

FEC FORM 5**REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED**

To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations

1. (a) Name of Individual, Organization or Corporation NATIONAL ORGANIZATION FOR MARRIAGE		3. FEC Identification Number C C90011057
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 2029 K ST., NW STE. 300		
(c) City, State and ZIP Code WASHINGTON DC 20006		
2. Corporate filers only	Is the filer a qualified nonprofit corporation? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Individual filers only	Name of Employer	Occupation

4. TYPE OF REPORT (check appropriate boxes):

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

b) Is this Report an amendment? Yes ☐ No ☒

5. COVERING PERIOD: FROM

M M	/	D D	/	Y Y Y Y Y Y
10		01		2012

THROUGH

M M	/	D D	/	Y Y Y Y Y Y
12		31		2012

6. TOTAL CONTRIBUTIONS

0.00

7. TOTAL INDEPENDENT EXPENDITURES

176433.07

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. In addition, (if the independent expenditures reported herein were made by a corporation) I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE

[Electronically Filed]

Brian Stephen Brown

Brian Stephen Brown

01/31/2013

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

For further information, contact:

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: F5N
Transaction ID :

No contributions were received for the purpose of furthering the independent expenditures in this report.

Form/Schedule:
Transaction ID:

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 3 OF 9
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

NATIONAL ORGANIZATION FOR MARRIAGE

Full Name (Last, First, Middle Initial) of Payee ccAdvertising		Date MM / DD / YYYY 11 / 02 / 2012	
Mailing Address 5900 Fort Drive Suite 302		Amount 11216.47	
City Centreville	State VA	Zip Code 20121	Transaction ID : F57.4194
Purpose of Expenditure GOTV robocalls	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 17505.47		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee ccAdvertising		Date MM / DD / YYYY 11 / 02 / 2012	
Mailing Address 5900 Fort Drive Suite 302		Amount 11216.46	
City Centreville	State VA	Zip Code 20121	Transaction ID : F57.4195
Purpose of Expenditure GOTV robocalls	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: TOM SMITH		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 21796.58		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee ccAdvertising		Date MM / DD / YYYY 11 / 02 / 2012	
Mailing Address 5900 Fort Drive Suite 302		Amount 8782.84	
City Centreville	State VA	Zip Code 20121	Transaction ID : F57.4196
Purpose of Expenditure GOTV Robocalls	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 26288.31		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures..... ➤

31215.77

(b) SUBTOTAL of Unitemized Independent Expenditures..... ➤

(c) TOTAL Independent Expenditures ➤
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 4 OF 9
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NAME OF FILER (In Full)

NATIONAL ORGANIZATION FOR MARRIAGE

Full Name (Last, First, Middle Initial) of Payee ccAdvertising		Date MM / DD / YYYY 11 / 02 / 2012	
Mailing Address 5900 Fort Drive Suite 302		Amount 19122.74	
City Centreville	State VA	Zip Code 20121	Transaction ID : F57.4197
Purpose of Expenditure GOTV Robocalls	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 45411.05		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee ccAdvertising		Date MM / DD / YYYY 11 / 02 / 2012	
Mailing Address 5900 Fort Drive Suite 302		Amount 19122.74	
City Centreville	State VA	Zip Code 20121	Transaction ID : F57.4198
Purpose of Expenditure GOTV robocalls	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: JOSH MANDEL		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 19122.74		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee ccAdvertising		Date MM / DD / YYYY 11 / 02 / 2012	
Mailing Address 5900 Fort Drive Suite 302		Amount 21755.96	
City Centreville	State VA	Zip Code 20121	Transaction ID : F57.4200
Purpose of Expenditure GOTV robocalls	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 67167.01		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	60001.44
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)	

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 5 OF 9
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NAME OF FILER (In Full)

NATIONAL ORGANIZATION FOR MARRIAGE

Full Name (Last, First, Middle Initial) of Payee PollTell		Date MM / DD / YYYY 11 / 01 / 2012	
Mailing Address 3586 Aloma Ave Ste 13		Amount 6289.00	
City Winter Park	State FL	Zip Code 32789	
Purpose of Expenditure Robocalls		Category/ Type 004	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 6289.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee PollTell		Date MM / DD / YYYY 11 / 01 / 2012	
Mailing Address 3586 Aloma Ave Ste 13		Amount 6289.00	
City Winter Park	State FL	Zip Code 32789	
Purpose of Expenditure Robocalls		Category/ Type 004	Office Sought: <input type="checkbox"/> House State: WI <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: TOMMY G THOMPSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 6289.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee PollTell		Date MM / DD / YYYY 11 / 02 / 2012	
Mailing Address 3586 Aloma Ave Ste 13		Amount 10580.12	
City Winter Park	State FL	Zip Code 32789	
Purpose of Expenditure Robocalls		Category/ Type 004	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: TOM SMITH		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 10580.12		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
(a) SUBTOTAL of Itemized Independent Expenditures.....		23158.12	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)			

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 6 OF 9
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NAME OF FILER (In Full)

NATIONAL ORGANIZATION FOR MARRIAGE

Full Name (Last, First, Middle Initial) of Payee

PollTell

Date

M M M	/	D D D	/	Y Y Y Y Y Y Y Y
11		04		2012

Mailing Address

3586 Aloma Ave

Ste 13

Amount

7248.95

Transaction ID : F57.4213

Purpose of Expenditure

Robocalls

Category/
Type

004

Office Sought:

