

# 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

Innovation Political Action Committee

ADDRESS (number and street) 228 S. Washington St.

Check if different than previously reported. (ACC) Ste. 115

Alexandria VA 22314

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00540187  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)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)

Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)

Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

Primary (12P)  General (12G)  Runoff (12R)

Convention (12C)  Special (12S)

Election on M M / D D / Y Y Y Y Y Y in the State of  

(d) 30-Day POST-Election Report for the:

General (30G)  Runoff (30R)  Special (30S)

Election on M M / D D / Y Y Y Y Y Y in the State of  

5. Covering Period M M / D D / Y Y Y Y Y Y 05 / 01 / 2019 through M M / D D / Y Y Y Y Y Y 05 / 31 / 2019

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

Lisker, Lisa, , ,

Type or Print Name of Treasurer \_\_\_\_\_

Signature of Treasurer Lisker, Lisa, , , [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 06 / 19 / 2019

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**Innovation Political Action Committee**

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="2019"/>		<input type="text" value="262378.19"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="340491.12"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="47137.32"/>	<input type="text" value="330179.32"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="387628.44"/>	<input type="text" value="592557.51"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="68103.52"/>	<input type="text" value="273032.59"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="319524.92"/>	<input type="text" value="319524.92"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="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

Write or Type Committee Name

**Innovation Political Action Committee**

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).....	3750.00	94250.00
(ii) Unitemized .....	0.00	50.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	3750.00	94300.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	25500.00	211500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	29250.00	305800.00
12. Transfers From Affiliated/Other Party Committees.....	17887.32	24379.32
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)).....▶	47137.32	330179.32
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	47137.32	330179.32

**DETAILED SUMMARY PAGE**  
of Disbursements

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 .....	10603.52	147032.59
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	10603.52	147032.59
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	47500.00	116000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	10000.00	10000.00
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	68103.52	273032.59
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	68103.52	273032.59

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	29250.00	305800.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	29250.00	305800.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	10603.52	147032.59
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	10603.52	147032.59

**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 6 OF 19
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)  
**Innovation Political Action Committee**

**A. LAPINSKI, MATTHEW, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1210 R STREET NW # 304  
 City WASHINGTON State DC Zip Code 20009-4388  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CROSSROADS STRATEGIES Occupation (for Individual) SENIOR MANAGING DIRECTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 05 / 05 / 2019  
**Transaction ID : SA11A.22421**  
 Amount of Each Receipt this Period 1250.00  
 Memo Item CONTRIBUTION

**B. SCHELLHAS, ROBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2639 N. ROOSEVELT ST.  
 City ARLINGTON State VA Zip Code 22207-1011  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ERNST & YOUNG LLP Occupation (for Individual) CONSULTING  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 07 / 2019  
**Transaction ID : SA11A.22392**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item CONTRIBUTION

**C.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼

Date of Receipt  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3750.00
<b>TOTAL</b> This Period (last page this line number only).....	3750.00

**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 19
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Innovation Political Action Committee**

**A. BILL PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 824 S. MILLEDGE AVE. STE. 101

City ATHENS	State GA	Zip Code 30605-1332
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FEC ID number of contributing federal political committee. **C** C00412288

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		29		2019

**Transaction ID : SA11C.22483**

Amount of Each Receipt this Period  
2000.00

Memo Item  
CONTRIBUTION

**B. CME GROUP INC. PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20 SOUTH WACKER DRIVE

City CHICAGO	State IL	Zip Code 60606-7431
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FEC ID number of contributing federal political committee. **C** C00076299

Name of Employer (for Individual) Occupation (for Individual)

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
05		07		2019

**Transaction ID : SA11C.22391**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**C. CULAC THE PAC OF THE CREDIT UNION NATIONAL ASSOC.**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 601 PENNSYLVANIA AVENUE, NW  
SOUTH BUILDING, SUITE 600

City WASHINGTON	State DC	Zip Code 20004-2601
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FEC ID number of contributing federal political committee. **C** C00007880

Name of Employer (for Individual) Occupation (for Individual)

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
05		07		2019

**Transaction ID : SA11C.22393**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	12000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**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 8 OF 19
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Innovation Political Action Committee**

