

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. SIERRA CLUB INDEPENDENT ACTION

ADDRESS (number and street) 2101 Webster Street, Suite 1300 Check if different than previously reported. (ACC) Oakland CA 94612

2. FEC IDENTIFICATION NUMBER C C00483693 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X]

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report. (b) Monthly Report Due On: Feb 20, May 20 [X], Aug 20, Nov 20, Mar 20, Jun 20, Sep 20, Dec 20, Apr 20, Jul 20, Oct 20, Jan 31. (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special. (d) 30-Day POST-Election Report for the: General, Runoff, Special.

5. Covering Period 04/01/2016 through 04/30/2016

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 Mary Nemerov

Signature of Treasurer Mary Nemerov [Electronically Filed] Date 06/20/2016

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

SIERRA CLUB INDEPENDENT ACTION

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>		136256.58
(b) Cash on Hand at Beginning of Reporting Period.....	136195.83	
(c) Total Receipts (from Line 19)	110000.00	110000.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	246195.83	246256.58
7. Total Disbursements (from Line 31).....	80242.77	80303.52
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	165953.06	165953.06
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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)

Write or Type Committee Name

SIERRA CLUB INDEPENDENT ACTION

Report Covering the Period: From: / / To: / /

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).....	110000.00	110000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	110000.00	110000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	110000.00	110000.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	110000.00	110000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	110000.00	110000.00

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	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	9724.69	9714.22
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	9724.69	9714.22
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	20000.00	20000.00
24. Independent Expenditures (use Schedule E)	50518.08	50589.30
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	80242.77	80303.52
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	80242.77	80303.52

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)	110000.00	110000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	110000.00	110000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	9724.69	9714.22
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	9724.69	9714.22

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA
Transaction ID :

This report is being amended to include two additional "salaries & benefits" lines on schedule E (see corresponding memo texts) that reflects staff time that had not yet been submitted to our internal timekeeping system at the time of filing. In addition, a previously reported line 24 staff "salaries & benefits" is updated with the correct election information (general, not as primary as reported originally). All line 21(b) offsets have also ben updated to capture the offsets for the new "salaries & benefits" entries.

Form/Schedule:
Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<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)
SIERRA CLUB INDEPENDENT ACTION

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

Mailing Address 828 Arlington Ave

City Berkeley State CA Zip Code 94707

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

Name of Employer None Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 19 / 2016

Transaction ID : SA11AI.4245

Amount of Each Receipt this Period
5000.00

Memo Item

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

Mailing Address 828 Arlington Ave

City Berkeley State CA Zip Code 94707

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

Name of Employer None Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 19 / 2016

Transaction ID : SA11AI.4246

Amount of Each Receipt this Period
5000.00

Memo Item

C. Christina Singleton
Full Name (Last, First, Middle Initial)

Mailing Address 528 Palisades Dr

City Pacific Palisades State CA Zip Code 90272

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

Name of Employer Information requested Occupation Information requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 29 / 2016

Transaction ID : SA11AI.4248

Amount of Each Receipt this Period
100000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	▶	110000.00
TOTAL This Period (last page this line number only).....	▶	110000.00

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
SIERRA CLUB INDEPENDENT ACTION

Full Name (Last, First, Middle Initial)

A. Kiyana Allen

Mailing Address 1536 Wynkoop St., 2nd Floor Suite

City State Zip Code
Denver CO 80202

Purpose of Disbursement
Salaries & Benefits

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4253

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Kiyana Allen

Mailing Address 1536 Wynkoop St., 2nd Floor Suite

City State Zip Code
Denver CO 80202

Purpose of Disbursement
Salaries & Benefits

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4254

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. John Gould

Mailing Address 85 2nd St, 2nd Floor

City State Zip Code
San Francisco CA 94105

Purpose of Disbursement
Salaries & Benefits

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4255

Amount of Each Disbursement this Period

Memo Item

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

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

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
SIERRA CLUB INDEPENDENT ACTION

Full Name (Last, First, Middle Initial)

A. Melissa Lee

Mailing Address 85 2nd St, 2nd Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
Salaries & Benefits

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4250

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Mary Nemerov

Mailing Address 2101 Webster Street, Suite 1300

City Oakland State CA Zip Code 94612

Purpose of Disbursement
Salaries & Benefits

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4271

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Paymentech

Mailing Address 4 Northeastern Blvd

City Salem State NH Zip Code 03079

Purpose of Disbursement
Credit Card Fees

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4268

Amount of Each Disbursement this Period

Memo Item

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

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

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
SIERRA CLUB INDEPENDENT ACTION

