Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. Employees of Palantir Technologies Inc. PAC 1025 Thomas Jefferson Street NW ADDRESS (number and street) Suite 600 (Check if address is changed) Washington 20007 DC CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address palantir-pac@Palantir.com is changed) Optional Second E-Mail Address reporting@premier-compliance.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2024 C00498691 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. Type or Print Name of Treasurer Strohm, Claire, , 05 13 2024 Signature of Treasurer Strohm, Claire, , , 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 (Revised 06/2012)

Toll Free 800-424-9530

Local 202-694-1100

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TYPE O	F COMMITTEE:	
Candida	ate 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 information below.)	the candidate
Name Candid		
Candid Party A	late Office Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Cand		
Party C	Committee:	
(d)	This committee is a (National, State or subordinate) committee of the Republication	tic, n, etc.) Party
Politica	I Action Committee (PAC):	
(e) X	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.	eted organization is
		Organization
	Membership Organization Trade Association Coope	erative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segrega committee. (i.e., nonconnected committee)	ted 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).	
(9)	In addition, this committee is a Lobbyist/Registrant PAC.	
(In)		DAO)
(h)	This committee is a political committee with both contribution and non-contribution accounts (Hybrid	PAC).
	In addition, this committee is a Lobbyist/Registrant PAC.	
Joint F	undraising 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 committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
Comr	mittees Participating in Joint Fundraiser	
OUIIII	C	

Title or Position ▼

Treasurer

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V	Vrite or Type Comm					
		es of Palantir Technologies Inc. PAC				
6.	Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor					
	Palantir Technologies Inc.					
	Mailing Address	1200 17th Street				
		Floor 15				
		Denver CO 80202-58	35			
		CITY ▲ STATE ▲ Z	ZIP CODE ▲			
	Relationship:	Connected Organization Affiliated Organization Joint Fundraising Representative Le	eadership 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.					
	Full Name	Strohm, Claire, , ,				
	Mailing Address	1025 Thomas Jefferson Street, NW				
		Suite 600				
		Washington DC 20007				
		CITY ▲ STATE ▲ Z	ZIP CODE ▲			
	Title or Position	▼				
	Treasurer	Telephone number				
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 of Treasurer	Strohm, Claire, , ,				
	Mailing Address	1025 Thomas Jefferson Street, NW				
		Suite 600				
		Washington DC 20007				
		CITY ▲ STATE ▲ Z	ZIP CODE ▲			

Telephone number

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Full Name of Designated Agent	Johnson, Morgan, Gress, ,					
Mailing Address	1025 Thomas Jefferson Street NW Suite 600					
	Washington	DC	20007			
Title or Position	CITY ▲	STATE ▲	ZIP CODE ▲			
Asst. Treasurer		ne number				
Banks or Other safety deposit bo	<b>Depositories:</b> List all banks or other depositories in which the coxes or maintains funds.	mmittee deposits fo	unds, holds accounts, rents			
Name of Bank, D	Depository, etc.					
	Chain Bridge Bank					
Mailing Address	1445-A Laughlin Avenue					
	McLean	VA	22101			
	CITY ▲	STATE ▲	ZIP CODE ▲			
Name of Bank, Depository, etc.						
	Amalgamated Bank					
Mailing Address	1825 K St NW					
	Washington	DC	20006			
	CITY ▲	STATE ▲	ZIP CODE ▲			