

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 Human Rights Campaign		3. FEC Identification Number C C90012626
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1640 Rhode Island Ave NW		
(c) City, State and ZIP Code Washington DC 20036		
2. Corporate filers only	Is the filer a qualified nonprofit corporation? <input type="checkbox"/> Yes <input checked="" 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

/ /
 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.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM	SIGNATURE	DATE
James Rinefield	<i>James Rinefield</i>	05/10/2012

[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-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Human Rights Campaign

Full Name (Last, First, Middle Initial) of Payee Human Rights Campaign		Date MM / DD / YYYY 04 / 10 / 2012
Mailing Address 1640 Rhode Island Ave NW		Amount 25.00 Transaction ID : D467680
City Washington	State DC	
Zip Code 20036	Purpose of Expenditure Website	Category/Type
Name of Federal Candidate Supported or Opposed by Expenditure: Richard J Santorum	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 2011.00	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee API		Date MM / DD / YYYY 05 / 10 / 2012
Mailing Address 4471 Nicole Dr		Amount 14693.10 Transaction ID : D467668
City Lanham	State MD	
Zip Code 20706	Purpose of Expenditure T-Shirts	Category/Type
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 15465.10	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Human Rights Campaign		Date MM / DD / YYYY 05 / 01 / 2012
Mailing Address 1640 Rhode Island Ave NW		Amount 25.00 Transaction ID : D466945
City Washington	State DC	
Zip Code 20036	Purpose of Expenditure Email	Category/Type
Name of Federal Candidate Supported or Opposed by Expenditure: Mitt Romney	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 26786.03	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	14743.10
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures	▶	
(carry total from last page forward to Line 7)		

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Human Rights Campaign

Full Name (Last, First, Middle Initial) of Payee Human Rights Campaign		Date MM / DD / YYYY 05 / 10 / 2012
Mailing Address 1640 Rhode Island Ave NW		Amount 25.00 Transaction ID : D467694
City Washington	State DC	
Zip Code 20036		
Purpose of Expenditure Email	Category/ Type	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 type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 26786.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee API		Date MM / DD / YYYY 05 / 10 / 2012
Mailing Address 4471 Nicole Dr		Amount 33.44 Transaction ID : D467671
City Lanham	State MD	
Zip Code 20706		
Purpose of Expenditure T-Shirts	Category/ Type	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: Barack Obama		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 15465.10		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee API		Date MM / DD / YYYY 05 / 10 / 2012
Mailing Address 4471 Nicole Dr		Amount 195.00 Transaction ID : D467698
City Lanham	State MD	
Zip Code 20706		
Purpose of Expenditure Wristbands	Category/ Type	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: Barack Obama		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 15465.10		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	253.44
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures	▶	14996.54
(carry total from last page forward to Line 7)		