

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 Defenders of Willdife Action Fund		3. FEC Identification Number C C90007907
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1130 17th St NW		
(c) City, State and ZIP Code Washington DC 20036		
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 24-Hour Notice 48-Hour Notice
- July 15 Quarterly Report
- October Quarterly Report
- January 31 Year-End 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 with the cooperation or prior consent of, or in constitution with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee or a 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

William Lutz

10/19/2010

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-E
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)

Defenders of Willdife Action Fund

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

Date

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Mailing Address
6190 Grovedale Ct
Suite 200

Amount

37517.50

City State Zip Code
Alexandria VA 22310

Purpose of Expenditure
TV ad buy

Category/
Type

Office Sought: House State: NM
House Senate District: 01
 President

Name of Federal Candidate Supported or Opposed by Expenditure:
MARTIN HEINRICH

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 437679.50

Disbursement For: Primary General
2010
 Other (specify)

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

Date

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Mailing Address
6190 Grovedale Ct
Suite 200

Amount

37517.50

City State Zip Code
Alexandria VA 22310

Purpose of Expenditure
TV ad buy

Category/
Type

Office Sought: House State: NM
House Senate District: 01
 President

Name of Federal Candidate Supported or Opposed by Expenditure:
JON BARELA

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 475197.00

Disbursement For: Primary General
2010
 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures

75035.00

(b) SUBTOTAL of Unitemized Independent Expenditures

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

75035.00