FEC FORM 1	STATEME ORGANIZ		Office Use Only	PAGE 1 / 4
1. NAME OF COMMITTEE (in fu	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
ADDRESS (number and (Check if add is changed)				FED PAC)
COMMITTEE'S E-MAIL	ADDRESS			
Check if add is changed)	dress vwinters@iuoe399.com Optional Second E-Mail / ehoey@iuoe399.com	Address		
COMMITTEE'S WEB P. (Check if add is changed)				
2. DATE 08	/ D D / Y Y Y Y 01 2023			
3. FEC IDENTIFICA	TION NUMBER ►	C00432815		
4. IS THIS STATEME	NT NEW (N) OR	× AMENDED (A)		
I certify that I have exa Type or Print Name of	mined this Statement and to the be Treasurer <u>Winters, Vincent, T, Mr.,</u>	est of my knowledge and belief it	is true, correct and complete.	
Signature of Treasurer	Winters, Vincent, T, Mr.,		Date 02 08 1	y y y y 2024
NOTE: Submission of fal	se, erroneous, or incomplete information ANY CHANGE IN INFORM	on may subject the person signing t MATION SHOULD BE REPORTED		52 U.S.C. §30109
Office Use Only		For further information of Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100		

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5.	TYPE OF COMMITTEE:					
	Candidate Committee:					
	(a) This committee is a	a principal campaign	committee. (Complete	the candidate inform	ation below.)	
	(b) This committee is a information below.)		tee, and is NOT a prir	cipal campaign com	mittee. (Complete	the candidate
	Name of Candidate					
	Candidate Party Affiliation	Office Sought:	House	Senate	President	State
	(c) This committee sup	oports/opposes only o	ne candidate, and is I	NOT an authorized c	ommittee.	District
	Name of Candidate					
	Party Committee: (d) This committee is a	· د	ational, State subordinate) committe	e of the	(Democr Republic	atic, an, etc.) Party
	Political Action Commit	ttee (PAC):				
	(e) X This committee is a	a separate segregated	d fund. (Identify conne	cted organization on	line 6.) Its conne	cted organization is a:
	Corporation		Corporation w/	o Capital Stock	X Labo	r Organization
	Membership (	Organization	Trade Associat	ion	Соор	erative
	In additio	on, this committee is a	a Lobbyist/Registrant F	AC.		
		pports/opposes more nconnected committee	than one Federal cano e)	lidate, and is NOT a	separate segreg	ated fund or party
	In additio	on, this committee is a	a Lobbyist/Registrant F	AC.		
	In additio	on, this committee is a	a Leadership PAC. (Ide	ntify sponsor on line	9 6.)	
	(g) This committee is a	an independent exper	nditure-only political co	mmittee (Super PAC)	).	
	In additio	on, this committee is a	a Lobbyist/Registrant F	AC.		
	(h) This committee is a	a political committee v	with both contribution	and non-contribution	accounts (Hybrid	PAC).

## Joint Fundraising Representative:

(i) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
 (j) 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
 2.

In addition, this committee is a Lobbyist/Registrant PAC.

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W	Irite or Type Committee Nan	ne		
	LOCAL 399 INTERNAT	IONAL UNION OF OPERATING ENGINEERS	FEDERAL PAC (LOCAL 399	IUOE FED PAC)
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundrais	sing Representative, or Leade	rship PAC Sponsor
	Mailing Address	1125 17TH ST, NW		
				; 
			STATE A	ZIP CODE
	Relationship: Connecte	ed Organization X Affiliated Organization Joint	Fundraising Representative	Leadership PAC Spons

7. **Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Winters, V	incent, T, Mr.,
Full Name	
Mailing Address	2260 S Grove Street
	1
	Chicago     IL     60616       IL     IL     IL
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position ▼	
Treasurer	Telephone number     312     -     372     -     9870

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 of Treasurer	Winters, Vincent, T, Mr.,
Mailing Address	2260 S Grove Street
	Chicago
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	·
	Image: Telephone number     312     -     372     -     9870

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Full Name of Designated Agent	McGinty, Roger, F, ,	
Mailing Address	2260 S Grove Street	
	Chicago IL 60616	
		P CODE ▲
Title or Position ▼	7	
	Telephone number	

9. 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.

	Byline B	ank																							
Mailing Address		180 N I	∟aSall	e																					
		Ste. 40	0																						
		Chicag	0													L 		60	601						
						СІЛ	ΓY Δ							S	TAT	E				Z	ΊP	COI	DE		
Name of Bank, D	)epository, e	tc.																							
Mailing Address																									
						СІТ	ΓY Δ							S	TAT	E				Z	ΊΡ	COI	DE		