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. Entertainment Software Association PAC (ESA PAC) 601 Massachusetts Avenue, NW ADDRESS (number and street) Suite 300 West (Check if address is changed) Washington 20001 DC CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address mwilliams@theesa.com is changed) Optional Second E-Mail Address cparana@politicalcompliance.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2023 C00439216 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 Williams, Mike, , 09 14 2023 Signature of Treasurer Williams, Mike, , , 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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YPE 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 candidate information below.)				
Name of Candidate '','','','',',',',',',',',',',',',',',				
Candidate Office Party Affiliation Sought: House Senate President	State			
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Name of Candidate				
Party Committee:				
(d) This committee is a (National, State or subordinate) committee of the Republican, et	tc.) Party			
Political Action Committee (PAC):				
(e) X This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization				
Corporation Corporation w/o Capital Stock Labor Orga	anization			
Membership Organization X Trade Association Cooperative				
X 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 f committee. (i.e., nonconnected committee)	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 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 two or no committees/organizations, at least one of which is an authorized committee of a federal candidate.	more political			
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				
1C				
2.				

Treasurer

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٧	Vrite or Type Committee Name				
		oftware Association PAC (ESA PA			
6.	-	Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor			
	Entertainment Softwa	are Association			
	Mailing Address	601 Massachusetts Avenue, NW			
		Suite 300 West			
		Washington	DC 20001		
		CITY ▲	CTATE A	7ID CODE A	
			STATE A	ZIP CODE ▲	
	Relationship: X Connected	Organization Affiliated Organization Joint Fundraisi	ng Representative	Leadership PAC Sponso	
 Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of combooks and records. 				sion of committee	
	Williams, N	like, , ,			
	Full Name				
	Mailing Address	601 Massachusetts Avenue, NW			
		Suite 300 West			
		Washington	DC 20001		
		CITY ▲	STATE ▲	ZIP CODE ▲	
	Title or Position ▼				
	Treasurer	Telephone nu	umber	223	
8.	Treasurer: List the name an any designated agent (e.g., a	d address (phone number optional) of the treasurer of the assistant treasurer).	ne committee; and the r	name and address of	
	Full Name Williams, North Treasurer	/like, , ,			
	Mailing Address	601 Massachusetts Avenue, NW			
		Suite 300 West			
		Washington	DC 20001		
		CITY ▲	STATE ▲	ZIP CODE ▲	
	Title or Position ▼				

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Telephone number

2400

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Full Name of Designated Agent					
Mailing Address					
Title or Position ▼	CITY ▲ STA	ATE ▲ ZIP CODE ▲			
	Telephone number				
Banks or Other Depositorions safety deposit boxes or main	es: List all banks or other depositories in which the committee detains funds.	eposits funds, holds accounts, rents			
Name of Bank, Depository, etc.					
Capitol (Capitol One Bank				
Mailing Address	7501 Wisconsin Avenue				
	Bethesda	MD 20814			
	CITY ▲ STA	ATE ▲ ZIP CODE ▲			
Name of Bank, Depository, etc.					
Mailing Address					
	CITY ▲ STA	ATE ▲ ZIP CODE ▲			