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

Planned Parenthood Action Fund Inc.

(b) Address (number and street) ☐ check if different than previously reported

434 West 33rd Street

(c) City, State and ZIP Code

New York NY 10001

3. FEC Identification Number

C C90005471

2. **Corporate filers only** Is the filer a qualified nonprofit corporation? ☐ Yes ☒ 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 M M / D D / Y Y Y Y

THROUGH M M / D D / Y Y Y Y

6. TOTAL CONTRIBUTIONS 0.00

7. TOTAL INDEPENDENT EXPENDITURES 145200.00

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
Deirdre Schifeling	*[Electronically Filed]* *Deirdre Schifeling*	09/12/2012

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

Image# 12972179601

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)
Planned Parenthood Action Fund Inc.

Full Name (Last, First, Middle Initial) of Payee
Blueprint Interactive

Mailing Address 2229 North Pollard Street

City: Arlington | State: VA | Zip Code: 22207

Date: 09 / 10 / 2012

Amount: 145200.00

Transaction ID : 57435893

Purpose of Expenditure: Online advertising

Category/ Type: 004

Name of Federal Candidate Supported or Opposed by Expenditure: Mitt Romney

Office Sought: [ ] House [ ] Senate [X] President — State: ____ District: ____

Check One: [ ] Support [X] Oppose

Calendar Year-To-Date Per Election for Office Sought: 215959.13

Disbursement For: [ ] Primary [X] General 2012 [ ] Other (specify) ▶ ____

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

Mailing Address

City | State | Zip Code

Date: M M / D D / Y Y Y Y

Amount

Purpose of Expenditure

Category/ Type

Name of Federal Candidate Supported or Opposed by Expenditure:

Office Sought: [ ] House [ ] Senate [ ] President — State: ____ District: ____

Check One: [ ] Support [ ] Oppose

Calendar Year-To-Date Per Election for Office Sought

Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▶ ____

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

Mailing Address

City | State | Zip Code

Date: M M / D D / Y Y Y Y

Amount

Purpose of Expenditure

Category/ Type

Name of Federal Candidate Supported or Opposed by Expenditure:

Office Sought: [ ] House [ ] Senate [ ] President — State: ____ District: ____

Check One: [ ] Support [ ] Oppose

Calendar Year-To-Date Per Election for Office Sought

Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▶ ____

(a) SUBTOTAL of Itemized Independent Expenditures ▶ 145200.00

(b) SUBTOTAL of Unitemized Independent Expenditures ▶

(c) TOTAL Independent Expenditures ▶ 145200.00
(carry total from last page forward to Line 7)