

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

Make America Number 1

ADDRESS (number and street) 2 Roosevelt Avenue

Check if different than previously reported. (ACC) Port Jefferson Sta NY 11776

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

C C00575373

3. 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:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|---|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input checked="" type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on 11 / 08 / 2016 in the State of

- (d) 30-Day POST-Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on / / in the State of

5. Covering Period 10 / 01 / 2016 through 10 / 19 / 2016

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

James, Jacquelyn, , ,

Type or Print Name of Treasurer _____

Signature of Treasurer James, Jacquelyn, , , [Electronically Filed] Date 10 / 27 / 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.

Office Use Only									
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Make America Number 1

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"/>		7494987.69
(b) Cash on Hand at Beginning of Reporting Period.....	4024771.50	
(c) Total Receipts (from Line 19)	25.00	8549380.29
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	4024796.50	16044367.98
7. Total Disbursements (from Line 31).....	2141762.40	14181553.88
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	1883034.10	1862814.10
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

Write or Type Committee Name

Make America Number 1

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).....	0.00	5333000.00
(ii) Unitemized	25.00	5502.31
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	25.00	5338502.31
(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)	25.00	5338502.31
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	26682.29
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	3184195.69
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)).....▶	25.00	8549380.29
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	25.00	8549380.29

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	399190.40	2135311.42
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	399190.40	2135311.42
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)	1742572.00	10082629.43
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).....	0.00	1963613.03
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)) ..	2141762.40	14181553.88
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2141762.40	14181553.88

DETAILED SUMMARY PAGE
of Disbursements

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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)	25.00	5338502.31
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	25.00	5338502.31
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	399190.40	2135311.42
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	26682.29
38. Net Operating Expenditures (subtract Line 37 from Line 36)	399190.40	2108629.13

**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

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)

Make America Number 1

Full Name (Last, First, Middle Initial)

A. GIDLEY, J. HOGAN, , ,

Mailing Address 2507 RIGBY DRIVE

City
COLUMBIA

State
SC

Zip Code
29204

Purpose of Disbursement
COMMUNICATIONS STRATEGY CONSULTING

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
10			04			2016			

FEC Identification Number

C []

Transaction ID : SB9865210

Amount of Each Disbursement this Period

[] 11000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CAMBRIDGE ANALYTICA LLC

Mailing Address 1 WALES ALLEY
STE 300

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
CAMPAIGN MANAGEMENT CONSULTING SVCS

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
10			03			2016			

FEC Identification Number

C []

Transaction ID : SB986201

Amount of Each Disbursement this Period

[] 301763.00

Memo Item

Full Name (Last, First, Middle Initial)

C. CAMBRIDGE ANALYTICA LLC

Mailing Address 1 WALES ALLEY
STE 300

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
WEB SERVICES

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
10			05			2016			

FEC Identification Number

C []

Transaction ID : SB986201_7!

Amount of Each Disbursement this Period

[] 2145.00

Memo Item

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

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

[] 314908.00

[]

**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)	PAGE 7 OF 14
	<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	

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)
Make America Number 1

Full Name (Last, First, Middle Initial) A. CAMBRIDGE ANALYTICA LLC	Date of Disbursement M M / D D / Y Y Y Y Y 10 / 19 / 2016
Mailing Address 1 WALES ALLEY STE 300	FEC Identification Number C [] Transaction ID : SB986201_87 Amount of Each Disbursement this Period [] 20000.00 <input type="checkbox"/> Memo Item
City ALEXANDRIA State VA Zip Code 22314	
Purpose of Disbursement DATA ACQUISITION SERVICES Candidate Name Office Sought: <input type="checkbox"/> House Disbursement For: <input type="checkbox"/> Senate <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼ State: District:	

Full Name (Last, First, Middle Initial) B. DENTONS US LLP	Date of Disbursement M M / D D / Y Y Y Y Y 10 / 19 / 2016
Mailing Address 1301 K STREET NW STE 600	FEC Identification Number C [] Transaction ID : SB9896636 Amount of Each Disbursement this Period [] 6539.50 <input type="checkbox"/> Memo Item
City WASHINGTON State DC Zip Code 20005	
Purpose of Disbursement LEGAL CONSULTING Candidate Name Office Sought: <input type="checkbox"/> House Disbursement For: <input type="checkbox"/> Senate <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼ State: District:	

