

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 National Association of Realtors Congressional Fund

ADDRESS (number and street) 430 North Michigan Avenue Chicago IL 60611-4011

2. FEC IDENTIFICATION NUMBER C C00488742 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 (M2) X, May 20 (M5), Aug 20 (M8), Nov 20 (M11), Mar 20 (M3), Jun 20 (M6), Sep 20 (M9), Dec 20 (M12), 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 M / D 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 M / D D D / Y Y Y Y Y Y in the State of.

5. Covering Period 01 / 01 / 2014 through 01 / 31 / 2014

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 Michael C McGrew

Signature of Treasurer Michael C McGrew [Electronically Filed] Date 03 / 19 / 2014

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

Office Use Only table with 7 columns and 1 row. FEC FORM 3X Rev. 12/2004

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**National Association of Realtors Congressional Fund**

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="2014"/>	<input type="text" value="30495.61"/>	<input type="text" value="30495.61"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="30495.61"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="1000161.60"/>	<input type="text" value="1000161.60"/>
(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="1030657.21"/>	<input type="text" value="1030657.21"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="51400.58"/>	<input type="text" value="51400.58"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="979256.63"/>	<input type="text" value="979256.63"/>
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**National Association of Realtors Congressional Fund**

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).....	1000161.60	1000161.60
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	1000161.60	1000161.60
(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) .....	1000161.60	1000161.60
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))..... ▶	1000161.60	1000161.60
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	1000161.60	1000161.60

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

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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 .....	20880.58	20880.58
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	20880.58	20880.58
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	30520.00	30520.00
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)) ..	51400.58	51400.58
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	51400.58	51400.58

**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) .....	1000161.60	1000161.60
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	1000161.60	1000161.60
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	20880.58	20880.58
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	20880.58	20880.58

: 97 `A =G7 9 @C B9CI G`H9LH`F9 @ H98 `HC `5 `F9DCFH`G7 <98I @ `CF `H9A =N5 HCB

Form/Schedule: F3XA  
Transaction ID :

3/19/2014: We are amending our February 2014 Monthly Report to update the beginning balances for the current month and year-to-date totals at the start of the 2014 year. We inadvertently carried forward the incorrect ending balances from our 2013 year-end report to the beginning balances on our 2014 February Monthly Report. This report reflects the correct amount of \$30,495.61 for both the current and YTD beginning balances, and therefore, the totals on Page 2, Line 8, Cash on Hand are properly reflected. Please note that all January line items were reported correctly. This correction is for cash balancing purposes only. For Line 21b of this report, the disbursement to 720 Strategies LLC on 1/16/2014 in the amount of \$20,718.98 represents advance costs for independent expenditures that were not publicly disseminated during this reporting period, but instead will be disseminated in future reporting periods.

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 10
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**National Association of Realtors Congressional Fund**

Full Name (Last, First, Middle Initial)  
**A. NATIONAL ASSOCIATION OF REALTORS**

Mailing Address 430 N Michigan Avenue

City Chicago	State IL	Zip Code 60611-4011
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FEC ID number of contributing federal political committee. **C**

Name of Employer Corporation	Occupation n/a
---------------------------------	-------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000080.80

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 15 / 2014  
**Transaction ID : ACF0106CDD7CE451AA2A**

Amount of Each Receipt this Period  
80.80

In-Kind: administrative & compliance support

Full Name (Last, First, Middle Initial)  
**B. NATIONAL ASSOCIATION OF REALTORS**

Mailing Address 430 N Michigan Avenue

City Chicago	State IL	Zip Code 60611-4011
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FEC ID number of contributing federal political committee. **C**

Name of Employer Corporation	Occupation n/a
---------------------------------	-------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000080.80

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 15 / 2014  
**Transaction ID : A543143F8FE784A7AA29**

Amount of Each Receipt this Period  
1000000.00

Full Name (Last, First, Middle Initial)  
**C. NATIONAL ASSOCIATION OF REALTORS**

Mailing Address 430 N Michigan Avenue

City Chicago	State IL	Zip Code 60611-4011
-----------------	-------------	------------------------

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

Name of Employer Corporation	Occupation n/a
---------------------------------	-------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000161.60

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 31 / 2014  
**Transaction ID : A3DFBFA4AE15D40D0ABE**

Amount of Each Receipt this Period  
80.80

In-Kind: administrative & compliance support

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000161.60
<b>TOTAL</b> This Period (last page this line number only).....	1000161.60

