Only

STATEMENT OF

PAGE 1/5

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. GAP Inc. Good Government Fund 2 Folsom Street ADDRESS (number and street) 13th Floor (Check if address is changed) San Francisco 94105 CA CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address Gap_Inc_Govt_Affairs@Gap.com is changed) Optional Second E-Mail Address dirk@campaignfinancesolutions.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2024 C00257246 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 Lester, Stephanie, , Lester, Stephanie, . . Date 04 04 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

FEC Form 1 (Revised 03/2022)	Page 2					
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 candidate information below.)						
Name of Candidate						
Candidate Office Party Affiliation Sought: House Senate President	State 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 Republican,	etc.) Party					
Political Action Committee (PAC):						
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	I organization is a:					
Corporation Corporation w/o Capital Stock Labor Or	ganization					
Membership Organization Trade Association Cooperat	ive					
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 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) This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC	C).					
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 or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.						
(j) 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						
C						

I	FEC Form 1 (Revised (02/2009)		Page 3
٧	Vrite or Type Committee Name	Government Fund		
6.		rganization, Affiliated Committee, Joint Fundraising	Representative, or Leade	rship PAC Sponsor
٠.	Gap Inc.	. 5	,,	
	Mailing Address	2 Folsom Street		
		13th Floor		
		San Francisco	CA 94105	
		CITY ▲	STATE ▲	ZIP CODE ▲
	_		_	
	Relationship: X Connected	Organization Affiliated Organization Joint Fund	draising Representative	Leadership PAC Sponso
7.	Custodian of Records: Iden books and records.	ify by name, address (phone number optional) and po	sition of the person in posses	esion of committee
	Champeau	ı, Todd		
	Full Name			
	Mailing Address	2 Folsom Street		
		13th Floor		
		San Francisco	CA 94105	
		CITY ▲	STATE ▲	ZIP CODE ▲
	Title or Position ▼	3. =	511 II 2 =	2 3352 —
	Custodian of Records		. 650	952 4400
		Telephor	ne number	
8.	Treasurer: List the name ar any designated agent (e.g.,	d address (phone number optional) of the treasurer assistant treasurer).	of the committee; and the r	name and address of
	Full Name Lester, Ste	phanie		
	of Treasurer			
	Mailing Address	2 Folsom Street		
		13th Floor		
		San Francisco	CA 94105	
		CITY ▲	STATE ▲	ZIP CODE ▲
	Title or Position ▼			
	Treasurer	Telephor	ne number 650 - L	952 4400

FEC Form 1	(Revised 02/2009)		Page 4		
Full Name of Designated Agent	Reardon, Gabrielle, , ,				
Mailing Address	2 Folsom Street				
	13th Floor				
	San Francisco	CA	94105		
Title or Position ▼		STATE A	ZIP CODE ▲		
Assistant Treasur		ber	650 - 952 - 4400		
	Depositories: List all banks or other depositories in which the committee ces or maintains funds.	e deposits	funds, holds accounts, rents		
Name of Bank, Depository, etc.					
	Bank of America				
Mailing Address	1850 Gateway Boulevard				
	Concord	CA	94520		
	CITY ▲	STATE A	ZIP CODE ▲		
Name of Bank, Depository, etc.					
Mailing Address					
	CITY ▲	STATE A	ZIP CODE ▲		

: 97 'A = G7 9 @ G B9 C I G'H9 LH F 9 @ 5 H9 8 'HC '5 'F 9 DC F Hz G7 < 98 I @ 'C F ' + H9 A = N5 H+ C B

Form/Schedule: F1A Transaction ID:

Updating: Committee name, Custodian of Records

Form/Schedule: Transaction ID: