

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 NATIONAL WILDLIFE FEDERATION ACTION FUND		3. FEC Identification Number C C90009994
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 11100 WILDLIFE CENTER DRIVE		
(c) City, State and ZIP Code RESTON VA 20190		
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 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

M	M
0	7

 /

D	D
0	1

 /

Y	Y	Y	Y
2	0	1	0

THROUGH

M	M
0	9

 /

D	D
3	0

 /

Y	Y	Y	Y
2	0	1	0

6. TOTAL CONTRIBUTIONS

.00

7. TOTAL INDEPENDENT EXPENDITURES.....

69967.77

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
Malea Stenzel		10/15/2010

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)

NATIONAL WILDLIFE FEDERATION ACTION FUND

Full Name (Last, First, Middle Initial) of Payee
Grassroots Campaigns Inc

Date

M M / D D / Y Y Y Y
09 / 23 / 2010

Mailing Address
59 Temple Place Suite 404

Amount

46000.00

City State Zip Code
Boston MA 02110

Purpose of Expenditure
Canvass

Category/
Type

Office Sought: House State: PA
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Joe Sestak

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 49265.00

Disbursement For: Primary General
 Other (specify) _____

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

Date

M M / D D / Y Y Y Y
09 / 23 / 2010

Mailing Address
1015 Queen Street

Amount

3625.00

City State Zip Code
Alexandria VA 22314

Purpose of Expenditure
Campaign Materials

Category/
Type

Office Sought: House State: PA
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Joe Sestak

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 49265.00

Disbursement For: Primary General
 Other (specify) _____

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

Date

M M / D D / Y Y Y Y
10 / 08 / 2010

Mailing Address
4529 Hayward Place

Amount

104.77

City State Zip Code
Denver CO 80210

Purpose of Expenditure
Reimbursement for Travel

Category/
Type

Office Sought: House State: VA
 Senate District: 05
 President

Name of Federal Candidate Supported or Opposed by Expenditure:
THOMAS PERRIELLO

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 104.77

Disbursement For: Primary General
 Other (specify) _____

(a) **SUBTOTAL** of Itemized Independent Expenditures

49729.77

(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)

NATIONAL WILDLIFE FEDERATION ACTION FUND

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

Date

M M / D D / Y Y Y Y
1 0 / 0 7 / 2 0 1 0

Mailing Address
1900 Grant Street

Amount

10119.00

City State Zip Code
Denver CO 80203

Purpose of Expenditure
Direct Mail

Category/
Type

Office Sought: House State: NM
 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 10119.00

Disbursement For: Primary General
 Other (specify)

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

Date

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Mailing Address
1900 Grant Street

Amount

10119.00

City State Zip Code
Denver CO 80203

Purpose of Expenditure
Direct Mail

Category/
Type

Office Sought: House State: NM
 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 20398.00

Disbursement For: Primary General
 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures

20238.00

(b) SUBTOTAL of Unitemized Independent Expenditures

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

69967.77