☐

House

State: OH

☒

Senate

District: _____

☐

President

Check One:

☒

Support

☐

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

JOSH MANDEL

Calendar Year-To-Date Per Election
for Office Sought

26371.69

Disbursement For:

☐

Primary

☒

General

☐ 2012
☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

PollTell

Date

M M M	/	D D D	/	Y Y Y Y Y Y Y Y
11		04		2012

Mailing Address

3586 Aloma Ave

Ste 13

Amount

7248.94

Transaction ID : F57.4214

Purpose of Expenditure

Robocalls

Category/
Type

004

Office Sought:

☐

House

State: _____

☒

Senate

District: _____

☐

President

Check One:

☒

Support

☐

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

MITT ROMNEY

Calendar Year-To-Date Per Election
for Office Sought

74415.95

Disbursement For:

☐

Primary

☒

General

☐ 2012
☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

PollTell

Date

M M M	/	D D D	/	Y Y Y Y Y Y Y Y
11		04		2012

Mailing Address

3586 Aloma Ave

Ste 13

Amount

7883.39

Transaction ID : F57.4216

Purpose of Expenditure

Robocalls

Category/
Type

004

Office Sought:

☐

House

State: MO

☒

Senate

District: _____

☐

President

Check One:

☐

Support

☒

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

CLAIRE MCCASKILL

Calendar Year-To-Date Per Election
for Office Sought

7883.39

Disbursement For:

☐

Primary

☒

General

☐ 2012
☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶

22381.28

(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶

(c) TOTAL Independent Expenditures ▶
(carry total from last page forward to Line 7)

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 7 OF 9
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NAME OF FILER (In Full)

NATIONAL ORGANIZATION FOR MARRIAGE

Full Name (Last, First, Middle Initial) of Payee PollTell		Date MM / DD / YYYY 11 / 04 / 2012	
Mailing Address 3586 Aloma Ave Ste 13		Amount 6216.35	
City Winter Park	State FL	Zip Code 32789	
Purpose of Expenditure Robocalls		Category/ Type	004
Name of Federal Candidate Supported or Opposed by Expenditure: TOMMY G THOMPSON		Office Sought: <input type="checkbox"/> House State: WI <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought		12505.35	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____			
Full Name (Last, First, Middle Initial) of Payee PollTell		Date MM / DD / YYYY 11 / 04 / 2012	
Mailing Address 3586 Aloma Ave Ste 13		Amount 6216.35	
City Winter Park	State FL	Zip Code 32789	
Purpose of Expenditure Robocalls		Category/ Type	004
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought		80632.30	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____			
Full Name (Last, First, Middle Initial) of Payee PollTell		Date MM / DD / YYYY 11 / 05 / 2012	
Mailing Address 3586 Aloma Ave Ste 13		Amount 5812.30	
City Winter Park	State FL	Zip Code 32789	
Purpose of Expenditure Robocalls		Category/ Type	004
Name of Federal Candidate Supported or Opposed by Expenditure: TOMMY G THOMPSON		Office Sought: <input type="checkbox"/> House State: WI <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought		18317.65	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____			
(a) SUBTOTAL of Itemized Independent Expenditures.....		18245.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)			

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NAME OF FILER (In Full)

NATIONAL ORGANIZATION FOR MARRIAGE

Full Name (Last, First, Middle Initial) of Payee PollTell		Date MM / DD / YYYY 11 / 05 / 2012	
Mailing Address 3586 Aloma Ave Ste 13		Amount 1585.01	
City Winter Park	State FL	Zip Code 32789	
Purpose of Expenditure Robocalls		Category/ Type 004	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CONNIE MACK		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1585.01		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee PollTell		Date MM / DD / YYYY 11 / 06 / 2012	
Mailing Address 3586 Aloma Ave Ste 13		Amount 8412.46	
City Winter Park	State FL	Zip Code 32789	
Purpose of Expenditure Robocalls		Category/ Type 004	Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CLAIRE MCCASKILL		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 16295.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee PollTell		Date MM / DD / YYYY 11 / 06 / 2012	
Mailing Address 3586 Aloma Ave Ste 13		Amount 5717.00	
City Winter Park	State FL	Zip Code 32789	
Purpose of Expenditure Robocalls		Category/ Type 004	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 86349.30		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
(a) SUBTOTAL of Itemized Independent Expenditures.....		15714.47	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)			

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 9 OF 9
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NAME OF FILER (In Full)

NATIONAL ORGANIZATION FOR MARRIAGE

Full Name (Last, First, Middle Initial) of Payee PollTell		Date MM / DD / YYYY 11 / 06 / 2012	
Mailing Address 3586 Aloma Ave Ste 13		Amount 5716.99	
City Winter Park	State FL	Zip Code 32789	
Purpose of Expenditure Robocalls		Category/ Type 004	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOSH MANDEL		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 32088.68		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee		Date MM / DD / YYYY	
Mailing Address		Amount	
City	State	Zip Code	
Purpose of Expenditure		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee		Date MM / DD / YYYY	
Mailing Address		Amount	
City	State	Zip Code	
Purpose of Expenditure		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
(a) SUBTOTAL of Itemized Independent Expenditures.....		5716.99	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)		176433.07	