PAGE 1/5 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) INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL 99 COMMITTEE FOR POLITICAL EDUCATION 9315 Largo Drive West ADDRESS (number and street) Suite 200 (Check if address is changed) Upper Marlboro 20774 MD CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS fbarile@iuoelocal99.org (Check if address is changed) Optional Second E-Mail Address robin@sextonpac.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2022 C00279737 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. Barile, Frank, C.,, Type or Print Name of Treasurer Barile, Frank, C.,, [Electronically Filed] 06 10 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:
Use			Federal Election Commission
			Toll Free 800-424-9530
Only			Local 202-694-1100

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. TYPE OF COMMITTEE:	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complet	e the candidate information below.)
(b) This committee is an authorized committee, and is NOT a p information below.)	rincipal campaign committee. (Complete the candidate
Name of Candidate	
Candidate Office Sought: House	State President District
(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) commit	(Democratic, ttee of the Republican, etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify conr	nected organization on line 6.) Its connected organization is a
Corporation	w/o Capital Stock Labor Organization
Membership Organization Trade Assoc	iation Cooperative
In addition, this committee is a Lobbyist/Registrant	PAC.
(f) This committee supports/opposes more than one Federal ca committee. (i.e., nonconnected committee)	
In addition, this committee is a Lobbyist/Registrant	PAC.
In addition, this committee is a Leadership PAC. (I	dentify 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 expercommittees/organizations, at least one of which is an author	·
(j) This committee collects contributions, pays fundraising expercommittees/organizations, none of which is an authorized co	·
Committees Participating in Joint Fundraiser	
1. [ , , , , , , , , , , , , , , , , , ,	C

	FEC Form 1 (Revised (	· · · · · · · · · · · · · · · · · · ·	Page <b>3</b>
٧	Vrite or Type Committee Name		
	INTERNATIONAL UNIO	N OF OPERATING ENGINEERS LOCAL 99 COMMITTEE FOR PC	DLITICAL EDUCATION
6.	=	organization, Affiliated Committee, Joint Fundraising Representative, or L	eadership PAC Sponsor
	International Union of	of Operating Engineers, Local 99	
	Mailing Address	9315 Largo Drive West	I
	Mailing Address	Cuita 200	
		Suite 200	
		Upper Marlboro MD	20774
		CITY ▲ STATE ▲	ZIP CODE ▲
	Relationship: X Connected	Organization	Leadership PAC Sponso
		- Same and a same and	
		tify by name, address (phone number optional) and position of the person in p	ossession of committee
	books and records.		
	Green, Dav	wn, Sandiford, ,	
	Full Name		
	Mailing Address	9315 Largo Drive West	
		Suite 200	
		Upper Marlboro   MD   12	20774
		Opper Manboro	20174
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Custodian of Records		-  337  -  0099
		isophishe named	
_	Traceurer: List the name an	d address (phone number optional) of the treasurer of the committee; and	the name and address of
•	any designated agent (e.g.,		the hame and address of
	Full Name Barile, Fra	nk, C., ,	
	of Treasurer		
	Mailing Address	9315 Largo Drive West	
	. 3	Suite 200	
		Lippor Mariboro	20774
		Upper Marlboro MD	20774
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Treasurer		-  337  -  0099

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Full Name of Designated Agent Mailing Address	Havard, Donald, P, ,  9315 Largo Drive West Suite 200	
	Upper Marlboro MD  CITY A STATE A	20774 ZIP CODE ▲
Title or Position  Assistant Treasur		
	Depositories: List all banks or other depositories in which the committee deposits fundates or maintains funds.	ds, holds accounts, rents
Name of Bank, D	epository, etc.	
Mailing Address	M&T Bank PO Box 767	
	Buffalo	14240-0767
	CITY ▲ STATE ▲	ZIP CODE ▲
Name of Bank, D	epository, etc.	
Mailing Address		
	CITY ▲ STATE ▲	ZIP CODE ▲

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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page \_\_\_\_ **of** \_\_\_\_

h). <b>Joint Fundraising</b>	Рагисірані:			
1.		FEC ID nu	=	<del></del>
2.		FEC ID nu	mber C	
3.		FEC ID nu	mber C	
4.		FEC ID nu	mber C	
	Organization, Affiliated Committee, Joint F			
		LIVATION ALL OTHION		
Mailing Address	1125 17TH ST, NW			
	WASHINGTON		DC	20036
Relationship:	CITY ▲	ST	ATE 🛦	ZIP CODE ▲
Connected	Organization X Affiliated Committee	Joint Fundraising Re	presentative	Leadership PAC S
	Organization Affiliated Committee  by name, address (phone number – optional	-	presentative	Leadership PAC S
esignated Agent: Identify		-	presentative	Leadership PAC S
esignated Agent: Identify  Full Name		-	presentative	Leadership PAC S
esignated Agent: Identify  Full Name	by name, address (phone number – optiona	al)		
esignated Agent: Identify  Full Name	by name, address (phone number – optiona	al)		
esignated Agent: Identify  Full Name  Mailing Address	by name, address (phone number – optiona	al)	TE A	
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor afety deposit boxes or mai	by name, address (phone number – optional control of the control o	STAT	TE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION anks or Other Depositor	by name, address (phone number – optional control of the control o	STAT	TE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor afety deposit boxes or mail	by name, address (phone number – optional control of the control o	STAT	TE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor afety deposit boxes or mai ame of Bank, epository, etc.	by name, address (phone number – optional control of the control o	STAT	TE A	ZIP CODE A