**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

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)  
**National Association of Realtors Congressional Fund**

Full Name (Last, First, Middle Initial)

**A. 720 Strategies LLC**

Mailing Address 1111 19th St NW

City Washington State DC Zip Code 20036-3603

Purpose of Disbursement  
Advance payment for website design & maintenance (see memo entry for explanation)  
Candidate Name

Category/Type

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

Date of Disbursement

MM / DD / YYYY  
01 / 16 / 2014

Transaction ID : B1CFCCD19275C469CB35

Amount of Each Disbursement this Period

20718.98

Full Name (Last, First, Middle Initial)

**B. NATIONAL ASSOCIATION OF REALTORS**

Mailing Address 430 N Michigan Avenue

City Chicago State IL Zip Code 60611-4011

Purpose of Disbursement  
In-Kind: administrative & compliance support  
Candidate Name

Category/Type

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

Date of Disbursement

MM / DD / YYYY  
01 / 15 / 2014

Transaction ID : B3FC334B544B2416BB6A

Amount of Each Disbursement this Period

80.80

Full Name (Last, First, Middle Initial)

**C. NATIONAL ASSOCIATION OF REALTORS**

Mailing Address 430 N Michigan Avenue

City Chicago State IL Zip Code 60611-4011

Purpose of Disbursement  
In-Kind: administrative & compliance support  
Candidate Name

Category/Type

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

Date of Disbursement

MM / DD / YYYY  
01 / 31 / 2014

Transaction ID : BB972B6DDB0854D6B9D4

Amount of Each Disbursement this Period

80.80

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

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

20880.58

20880.58



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>National Association of Realtors Congressional Fund</b>		FEC IDENTIFICATION NUMBER <b>C</b> C00488742
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 <b>720 Strategies LLC</b>		
Mailing Address <b>1111 19th St NW</b>		
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20036-3603</b>
Purpose of Expenditure <b>Website infrastructure costs</b>	Category/Type	
Name of Federal Candidate <b>Rep. Pete A. Sessions</b>	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate
Calendar Year-To-Date Per Election for Office Sought		District: <b>32</b> State: <b>TX</b>
30520.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
2014		

Date of Public Distribution/Dissemination MM / DD / YYYY <b>01 / 16 / 2014</b>
Amount <b>2000.00</b>
Transaction ID : <b>E851AC9E4E1D34B81818</b>
Date of Disbursement or Obligation MM / DD / YYYY

Full Name of Payee <b>720 Strategies LLC</b>		
Mailing Address <b>1111 19th St NW</b>		
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20036-3603</b>
Purpose of Expenditure <b>Website design costs</b>	Category/Type	
Name of Federal Candidate <b>Rep. Pete A. Sessions</b>	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate
Calendar Year-To-Date Per Election for Office Sought		District: <b>32</b> State: <b>TX</b>
30520.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
2014		

Date of Public Distribution/Dissemination MM / DD / YYYY <b>01 / 16 / 2014</b>
Amount <b>3500.00</b>
Transaction ID : <b>E62551033D7224C95BC6</b>
Date of Disbursement or Obligation MM / DD / YYYY

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<b>5500.00</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> 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.

*Michael McGrew*  
Signature

[Electronically Filed] Date **03 / 19 / 2014**

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>National Association of Realtors Congressional Fund</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00488742
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 <b>Meath Media Group</b>	Date of Public Distribution/Dissemination MM / DD / YYYY <b>01 / 16 / 2014</b>
Mailing Address 4441 Kingle St., NW	Amount <b>25020.00</b>
City: Washington      State: DC      Zip Code: 20016-3578	<b>Transaction ID : EFA0FD63C5380490AB57</b>
Purpose of Expenditure Online video production	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Rep. Pete A. Sessions	<input checked="" type="checkbox"/> Support      Office Sought: <input checked="" type="checkbox"/> House      District: <u>32</u> <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate      State: <u>TX</u>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

30520.00

Full Name of Payee	Date of Public Distribution/Dissemination MM / DD / YYYY
Mailing Address	Amount
City:      State:      Zip Code:	Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure	Category/Type
Name of Federal Candidate	<input type="checkbox"/> Support      Office Sought: <input type="checkbox"/> House      District: _____ <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate      State: _____
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>25020.00</b>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
<b>(c) TOTAL</b> Independent Expenditures..... ▶	<b>30520.00</b>

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.

*Michael McGrew*      [Electronically Filed]      Date **03 / 19 / 2014**

Signature \_\_\_\_\_