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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) over the lines. is changed) NATIONAL UTILITY CONTRACTORS ASSOCIATION LEGISLATIVE INFORMATION AND ACTION COMMITTEE 3925 Chain Bridge Road ADDRESS (number and street) Suite 300 (Check if address is changed) Fairfax 22030-CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS Chris@nuca.com (Check if address is changed) Optional Second E-Mail Address outsourcing@aristotle.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 31 2023 C00004101 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. Barrett, Chris, , , Type or Print Name of Treasurer Barrett, Chris,,, [Electronically Filed] 01 31 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. FEC FORM 1

Office			For further information contact
Use			Federal Election Commission
Only			Toll Free 800-424-9530 Local 202-694-1100
			Local 202-094-1100

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TYPE OF COMMITTEE:							
Candidate Committee:	andidate 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 of information below.)							
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 authorized	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) x This committee is a separate segregated fund. (Identify connected organization	on line 6.) Its connected organization is as						
Corporation Corporation w/o Capital Stock	Labor Organization						
Membership Organization	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 segregated fund committee. (i.e., nonconnected committee)							
In addition, this committee is a Lobbyist/Registrant PAC.							
In addition, this committee is a Leadership PAC. (Identify sponsor on I	line 6.)						
(g) This committee is an independent expenditure-only political committee (Super Pa	AC).						
In addition, this committee is a Lobbyist/Registrant PAC.							
(h) This committee is a political committee with both contribution and non-contribution	on 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 committees/organizations, at least one of which is an authorized committee of a	·						
(j) This committee collects contributions, pays fundraising expenses and disburses committees/organizations, none of which is an authorized committee of a federal	·						
Committees Participating in Joint Fundraiser							
1.	C						
	C						

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٧	Vrite or Type Commit	ttee Name	
_	NATIONAL UTI	LITY CONTRACTORS ASSOCIATION LEGISLATIVE INFORMATION AND ACTION C	COMMITTEE
3.	-	nnected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership I ty Contractors Association	PAC Sponsor
	Mailing Address	3925 Chain Bridge Rd	
		Ste 300	
		Fairfax VA 22030-3938	
		CITY ▲ STATE ▲ ZIP	CODE ▲
	Relationship:	Connected Organization Affiliated Organization Joint Fundraising Representative Leader	ership PAC Sponso
7.	Custodian of Reco	ords: Identify by name, address (phone number optional) and position of the person in possession of s.	f committee
		Barrett, Chris, , ,	
	Full Name		
	Mailing Address	3925 Chain Bridge Rd	
		Ste 300	
		Fairfax VA 22030-3938	
		CITY ▲ STATE ▲ ZIP	CODE ▲
	Title or Position ▼		
	Custodian of Recor	rds Telephone number 703 - 358	
3.		e name and address (phone number optional) of the treasurer of the committee; and the name a jent (e.g., assistant treasurer).	and address of
	Full Name	Barrett, Chris, , ,	
	of Treasurer		
	Mailing Address	3925 Chain Bridge Rd	
		Ste 300	
		Fairfax VA 22030-3938	
		CITY ▲ STATE ▲ ZIP	CODE ▲
	Title or Position ▼		
	Treasurer		

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Full Name	e of				. 190		
Agent							
Mailing A	ddress						
Title or P	osition ▼	CITY	•	STATE ▲	ZIP CODE ▲		
			Telephone no	umber - -			
Banks or safety dep	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	Name of Bank, Depository, etc.						
	Freedom Bank						
Mailing A	Idress	10555 Main Street					
		Suite 100			1		
		Fairfax		VA 220	30		
		CITY A		STATE ▲	ZIP CODE ▲		
Name of	Bank, Depository, o	etc.					
Mailing A	ldress						
		CITY A	\	STATE ▲	ZIP CODE ▲		

: 97 'A = G7 9 @ G B9 C I G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCF HZ G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: F1A Transaction ID:

This form is being amended to disclose a change in banking information.

Form/Schedule: Transaction ID: