REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

2000 MAR 23 A 9:53

1. NAME OF COMMITTEE (in full)

NRA Political Victory Fund

ADDRESS (number and street) [ ] Check if different than previously reported

11250 Waples Mill Road

CITY, STATE and ZIP CODE

Fairfax, VA 22030

2. FEC IDENTIFICATION NUMBER

C00053553

3. [X] This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

4. TYPE OF REPORT

(a) [ ] April 15 Quarterly Report

[ ] July 15 Quarterly Report

[ ] October 15 Quarterly Report

[ ] January 31 Year End Report

[ ] July 31 Mid Year Report (Non-election Year Only)

[ ] Termination Report

Monthly Report Due On:

[ ] February 20	[ ] June 20	[ ] October 20
[X] March 20	[ ] July 20	[ ] November 20
[ ] April 20	[ ] August 20	[ ] December 20
[ ] May 20	[ ] September 20	[ ] January 31

[ ] Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____

[ ] Thirtieth day report following the General Election on _____ in the State of _____

(b) Is this Report an Amendment? [ ] YES [X] NO

SUMMARY

5. Covering Period 02/01/2000 through 2/29/2000

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 19 2000		$ 3,002,351.63
(b) Cash on Hand at Beginning of Reporting Period	$ 3,244,246.03	
(c) Total Receipts (from line 19)	$ 491,512.71	$ 914,720.85
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 3,735,758.74	$ 3,917,072.48
7. Total Disbursements (from Line 30)	$ 338,980.34	$ 520,294.08
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 3,396,778.40	$ 3,396,778.40
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$ -0-.	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$ -0-.	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer: Mary Rose Adkins

Signature of Treasurer: Mary Rose Adkins

Date: 03/20/2000

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