STATEMENT OF

PAGE 1/5 =

| FORM 1 | | | ORG | ΙAέ | IIZ <i>A</i> | ΔΤΙ | 10 | 1 | | | | | | | | (| Office | Use | Only | / | | | |
|----------------------------------|------------------|----------|--------------------|-------------------|-----------------|-----------------|-----------------|-----------------|---|--------------|--------|------|------------|------|-------|------------|--------|--------|---------|---------------------|-------------|-------|-------|
| NAME OF COMMITTEE (ir | n full) | | (Check | k if nam nged) | ne | | campl er the | | | typ | е | | 121 | FE4 | M5 | | | | | | | | |
| APPLIED IN | ITUITIO | ϽN, | INC. | POL | _ITIC | CAL | _ A | СŢ | 101 | 1 C | CO | M | Μľ | ТТ | ΈI | E (| (Al | P | LI _ | ΕC |) P | Α(| 2) |
| | | | | | | | | | | | | | | | | l | | | | | | 1 | Ш |
| ADDRESS (number a | nd street) | 800 M | laine Ave | nue SW | <i>!</i> | | | | | | | | | | | | | | | | | | |
| (Check if a is changed | | Floor | 7 | | | | | | | | | | | | | | | | | | | | |
| J | , | Wash | ington CITY ▲ | | | | | | | | | ; | DC STAT | | | 20 | 024 | | ZIF |]-[| DE 4 | | Ш |
| COMMITTEE'S E-MA | AIL ADDRES | 3S | | | | | | | | | | | | | | | | | | | | | |
| (Check if a is changed | | ago | mez@c | gagro | up.coi | m | | | | | | | | | | | | | | | | | |
| | | Option | nal Seco abethd | nd E-Ma | ail Add appl | dress lied.d | ço _ | | | | | | | | | 1 | | | | | | | Ш |
| ☐ (Check if a is changed | | | | | | | | | | | | | | | | | | | | | | | |
| 2. DATE 0 | M / D 02 | | 2023 | | | | | | | | | | | | | | | | | | | | |
| 3. FEC IDENTIFIC | CATION NU | MBER | • | C | C 0 | 008288 | 330 | Ï | | | | | | | | | | | | | | | |
| 4. IS THIS STATEM | MENT | NE | EW (N) | 0 | DR | | × | АМ | ENDE | ED (| A) | | | | | | | | | | | | |
| I certify that I have e | examined thi | s State | ment an | d to the | e best | of my | / knov | vledg | e and | d bel | lief i | t is | true | , co | rrect | an | d co | mpl | ete. | | | | |
| Type or Print Name | of Treasurer | Dowr | ı, Elizabe | th, , , | | | | | | | | | | | | | | | | | | | |
| Signature of Treasure | er <i>Down</i> , | Elizabet | h, , , | | | | [Ele | ectron | ically l | Filed |] | Da | ate | | 05 | _ | 1 | 02 | | Y | 202 | | Y |
| NOTE: Submission of | false, errone | | incomple | | | - | | | | _ | _ | | | | | | e per | naltie | es o | f 52 | U.S.C | D. §3 | 30109 |
| Office Use Only | | | | | | | Fed Toll | deral E Free | er info lection 800-42 2-694-1 | Con 24-95 | nmiss | | ict: | | | | | | | DRI 06/20 | VI 1 | | |

| FEC Form 1 (Revised 03/2022) | Page 2 | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|
| TYPE OF COMMITTEE: | | | | | | | | | |
| Candidate Committee: | | | | | | | | | |
| (a) This committee is a principal campaign committee. (0 | complete the candidate information below.) | | | | | | | | |
| (b) This committee is an authorized committee, and is N information below.) | OT a principal campaign committee. (Complete the candidate | | | | | | | | |
| Name of Candidate | | | | | | | | | |
| Candidate Office Party Affiliation Sought: Ho | State President 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 | committee of the (Democratic, Republican, etc.) Party | | | | | | | | |
| Political Action Committee (PAC): | | | | | | | | | |
| (e) This committee is a separate segregated fund. (Ident | fy connected organization on line 6.) Its connected organization is a | | | | | | | | |
| ✗ Corporation Corpo | oration w/o Capital Stock Labor Organization | | | | | | | | |
| Membership Organization Trade | Association Cooperative | | | | | | | | |
| In addition, this committee is a Lobbyist/Re | gistrant PAC. | | | | | | | | |
| (f) This committee supports/opposes more than one Fed committee. (i.e., nonconnected committee) | leral candidate, and is NOT a separate segregated fund or party | | | | | | | | |
| In addition, this committee is a Lobbyist/Re | gistrant 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/Re | gistrant PAC. | | | | | | | | |
| (h) This committee is a political committee with both com | tribution and non-contribution accounts (Hybrid PAC). | | | | | | | | |
| In addition, this committee is a Lobbyist/Re | gistrant PAC. | | | | | | | | |
| Joint Fundraising Representative: | | | | | | | | | |
| (i) This committee collects contributions, pays fundraisin committees/organizations, at least one of which is an | g expenses and disburses net proceeds for two or more political authorized committee of a federal candidate. | | | | | | | | |
| (1) | (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 | | | | | | | | |
| - 1 | C | | | | | | | | |

