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 Climate Reality Action Fund (b) Address (number and street) check if different than previously reported 750 9th Street, NW, Suite 520 (c) City, State and ZIP Code 3. FEC Identification Number Washington, DC 20001 2. Occupation and Name of Employer (for Individual Filers Only) C n/a 4. TYPE OF REPORT (check appropriate boxes): (a) April 15 Quarterly Report 24-Hour Report July 15 Quarterly Report October 15 Quarterly Report 48-Hour Report January 31 Year-End Report b) Is this Report an amendment? Yes, it amends the report filed on 2016 5. COVERING PERIOD: FROM **THROUGH** 2016 6. TOTAL CONTRIBUTIONS..... 7. TOTAL INDEPENDENT EXPENDITURES 1 358 12 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 11/4/2016 David Jenkins NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 52 U.S.C. § 30109.

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

| TEMIZED RECEIPTS | | | PAGE OF |
|--|---------|--|--|
| | | | person for the purpose of soliciting contributions tee to solicit contributions from such committee. |
| NAME OF FILER (In Full) | | | |
| 1. Full Name (Last, First, Middle Initial) | | | |
| Mailing Address | | | Date of Receipt |
| | | | |
| City | State | Zip Code | Amount of Each Passist this Pasied |
| FEC ID number of contributing | | | Amount of Each Receipt this Period |
| federal political committee. | С | | , , , , , |
| Name of Employer | | Occupa | ition |
| Full Name (Last, First, Middle Initial) | | | |
| Mailing Address | | | Date of Receipt |
| | | | at the body of the transfer of the body of |
| City | State | Zip Code | Ave at 4 Seek Beerin Nie Berief |
| FEC ID number of contributing | | | Amount of Each Receipt this Period |
| federal political committee. | С | | 5 . p |
| Name of Employer | | Occupa | tion |
| Full Name (Last, First, Middle Initial) | | · | Date of Pagaint |
| Mailing Address | | | Date of Receipt |
| City | State | Zip Code | |
| —————————————————————————————————————— | Olate | 210 0000 | Amount of Each Receipt this Period |
| FEC ID number of contributing | C. | | |
| federal political committee. | | | |
| Name of Employer | | Occupa | tion |
| Full Name (Last, First, Middle Initial) | | | Date of Receipt |
| Mailing Address | | | M ST 4 D D ; Y Y Y Y |
| City | State | Zip Code | |
| | | | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | * |
| Name of Employer | | Occupat | ion |
| SUBTOTAL of Receipts This Page (optional | J)(l) | | • |
| | | | |
| TOTAL This Period (last page carry total to | Line 6) | ······································ | > |

| SCHEDULE 5-E TEMIZED INDEPENDENT EXPENDITURES | PAGE 1 OF 2 FOR LINE 7 OF FORM 5 | |
|---|--|--|
| NAME OF FILER (In Full) | Translate 7 of Toriwa. | |
| Climate Reality Action Fund | | |
| | | |
| Full Name (Last, First, Middle Initial) of Payee | Date of Public Distribution/Dissemination | |
| 360 Campaign Consulting LLC | 11 03 2016 | |
| Mailing Address | 11 03 2016 | |
| 305 Saranac Way | Amount | |
| Cily State Zip Code | 611.15 | |
| Ithaca NY 14850 | | |
| Purpose of Expenditure Category/ Chone banking Type | Office Sought: House State: FL | |
| Name of Federal Candidate Supported or Opposed by Expenditure: | Senate District: | |
| | Check One: Support Oppose | |
| Only de Very To Day De Clastica | Disbursement For: Primary General | |
| Calendar Year-To-Date Per Election for Office Sought 2.473.23 | Other (specify) | |
| Full Name (Last, First, Middle Initial) of Payee | Date of Public Distribution/Dissemination | |
| 360 Campaign Consulting LLC | | |
| Mailing Address | 11 03 2016 | |
| 305 Saranac Way | Amount | |
| City State Zip Code | 611.15 | |
| Ithaca NY 14850 | · * | |
| 1 0010901) | Office Sought: House State: FL | |
| Phone banking Type | Senate District: | |
| Name of Federal Candidate Supported or Opposed by Expenditure: | President Check One: Support Oppose | |
| | | |
| Calendar rear-10-Date Per Election 2,433.23 | disbursement For: Primary General General | |
| 222 | Other (specify) | |
| Full Name (Last, First, Middle Initial) of Payee Climate Reality Action Fund | Date of Public Distribution/Dissemination | |
| Mailing Address | 11 03 2016 | |
| 750 9th St NW Suite 520 | Amount | |
| City State Zip Code | | |
| Washington DC 20001 | 67.91 | |
| Purpose of Expenditure Category/ O | ffice Sought: House State: FL | |
| Staff campaign activity | Senate District: | |
| Name of Federal Candidate Supported or Opposed by Expenditure: | . President □ | |
| Hillary Clinton C | heck One: Support Oppose | |
| Calendar Year-To-Date Per Election for Office Sought 2,541.14 | isbursement For: Primary General Other (specify) | |
| (a) SUBTOTAL of Itemized Independent Expenditures | | |
| | 1,290.21. | |
| (b) SUBTOTAL of Unitemized Independent Expenditures | • | |
| (c) TOTAL Independent Expenditures | • | |

