

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 750		
(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 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 / /

THROUGH

/ /

6. TOTAL CONTRIBUTIONS

7. TOTAL INDEPENDENT EXPENDITURES.....

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
Emily Buchanan	_____	10/08/2010

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-A
ITEMIZED RECEIPTS**

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 FILER (In Full)
SUSAN B ANTHONY LIST INC

A. Full Name (Last, First, Middle Initial)

CitizenLink
Mailing Address
8655 Explorer Drive

City State Zip Code
Colorado Springs CO 80920

FEC ID number of contributing federal political committee. **C** []

Name of Employer Occupation

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 8 / 2 0 1 0

Transaction ID: F56.000001

Amount of Each Receipt this Period
[] 100000.00

B. Full Name (Last, First, Middle Initial)

Susan B. Anthony List General Treasury
Mailing Address
1707 L Street St NW Ste 750

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** []

Name of Employer Occupation

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 8 / 2 0 1 0

Transaction ID: F56.000002

Amount of Each Receipt this Period
[] 100000.00

SUBTOTAL of Receipts This Page (optional)

[] 200000.00

TOTAL This Period (last page carry total to Line 6)

[] 200000.00

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)

SUSAN B ANTHONY LIST INC

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

Date

M M / D D / Y Y Y Y
1 0 / 0 8 / 2 0 1 0

Mailing Address
2130 Priest Bridge Dr #11

Amount

200000.00

City State Zip Code
Crofton MD 21114

Purpose of Expenditure
TV advertising

Category/
Type

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

Name of Federal Candidate Supported or Opposed by Expenditure:
Sharron Angle

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought .00

Disbursement For: Primary General
2010
 Other (specify) _____

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

200000.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures

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

200000.00