

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation Majority Forward		3. FEC Identification Number C C90016098
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 700 13th Street NW, Suite 600		
(c) City, State and ZIP Code Washington DC 20005		
2. Occupation and Name of Employer (for Individual Filers Only)		

4. TYPE OF REPORT (check appropriate boxes):

- (a) April 15 Quarterly Report
- July 15 Quarterly Report 24-Hour Report
- October 15 Quarterly Report 48-Hour Report
- January 31 Year-End Report

b) Is this Report an amendment? No Yes, it amends the report filed on / /

5. COVERING PERIOD:

FROM / /

THROUGH / /

6. TOTAL CONTRIBUTIONS..... 0.00

7. TOTAL INDEPENDENT EXPENDITURES 2511499.50

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM	SIGNATURE	DATE
Poersch, J.B., , ,	<i>Poersch, J.B., , ,</i>	11/02/2016

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. §437g.

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Majority Forward

Full Name (Last, First, Middle Initial) of Payee Waterfront Strategies		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 01 / 2016	
Mailing Address 3050 K St NW Ste 100		Amount 971392.50	
City Washington	State DC	Zip Code 20007-5108	Transaction ID : VN7GBA73678
Purpose of Expenditure TV Advertising of 'Choice' - Estimate	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2785955.81	

Full Name (Last, First, Middle Initial) of Payee Waterfront Strategies		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 01 / 2016	
Mailing Address 3050 K St NW Ste 100		Amount 181092.75	
City Washington	State DC	Zip Code 20007-5108	Transaction ID : VN7GBA73686
Purpose of Expenditure TV Advertising of 'Wrong' - Estimate	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, J., ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		307588.43	

Full Name (Last, First, Middle Initial) of Payee Waterfront Strategies		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 01 / 2016	
Mailing Address 3050 K St NW Ste 100		Amount 1359014.25	
City Washington	State DC	Zip Code 20007-5108	Transaction ID : VN7GBA73694
Purpose of Expenditure TV Advertising of 'Predatory', 'Talk', 'Rigged', 'Disappeared', 'Wrono' - Estimate	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Toomey, Patrick, J., ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		5838742.46	

(a) SUBTOTAL of Itemized Independent Expenditures.....	2511499.50
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	2511499.50