STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEE

(PLEASE TYPE)

OFFICE USE ONLY

UE PARIMENT OF STATE

17 APR -6 AM 9:33

DIVISION OF ELECTIONS

1. I	Full	Name	of	Committee
------	------	------	----	-----------

People versus the Powerful

(415) 662-3254

Mailing Address (include city, state and zip code)

888 Brannan Street, 4th Floor, San Francisco, CA 94103

Street Address (include city, state and zip code)

3250 NE 1st Ave #305, Miami, FL 33137

2. Affiliated or Connected Organizations (includes other committees of continuous existence and political committees)

Name of Affiliated or Connected Organization	Mailing Address	Relationship	
Airbnb, Inc.	888 Brannan Street, 4th Floor, San Francisco, CA 94103	Sponsor	

3. Area, Scope and Jurisdiction of the Committee

Political committee supporting or opposing statewide, legislative, multicounty, and local candidates

4. Nature of Organization or Organization's Special Interest (e.g., medical, legal, education, etc.)

Tourism/Home-sharing

5. Identify by Name, Address and Position, the Custodian of Books and Accounts (include treasurer's name)

Full Name	Mailing Address	Committee Title or Position
Kevin Heneghan	888 Brannan Street, 4th Floor San Francisco, CA 94103	Treasurer

	nd Position, Other Principal (ny (include chairman's name)	•	Officers a	nd Members of the						
Full Name	Mailing Addr	Committee Title or Position								
Tomas Martinelli	3250 NE 1st Ave #305,	Miami, FL 33137	Chairman							
Kevin Heneghan	888 Brannan Street, 4th Francisco, CA 94103	Floor, San Treasu		rer						
7. List by Name, Address, Office Sought and Party Affiliation Each Candidate or Other Individual that this Committee is Supporting (if none, please indicate)										
Full Name	Mailing Address	Office	Sought	Party						
TBD										
8. List Any Issues this Com	mittee is Supporting: N/A									
List Any Issues this Com	List Any Issues this Committee is Opposing: N/A									
9. If this Committee is Supporting the Entire Ticket of a Party, Give Name of Party N/A										
10. In the Event of Dissolut Returned to do	ion, What Disposition will be	Made of Residual F	unds?							
11. List all Banks, Safety Do	eposit Boxes, or Other Depos	sitories Used for Co	mmittee	Funds						
Name of Bank or Depos	sitory & Account Number	Mailing Address								
Wells Fargo Bank,	490 Brannan Street, San Francisco, CA 94107									
12. List all Reports Required to be Filed by this Committee with Federal Officials and the Names, Addresses and Positions of Such Officials, If Any										
Report Title	Dates Required to be Filed	Name & Position o	f Official	Mailing Address						
Form 8871 Form 990 1120-POL	Upon creation Annually, if required Annually, if required	IRS IRS IRS		Ogden, UT 84201 Ogden, UT 84201 Ogden, UT 84201						
STATE OF Florida		Miami-Dade COUNTY								
Tomas Martinelli , certify that the information in this Statement of										
Organization is complete, true and correct. X Signature of Chairman-of Political Committee 3/27/2017 Date										