FEC

Only

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Friends of Schumer 192 Lexington Avenue ADDRESS (number and street) **Suite 1001** (Check if address is changed) New York 10016 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address nkutryb@chuckschumer.com is changed) Optional Second E-Mail Address cjgrover@vlpc.com COMMITTEE'S WEB PAGE ADDRESS (URL) http://www.chuckschumer.com (Check if address is changed) DATE 2024 C00346312 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 Dimas, Constantine,, Dimas, Constantine, , , Date 06 13 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

| EC Form 1 (Revised 03/2022) | Page 2 | | | | |
|--|------------------------|--|--|--|--|
| TYPE OF COMMITTEE: | | | | | |
| Candidate Committee: | | | | | |
| (a) X 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 tinformation below.) | the candidate | | | | |
| Name of Candidate Schumer, Charles, E., , | | | | | |
| Candidate Party Affiliation DEM Office Sought: House X Senate President | State NY District | | | | |
| (c) This committee supports/opposes only one candidate, and is NOT an authorized committee. | | | | | |
| Name of Candidate | | | | | |
| Party Committee: | | | | | |
| (d) This committee is a (National, State or subordinate) committee of the Republication | tic, n, etc.) Party | | | | |
| Political Action Committee (PAC): | | | | | |
| (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connec | ted organization is a: | | | | |
| Corporation Corporation w/o Capital Stock Labor | Organization | | | | |
| Membership Organization Trade Association Coope | rative | | | | |
| 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 or 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) This committee is a political committee with both contribution and non-contribution accounts (Hybrid I | PAC). | | | | |
| 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 | | | | |
| 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 | | | | | |
| 1C | | | | | |

| I | FEC Form 1 (Revised | 02/2009) | | Page 3 |
|----|---|---|-------------------------------|-----------------------------------|
| ٧ | Vrite or Type Committee Name | | | |
| _ | Friends of Schu | | | |
| 6. | Schumer Majority Co | Organization, Affiliated Committee, Joint | Fundraising Representat | ive, or Leadership PAC Sponsor |
| | | | | |
| | | | | |
| | Mailing Address | 600 Pennsylvania Ave, SE | | |
| | | Suite 15180 | | |
| | | Washington | DC | 20003 |
| | | CITY A | STATE | ▲ ZIP CODE ▲ |
| | Deletionship: Connected | | | |
| | Relationship: Connected | Affiliated Organization | X Joint Fundraising Repres | Leadership PAC Sponso |
| _ | | | | |
| 7. | Custodian of Records: Iden books and records. | tify by name, address (phone number opt | ional) and position of the pe | erson in possession of committee |
| | D' 0a | and a street | | |
| | Full Name | onstantine, , , | | |
| | Mailing Address | 192 Lexington Ave. | | |
| | Ü | Suite 1001 | | |
| | | New York | , NY | 10016 |
| | | | | |
| | Title or Position ▼ | CITY ▲ | STATE | ▲ ZIP CODE ▲ |
| | Treasurer | I | Talambana mumahan | 212 532 2266 |
| | | | Telephone number | |
| 8. | | nd address (phone number optional) of | the treasurer of the commi | ttee; and the name and address of |
| | any designated agent (e.g., | assistant treasurer). | | |
| | | onstantine, , , | | |
| | of Treasurer | 400 Laviantes Aus | | |
| | Mailing Address | 192 Lexington Ave. | | |
| | | Suite 1001 | | |
| | | New York | NY | |
| | | CITY ▲ | STATE | ▲ ZIP CODE ▲ |
| | Title or Position ▼ | - | - | |
| | Treasurer | | Telephone number | 212 - 532 - 2266 |

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|--|--|--------------------|-----------------------------|
| Full Name of Designated Agent Mailing Address | Goldenkranz, Steven, D., , 192 Lexington Ave. Suite 1001 New York | NY | 10016 |
| Title or Position | CITY ▲ | STATE ▲ | ZIP CODE ▲ |
| Assistant Treasur | er Telephone r | number 2 | 12 532 - 2266 |
| | Depositories: List all banks or other depositories in which the commes or maintains funds. | nittee deposits fo | unds, holds accounts, rents |
| Name of Bank, D | epository, etc. | | |
| Mailing Address | Amalgamated Bank 1825 K St, NW | | |
| | Washington | DC | 20003 |
| | CITY A | STATE ▲ | ZIP CODE ▲ |
| Name of Bank, D | epository, etc. | | |
| | Janney Montgomery Scott, LLC | | |
| Mailing Address | 1717 Arch Street | | |
| | | 1 1 1 1 | |
| | Philadelphia | PA | 19103 |
| | CITY ▲ | STATE ▲ | ZIP CODE ▲ |

: 97 'A = G7 9 @ G B9 C I G'H9 L H'F9 @ 5 H98 'HC' 5 'F9 DCF H Ž G7 < 98 I @ 'C F' + H9 A = N5 H + C B

Form/Schedule: F1A Transaction ID:

This amendment is being filed to correct the State for the Candidate.

Form/Schedule: Transaction ID: