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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) Political Action Committee of the International Alliance of Theatrical Stage Employees 207 West 25th Street ADDRESS (number and street) 4th Floor (Check if address is changed) New York 10001 NY CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS iatsepac@myfecnotices.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2020 C00344325 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. Ford, John, , , Type or Print Name of Treasurer Ford, John, , , [Electronically Filed] 01 2020 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use

Toll Free 800-424-9530 Only Local 202-694-1100

(Revised 06/2012)

	FEC Fo	rm 1 (Revised 02/2009)	Page 2		
	E OF COMMITTEE				
	ididate	Committee:			
(a)	ш	This committee is a principal campaign committee. (Complete the candidate information below.)			
(b)	Ш	This committee is an authorized committee, and is NOT a principal campaign committee. (Compinformation below.)	lete the candidate		
Nam Cand	e of didate				
	didate / Affiliation	Office Sought: House Senate President	State		
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District		
Nam Cand	e of didate				
Par	ty Con	nmittee:			
(d)			Democratic, Republican, etc.) Party.		
Poli	tical A	ction Committee (PAC):			
(e)	×	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conn	nected organization is a		
		Corporation Corporation w/o Capital Stock	Labor Organization		
		Membership Organization Trade Association	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 o 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 line 6.)			
Join	t Fund	raising Representative:			
(g)		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.	o or more political		
(h)		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.	o or more political		
	Committees Participating in Joint Fundraiser				
	1.	FEC ID number			
	2.	FEC ID number			
	3.	FEC ID number			
	4.				

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١٨	FEC Form 1 (Revised 0) Vrite or Type Committee Name	2/2009)	Page 3
	•	mittee of the International Alliance of Theatrical Stage	Employees
		mittee of the International Alliance of Theatrical Stage	· · ·
6.	Name of Any Connected Or	ganization, Affiliated Committee, Joint Fundraising Representative, or Leadership	PAC Sponsor
In	nternational Alliance o	f Theatrical Stage Employees	
	Mailing Address	207 West 25th Street	
	Mailing Address	4th Floor	
		New York NY 10001	
		CITY STATE ZII	P CODE
	_	SIAIL ZI	CODE
	Relationship: X Connected	Organization Affiliated Committee Joint Fundraising Representative Leade	rship PAC Sponsor
	Custodian of Records: Identibooks and records.	ify by name, address (phone number optional) and position of the person in posse	ssion of committee
	Ford, John,	,,	1
	Full Name	207 West 25th Street	
	Mailing Address	₁ 4th Floor	
		New York , NY , 10001	
		The wind the state of the state	
	Title or Position	CITY STATE ZIF	CODE
	Treasurer		0 1770
3.	Treasurer: List the name and any designated agent (e.g., as	address (phone number optional) of the treasurer of the committee; and the name ssistant treasurer).	and address of
	Full Name Ford, John,		
	of Treasurer		
	Mailing Address	207 West 25th Street	
		4th Floor	
		New York 10001	
	Title or Position	CITY STATE ZIF	CODE
	Treasurer		1770

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Full Name of Designated Agent	Wood, James, , ,					
Mailing Address	207 West 25th Street					
	4th Floor					
	New York CITY STATE Z	IP CODE				
Title or Position General Secreta	Telephone number 212 - 73	30 - 1770				
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, Depository, etc. JPMorgan Chase Bank						
Mailing Address	4 Chase Metrotech Center					
<u> </u>	14th Floor					
	Brooklyn NY 11245					
	CITY STATE Z	ZIP CODE				
Name of Bank, [Depository, etc.					
	I , , , , , , , , , , , , , , , , , , ,					
Mailing Address						
Mailing Address						
Mailing Address						

: 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 amendment is being filed to indicate the recent change in status to Lobbyist Registrant PAC.

Form/Schedule: Transaction ID: