

# 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 <b>AFL-CIO COMMITTEE ON POLITICAL EDUCATION TREASURY FUND</b>		3. FEC Identification Number <b>C</b> C90016106
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 815 16TH ST. NW		
(c) City, State and ZIP Code WASHINGTON DC 20006		
2. Occupation and Name of Employer (for Individual Filers Only)		

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  /  /

6. TOTAL CONTRIBUTIONS.....  0.00  
 7. TOTAL INDEPENDENT EXPENDITURES .....  25275.00

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 any political party committee or its agent.

<b>TYPE OR PRINT NAME OF PERSON COMPLETING FORM</b>	<b>SIGNATURE</b>	<b>DATE</b>
Shuler, Elizabeth, , ,	Shuler, Elizabeth, , ,	11/02/2016

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

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
AFL-CIO COMMITTEE ON POLITICAL EDUCATION TREASURY FUND

Full Name (Last, First, Middle Initial) of Payee ShareProgress		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 01 / 2016	
Mailing Address 88 King Unit 523		Amount 25000.00	
City San Francisco	State CA	Zip Code 94107	
Purpose of Expenditure Online Advertising		Category/ Type 004	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 184568.94		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.4309

Full Name (Last, First, Middle Initial) of Payee Upland IX, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 24 / 2016	
Mailing Address 45 Main St., Ste. 520		Amount 25.00	
City Brooklyn	State NY	Zip Code 11201	
Purpose of Expenditure Digital Communications		Category/ Type 004	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 86818.94		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.4310

Full Name (Last, First, Middle Initial) of Payee Upland IX, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 31 / 2016	
Mailing Address 45 Main St., Ste. 520		Amount 250.00	
City Brooklyn	State NY	Zip Code 11201	
Purpose of Expenditure Digital Communications		Category/ Type 004	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 159568.94		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.4312

(a) SUBTOTAL of Itemized Independent Expenditures.....	25275.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	25275.00