

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 45Committee Inc. | | 3. FEC Identification Number C C90016478 |
| (b) Address (number and street) <input type="checkbox"/> check if different than previously reported P.O. Box 710993 | | |
| (c) City, State and ZIP Code Herndon VA 20171 | | |
| 2. Occupation and Name of Employer (for Individual Filers Only) | | |

4. TYPE OF REPORT (check appropriate boxes):

- (a) April 15 Quarterly Report
- July 15 Quarterly Report 24-Hour Report
- October 15 Quarterly Report 48-Hour Report
- January 31 Year-End Report

b) Is this Report an amendment? No Yes, it amends the report filed on / /

5. COVERING PERIOD: FROM / / THROUGH / /

6. TOTAL CONTRIBUTIONS..... .00

7. TOTAL INDEPENDENT EXPENDITURES 7238145.06

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 |
| Wojciechowski, Maria, , , | <i>Wojciechowski, Maria, , ,</i> <i>[Electronically Filed]</i> | 10/06/2016 |

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

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
45Committee Inc.

| | | | |
|--|--------------------------|--|------------------------------|
| Full Name (Last, First, Middle Initial) of Payee McCarthy Hennings Whalen | | Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 04 / 2016 | |
| Mailing Address 1850 M Street NW, Suite 235 Suite 235 | | Amount 15185.55 | |
| City Washington | State DC | Zip Code 20036 | Transaction ID : F57.000001 |
| Purpose of Expenditure Media production | Category/ Type 004 | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President | State: DC District: _____ |
| Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , , | | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought 15185.55 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____ | |

| | | | |
|---|--------------------------|--|---------------------------------|
| Full Name (Last, First, Middle Initial) of Payee McCarthy Hennings Whalen | | Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 04 / 2016 | |
| Mailing Address 1850 M Street NW, Suite 235 | | Amount 15185.55 | |
| City Washington | State DC | Zip Code 20036 | Transaction ID : F57.000002 |
| Purpose of Expenditure Media production | Category/ Type 004 | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President | State: _____ District: _____ |
| Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , , | | Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought 30371.10 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____ | |

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|--|--------------------------|--|---------------------------------|
| Full Name (Last, First, Middle Initial) of Payee Del Cielo Media | | Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 04 / 2016 | |
| Mailing Address 1427 Leslie Ave. Suite 102 | | Amount 2650250.00 | |
| City Alexandria | State VA | Zip Code 22301 | Transaction ID : F57.000003 |
| Purpose of Expenditure Media placement | Category/ Type 004 | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President | State: _____ District: _____ |
| Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , , | | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought 2680621.10 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____ | |

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|---|------------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... | 2680621.10 |
| (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)
45Committee Inc.

| | | | |
|---|-------------|--|--|
| Full Name (Last, First, Middle Initial) of Payee Del Cielo Media | | Date of Public Distribution/Dissemination 10 / 04 / 2016 | |
| Mailing Address 1427 Leslie Ave. Suite 102 | | Amount 2650250.00 | |
| City Alexandria | State VA | Zip Code 22301 | |
| Purpose of Expenditure Media placement | | Category/ Type 004 | Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President |
| Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , , | | Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought 5330871.10 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____ | |

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|--|-------------|--|--|
| Full Name (Last, First, Middle Initial) of Payee Connell Donatelli | | Date of Public Distribution/Dissemination 10 / 06 / 2016 | |
| Mailing Address P.O. Box 1877 | | Amount 210246.52 | |
| City Alexandria | State VA | Zip Code 22313 | |
| Purpose of Expenditure Media placement | | Category/ Type 004 | Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President |
| Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , , | | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought 5541117.62 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____ | |

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|---|-------------|--|--|
| Full Name (Last, First, Middle Initial) of Payee Connell Donatelli | | Date of Public Distribution/Dissemination 10 / 06 / 2016 | |
| Mailing Address P.O. Box 1877 | | Amount 210246.52 | |
| City Alexandria | State VA | Zip Code 22313 | |
| Purpose of Expenditure Media placement | | Category/ Type 004 | Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President |
| Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , , | | Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought 5751364.14 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____ | |

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| (a) SUBTOTAL of Itemized Independent Expenditures..... | 3070743.04 |
| (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)
45Committee Inc.

| | | | |
|--|--------------------------|--|---------------------------------|
| Full Name (Last, First, Middle Initial) of Payee DDC | | Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 05 / 2016 | |
| Mailing Address 805 15th Street, NW Suite 300 | | Amount 224520.00 | |
| City Washington | State DC | Zip Code 20005 | Transaction ID : F57.000007 |
| Purpose of Expenditure Media placement | Category/ Type 004 | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President | State: _____ District: _____ |
| Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , , | | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought 5975884.14 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____ | |

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|---|--------------------------|--|---------------------------------|
| Full Name (Last, First, Middle Initial) of Payee DDC | | Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 05 / 2016 | |
| Mailing Address 805 15th Street, NW Suite 300 | | Amount 224520.00 | |
| City Washington | State DC | Zip Code 20005 | Transaction ID : F57.000008 |
| Purpose of Expenditure Media placement | Category/ Type 004 | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President | State: _____ District: _____ |
| Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , , | | Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought 6200404.14 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____ | |

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|--|--------------------------|--|---------------------------------|
| Full Name (Last, First, Middle Initial) of Payee The Tarrance Group | | Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 04 / 2016 | |
| Mailing Address 201 N. Union St. Suite 410 | | Amount 23484.00 | |
| City Alexandria | State VA | Zip Code 22314 | Transaction ID : F57.000009 |
| Purpose of Expenditure Survey | Category/ Type 005 | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President | State: _____ District: _____ |
| Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , , | | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought 6223888.14 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____ | |

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|---|-----------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... | 472524.00 |
| (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)
45Committee Inc.

| | | | |
|---|-----------------------|--|---------------------------------|
| Full Name (Last, First, Middle Initial) of Payee The Tarrance Group | | Date of Public Distribution/Dissemination 10 / 04 / 2016 | |
| Mailing Address 201 N. Union St. Suite 410 | | Amount 23484.00 | |
| City Alexandria | State VA | Zip Code 22314 | Transaction ID : F57.000010 |
| Purpose of Expenditure Survey | Category/ Type 005 | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President | State: _____ District: _____ |
| Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , , | | Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought 6247372.14 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____ | |

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|---|-----------------------|--|---------------------------------|
| Full Name (Last, First, Middle Initial) of Payee DDC | | Date of Public Distribution/Dissemination 10 / 04 / 2016 | |
| Mailing Address 805 15th Street, NW Suite 300 | | Amount 864106.26 | |
| City Washington | State DC | Zip Code 20005 | Transaction ID : F57.000011 |
| Purpose of Expenditure Direct mail | Category/ Type 004 | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President | State: _____ District: _____ |
| Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , , | | Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought 7111478.40 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____ | |

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|---|-----------------------|--|---------------------------------|
| Full Name (Last, First, Middle Initial) of Payee TargetPoint Consulting | | Date of Public Distribution/Dissemination 10 / 04 / 2016 | |
| Mailing Address 66 Canal Center Plaza No 555 | | Amount 126666.66 | |
| City Alexandria | State VA | Zip Code 22314 | Transaction ID : F57.000012 |
| Purpose of Expenditure Survey | Category/ Type 005 | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President | State: _____ District: _____ |
| Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , , | | Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought 7238145.06 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____ | |

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|---|------------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... | 1014256.92 |
| (b) SUBTOTAL of Unitemized Independent Expenditures | |
| (c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7) | 7238145.06 |