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) Genentech Inc. Political Action Committee (GenenPAC) 1 DNA Way ADDRESS (number and street) MS355A (Check if address is changed) South San Francisco 94080 CA CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address joingenenpac@gene.com is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2024 C00199257 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 Morales, Mario,, 06 06 2024 Signature of Treasurer Morales, Mario, . . 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

EC F	orm 1 (Revised 03/2022) Page 2
TYI	PE OF COMMITTEE:
Ca	ndidate 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.)
	lame of Candidate
C	Candidate Office State
Р	Party Affiliation Sought: House Senate President District
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.
	Name of Candidate
Pa	rty Committee:
(d)	This committee is a (National, State (Democratic, or subordinate) committee of the Republican, etc.) Party
	litical Action Committee (PAC):
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected 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 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).
()	In addition, this committee is a Lobbyist/Registrant PAC.
Joi	int 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
	1. C

Treasurer

	_			
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V	Vrite or Type Committee Name			
	Genentech Inc.	Political Action Committee	(GenenPAC)	
6.	Name of Any Connected C	Organization, Affiliated Committee, Joint Fu	undraising Representative, or Leade	rship PAC Sponsor
	Genentech Inc.			
	Mailing Address	1 DNA Way		
		MS355A		
		South San Francisco	CA 94080	' , , <u> - </u> , , ,
		CITY A	STATE ▲	ZIP CODE ▲
	Relationship: X Connected	d Organization Affiliated Organization	Joint Fundraising Representative	Leadership PAC Sponso
7.	Custodian of Records: Identical books and records. Morales, I Full Name		nal) and position of the person in posses	ssion of committee
	Mailing Address	350 DNA Way		
		Building 35, Rm#35-N2-9		
		South San Francisco	CA 94080	
		CITY ▲	STATE ▲	ZIP CODE ▲
	Title or Position ▼ Custodian of Records		Telephone number 650 - [867 - 7615
8.	Treasurer: List the name are any designated agent (e.g.,	nd address (phone number optional) of the assistant treasurer).	treasurer of the committee; and the r	name and address of
	Full Name Morales, I of Treasurer	Mario, , ,		
	Mailing Address	350 DNA Way	<u> </u>	
		Building 35, Rm#35-N2-9		
		South San Francisco	CA 94080	
	Title or Desition —	CITY ▲	STATE ▲	ZIP CODE ▲
	Title or Position ▼			

650

Telephone number

867

7615

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Full Name of Designated Agent	Alves de Lima, Roberto, , ,		
Mailing Address	1 DNA Way 		
	South San Francisco	CA L	94080
Title or Position	CITY ▲	STATE ▲	ZIP CODE ▲
Assistant Treasu	rer Tele	phone number 650	
	Depositories: List all banks or other depositories in which the xes or maintains funds.	e committee deposits fund	s, holds accounts, rents
Name of Bank, D	Depository, etc.		
	Citibank		
Mailing Address	One Penns Way		
	New Castle	DE 1	19720
	CITY ▲	STATE ▲	ZIP CODE ▲
Name of Bank, D	Depository, etc.		
Mailing Address			
	CITY ▲	STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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1.							
				FEC ID	number	С	
2				FEC ID	number	C	
3.				FEC ID	number	С	
4.				FEC ID	number	C	Ξ
lama of A	uny Composted C	Average Affiliation	ted Committee Joint	Eundraining Dan	roomtativa	e, or Leadership PAC Sp	
	-	rporation PAC (Ro		I diluiaisiiig nep		e, or Leadership FAC 3	
Mailir	ng Address	Roche					
		9115 Hague Rd					
		Indianapolis			IN	46256	
Relat	ionship:		CITY A		STATE A	ZIP CODE A	A
esignated			ffiliated Committee	Joint Fundraising	Hepresenta	ative Leadership PAC	C Sp
esignated Full Na	Agent: Identify				Hepresenta	Leadership PAC	C Sp
Full Na	Agent: Identify				Hepresenta	Leadership PAC	Sp
Full Na	Agent: Identify				Hepresenta	Leadership PAC	Sp
Full Na	Agent: Identify				Hepresenta	Leadership PAC	C Sp
Full Na Mailing	Agent: Identify	by name, address (nal)	Hepresenta	ZIP CODE A	

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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fu	ndraising Representative	e, or Leadership PAC Spon
Spark Therapeutics,	Inc. PAC (Spark PAC)		
Mailing Address	3737 Market Street		
	Suite 1300		
	Philadelphia	PA PA	19104
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	d Organization X Affiliated Committee July by name, address (phone number – optional)	oint Fundraising Represent	Leadership PAC Sp
			Leadership PAC Sp
esignated Agent: Identi			Leadership PAC Sp
esignated Agent: Identi			Leadership PAC Sp
esignated Agent: Identi			Leadership PAC Sp
esignated Agent: Identi	y by name, address (phone number – optional)		Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address	y by name, address (phone number – optional)		
esignated Agent: Identi Full Name	CITY A pries: List all banks or other depositories in white aintains funds.	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank,	CITY A pries: List all banks or other depositories in white aintains funds.	STATE A Telephone Number ch the committee deposit	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	CITY A pries: List all banks or other depositories in white aintains funds.	STATE A Telephone Number ch the committee deposit	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	CITY A pries: List all banks or other depositories in white aintains funds.	STATE A Telephone Number ch the committee deposit	ZIP CODE A