		
	Washington		06
	CITY 🔺	STATE A	ZIP CODE
Name of Bank, I			]
Mailing Address			
	CITY ▲	STATE ▲	ZIP CODE ▲

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g) or (h).	Joint Fundraising	Participant:				
1.				FEC	ID number	C
2.				FEC	ID number	С
3.				FEC	ID number	C
4.				FEC	ID number	С
			iated Committee, Joint	Fundraising F	Representativ	e, or Leadership PAC Sponsor
Em	pire State Strikes E					
Ν	Vailing Address	PO Box 65322				
	<b>J</b>					
		Washington		1		20035
F	Relationship:				STATE ▲	
	Connected	Organization	Affiliated Committee	Joint Fundrais	sing Represent	ative
Decim	anted Amonte Islamitic		(abone number ention			
	nated Agent: Identify	by name, address	(phone number – option	nal)		
Ful		by name, address	s (phone number – option	nal)		
Ful	II Name	by name, address	s (phone number – option	nal)		
Ful	II Name	by name, address	(phone number – option	nal)		
Ful	II Name		(phone number – option	nal)		<pre></pre>
Ful	II Name			nal)		· · · · · · · · · · · · · · · · · · ·
Ful	II Name					· · · · · · · · · · · · · · · · · · ·
Ful Ma TI 	II Name		CITY ▲	Telephone	Number	
Ful Ma TI Banks safety	II Name		CITY ▲	Telephone	Number	[[
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Ful Ma TI Banks safety Name Deposi	II Name		CITY ▲	Telephone	Number	[[

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g) or (h).	Joint Fundraising	Participant:		
1.			FEC ID number	С
2.			FEC ID number	C
3.			FEC ID number	C
4.			FEC ID number	С
Name	of Any Connected C	Organization, Affiliated Committee, Joint Fundra	aising Representativ	e. or Leadership PAC Sponsor
	Re Back the House			
٨	Mailing Address	600 Pennsylvania Ave SE		
		Unit 15180		
		Washington		20003
F	Relationship:		STATE A	ZIP CODE A
	Connected	Organization Affiliated Committee X Joint	Fundraising Represent	ative Leadership PAC Sponsor
Design	nated Agent: Identify	by name, address (phone number – optional)		
Ful	II Name			
Ma	ailing Address			
				-
TI	ITLE OR POSITION	CITY A	STATE A	ZIP CODE 🔺
		1	lephone Number	
	or Other Depositori deposit boxes or main	es: List all banks or other depositories in which that the second	the committee deposi	ts funds, holds accounts, rents
	of Bank, itory, etc.			
	Mailing Address	1		
	maning Addiess			

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	oonit i unululoing	Participant:				
1.				FEC	ID number	С
2.				J FEC	ID number	С
3.				J FEC	ID number	C
4.				FEC	ID number	С
. Name o	of Any Connected C	organization, Affiliate	d Committee, Joint Fu	ndraising R	epresentativo	e, or Leadership PAC Sponsor
Hou	se Victory Project 2	2024				
M	ailing Address	600 Pennsylvania A	/e SE			
		Unit 15180				
		Washington	· · · · · · · · · ·			20003
R	elationship:					
	Connected	Organization Affi	liated Committee	oint Fundrais	ing Representa	ative
	ated Agent: Identify	by name, address (pl	none number – optional)			
Mai	ling Address	1				
		1				
тп						
тп	LE OR POSITION			Telephone		
. Banks safety c	or Other Depositorie	es: List all banks or			Number	Image: Image of the state
. Banks safety c Name c Deposit	or Other Depositorie leposit boxes or mair of Bank, ory, etc.	es: List all banks or			Number	
. Banks safety c Name c Deposit	or Other Depositoric leposit boxes or mair	es: List all banks or			Number	

1. 💷						FEC II	0 number	С				
2.						FEC I	0 number	С				
3.						FEC I	D number	С				
4.						FEC II	0 number	С				
	Any Connected C	-	ffiliated Cor	nmittee, Jo	int Fundra	aising Rep	oresentativ	ve, or	Leade	ership	PAC S	Spons
	racy Summer M	lajority Fund										
		600 Pennsylva	ania Ave SE									
Maili	ng Address											
		#15180										
		1 Washington						l	20003	3		
										-		
	tionship: Connected d Agent: Identify	Organization	Affiliated	rY ▲ Committee number – op		Fundraisin	STATE				CODE ship P4	
	Connected	Organization	Affiliated	Committee		Fundraising						
Designate Full Na	Connected	Organization	Affiliated	Committee								
Designate Full Na	Connected	Organization	Affiliated	Committee								
Designate Full Na	Connected	Organization	Affiliated	Committee		Fundraising						
Designate Full Na Mailing	Connected		Affiliated	Committee						Leader		AC Spo
Designate Full Na Mailing	Connected		Affiliated (	Committee	otional)		g Represen			Leader	ship P4	AC Spo

or (h). Joint Fundraising	Participant:	
1.		FEC ID number
2.		FEC ID number
3.		FEC ID number
4.		FEC ID number
Name of Any Connected O	Organization, Affiliated Committee, Joint Fundr	raising Representative, or Leadership PAC Spons
Nadler Victory Fund	<u> </u>	
Mailing Address	200 West 79th St	
	<b>₩8N</b>	
	New York	NY   10024
Relationship:	CITY A	STATE A ZIP CODE A
	Organization Affiliated Committee X Joint	t Fundraising Representative Leadership PAC Spo
Full Name		
Mailing Address		
TITLE OR POSITION <b>•</b>		STATE A ZIP CODE A
1		elephone Number
Banks or Other Depositorie safety deposit boxes or main Name of Bank, Depository, etc.	>s: List all banks or other depositories in which itains funds.	the committee deposits funds, holds accounts, rents

or (h). Joint Fundraising	Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
Name of Any Connected C	Organization, Affiliated Committee, Joint Fund	Iraising Representativ	e, or Leadership PAC Sponsor
Democracy Action Nov	v New York		
	PO Box 65322		
Mailing Address			
	Washington		20035
Relationship:	CITY 🔺	STATE 🔺	ZIP CODE
Connected	Organization Affiliated Committee X Join	nt Fundraising Represent	ative Leadership PAC Spons
Full Name			
Mailing Address			
TITLE OR POSITION		STATE A	ZIP CODE
I		Felephone Number	
Banks or Other Depositoria	es: List all banks or other depositories in which	n the committee deposi	ts funds holds accounts rents
safety deposit boxes or main	tains funds		
safety deposit boxes or main	ntains funds.		
safety deposit boxes or mair Name of Bank, Depository, etc.			
safety deposit boxes or main			
safety deposit boxes or mair Name of Bank, Depository, etc.			
safety deposit boxes or mair Name of Bank, Depository, etc.			

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		g Participant:						
1.				FE	C ID number	С		_
2.				FE	C ID number	С		
3.				FE	C ID number	С		
4.				FE	C ID number	С		
Name of	Any Connected	Organization, Affil	liated Committee, Join	t Fundraising	Representativ	ve, or Leaders	hip PAC Spor	nso
Gillen	Riley Victory Fu							
Mai	ling Address	1220 L St NW						
IVIAI	ling Address	Ste 100, Box 38	4					
		Washington				20005		
		washington						
						. Z		
		Organization	CITY  Affiliated Committee (phone number – opti	X Joint Fundra	STATE ▲	tative Lea	adership PAC S	Spo
	Connected		Affiliated Committee			tative Lea		
<b>Designate</b> Full N	Connected		Affiliated Committee					6por
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<b>Designate</b> Full N	Connected		Affiliated Committee					Spor
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