#### 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 Climate Reality Action Fund (b) Address (number and street) check if different than previously reported 750 9th Street, NW, Suite 520 (c) City, State and ZIP Code 3. FEC Identification Number Washington, DC 20001 2. Occupation and Name of Employer (for Individual Filers Only) n/a 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 7. TOTAL INDEPENDENT EXPENDITURES ..... Under penalty of penjury 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 David Jenkins 11/4/2016 NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 52 U.S.C. § 30109.

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				PAGE OF	
				on for the purpose of soliciting contributions o solicit contributions from such committee.	
NAME OF FILER (In Full)					
A. Full Name (Last, First, Middle Initial)				Date of Receipt	
Mailing Address				H K / U TO	
City	State	Zip Code		Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С	-	•	a to the teather at a teather to	
Name of Employer			Occupation	L	
B. Full Name (Last, First, Middle Initial)				Date of Receipt	
Mailing Address				Date of Receipt	
City	State	Zip Code		Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С			and the second s	
Name of Employer			Occupation		
C. Full Name (Last, First, Middle Initial)				Date of Receipt	
Mailing Address				THE RESTORED TO THE PROPERTY OF THE PROPERTY O	
City	State	Zip Code		Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С			a de la companya de La companya de la co	
Name of Employer			Occupation		
D. Full Name (Last, First, Middle Initial)					
Mailing Address				Date of Receipt ,此一句句,而《文章》《李章》	
City	State	Zip Code		The sale of the sa	
FEC ID number of contributing				Amount of Each Receipt this Period	
federal political committee.	С		÷	Land to the time the land well and the land	
Name of Employer	. —		Occupation		
SUBTOTAL of Receipts This Page (option	al)			and a separative appear (participal separation), and	
TOTAL This Period (last page carry total t	o Line 6)			A form of the contract the standard and the contract of the co	
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SCHEDULE 5-E TEMIZED INDEPENDENT EXPENDITURES	PAGE 1 OF 2 FOR LINE 7 OF FORM 5		
NAME OF FILER (In Full)	FOR LINE 7 OF FORM 3		
Climate Reality Action Fund			
·			
Full Name (Last, First, Middle Initial) of Payee	Date of Public Distribution/Dissemination		
360 Campaign Consulting LLC			
Mailing Address	10 27 2016		
305 Saranac Way	Amount		
City State Zip Code	481.61		
Ithaca NY 14850	The state of the s		
Purpose of Expenditure Category/	Office Sought: House State: FL		
Phone banking Type	Senate District:		
Name of Federal Candidate Supported or Opposed by Expenditure:	✓ President		
Hillary Clinton	Check One: Support Oppose		
Calendar Year-To-Date Per Election 1,020.13	Disbursement For: Primary General		
for Office Sought	Other (specify)		
Full Name (Last, First, Middle Initial) of Payee	Date of Public Distribution/Dissemination		
360 Campaign Consulting LLC	10 27 2016		
Mailing Address	10 27 2016		
305 Saranac Way	Amount		
City State Zip Code	481.61		
Ithaca NY 14850	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1		
Purpose of Expenditure Category/ Phone banking Type	Office Sought: House State: FL		
	✓ Senate  President  District:		
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy	Check One: Support Oppose		
T action Mulphy			
Calendar Year-To-Date Per Election 1,020.13 for Office Sought	Disbursement For: Primary General		
	Other (specify)		
Full Name (Last, First, Middle Initial) of Payee  Climate Reality Action Fund	Date of Public Distribution/Dissemination		
Mailing Address	10 27 +2016		
750 9th St NW Suite 520	Amount		
City State Zip Code	Amount		
Washington DC 20001	211.09		
Purpose of Expenditure Category/	Office Sought: House State: FL		
Staff campaign activity  Type	Senate		
Name of Federal Candidate Supported or Opposed by Expenditure:	President District:		
Hillary Clinton	Check One: Support Oppose		
Calendar Year-To-Date Per Election	Disbursement For: Primary General		
for Office Sought , 1,231.22	Other (specify)		
(a) SUBTOTAL of Itemized Independent Expenditures	···· <b>1</b> 174,31		
(A) OUDTOTAL of Helback and helback and all E	a an		
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures	نهري 3 - 10		
(carry total from last page forward to Line 7)	•••• ► • • • • • • • • • • • • • • • •		

SCHEDULE 5-E TEMIZED INDEPENDENT EXPENDITURES	PAGE 2 OF 2 FOR LINE 7 OF FORM 5					
NAME OF FILER (In Full) Climate Reality Action Fund						
Full Name (Last, First, Middle Initial) of Payee						
Climate Reality Action Fund		Date of Public Distribution/Dissemination				
· ·		10 27 2016				
Mailing Address 750 9th St NW Suite 520				i Du# / Seathword Se		
	04-4-	7. 0.1.		Amount		
City S Washington	State DC	Zip Code 20001		211.09		
Purpose of Expenditure		Category/	Offic	ce Sought: House State: FL .		
Staff campaign activity		Туре		Senate District:		
Name of Federal Candidate Supported or Opposed by	y Expendi	ture:		President		
Patrick Murphy			Che	ck One: Support Oppose		
Calendar Year-To-Date Per Election for Office Sought	ı	1,231.22	Disb	ursement For: Primary General Other (specify)		
Full Name (Last, First, Middle Initial) of Payee		<u> </u>		Date of Public Distribution/Dissemination		
				n w tob∀a toyfer∀Y		
Mailing Address						
				Amount		
City	State	Zip Code				
Purpose of Expenditure		Category/ Type	Offic	ce Sought: House State: Senate District: District:		
Name of Federal Candidate Supported or Opposed by	y Expendi	ture:	Che	President ck One: Support Oppose		
Calendar Year-To-Date Per Election for Office Sought	,	e de la companya de l	Disb	ursement For: Primary General Other (specify)		
Full Name (Last, First, Middle Initial) of Payee				Date of Public Distribution/Dissemination		
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Mailing Address				Amount		
City	State	Zip Code		i digili kangan mara denga bili. Salah Marangan esteka esteka esteka est		
Purpose of Expenditure		Category/ Type	Offic	e Sought: House State: Senate		
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton				President District:  Check One: Support Doppose		
Calendar Year-To-Date Per Election for Office Sought	7		Disb	ursement For: Primary General Other (specify)		
(a) SUBTOTAL of Itemized Independent Expenditures			···· <b>&gt;</b> <sup>?</sup>	211.09		
(b) SUBTOTAL of Unitemized Independent Expenditure	!S		···· <b>&gt;</b> .	Control Contro		
(c) TOTAL Independent Expenditures(carry total from last page forward to Line 7)	•••••		···· <b>&gt;</b>	1,385.40		

# Via E-Mail

(3/2015)

### Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. Date of Receipt Hand Delivered Date of Receipt Postmarked **USPS First Class Mail** Postmarked (R/C) USPS Registered/Certified Postmarked **USPS Priority Mail** Postmarked **USPS Priority Mail Express** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery** Date of Receipt Received from House Records & Registration Office Date of Receipt Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked 5-Mail Other (Specify): **PREPARER**