| SCHEDULE 5-E | | PAGE 2 OF 2 |
|--|-------------------|---|
| TEMIZED INDEPENDENT EXPENDITURES | | FOR LINE 7 OF FORM 5 |
| NAME OF FILER (In Full) Climate Reality Action Fund | | |
| · · | | |
| Full Name (Last, First, Middle Initial) of Payee | | Date of Public Distribution/Dissemination |
| Climate Reality Action Fund | | i in the second of the second |
| Mailing Address | | 11 03 2016 |
| 750 9th St NW Suite 520 | | Amount |
| City , State | Zip Code | 67.91 |
| Washington DC | 20001 | 9 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| Purpose of Expenditure | Category/ | Office Sought: House State: FL |
| Staff campaign activity | Туре | Senate District: |
| Name of Federal Candidate Supported or Opposed by Expe | enditure: | President Check One: Support Oppose |
| Patrick Murphy | | |
| Calendar Year-To-Date Per Election for Office Sought | 2,501.14 | Disbursement For: Primary General |
| | 3 | Other (specify) |
| Full Name (Last, First, Middle Initial) of Payee | | Date of Public Distribution/Dissemination |
| N-P AJJ | | . u sp. tu t ≎ p n y |
| Mailing Address | | Amount |
| City State | Zip Code | Amount |
| City | Zip Code | , , |
| Purpose of Expenditure | Category/ | Office Sought: House State: |
| | Type | Senate State |
| Name of Federal Candidate Supported or Opposed by Expe | enditure: | President District: |
| | | Check One: Support Oppose |
| Calendar Year-To-Date Per Election | | Disbursement For: Primary General |
| for Office Sought | . , | Other (specify) |
| Full Name (Last, First, Middle Initial) of Payee | | Date of Public Distribution/Dissemination |
| | | St. M. B. B. C. V. W. W. W. |
| Mailing Address | | ! |
| | | Amount |
| City State | Zip Code | , , |
| Durance of Europediture | 10 | 0% Caushii |
| Purpose of Expenditure | Category/ Type | Office Sought: House State: |
| Name of Federal Candidate Supported or Opposed by Expe | enditure: | President District: |
| Hillary Clinton | | Check One: Support Oppose |
| Calendar Year-To-Date Per Election | | Disbursement For: Primary General |
| for Office Sought | , . | Other (specify) |
| | | |
| (a) SUBTOTAL of Itemized Independent Expenditures | | ▶ 67.91 |
| (h) CUSTOTAL of Unitarized Indopendent Expenditures | | |
| (b) SUBTOTAL of Uniternized Independent Expenditures | | ····· ▶ |
| (c) TOTAL Independent Expenditures | | ▶ 1,358.12 |
| (carry total from last page forward to Line 7) | | , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |

Via E-Mail

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. Date of Receipt Hand Delivered Postmarked Date of Receipt **USPS First Class Mail** Postmarked (R/C) USPS Registered/Certified Postmarked **USPS Priority Mail** Postmarked **USPS Priority Mail Express** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery** Date of Receipt Received from House Records & Registration Office Date of Receipt Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked E-Mail Other (Specify): DATE PREPARED

(3/2015)