FEC

Only

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) Affordable Housing Tax Credit Coalition Political Action Committee (Affordable Housing PAC) 630 I Street NW ADDRESS (number and street) (Check if address is changed) Washington 20001 DC CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address housingpac@taxcreditcoalition.org is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2024 C00842583 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. Type or Print Name of Treasurer Amstadt, Nancy,, Date 04 2024 Signature of Treasurer Amstadt, Nancy, , , 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.)					
	(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the information below.)	ne candidate				
	Name of Candidate					
	Candidate Party Affiliation Office Sought: House Senate President	State District				
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.					
	Name of Candidate					
	rty Committee:					
	(Mational, State (Democratic	c, , etc.) Party				
	Political Action Committee (PAC):					
	(e) X This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ed organization is a:				
		San and a street				
		Organization				
	Membership Organization X Trade Association Coopera	ative				
	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 or party committee. (i.e., nonconnected committee)					
	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 accounts (Hybrid PAC).					
	In addition, this committee is a Lobbyist/Registrant PAC.					
	In addition, this committee is a cobbyist negistratic rac.					
	Joint Fundraising Representative:					
	(i) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political				
	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.	or more political				
	Committees Participating in Joint Fundraiser					
	1 C					

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٧	Vrite or Type Committee Name				
	Affordable Housing 1	Tax Credit Coalition Political Action Committee (Affordable Ho	using PAC)		
6.	Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor				
	Affordable Housing T	ax Credit Coalition			
	Mailing Address	630 I Street NW			
		1			
		Washington DC 20001	. _		
		CITY ▲ STATE ▲ Z	ZIP CODE ▲		
	Relationship: X Connected		adership PAC Sponso		
	Tielationship.	Organization Anniated Organization South Fundraising Representative	adeisiiip i AO Opoliso		
7 .	Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.				
	Amstadt, N	ancy, , ,			
	Full Name				
	Mailing Address	630 I Street NW			
		Washington	- -		
		CITY ▲ STATE ▲ Z	IP CODE ▲		
	Title or Position ▼				
	Treasurer		35 - 0977		
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 Amstadt, Note Treasurer	ancy, , ,			
	Mailing Address	630 I Street NW			
		1			
		Washington DC 20001			
		CITY ▲ STATE ▲ Z	IP CODE ▲		
	Title or Position ▼				
	Treasurer		35 - 0977		

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Full Name of Designated							
Agent							
Mailing Address							
Title or Position	CITY ▲	STATE ▲	ZIP CODE ▲				
	Telephon	ne number					
Banks or Other safety deposit bo	Depositories: List all banks or other depositories in which the conces or maintains funds.	mmittee deposits fu	inds, holds accounts, rents				
Name of Bank, D	Name of Bank, Depository, etc.						
	PNC Bank						
Mailing Address	300 Fifth Avenue						
	Pittsburgh	PA	15222				
	CITY A	STATE ▲	ZIP CODE ▲				
Name of Bank, Depository, etc.							
Mailing Address							
	CITY ▲	STATE ▲	ZIP CODE ▲				