Full Name (Last, First, Middle Initial) A. Karissa Sellman		Date of Disbursement MM / DD / YYYY 04 / 30 / 2016
Mailing Address 85 2nd St, 2nd Floor		Transaction ID : SB21B.4256
City San Francisco	State CA	
Purpose of Disbursement Salaries & Benefits		Amount of Each Disbursement this Period 646.43
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) B. Sierra Club		Date of Disbursement MM / DD / YYYY 04 / 18 / 2016
Mailing Address 85 2nd St, 2nd Floor		Transaction ID : SB21B.4262
City San Francisco	State CA	
Purpose of Disbursement Advance for programmatic services		Amount of Each Disbursement this Period 10000.00
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Sierra Club		Date of Disbursement MM / DD / YYYY 04 / 30 / 2016
Mailing Address 85 2nd St, 2nd Floor		Transaction ID : SB21B.4266
City San Francisco	State CA	
Purpose of Disbursement Payment allocated & reported on line 24		Amount of Each Disbursement this Period -518.08
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....▶	10128.35
TOTAL This Period (last page this line number only).....▶	

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
SIERRA CLUB INDEPENDENT ACTION

Full Name (Last, First, Middle Initial)

A. Sierra Club

Mailing Address 85 2nd St, 2nd Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
Payment allocated & reported on line 21

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 30 / 2016

Transaction ID : **SB21B.4267**

Amount of Each Disbursement this Period

-4016.95

Memo Item

Full Name (Last, First, Middle Initial)

B. Kaitlyn Silveira

Mailing Address 85 2nd St, 2nd Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
Salaries & Benefits

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 30 / 2016

Transaction ID : **SB21B.4257**

Amount of Each Disbursement this Period

60.23

Memo Item

Full Name (Last, First, Middle Initial)

C. Dave Thack

Mailing Address 50 F St, NW, 8th Floor

City Washington State DC Zip Code 20001

Purpose of Disbursement
Salaries & Benefits

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2016

Transaction ID : **SB21B.4251**

Amount of Each Disbursement this Period

138.91

Memo Item

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

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

-3817.81

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
SIERRA CLUB INDEPENDENT ACTION

Full Name (Last, First, Middle Initial) A. Dave Thack		Date of Disbursement MM / DD / YYYY 04 / 30 / 2016
Mailing Address 50 F St, NW, 8th Floor		Transaction ID : SB21B.4252
City Washington State DC Zip Code 20001	Amount of Each Disbursement this Period 34.73	
Purpose of Disbursement Salaries & Benefits	Candidate Name	<input type="checkbox"/> Memo Item
Category/Type 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Justin Uebelhor		Date of Disbursement MM / DD / YYYY 04 / 15 / 2016
Mailing Address 70 E. Lake Street Ste 1500		Transaction ID : SB21B.4272
City Chicago State IL Zip Code 60601	Amount of Each Disbursement this Period 342.96	
Purpose of Disbursement Salaries & Benefits	Candidate Name	<input type="checkbox"/> Memo Item
Category/Type 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Category/Type	
Purpose of Disbursement	Candidate Name	<input type="checkbox"/> Memo Item
Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)..... ▶	377.69
TOTAL This Period (last page this line number only)..... ▶	9724.69

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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
SIERRA CLUB INDEPENDENT ACTION

Full Name (Last, First, Middle Initial)

A. COMMITTEE FOR MARYLAND'S PROGRESS

Mailing Address PO BOX 75357

City WASHINGTON State DC Zip Code 20013

Purpose of Disbursement
Direct Contribution

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB23.4276

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Memo Item

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

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

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SIERRA CLUB INDEPENDENT ACTION	FEC IDENTIFICATION NUMBER ▼ C C00483693
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee Ariel Hayes <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y
Mailing Address 50 F St, NW, 8th Floor	Amount 35.60
City Washington	State DC
Zip Code 20001	Transaction ID : SE.4232
Purpose of Expenditure Salaries & Benefits	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y
Category/Type 001	04 / 15 / 2016
Name of Federal Candidate CHRIS VAN HOLLEN	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate
	District: 00 State: MD
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
50106.82	2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Ariel Hayes <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y
Mailing Address 50 F St, NW, 8th Floor	Amount 71.21
City Washington	State DC
Zip Code 20001	Transaction ID : SE.4233
Purpose of Expenditure Salaries & Benefits	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y
Category/Type 001	04 / 15 / 2016
Name of Federal Candidate CHRIS VAN HOLLEN	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate
	District: 00 State: MD
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
50178.03	2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	106.81
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Nemerov [Electronically Filed]

