Only

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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) NRDC Action Fund Inc PAC 40 W 20th St ADDRESS (number and street) FI 11 (Check if address is changed) New York 10011 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address nrdcafpac@nrdc.org is changed) Optional Second E-Mail Address nrdc@mbacg.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2024 C00548008 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) 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 Foo, Veronica,, Foo, Veronica,,, Date 01 29 2024 Signature of Treasurer 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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	TYPE 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 information below.)	e candidate				
	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.	Biomor				
Name of Candidate						
	Party Committee:					
	(d) This committee is a (National, State or subordinate) committee of the Republican	c, , etc.) Party				
Political Action Committee (PAC):						
	(e) X This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ed organization is a:				
	Corporation Corporation w/o Capital Stock Labor C	Organization				
	Membership Organization Trade Association Coopera	ative				
	In addition, this committee is a Lobbyist/Registrant PAC.					
	(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate committee. (i.e., nonconnected committee)	d 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 PA	AC).				
	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 committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political				
(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more p committees/organizations, none of which is an authorized committee of a federal candidate.						
	Committees Participating in Joint Fundraiser					
	1 C					

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۷	Vrite or Type Committee Name				
	NRDC Action Fu	ind Inc PAC			
6.	Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor				
	NRDC Action Fund I	NC.			
	Mailing Address	40 W 20th St			
		FI 11 			
		New York	NY 10011		
		CITY ▲	STATE ▲	ZIP CODE ▲	
	Relationship: X Connected	Organization Affiliated Organization Joint Fundraising	Representative	Leadership PAC Sponso	
7.	Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.				
	Catapano,	Lisa, M, ,			
	Mailing Address	1152 15th St NW			
		Ste 300			
		Washington	DC 20005	·	
		CITY ▲	STATE ▲	ZIP CODE ▲	
	Title or Position ▼				
	Custodian of Records	Telephone numl	ber		
8.	<b>Treasurer:</b> 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 Foo, Veror of Treasurer	nica, , ,			
	Mailing Address	40 W 20th St			
		FI 11			
		New York	NY 10011		
		CITY ▲	STATE ▲	ZIP CODE ▲	
	Title or Position ▼				
	Treasurer	Telephone numl	ber		

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Full N Desig Agent		Bischof, Emily, , ,		
Mailin	g Address	1152 15th St NW		
		Ste 300		
		Washington	DC DC	20005
Title o	or Position <b>▼</b>	CITY ▲	STATE ▲	ZIP CODE ▲
		Te	elephone number	
		Depositories: List all banks or other depositories in which es or maintains funds.	the committee deposits fur	nds, holds accounts, rents
Name	of Bank, D	epository, etc.		
		Bank of America Merrill Lynch		
Mailing	g Address	PO Box 15284		
		Wilmington	DE	19850
		CITY ▲	STATE ▲	ZIP CODE ▲
Name	of Bank, D	epository, etc.		
Mailing	g Address			
		CITY ▲	STATE ▲	ZIP CODE ▲