

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 SUSAN B ANTHONY LIST INC | | 3. FEC Identification Number C C90011313 |
| (b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1707 L STREET NW STE 550 | | |
| (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
 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

MM / DD / YYYY

THROUGH

MM / DD / YYYY

6. TOTAL CONTRIBUTIONS 0.00

7. TOTAL INDEPENDENT EXPENDITURES 58.78

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 |
| Frank Cannon | <i>Frank Cannon</i> | 08/27/2012 |

[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)
SUSAN B ANTHONY LIST INC

| | | |
|---|----------------------|--|
| Full Name (Last, First, Middle Initial) of Payee Amtrak | | Date 08 / 26 / 2012 |
| Mailing Address 50 Massachusetts Avenue, NE | | Amount 9.40 Transaction ID : F57.5783 |
| City Washington | State DC | |
| Zip Code 20002 | Category/Type 002 | Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President |
| Purpose of Expenditure Train | | Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose |
| Name of Federal Candidate Supported or Opposed by Expenditure: SHERROD BROWN | | 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 21166.11 | | |

| | | |
|---|----------------------|--|
| Full Name (Last, First, Middle Initial) of Payee Delta Air | | Date 08 / 26 / 2012 |
| Mailing Address 1030 Delta Blvd | | Amount 29.62 Transaction ID : F57.5765 |
| City Atlanta | State GA | |
| Zip Code 30320 | Category/Type 002 | Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President |
| Purpose of Expenditure Flight | | Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose |
| Name of Federal Candidate Supported or Opposed by Expenditure: SHERROD BROWN | | 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 21136.95 | | |

| | | |
|---|----------------------|--|
| Full Name (Last, First, Middle Initial) of Payee US AIRWAYS | | Date 08 / 26 / 2012 |
| Mailing Address 111 W RIO SALADO PKWY | | Amount 19.76 Transaction ID : F57.5766 |
| City TEMPE | State AZ | |
| Zip Code 85281 | Category/Type 002 | Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President |
| Purpose of Expenditure Flight | | Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose |
| Name of Federal Candidate Supported or Opposed by Expenditure: SHERROD BROWN | | 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 21156.71 | | |

| | |
|--|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... | 58.78 |
| (b) SUBTOTAL of Unitemized Independent Expenditures..... | |
| (c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7) | 58.78 |