

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

RECEIVED  
FEC MAIL CENTER  
2016 APR 18 AM 9:33  
Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT ▼** Example: If typing, type over the lines. 12FE4M5

FEMINIST MAJORITY PAC

ADDRESS (number and street) 1600 WILSON BLVD.  
SUITE 801  
ARLINGTON VA 22209

Check if different than previously reported. (ACC)

2. **FEC IDENTIFICATION NUMBER ▼** C00377168 **CITY ▲** **STATE ▲** **ZIP CODE ▲**

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:

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  /  /  in the State of

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

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

Election on  /  /  in the State of

5. Covering Period 01 / 01 / 2016 through 03 / 31 / 2016

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 ELEANOR SMEAL, ASSISTANT TREASURER

Signature of Treasurer Elean Smeal Date 04 / 15 / 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.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

FEMINIST MAJORITY PAC

Report Covering the Period:

From:

01 ' 01 ' 2016

To:

03 ' 31 ' 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2016	2016	20313.49
(b) Cash on Hand at Beginning of Reporting Period.....	20313.49	
(c) Total Receipts (from Line 19).....	1525.00	1525.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	21838.49	21838.49
7. Total Disbursements (from Line 31).....	2355.00	2355.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	19483.49	19483.49
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0	

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

20160331 14:40:00

**DETAILED SUMMARY PAGE**  
of Receipts

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Page 3

Write or Type Committee Name

**FEMINIST MAJORITY PAC**

Report Covering the Period: From:

**01 ' 01 ' 2016**

To:

**03 ' 31 ' 2016**

**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).....

**1,000.00**

**1,000.00**

(ii) Unitemized.....

**525.00**

**525.00**

(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

**1,525.00**

**1,525.00**

(b) Political Party Committees.....

**0**

**0**

(c) Other Political Committees (such as PACs).....

**0**

**0**

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

**1,525.00**

**1,525.00**

12. Transfers From Affiliated/Other Party Committees.....

**0**

**0**

13. All Loans Received.....

**0**

**0**

14. Loan Repayments Received.....

**0**

**0**

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

**0**

**0**

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

**0**

**0**

17. Other Federal Receipts (Dividends, Interest, etc.).....

**0**

**0**

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account (from Schedule H3).....

**0**

**0**

(b) Levin Funds (from Schedule H5).....

**0**

**0**

(c) Total Transfers (add 18(a) and 18(b))..

**0**

**0**

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

**1,525.00**

**1,525.00**

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

**1,525.00**

**1,525.00**

NON-FEDERAL RECEIPTS



**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) .....	1,525 <sup>00</sup>	1,525 <sup>00</sup>
34. Total Contribution Refunds (from Line 28(d)) .....	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	1,525 <sup>00</sup>	1,525 <sup>00</sup>
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	355 <sup>00</sup>	355 <sup>00</sup>
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	355 <sup>00</sup>	355 <sup>00</sup>

NON-PROFIT CORPORATION

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 7  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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)  
FEMINIST MAJORITY PAC

**A.** Full Name (Last, First, Middle Initial)  
SHERWOOD, NANCY

Mailing Address  
P.O. BOX 549

City  
HEATHSVILLE, VA State Zip Code  
22473

FEC ID number of contributing federal political committee.  
C

Name of Employer  
NIA - RETIRED Occupation  
NIA

Receipt For:  
 Primary  General  
 Other (specify)  Aggregate Year-to-Date   
1,000.00

Date of Receipt  
01 / 19 / 2016

Amount of Each Receipt this Period  
1,000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.  
C

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)  Aggregate Year-to-Date

Date of Receipt

Amount of Each Receipt this Period

Memo Item

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.  
C

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)  Aggregate Year-to-Date

Date of Receipt

Amount of Each Receipt this Period

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... 1,000.00

**TOTAL** This Period (last page this line number only)..... 1,000.00


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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.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Date of Receipt
Postmarked	
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <b>Fed Ex</b>	Shipping Date <b>4/15/16</b>
Next Business Day Delivery	<input checked="" type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
 PREPARER	<b>4/18/16</b> DATE PREPARED

(3/2015)

NON-PROFIT CORPORATION