

# 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 <b>TRUMAN NATIONAL SECURITY PROJECT</b>		3. FEC Identification Number <b>C90013970</b>
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1050 17TH STREET NW SUITE 375		
(c) City, State and ZIP Code WASHINGTON DC 20036		
2. <b>Corporate filers only</b>	Is the filer a qualified nonprofit corporation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>Individual filers only</b>	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

/  /

THROUGH

/  /

6. TOTAL CONTRIBUTIONS .....

7. TOTAL INDEPENDENT EXPENDITURES .....

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.

<b>TYPE OR PRINT NAME OF PERSON COMPLETING FORM</b>	<b>SIGNATURE</b>	<b>DATE</b>
Sarah Spencer Bruno	<i>Sarah Spencer Bruno</i>	06/21/2013

*[Electronically Filed]*

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

**SCHEDULE 5-A  
ITEMIZED RECEIPTS**

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF FILER (In Full)  
TRUMAN NATIONAL SECURITY PROJECT

<b>A. Full Name (Last, First, Middle Initial)</b> Win Back Respect			Date of Receipt MM / DD / YYYY 09 / 10 / 2012		
Mailing Address 4601 Connecticut Ave, NW, #221			<b>Transaction ID : F56.000001</b>		
City Washington	State DC	Zip Code 20008	Amount of Each Receipt this Period 100000.00		
FEC ID number of contributing federal political committee. C					
Name of Employer			Occupation		

<b>B. Full Name (Last, First, Middle Initial)</b>			Date of Receipt MM / DD / YYYY		
Mailing Address					
City	State	Zip Code	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee. C					
Name of Employer			Occupation		

<b>C. Full Name (Last, First, Middle Initial)</b>			Date of Receipt MM / DD / YYYY		
Mailing Address					
City	State	Zip Code	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee. C					
Name of Employer			Occupation		

<b>D. Full Name (Last, First, Middle Initial)</b>			Date of Receipt MM / DD / YYYY		
Mailing Address					
City	State	Zip Code	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee. C					
Name of Employer			Occupation		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	100000.00
<b>TOTAL</b> This Period (last page carry total to Line 6) ..... ▶	100000.00

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
TRUMAN NATIONAL SECURITY PROJECT

Full Name (Last, First, Middle Initial) of Payee Adelstein Liston		Date MM / DD / YYYY 10 / 04 / 2012
Mailing Address 222 W. Ontario Street, Suite 600		Amount 68000.00 <b>Transaction ID : F57.000001</b>
City Chicago	State IL	
Zip Code 60654	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Purpose of Expenditure Broadcast Media Buy - "Commander in Chief"		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Mitt Romney		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 92396.00		

Full Name (Last, First, Middle Initial) of Payee Adelstien Liston		Date MM / DD / YYYY 10 / 04 / 2012
Mailing Address 222 W. Ontario Street, Suite 600		Amount 5000.00 <b>Transaction ID : F57.000002</b>
City Chicago	State IL	
Zip Code 60654	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Purpose of Expenditure Online Media Buy - "Commander in Chief"		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Mitt Romney		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 92396.00		

Full Name (Last, First, Middle Initial) of Payee Sarah Bruno		Date MM / DD / YYYY 10 / 04 / 2012
Mailing Address 1050 17th Street NW, Suite 375		Amount 723.00 <b>Transaction ID : F57.000003</b>
City Washington	State DC	
Zip Code 20036	Category/ Type 001	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Purpose of Expenditure staff time associated with independent expenditure		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Mitt Romney		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 92396.00		

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	▶	73723.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....	▶	
(c) <b>TOTAL</b> Independent Expenditures .....	▶	
(carry total from last page forward to Line 7)		

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
TRUMAN NATIONAL SECURITY PROJECT

Full Name (Last, First, Middle Initial) of Payee William John McCauley		Date MM / DD / YYYY 10 / 04 / 2012
Mailing Address 1050 17th Street NW, Suite 375		Amount 577.00 <b>Transaction ID : F57.000004</b>
City Washington	State DC	
Zip Code 20036	Purpose of Expenditure Staff time associated with independent expenditure	Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: Mitt Romney		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 92396.00		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Brandon L Fureigh		Date MM / DD / YYYY 10 / 04 / 2012
Mailing Address 1050 17th Street NW, Suite 375		Amount 1096.00 <b>Transaction ID : F57.000005</b>
City Washington	State DC	
Zip Code 20036	Purpose of Expenditure Staff time associated with independent expenditure	Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: Mitt Romney		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 92396.00		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Adelstein Liston		Date MM / DD / YYYY 10 / 04 / 2012
Mailing Address 222 W. Ontario Street, Suite 600		Amount 17000.00 <b>Transaction ID : F57.000006</b>
City Chicago	State IL	
Zip Code 60654	Purpose of Expenditure Shoot spot and production	Category/ Type 004
Name of Federal Candidate Supported or Opposed by Expenditure: Mitt Romney		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought .00		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	▶	18673.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....	▶	
(c) <b>TOTAL</b> Independent Expenditures .....	▶	92396.00
(carry total from last page forward to Line 7)		