Full Name (Last, First, Middle Initial) C. FIGHT FOR SMALL.COM	Date of Disbursement M M / D D / Y Y Y Y Y 10 / 06 / 2016
Mailing Address 5420 N. COLLEGE AVENUE STE LL2	FEC Identification Number C [] Transaction ID : SB84848686 Amount of Each Disbursement this Period [] 499.00 <input type="checkbox"/> Memo Item
City INDIANAPOLIS State IN Zip Code 46220	
Purpose of Disbursement WEB SERVICES Candidate Name Office Sought: <input type="checkbox"/> House Disbursement For: <input type="checkbox"/> Senate <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼ State: District:	

SUBTOTAL of Disbursements This Page (optional)..... ▶	[] 27038.50
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)
Make America Number 1

Full Name (Last, First, Middle Initial) A. GREENBERG & TRAURIG LLP		Date of Disbursement MM / DD / YYYY 10 / 05 / 2016
Mailing Address 200 PARK AVENUE		FEC Identification Number C [] Transaction ID : SB55550004
City NEW YORK	State NY	Zip Code 10166
Purpose of Disbursement LEGAL CONSULTING		Amount of Each Disbursement this Period [] 41972.50
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:		

Full Name (Last, First, Middle Initial) B. INDIANRUNNER INC.		Date of Disbursement MM / DD / YYYY 10 / 17 / 2016
Mailing Address 432 BEIRUT AVENUE		FEC Identification Number C [] Transaction ID : SB980147530
City PACIFIC PALISADES	State CA	Zip Code 90272
Purpose of Disbursement AUDIO/VIDEO PRODUCTION - PRE-PAID		Amount of Each Disbursement this Period [] 15000.00
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:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY [] / [] / []
Mailing Address		FEC Identification Number C []
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period []
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:		

SUBTOTAL of Disbursements This Page (optional).....▶	56972.50
TOTAL This Period (last page this line number only).....▶	398919.00

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

NAME OF COMMITTEE (In Full) Make America Number 1	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00575373 </div>
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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 <input type="checkbox"/> Memo Item CAMBRIDGE ANALYTICA LLC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 06 / 2016
Mailing Address 1 WALES ALLEY STE 300			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 11000.00 </div>
City ALEXANDRIA	State VA	Zip Code 22314	
Purpose of Expenditure MEDIA		Category/Type 	Transaction ID : SE98532011 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 03 / 2016
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 1498666.50 </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item CAMBRIDGE ANALYTICA LLC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 06 / 2016
Mailing Address 1 WALES ALLEY STE 300			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 190000.00 </div>
City ALEXANDRIA	State VA	Zip Code 22314	
Purpose of Expenditure MEDIA		Category/Type 	Transaction ID : SE98532011_B Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 05 / 2016
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 1498666.50 </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 201000.00 </div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y _____ </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y _____ </div>

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.

JAMES, JACQUELYN, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
10 / 27 / 2016

Signature

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

NAME OF COMMITTEE (In Full) Make America Number 1	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00575373 </div>
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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 <input type="checkbox"/> Memo Item CAMBRIDGE ANALYTICA LLC		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 09 / 2016	
Mailing Address 1 WALES ALLEY STE 300		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">111072.00</div> Transaction ID : SE9853201102021 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 06 / 2016	
City ALEXANDRIA	State VA		Zip Code 22314
Purpose of Expenditure MEDIA			Category/Type
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: 00 State:
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">1498666.50</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item CAMBRIDGE ANALYTICA LLC		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 09 / 2016	
Mailing Address 1 WALES ALLEY STE 300		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">200000.00</div> Transaction ID : SE9853201102021_B Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 06 / 2016	
City ALEXANDRIA	State VA		Zip Code 22314
Purpose of Expenditure MEDIA			Category/Type
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: 00 State:
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">1498666.50</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">311072.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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.