Treasurer

| | _ | | | |
|----|--|---|-----------------------------------|-----------------------------|
| • | FEC Form 1 (Revised 0 | 02/2009) | | Page 3 |
| ٧ | Vrite or Type Committee Name | <u> </u> | | - 3 |
| | APPLIED INTUIT | TION, INC. POLITICAL AC | TION COMMITTEE | (APPLIED PAC) |
| 6. | | rganization, Affiliated Committee, Joint F | | · |
| | Applied Intuition, Inc | | | |
| | | | | |
| | | | | |
| | Mailing Address | 145 E Dana Street | | |
| | 3 | | | |
| | | Manufair View | | |
| | | Mountain View | CA | 94041 |
| | | CITY ▲ | STATE ▲ | ZIP CODE ▲ |
| | Relationship: X Connected | Organization Affiliated Organization | Joint Fundraising Representati | ve Leadership PAC Sponso |
| | _ | | | _ |
| _ | | | | |
| 7. | Custodian of Records: Ident books and records. | ify by name, address (phone number optio | nal) and position of the person i | n possession of committee |
| | | Cohaction | | |
| | Full Name | sebastian, , , | | |
| | | _I 145 E Dana St | | |
| | Mailing Address | | | |
| | | | | |
| | | Mountain View | CA | 94041 |
| | | CITY ▲ | STATE ▲ | ZIP CODE ▲ |
| | Title or Position ▼ | 5 111 – | 07.112 | 2 3052 — |
| | Assistant Treasurer | | Talankana n osko i 1 . | . [_] [_] |
| | | | Telephone number | |
| _ | Transcript I list the name on | d address (shows number antismal) of th | a transcript of the committee of | and the name and address of |
| 8. | any designated agent (e.g., | d address (phone number optional) of th assistant treasurer). | e treasurer of the committee; a | and the name and address of |
| | Full Name Down, Eliza | abeth, , , | | |
| | of Treasurer | | | |
| | Mailing Address | 145 E Dana St | | |
| | 3 | | | |
| | | Mountain View | | . 04041 |
| | | INICALITATION | L CA | 94041 |
| | | CITY ▲ | STATE ▲ | ZIP CODE ▲ |
| | Title or Position | | | |

Telephone number

| FEC Form 1 | (Revised 02/2009) | | Page 4 |
|-------------------------------------|---|--------------------------------|---------------------|
| Full Name of Designated Agent | Kazvini-Gore, Nick, , , | | |
| Mailing Address | 145 E Dana St | | |
| | | 1 1 1 1 1 1 1 1 1 1 1 | |
| | Mountain View | CA 9404 | 1 |
| Title or Position ▼ | CITY ▲ | STATE ▲ | ZIP CODE ▲ |
| PAC President | | ephone number | |
| | Depositories: List all banks or other depositories in which these or maintains funds. | e committee deposits funds, ho | lds accounts, rents |
| Name of Bank, D | epository, etc. | | |
| | United Bank | 1 | |
| Mailing Address | 3030 M Street NW | | |
| | | | |
| | Washington | DC 20007 | |
| | CITY ▲ | STATE ▲ | ZIP CODE ▲ |
| Name of Bank, D | epository, etc. | | |
| | | | |
| Mailing Address | | | |
| | | | |
| | | | |
| | CITY ▲ | STATE ▲ | ZIP CODE ▲ |

: 97 'A = G7 9 @ G B9 C I G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCF HZ G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: F1A Transaction ID:

added Assistant Treasurer

Form/Schedule: Transaction ID: