

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 SIERRA CLUB | | 3. FEC Identification Number C C90011875 |
| (b) Address (number and street) <input type="checkbox"/> check if different than previously reported 2101 Webster St, Suite 1300 | | |
| (c) City, State and ZIP Code Oakland CA 94612 | | |
| 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 Reportb) Is this Report an amendment? ☒ No ☐ Yes, it amends the report filed on

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5. COVERING PERIOD:

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 2016

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| 6. TOTAL CONTRIBUTIONS..... | 0.00 |
| 7. TOTAL INDEPENDENT EXPENDITURES | 1335.45 |

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

[Electronically Filed]

David Thack

David Thack

07/15/2016

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 EXPENDITURESPAGE 2 OF 4
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

SIERRA CLUB

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

Aileen Kelley

Date of Public Distribution/Dissemination

06 / 15 / 2016

Mailing Address 10 Milk St. Ste. 417

Amount

190.76

City State Zip Code

Boston MA 02108

Transaction ID : F57.4131

Purpose of Expenditure
Salaries & BenefitsCategory/
Type 001Office Sought: ☐ House State: _____
☐ Senate District: 00
☒ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
DONALD J. TRUMPCheck One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought 1060.60Disbursement For: ☐ Primary ☒ General
2016 ☐ Other (specify) _____

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

Aileen Kelley

Date of Public Distribution/Dissemination

06 / 30 / 2016

Mailing Address 10 Milk St. Ste. 417

Amount

127.17

City State Zip Code

Boston MA 02108

Transaction ID : F57.4133

Purpose of Expenditure
Salaries & BenefitsCategory/
Type 001Office Sought: ☐ House State: _____
☐ Senate District: 00
☒ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
DONALD J. TRUMPCheck One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought 1335.45Disbursement For: ☐ Primary ☒ General
2016 ☐ Other (specify) _____

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

Emily Norton

Date of Public Distribution/Dissemination

06 / 15 / 2016

Mailing Address 10 Milk St. Ste. 417

Amount

89.21

City State Zip Code

Boston MA 02108

Transaction ID : F57.4135

Purpose of Expenditure
Salaries & BenefitsCategory/
Type 001Office Sought: ☐ House State: _____
☐ Senate District: 00
☒ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
DONALD J. TRUMPCheck One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought 1149.81Disbursement For: ☐ Primary ☒ General
2016 ☐ Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures..... 407.14

(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 3 OF 4
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

SIERRA CLUB

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

Kevin O'Brien

Date of Public Distribution/Dissemination

MM / DD / YYYY
05 / 15 / 2016

Mailing Address 10 Milk St. Ste. 417

Amount

14.62

Transaction ID : F57.4137

Purpose of Expenditure
Salaries & BenefitsCategory/
Type 001

Office Sought:

☐ House

State: _____

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
DONALD J. TRUMPCalendar Year-To-Date Per Election
for Office Sought

14.62

Disbursement For:
2016 ☐ Primary ☒ General☐ Other (specify) ▶ _____

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

Kevin O'Brien

Date of Public Distribution/Dissemination

MM / DD / YYYY
06 / 15 / 2016

Mailing Address 10 Milk St. Ste. 417

Amount

58.47

Transaction ID : F57.4139

Purpose of Expenditure
Salaries & BenefitsCategory/
Type 001

Office Sought:

☐ House

State: _____

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
DONALD J. TRUMPCalendar Year-To-Date Per Election
for Office Sought

1208.28

Disbursement For:
2016 ☐ Primary ☒ General☐ Other (specify) ▶ _____

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

Karissa Sellman

Date of Public Distribution/Dissemination

MM / DD / YYYY
06 / 15 / 2016

Mailing Address 2101 Webster St, Suite 1300

Amount

815.07

Transaction ID : F57.4127

Purpose of Expenditure
Salaries & BenefitsCategory/
Type 001

Office Sought:

☐ House

State: _____

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
DONALD J. TRUMPCalendar Year-To-Date Per Election
for Office Sought

829.69

Disbursement For:
2016 ☐ Primary ☒ General☐ Other (specify) ▶ _____

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

888.16

(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 4
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

SIERRA CLUB

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

Kaitlyn Silveira

Date of Public Distribution/Dissemination

MM / DD / YYYY
06 / 15 / 2016

Mailing Address 2101 Webster St, Suite 1300

Amount

City State Zip Code
Oakland CA 94612Amount
40.15

Transaction ID : F57.4129

Purpose of Expenditure
Salaries & BenefitsCategory/
Type 001Office Sought: ☐ House State: _____
☐ Senate District: 00
☒ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
DONALD J. TRUMPCheck One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought 869.84Disbursement For: ☐ Primary ☒ General
2016
☐ Other (specify) ▶

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

Date of Public Distribution/Dissemination

MM / DD / YYYY

Mailing Address

Amount

City State Zip Code

Amount

Purpose of Expenditure

Category/
TypeOffice Sought: ☐ House State: _____
☐ Senate District: _____
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:

Check One: ☐ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office SoughtDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▶

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

Date of Public Distribution/Dissemination

MM / DD / YYYY

Mailing Address

Amount

City State Zip Code

Amount

Purpose of Expenditure

Category/
TypeOffice Sought: ☐ House State: _____
☐ Senate District: _____
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:

Check One: ☐ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office SoughtDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶ 40.15

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶ 1335.45
(carry total from last page forward to Line 7)