Only

STATEMENT OF

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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. NAIOP-PAC 2355 Dulles Corner Blvd. ADDRESS (number and street) (Check if address Suite 750 is changed) Herndon 20171 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS maggard@naiop.org (Check if address is changed) Optional Second E-Mail Address |maggard@naiop.org COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 02 2022 C00233304 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. Sadeghein, Hediyeh, , Mrs., Type or Print Name of Treasurer Sadeghein, Hediyeh, , Mrs., [Electronically Filed] 06 15 2022 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

Local 202-694-1100

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TYPE OF COMMITTEE:					
Candidate Committee: (a) This committee is a principal campaign committee. (Complete the candidate information below.)					
Name of Candidate					
Candidate Party Affiliation Office Sought: House Senate President	State				
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.					
Name of Candidate					
Party Committee:					
(Mational, State (Demo	ocratic, blican, etc.) Party				
Political Action Committee (PAC):					
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor	nnected organization is a:				
Corporation Corporation w/o Capital Stock La	abor Organization				
Membership Organization Trade Association Co	ooperative				
In addition, this committee is a Lobbyist/Registrant PAC.					
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segrecommittee. (i.e., nonconnected committee)	regated 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).					
In addition, this committee is a Lobbyist/Registrant PAC.					
(h) This committee is a political committee with both contribution and non-contribution accounts (Hyb	This committee is a political committee with both contribution and non-contribution accounts (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 proceeds for 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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٧	rite or Type Committee Name NAIOP-PAC				
6.		rganization, Affiliated Committee, Joint Fur	ndraising Repre	esentative, or Leader	ship PAC Sponsor
	Mailing Address	2355 Dulles Corner Blvd.			
		Suite 750			
		Herndon		VA 20171	
		CITY ▲		STATE ▲	ZIP CODE ▲
	Relationship: x Connected	Organization Affiliated Organization	Joint Fundraising	g Representative	Leadership PAC Sponso
7.	Custodian of Records: Identi books and records.	fy by name, address (phone number optiona	and position o	of the person in possess	sion of committee
	Sadeghein,	Hediyeh, , Mrs.,			
	Full Name				
	Mailing Address	2355 Dulles Corner Blvd.			
		Suite 750			
		Herndon		VA 20171	
		CITY ▲		STATE ▲	ZIP CODE ▲
	Title or Position ▼				
	Vice Pres. Finance		Telephone num	nber 703 - L	674 - 1430
3.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the assistant treasurer).	treasurer of the	committee; and the n	ame and address of
	I dii I daii o	Hediyeh, , Mrs.,			,
	of Treasurer	2055 D. U. O DI. J.			
	Mailing Address	2355 Dulles Corner Blvd.			
		Suite 750			
		Herndon		VA 20171	
		CITY ▲		STATE ▲	ZIP CODE ▲
	Title or Position ▼				
	Vice Pres. Finance		Telephone num	nber	674 - 1430

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Full Name of Designated Agent	Sadeghein, Hediyeh, , ,						
Mailing Address	2355 Dulles Corner Blvd.						
	Suite 750						
	Herndon						
Title or Position	CITY ▲ STATE	▲ ZIP CODE ▲					
Vice Pres. Finan	Ce I	703 674 1430					
	Telephone number						
	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, [Name of Bank, Depository, etc.						
	TD Commercial Banking						
Mailing Address	PO Box 1377						
	Lewiston	04243					
	CITY ▲ STATE	▲ ZIP CODE ▲					
Name of Bank, Depository, etc.							
Mailing Address							
	CITY ▲ STATE	▲ ZIP CODE ▲					