PAGE 1 / 4

STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 X COMMITTEE (in full) is changed) over the lines. Democracy Defense Action 1032 15th Street NW ADDRESS (number and street) (Check if address Number 141 is changed) Washington DC 20005 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS Compliance@DemocracyDefenseAction.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) DemocracyDefenseAction.com (Check if address is changed) DATE 2023 C00746073 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. Caiola, Alexandra, , , Type or Print Name of Treasurer Caiola, Alexandra, , , [Electronically Filed] 07 2023 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: FEC FORM 1 Federal Election Commission Use

Toll Free 800-424-9530 Only

Local 202-694-1100

(Revised 06/2012)

FEC Form 1 (Revised 03/2022)	Page 2				
TYPE OF COMMITTEE:					
Candidate Committee:					
(a) This committee is a principal campaign committee. (Complete the candidate inf	formation below.)				
(b) This committee is an authorized committee, and is NOT a principal campaign of information below.)	committee. (Complete the candidate				
Name of Candidate					
Candidate Office Party Affiliation Sought: House Senate	State President District				
(c) This committee supports/opposes only one candidate, and is NOT an authorized	ed committee.				
Name of Candidate					
Party Committee:					
(d) This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party				
Political Action Committee (PAC):					
(e) This committee is a separate segregated fund. (Identify connected organization	on line 6.) Its connected 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.					
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 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) X This committee is a political committee with both contribution and non-contribut	tion accounts (Hybrid PAC).				
In addition, this committee is a Lobbyist/Registrant PAC.					
Joint Fundraising Representative:					
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.					
This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more politic committees/organizations, none of which is an authorized committee of a federal candidate.					
Committees Participating in Joint Fundraiser					
1 _ , , , , , , , , , , , , , , , , , ,	C				
	C				

	FEC Form 1 (Revised	02/2009)			Page 3
٧	rite or Type Committee Name				
<u> </u>	Democracy De	PIENSE ACTION Organization, Affiliated Committ	ee Joint Fundraising Ren	resentative, or Leade	rshin PAC Sponsor
<i>.</i>	NONE	organization, Anniated Committee	ce, come rundraising riep	resemanve, or Leader	ising i Ao oponsor
	Mailing Address				
		1			[-] [
		CITY 4		STATE ▲	ZIP CODE ▲
	Relationship: Connected	d Organization Affiliated Organ	ization Joint Fundraisin	ng Representative	Leadership PAC Sponsor
			_		
7.	Custodian of Records: Iden books and records.	atify by name, address (phone num	ber optional) and position	of the person in posses	sion of committee
	Caiola, Ale	exandra, , ,			
	Full Name				
	Mailing Address	1032 15th Street NW			
		Number 141			
		Washington		DC 20005	
		CITY 4	.	STATE ▲	ZIP CODE ▲
	Title or Position ▼				
	Treasurer		Telephone nu	mber	371 - 8727
3.	Treasurer: List the name ar any designated agent (e.g.,	nd address (phone number optassistant treasurer).	ional) of the treasurer of the	e committee; and the r	name and address of
	Full Name Caiola, Ale	exandra, , ,			
	of Treasurer				
	Mailing Address	1032 15th Street NW			
		Number 141			
		Washington		DC 20005	
		CITY 4		STATE ▲	ZIP CODE ▲
Title or Position ▼					
			Telephone nu	mber	371 - 8727

FEC Form 1	(Revised 02/2009)		Page 4			
Full Name of Designated						
Agent						
Mailing Address						
Title or Position		TATE ▲	ZIP CODE ▲			
	Telephone numbe	r				
Banks or Other safety deposit bo	Depositories: List all banks or other depositories in which the committee of the committe	deposits funds, hold	s accounts, rents			
Name of Bank, Depository, etc.						
	Amalgamated Bank					
Mailing Address	1825 K Street NW					
	- Washington	DC 20006				
	CITY ▲ ST	ATE A	ZIP CODE ▲			
Name of Bank, Depository, etc.						
Mailing Address						
	CITY ▲ ST.	TATE ▲	ZIP CODE ▲			