PAGE 1 / 4

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) SALESFORCE.COM INC POLITICAL ACTION COMMITTEE THE LANDMARK AT ONE MARKET ADDRESS (number and street) **STE 300** (Check if address is changed) SAN FRANCISCO 94105 CA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS PLGroup@perkinscoie.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2017 C00511600 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. Allen, Elizabeth, , , Type or Print Name of Treasurer Allen, Elizabeth, , , [Electronically Filed] 01 2017 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 (Revised 06/2012) Toll Free 800-424-9530 Only

Local 202-694-1100

| FEC F | orm 1 (Revised 02/2009) | Page 2 |
|----------------------------|--|--|
| | COMMITTEE se 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. (Cor information below.) | nplete the candidate |
| Name of Candidate | | <u> </u> |
| Candidate Party Affilia | tion Office Sought: House Senate President | State |
| (c) | This committee supports/opposes only one candidate, and is NOT an authorized committee. | |
| Name of Candidate | | |
| Party Co | | |
| (d) | This committee is a (National, State or subordinate) committee of the | (Democratic, Republican, etc.) Party. |
| Political | Action Committee (PAC): | |
| (e) x | This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co | nnected 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 s committee. (i.e., nonconnected committee) | egregated 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.) | |
| Joint Fun | draising Representative: | |
| (g) | This committee collects contributions, pays fundraising expenses and disburses net proceeds for t committees/organizations, at least one of which is an authorized committee of a federal candidate. | |
| (h) | This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate. | |
| Cor | nmittees Participating in Joint Fundraiser | |
| 1. | FEC ID number | |
| 2. | FEC ID number | |
| 3. | FEC ID number | |
| 4 | | |

Title or Position Treasurer

| | _ | | _ |
|----|--|---|--------------------|
| | FEC Form 1 (Revised (| 02/2009) | Page 3 |
| ٧ | Vrite or Type Committee Name | · | |
| (| SALESFORCE. | COM INC POLITICAL ACTION COMMITTE | ΞE |
| 6. | Name of Any Connected C | Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership | PAC Sponsor |
| S | salesforce.com, Inc. | | |
| | | | |
| | Mailing Address | The Landmark at One Market | |
| | S | Suite 300 | |
| | | San Francisco CA 94105 | |
| | | CITY STATE ZII | P CODE |
| | Relationship: x Connected | d Organization Affiliated Committee Joint Fundraising Representative Leader | ership PAC Sponsor |
| '. | Custodian of Records: Identification books and records. | ntify by name, address (phone number optional) and position of the person in posses | ssion of committee |
| | | g, Carmela, , , | I |
| | Full Name | ,The Landmark at One Market | |
| | Mailing Address | Suite 300 | |
| | | San Francisco CA 94105 | |
| | | | |
| | Title or Position | CITY STATE ZIF | P CODE |
| | Custodian of Records | Telephone number | |
| 3. | Treasurer: List the name and any designated agent (e.g., a | d address (phone number optional) of the treasurer of the committee; and the name assistant treasurer). | and address of |
| | Full Name Allen, Eliza of Treasurer | lbeth, , , | |
| | Mailing Address | The Landmark at One Market | |
| | | Suite 300 | |
| | | San Francisco CA 94105 | |

CITY

ZIP CODE

STATE

Telephone number

| FEC Form 1 (R | Revised 02/2009) | Page 4 |
|---|---|-----------------------------|
| | | |
| Full Name of Designated Agent Hill, | Catherine, , , | |
| Mailing Address | The Landmark at One Market | |
| | Suite 300 | |
| | San Francisco CA CITY STATE | 94105 ZIP CODE |
| Title or Position Assistant Treasurer | | |
| Banks or Other Depo safety deposit boxes or | ositories: List all banks or other depositories in which the committee deposits for maintains funds | unds, holds accounts, rents |
| carety apposit boxes of | maintains funus. | |
| Name of Bank, Deposi | | |
| Name of Bank, Deposi | | |
| Name of Bank, Deposi | itory, etc. | |
| Name of Bank, Deposi | ells Fargo | |
| Name of Bank, Deposi | ells Fargo | 20005 |
| Name of Bank, Deposi | ells Fargo 1310 G Street, NW | 20005 ZIP CODE |
| Name of Bank, Deposi | ells Fargo 1310 G Street, NW Washington CITY STATE | |
| Name of Bank, Deposi | ells Fargo 1310 G Street, NW Washington CITY STATE | |
| Name of Bank, Deposi | ells Fargo 1310 G Street, NW Washington CITY STATE | |
| Name of Bank, Deposi Mailing Address Name of Bank, Deposi | ells Fargo 1310 G Street, NW Washington CITY STATE | |
| Name of Bank, Deposi Mailing Address Name of Bank, Deposi | ells Fargo 1310 G Street, NW Washington CITY STATE | |