JAMES, JACQUELYN, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
10 / 27 / 2016

Signature

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

NAME OF COMMITTEE (In Full) Make America Number 1	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00575373 </div>
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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 <input type="checkbox"/> Memo Item INDIANRUNNER INC.	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 06 / 2016						
Mailing Address 432 BEIRUT AVENUE	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 15000.00 </div> Transaction ID : SE555500 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 03 / 2016						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>PACIFIC PALISADES</td> <td>CA</td> <td>90272</td> </tr> </table>		City	State	Zip Code	PACIFIC PALISADES	CA	90272
City		State	Zip Code				
PACIFIC PALISADES	CA	90272					
Purpose of Expenditure AUDIO/VIDEO PRODUCTION							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose CLINTON, HILLARY, RODHAM, ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: <u>00</u> State: _____						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> 1498666.50 </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

Full Name of Payee <input type="checkbox"/> Memo Item INDIANRUNNER INC.	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 09 / 2016						
Mailing Address 432 BEIRUT AVENUE	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 25000.00 </div> Transaction ID : SE555500_B Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 06 / 2016						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>PACIFIC PALISADES</td> <td>CA</td> <td>90272</td> </tr> </table>		City	State	Zip Code	PACIFIC PALISADES	CA	90272
City		State	Zip Code				
PACIFIC PALISADES	CA	90272					
Purpose of Expenditure AUDIO/VIDEO PRODUCTION							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose CLINTON, HILLARY, RODHAM, ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: <u>00</u> State: _____						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> 1498666.50 </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 40000.00 </div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 0.00 </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 40000.00 </div>

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.

JAMES, JACQUELYN, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
10 / 27 / 2016

Signature

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

NAME OF COMMITTEE (In Full) Make America Number 1	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00575373 </div>
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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 <input type="checkbox"/> Memo Item CAMBRIDGE ANALYTICA LLC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 18 / 2016		
Mailing Address 1 WALES ALLEY STE 300			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"> 250000.00 </div>		
City ALEXANDRIA	State VA	Zip Code 22314			
Purpose of Expenditure MEDIA		Category/Type 	Transaction ID : SE98532011_8520255 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 17 / 2016		
Name of Federal Candidate: <input type="checkbox"/> Support CLINTON, HILLARY, RODHAM, , <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought 1789166.50			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <input type="checkbox"/> Memo Item GLITTERING STEEL LLC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 18 / 2016		
Mailing Address 2776 S. ARLINGTON MILL DRIVE STE 261			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"> 40500.00 </div>		
City ARLINGTON	State VA	Zip Code 22206			
Purpose of Expenditure MEDIA		Category/Type 	Transaction ID : SE9853201196 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 17 / 2016		
Name of Federal Candidate: <input type="checkbox"/> Support CLINTON, HILLARY, RODHAM, , <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought 1789166.50			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"> 290500.00 </div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"> 0.00 </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"> 290500.00 </div>

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.

JAMES, JACQUELYN, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
10 / 27 / 2016

Signature

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

NAME OF COMMITTEE (In Full) Make America Number 1	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00575373 </div>
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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 <input type="checkbox"/> Memo Item CAMBRIDGE ANALYTICA LLC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 21 / 2016</div>
Mailing Address 1 WALES ALLEY STE 300			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">400000.00</div>
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE98532011000444 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 17 / 2016</div>
Purpose of Expenditure MEDIA		Category/Type 	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">2689166.50</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item CAMBRIDGE ANALYTICA LLC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 21 / 2016</div>
Mailing Address 1 WALES ALLEY STE 300			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">250000.00</div>
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE9853205553001 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 19 / 2016</div>
Purpose of Expenditure MEDIA		Category/Type 	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">2689166.50</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">650000.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

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.

JAMES, JACQUELYN, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

10 / 27 / 2016

Signature

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

NAME OF COMMITTEE (In Full) Make America Number 1	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00575373 </div>
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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 <input type="checkbox"/> Memo Item CAMBRIDGE ANALYTICA LLC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 21 / 2016
Mailing Address 1 WALES ALLEY STE 300	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">200000.00</div> Transaction ID : SE985330303 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 19 / 2016
City ALEXANDRIA State VA Zip Code 22314	
Purpose of Expenditure MEDIA Category/Type 	
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose CLINTON, HILLARY, RODHAM, ,	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 2689166.50	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item GLITTERING STEEL LLC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 21 / 2016
Mailing Address 2776 S. ARLINGTON MILL DRIVE STE 261	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">50000.00</div> Transaction ID : SE985330402854 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 17 / 2016
City ARLINGTON State VA Zip Code 22206	
Purpose of Expenditure MEDIA Category/Type 	
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose CLINTON, HILLARY, RODHAM, ,	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 2689166.50	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">250000.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">1742572.00</div>

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.

JAMES, JACQUELYN, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
10 / 27 / 2016

Signature