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FEC  
FORM 3X

REPORT OF RECEIPTS  
AND DISBURSEMENTS  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5

TAXPAYERS LEAGUE OF MINNESOTA LIBERTY FUND

ADDRESS (number and street) P.O. Box 30353

Check if different than previously reported. (ACC) SAINT PAUL MN 55113-0003

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

000339473

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
July 15 Quarterly Report (Q2)
October 15 Quarterly Report (Q3)
January 31 Year-End Report (YE)
July 31 Mid-Year Report (Non-election Year Only) (MY)
Termination Report (TER)

- (b) Monthly Report Due On: Feb 20 (M2), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11) (Non-Election Year Only), Dec 20 (M12) (Non-Election Year Only), Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S)
Election on in the State of

- (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)
Election on 11/02/2010 in the State of MN

5. Covering Period 10/01/2010 through 11/22/2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Torin Kelly

Signature of Treasurer [Handwritten Signature]

Date 12/29/2010

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Table with 10 columns for Office Use Only

FEC FORM 3X Rev. 12/2004

11030531411

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

*Taxpayers League of Minnesota Liberty Fund*

Report Covering the Period: From: *10 01 2010* To: *11 22 2010*

11030531412

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <i>2010</i>	<i>000</i>	<i>5,619.77</i>
(b) Cash on Hand at Beginning of Reporting Period.....	<i>000</i>	
(c) Total Receipts (from Line 19).....	<i>000</i>	<i>935.00</i>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<i>000</i>	<i>6,554.77</i>
7. Total Disbursements (from Line 31).....	<i>000</i>	<i>6,554.77</i>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<i>000</i>	<i>000</i>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<i>000</i>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<i>000</i>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

*Taxpayers League of Minnesota Liberty Fund*

Report Covering the Period: From:

*10 01 2010*

To:

*11 22 2010*

**I. Receipts**

**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

11. Contributions (other than loans) From:

- (a) Individuals/Persons Other Than Political Committees
  - (i) Itemized (use Schedule A).....
  - (ii) Unitemized .....
  - (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

*000*  
*000*  
*000*  
*000*  
*000*

*935.00*  
*000*  
*935.00*  
*000*  
*000*

- (b) Political Party Committees .....
- (c) Other Political Committees (such as PACs).....
- (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

*000*

*935.00*

12. Transfers From Affiliated/Other Party Committees .....

*000*

*000*

13. All Loans Received .....

*000*

*000*

14. Loan Repayments Received .....

*000*

*000*

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

*000*

*000*

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees .....

*000*

*000*

17. Other Federal Receipts (Dividends, Interest, etc.).....

*000*

*000*

18. Transfers from Non-Federal and Levin Funds

- (a) Non-Federal Account (from Schedule H3).....

*000*

*000*

- (b) Levin Funds (from Schedule H5) .....

*000*

*000*

- (c) Total Transfers (add 18(a) and 18(b))..

*000*

*000*

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

*000*

*935.00*

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

*000*

*935.00*

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**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

**II. Disbursements**

**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	000	000
(ii) Non-Federal Share .....	000	000
(b) Other Federal Operating Expenditures .....	000	2,254.77
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	000	2,254.77
22. Transfers to Affiliated/Other Party Committees .....	000	4,300.00
23. Contributions to Federal Candidates/Committees and Other Political Committees .....	000	000
24. Independent Expenditures (use Schedule E) .....	000	000
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F) .....	000	000
26. Loan Repayments Made .....	000	000
27. Loans Made .....	000	000
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	000	000
(b) Political Party Committees .....	000	000
(c) Other Political Committees (such as PACs) .....	000	000
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	000	000
29. Other Disbursements .....	000	000
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	000	000
(ii) "Levin" Share .....	000	000
(b) Federal Election Activity Paid Entirely With Federal Funds .....	000	000
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	000	000
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	000	6,554.77
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) .....	000	6,554.77

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**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	000	935.00
34. Total Contribution Refunds (from Line 28(d)) .....	000	000
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	006	935.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	000	2,254.77
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	000	000
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	000	2,254.77

11030531415

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE	OF
	(check only one)		
	<input type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15
		<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
*Taxpayers league liberty Fund*

**A.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.  C

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.  C

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.  C

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

0.00

11030531416

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE		OF	
	<input checked="" type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
*Taxpayers League of Minnesota Liberty Fund*

**A.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

SUBTOTAL of Disbursements This Page (optional).....	0.60
TOTAL This Period (last page this line number only).....	0.00

11030531417

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.

11030531418

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input checked="" type="checkbox"/> USPS Express Mail	Postmarked <i>1/4/11</i>
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

*Chm*  
 PREPARER  
 (3/2005)

*1/5/11*  
 DATE PREPARED