**A. FMR LLC POLITICAL ACTION COMMITTEE - FEDERAL (FIDELITY PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 82 DEVONSHIRE STREET  
N5A

City BOSTON	State MA	Zip Code 02109-3605
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FEC ID number of contributing federal political committee. **C** C00380550

Name of Employer (for Individual) Occupation (for Individual)

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
05		07		2019

**Transaction ID : SA11C.22389**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**B. INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1900 K ST NW  
STE 700

City WASHINGTON	State DC	Zip Code 20006-1135
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FEC ID number of contributing federal political committee. **C** C00084491

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		07		2019

**Transaction ID : SA11C.22390**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**C. LIBERTY MUTUAL INSURANCE COMPANY-PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 175 BERKELEY STREET

City BOSTON	State MA	Zip Code 02116-5066
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FEC ID number of contributing federal political committee. **C** C00171843

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		07		2019

**Transaction ID : SA11C.22395**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10000.00
<b>TOTAL</b> This Period (last page this line number only).....	



**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 9 OF 19
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Innovation Political Action Committee**

**A. MANAGED FUNDS ASSOCIATION PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 600 14TH STREET NW  
SUITE 900

City WASHINGTON State DC Zip Code 20005-2002

FEC ID number of contributing federal political committee. **C** C00306894

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
05 / 07 / 2019

**Transaction ID : SA11C.22394**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B. NATIONAL ASSOCIATION OF REAL ESTATE INVESTMENT TRUSTS, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1875 I STREET, NW  
SUITE 600

City WASHINGTON State DC Zip Code 20006-5413

FEC ID number of contributing federal political committee. **C** C00303339

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3500.00

Date of Receipt  
05 / 29 / 2019

**Transaction ID : SA11C.22482**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**C.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	25500.00

**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 10 OF 19
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Innovation Political Action Committee**

**A. TEAM MCHENRY**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 228 S WASHINGTON ST STE 115

City ALEXANDRIA	State VA	Zip Code 22314-5404
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FEC ID number of contributing federal political committee. **C** C00544650

Name of Employer (for Individual)	Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
24379.32

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2019

**Transaction ID : SA12.22484**

Amount of Each Receipt this Period  
17887.32

Memo Item  
TRANSFER

DISTRIBUTION OF NET JFC PROCEEDS

**B. MULE, EDWARD, A., ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15 DAIRY RD.

City GREENWICH	State CT	Zip Code 06830-3447
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SILVER POINT CAPITAL	Occupation (for Individual) CEO
---	------------------------------------

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		11		2019

**Transaction ID : SA.22329.3.0519**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER

TRANSFER FROM TEAM MCHENRY

**C. PARRISH, R. DOYLE, , MR.,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2609 KINGSLEY ROAD

City RALEIGH	State NC	Zip Code 27612-2921
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SUMMIT HOSPITALITY GROUP	Occupation (for Individual) PRESIDENT
---	--

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
05		16		2019

**Transaction ID : SA.22445.3.0519**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER

TRANSFER FROM TEAM MCHENRY

<b>SUBTOTAL</b> of Receipts This Page (optional).....	17887.32
<b>TOTAL</b> This Period (last page this line number only).....	

**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 11 OF 19
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Innovation Political Action Committee**

**A. SCHWARZMAN, CHRISTINE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 345 PARK AVENUE  
 City NEW YORK State NY Zip Code 10154-0004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) LAWYER  
 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 / 24 / 2019  
**Transaction ID : SA.22336.3.0519**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM TEAM MCHENRY

**B. SCHWARZMAN, STEPHEN, A., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 345 PARK AVENUE FLOOR 44  
 City NEW YORK State NY Zip Code 10154-0004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BLACKSTONE GROUP Occupation (for Individual) CHARIMAN/CEO  
 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 / 24 / 2019  
**Transaction ID : SA.22337.3.0519**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM TEAM MCHENRY

**C. SULLIVAN, JANE, C., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 3649  
 City WILMINGTON State NC Zip Code 28406-0649  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) HOMEMAKER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 4400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 14 / 2019  
**Transaction ID : SA.22438.3.0519**  
 Amount of Each Receipt this Period  
 4400.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM TEAM MCHENRY

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 12 OF 19
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Innovation Political Action Committee**