Signature _____ Date M M M / D D D / Y Y Y Y Y Y
06 / 20 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SIERRA CLUB INDEPENDENT ACTION	FEC IDENTIFICATION NUMBER ▼ C C00483693
--	---

Check if 24-hour report 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee Ariel Hayes <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y
Mailing Address 50 F St, NW, 8th Floor	Amount 106.82
City State Zip Code Washington DC 20001	Transaction ID : SE.4292 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 04 / 15 / 2016
Purpose of Expenditure Salaries & Benefits	Category/Type 001
Name of Federal Candidate CHRIS VAN HOLLEN	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: MD
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
106.82	106.82

Full Name of Payee Ariel Hayes <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y
Mailing Address 50 F St, NW, 8th Floor	Amount 35.61
City State Zip Code Washington DC 20001	Transaction ID : SE.4234 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 04 / 30 / 2016
Purpose of Expenditure Salaries & Benefits	Category/Type 001
Name of Federal Candidate CHRIS VAN HOLLEN	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: MD
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
50375.56	50375.56

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	142.43
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Nemerov [Electronically Filed]

Signature _____ Date M M / D D / Y Y Y Y Y Y
06 / 20 / 2016

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SE

Transaction ID : SE.4292

New item in amended report (1/2).

Form/Schedule: SE

Transaction ID: SE.4234

This amended line updates the election information from primary to general as the Maryland Senate primary took place on 4/26/2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SIERRA CLUB INDEPENDENT ACTION		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00483693 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		

Full Name of Payee Ariel Hayes <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination	
Mailing Address 50 F St, NW, 8th Floor		Amount	
City Washington	State DC	Zip Code 20001	17.80
Purpose of Expenditure Salaries & Benefits		Category/Type 001	Transaction ID : SE.4293
Name of Federal Candidate CHRIS VAN HOLLEN		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Date of Disbursement or Obligation
Calendar Year-To-Date Per Election for Office Sought		124.62	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MD		M M / D D / Y Y Y Y Y Y 04 / 30 / 2016	

Full Name of Payee Trey Pollard <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination	
Mailing Address 50 F St, NW, 8th Floor		Amount	
City Washington	State DC	Zip Code 20001	89.12
Purpose of Expenditure Salaries & Benefits		Category/Type 001	Transaction ID : SE.4235
Name of Federal Candidate CHRIS VAN HOLLEN		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Date of Disbursement or Obligation
Calendar Year-To-Date Per Election for Office Sought		50464.68	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MD		M M / D D / Y Y Y Y Y Y 04 / 30 / 2016	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	106.92
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Mary Nemerov [Electronically Filed] Date 06 / 20 / 2016

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SE

Transaction ID : SE.4293

New item in amended report (2/2).

Form/Schedule:

Transaction ID:

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SIERRA CLUB INDEPENDENT ACTION		FEC IDENTIFICATION NUMBER C C00483693
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee Holly Shulman		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY
Mailing Address 50 F St, NW, 8th Floor			Amount 161.92
City Washington	State DC	Zip Code 20001	Transaction ID : SE.4260
Purpose of Expenditure Salaries & Benefits	Category/Type 001		Date of Disbursement or Obligation MM / DD / YYYY 04 / 15 / 2016
Name of Federal Candidate CHRIS VAN HOLLEN		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MD
Calendar Year-To-Date Per Election for Office Sought		50339.95	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Sway		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY
Mailing Address 4350 East West Hwy, Suite 350			Amount 50000.00
City Bethesda	State MD	Zip Code 20814	Transaction ID : SE.4207
Purpose of Expenditure Digital ad buy and production for ad running between 4/6-4/23	Category/Type 006		Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate CHRIS VAN HOLLEN		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MD
Calendar Year-To-Date Per Election for Office Sought		50000.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	50161.92
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	50518.08

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Nemerov
Signature

[Electronically Filed]

Date 06 / 20 / 2016

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SE

Transaction ID : SE.4207

On the 24-hour report, this line item does not autopopulate in the 'Calendar Year-To-Date Per Election for Office Sought' amount box under the name of the federal candidate. Regarding this issue, we contacted the FECFile analyst and she noted that this may be an ongoing FECFile software issue and therefore not aggregating the total-- it is unclear whether the FEC team has fixed the tech problem or not. Nonetheless, we are submitting all the required information as usual.

Form/Schedule:

Transaction ID: