Democracy Values Fund 801 Penn. Ave. NW, Suite 610 Washington, DC 20004

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April 4, 2014

Federal Election Commission 999 E St. NW Washington, DC 20463

Re: Form 1, Statement of Organization - Unlimited Contributions

To Whom It May Concern:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in *SpeechNow v. FEC*, it intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated expenditures, to federal candidates or committees.

Respectfully submitted,

Michael G. Adams

Treasurer

14031204879

FEC FORM 1

STATEMENT OF ORGANIZATION

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				Office Use Only
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M	
Democracy V	alues Fund	111111111		
	201 Danney	duonio Avo All	<u> </u>	
ADDRESS (number and street)	801 Pennsy Suite 610	rlyania Ave. N	VV	<u></u>
(Check if address is changed)	Washington		DC	20004
		CITY	STATE	ZIP CODE
	RESS (Please provide only one pmichael.ada	e-mail address) ams@dinsmor	re, com	L.1 1 1 1 1 1 1 1 1 1 1
(Check if address is changed)		.1 .1 .1 .1 .1 .1 .1 .1 .1	<u> </u>	1.:1111
COMMITTEE'S WEB PAGE A	ADDRESS (URL)			
(Check if address				
is changed)			<u> </u>	
2. DATE 04 / 4	2014			
3. FEC IDENTIFICATION				
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
I certify that I have examined	d this Statement and to the be	_	f it is true, correc	ct and complete.
Type or Print Name of Treasu	Melan D	G. Adam	<u></u>	
Signature of Treasurer	Nicken	Ille	— Date 02	1 04 2014
NOTE: Submission of false, error	•	on may subject the person signir	-	o the penalties of 2 U.S.C. §437g.
Office Use		For further information Federal Election Communication Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)

	F	EC Fo	rm 1 (Revised 02/2009)	Page 2
	TYPE	OF C	OMMITTEE	
	Can	di <u>da</u> te	e Committee:	
	(a)		This committee is a principal campaign committee. (Complete the candidate information below.)	
	(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Compleinformation below.)	ete the candidate
	Name Cand			
	Cand Party	idate Affiliati	on Senate President	State
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name Cand			
	Part	y Con	nmittee:	
	(d)			emocratic, epublican, etc.) Party.
	Polit	ical A	ction Committee (PAC):	
	(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ected organization is a:
			Corporation Corporation w/o Capital Stock	Labor Organization
			Membership Organization Trade Assaciation	Cooperative
			In addition, this committee is a Lobbyist/Registrant PAC.	
	(f)	\times	This committee supports/opposes more than one Federal candidate, and is NOT a separate segr committee. (i.e., ronconnected committee)	egated fund or party
			In addition, this committee is a Lobbyist/Registrant PAC.	
			In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
	Join	t Fund	Iraising Representative:	
	(g)	П	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
	(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two	or more political
,	,		committees/organizations, none of which is an authorized committee of a federal candidate.	or more pointed.
		Com	mittees Participating in Joint Fundraiser	
		1.		
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		2.	interpretation of the control of the	ust ^e rban (Abbur ^{a)} , ilin ili samali unin Baginasi _{(A} manis III salah men
		3.	FEC ID number C	
		4.	FEC ID number C	.u.·.

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FEC Form 1 (Rev	ised 02/2009)	Page 3
Write or Type Committee	Name	
Democracy '	Values Fund	
6. Name of Any Connec	ted Organization; Affiliateti Committee, Joint Fundraising Repre	sentative, or Leadership PAC Sponsor
<u>none </u>		
Mailing Address		
	<u></u>	
	CITY	STATE ZIP CODE
 -		
Relationship: Conr	nected Organization Affiliated Committee Joint Fundraising	Representative Leadership PAC Sponso
Custodian of Records books and records.	: Identify by name, address (phone number optional) and position	n of the person in possession of committe
Mic	shool G. Adams	
Full Name	chael G. Adams	
Mailing Address	801 Pennsylvania Ave. NW	
	Suite 610	
	_l Washington	DC 20004 -
Title or Position	CITY	STATE ZIP CODE
THE OF FUSILION	on r	SIAIL ZII CODE
Treasurer	Telephone numi	per [202] - [372] - [9115]
	ne and address (phone number optional) of the treasurer of the e.g., assistant treasurer).	committee; and the name and address of
Full Name of Treasurer	chael G. Adams	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Mailing Address	801 Pennsylvania Ave. NW	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
-	Suițe 610	
	_I Washington , , , , , , , , , , , ,	IDC 20004 -
		STATE ZIP CODE
Title or Position		per [202,]-[372,]-[9115]
li cashi ci	IIII Telephone numb	per [272] - [272] - [3713]

	m 1 (Revised 02/2009)	Page 4
Full Name of		**************************************
Designated Agent	Michael G. Adams	
Mailing Address	[801 Pennsylvania Ave. NW	_ 1
	Suite 610	
	Washington	20004 -
	CITY STATE	ZIP CODE
Title or Position	Telephone number 20	2 - 372 - 9115
	r Depositories: List all banks or other depositories in which the committee deposits oxes or maintains funds. Depository, etc.	runus, riolus accounts, rems
safety deposit b Name of Bank,	Depository, etc. Chain Bridge Bank, N.A.	
safety deposit b	Depository, etc. Chain Bridge Bank, N.A.	
safety deposit b Name of Bank,	Depository, etc. [Chain Bridge Bank, N.A. [1445-A Laughlin Ave.,	
safety deposit b Name of Bank,	Depository, etc. Chain Bridge Bank, N.A. 1445-A Laughlin Ave.	
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