**A. THE COUNCIL OF INSURANCE AGENTS & BROKERS PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 701 PENNSYLVANIA AVE NW  
STE 750

City WASHINGTON State DC Zip Code 20004-2661

FEC ID number of contributing federal political committee. **C** C00039578

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
05 / 16 / 2019

**Transaction ID : SA.22446.3.0519**

Amount of Each Receipt this Period  
2500.00

Memo Item  
TRANSFER  
TRANSFER FROM TEAM MCHENRY

**B.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

**C.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	17887.32

**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"/> 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)  
**Innovation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. ANEDOT**

Mailing Address 450 LAUREL STREET  
SUITE 2105

City  
BATON ROUGE

State  
LA

Zip Code  
70801-1821

Purpose of Disbursement  
ONLINE PROCESSING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	5		2	0	1	9

FEC Identification Number

**C**

**Transaction ID : SB21B.I1309**

Amount of Each Disbursement this Period

47.18

Memo Item

Full Name (Last, First, Middle Initial)

**B. AUTHORIZE.NET**

Mailing Address P.O. BOX 8999

City  
SAN FRANCISCO

State  
CA

Zip Code  
94128

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	2		2	0	1	9

FEC Identification Number

**C**

**Transaction ID : SB21B.I1309**

Amount of Each Disbursement this Period

24.95

Memo Item

Full Name (Last, First, Middle Initial)

**C. BB&T**

Mailing Address 1909 K ST., NW

City  
WASHINGTON

State  
DC

Zip Code  
20006

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	5		2	0	1	9

FEC Identification Number

**C**

**Transaction ID : SB21B.I1310**

Amount of Each Disbursement this Period

57.90

Memo Item

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

130.03

**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"/> 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)  
**Innovation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. CMDI**

Mailing Address 1593 SPRING HILL RD., STE. 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement  
COMPLIANCE SOFTWARE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 28 / 2019

FEC Identification Number

C  
Transaction ID : SB21B.I1310  
Amount of Each Disbursement this Period  
250.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. THE OORBEEK GROUP**

Mailing Address 5614 GARNETTS FARMS DRIVE

City HAYMARKET State VA Zip Code 20169

Purpose of Disbursement  
FUNDRAISING CONSULTING/CATERING/TRAVEL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 03 / 2019

FEC Identification Number

C  
Transaction ID : SB21B.I1310  
Amount of Each Disbursement this Period  
10223.49

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY

FEC Identification Number

C  
Amount of Each Disbursement this Period

Memo Item

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

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

10473.49  
10603.52

**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"/> 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)  
**Innovation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. BISHOP FOR CONGRESS**

Mailing Address 2216 WHILDEN CT

City CHARLOTTE State NC Zip Code 28211

Purpose of Disbursement  
POLITICAL CONTRIBUTION

Candidate Name  
**BISHOP, JAMES, DANIEL, ,**

Office Sought:  House  Senate  President  
Disbursement For: 2019  Primary  General  Other (specify) **SPECIAL GENERAL**  
State: NC District: 09

Date of Disbursement

MM / DD / YYYY  
05 / 20 / 2019

FEC Identification Number

**C** C00699660

**Transaction ID : SB23.I13103**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. KENNY MARCHANT FOR CONGRESS**

Mailing Address PO BOX 110187

City CARROLLTON State TX Zip Code 75011-0187

Purpose of Disbursement  
POLITICAL CONTRIBUTION

Candidate Name  
**MARCHANT, KENNY, E, MR.,**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify)  
State: TX District: 24

Date of Disbursement

MM / DD / YYYY  
05 / 20 / 2019

FEC Identification Number

**C** C00393348

**Transaction ID : SB23.I13110**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. ROSS SPANO FOR CONGRESS**

Mailing Address 10101 BLOOMINGDALE AVENUE  
SUITE 201

City RIVERVIEW State FL Zip Code 33578

Purpose of Disbursement  
POLITICAL CONTRIBUTION

Candidate Name  
**SPANO, VINCENT , ROSS, ,**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify)  
State: FL District: 15

Date of Disbursement

MM / DD / YYYY  
05 / 20 / 2019

FEC Identification Number

**C** C00676668

**Transaction ID : SB23.I13115**

Amount of Each Disbursement this Period

2500.00

Memo Item

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

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

10000.00

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)  
**Innovation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. VOTETIPTON.COM**

Mailing Address P.O. BOX 1582

City: CORTEZ State: CO Zip Code: 81321

Purpose of Disbursement: POLITICAL CONTRIBUTION

Candidate Name: TIPTON, SCOTT, R., MR.,

Office Sought:  House  Senate  President  
 Disbursement For: 2020  Primary  General  Other (specify) ▼  
 State: CO District: 03

Date of Disbursement

MM / DD / YYYY  
05 / 20 / 2019

FEC Identification Number

C00470757

Transaction ID : SB23.I13120

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. YOUNG FOR IOWA, INC.**

Mailing Address P.O. BOX 162

City: VAN METER State: IA Zip Code: 50261

Purpose of Disbursement: POLITICAL CONTRIBUTION

Candidate Name: YOUNG, DAVID, , ,

Office Sought:  House  Senate  President  
 Disbursement For: 2020  Primary  General  Other (specify) ▼  
 State: IA District: 03

Date of Disbursement

MM / DD / YYYY  
05 / 20 / 2019

FEC Identification Number

C00545616

Transaction ID : SB23.I13121

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. ZELDIN FOR CONGRESS**

Mailing Address 47 FLINTLOCK DRIVE

City: SHIRLEY State: NY Zip Code: 11967

Purpose of Disbursement: POLITICAL CONTRIBUTION

Candidate Name: ZELDIN, LEE, M, ,

Office Sought:  House  Senate  President  
 Disbursement For: 2020  Primary  General  Other (specify) ▼  
 State: NY District: 01

Date of Disbursement

MM / DD / YYYY  
05 / 03 / 2019

FEC Identification Number

C00552547

Transaction ID : SB23.I13122

Amount of Each Disbursement this Period

2500.00

Memo Item

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

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

10000.00



**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)  
**Innovation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. ZELDIN FOR CONGRESS**

Mailing Address 47 FLINTLOCK DRIVE

City SHIRLEY State NY Zip Code 11967

Purpose of Disbursement  
POLITICAL CONTRIBUTION

Candidate Name  
**ZELDIN, LEE, M, ,**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: NY District: 01

Date of Disbursement

MM / DD / YYYY  
05 / 03 / 2019

FEC Identification Number

**C** C00552547

**Transaction ID : SB23.I13123**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. NRCC**

Mailing Address 320 1ST STREET SE

City WASHINGTON State DC Zip Code 20003-1838

Purpose of Disbursement  
POLITICAL CONTRIBUTION

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 20 / 2019

FEC Identification Number

**C** C00075820

**Transaction ID : SB23.I13112**

Amount of Each Disbursement this Period

10000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. NRCC**

Mailing Address 320 1ST STREET SE

City WASHINGTON State DC Zip Code 20003-1838

Purpose of Disbursement  
POLITICAL CONTRIBUTION

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 31 / 2019

FEC Identification Number

**C** C00075820

**Transaction ID : SB23.I13113**

Amount of Each Disbursement this Period

5000.00

Memo Item

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

17500.00

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)  
**Innovation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. NRCC**

Mailing Address 320 1ST STREET SE

City  
WASHINGTON

State  
DC

Zip Code  
20003-1838

Purpose of Disbursement  
POLITICAL CONTRIBUTION- BUILDING FUND

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
05 / 31 / 2019

FEC Identification Number

**C** C00075820

**Transaction ID : SB23.I13114**

Amount of Each Disbursement this Period

10000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify)

State: District:

Category/  
Type

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y

FEC Identification Number

**C**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y

FEC Identification Number

**C**

Amount of Each Disbursement this Period

Memo Item

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

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

10000.00

47500.00

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

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NAME OF COMMITTEE (In Full)  
**Innovation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. WARLICK FAMILY YMCA**

Mailing Address 2221 ROBINWOOD ROAD

City GASTONIA State NC Zip Code 28054

Purpose of Disbursement  
CHARITABLE CONTRIBUTION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 15 / 2019

FEC Identification Number

C

Transaction ID : SB29.I13124  
Amount of Each Disbursement this Period

10000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

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

10000.00

10000.00