



FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

RQ-1

August 9, 2016

RICHARD PHILLIPS, TREASURER
NATIONAL TAXPAYERS UNION CAMPAIGN
FUND
25 MASSACHUSETTS AVENUE NORTHWEST
SUITE 140
WASHINGTON, DC 20001

Response Due Date
09/13/2016

IDENTIFICATION NUMBER: C00298141

REFERENCE: AMENDED STATEMENT OF ORGANIZATION, RECEIVED 07/13/2016

Dear Treasurer:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. This notice requests information essential to full public disclosure of your federal election campaign finances. **Failure to adequately respond by the response date noted above could result in an audit or enforcement action.** Additional information is needed for the following 1 item(s):

- The Statement of Organization (FEC Form 1) that your committee submitted was not signed by the Treasurer or Designated Agent. Please re-submit your filing to include the proper signature. (11 CFR §102.2(a))

Please note, you will not receive an additional notice from the Commission on this matter. Adequate responses must be received by the Commission on or before the due date noted above to be taken into consideration in determining whether audit action will be initiated. Failure to comply with the provisions of the Act may also result in an enforcement action against the committee. Any response submitted by your committee will be placed on the public record and will be considered by the Commission prior to taking enforcement action. **Requests for extensions of time in which to respond will not be considered.**

Electronic filers must file amendments (to include statements, designations and reports) in an electronic format and must submit an amended report in its entirety, rather than just those portions of the report that are being amended. If you should have any questions regarding this matter or wish to verify the adequacy of your response, please contact me on our toll free number (800) 424-9530 (at the prompt press 5 to reach the Reports Analysis Division) or my local number (202) 694-1175.

20160809 10:00:00 AM

**FEC
FORM 1**

**STATEMENT OF
ORGANIZATION**

RECEIVED
FEC MAIL CENTER
2016 AUG 25 PM 12:10

Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines.

12FE4M5

NATIONAL TAXPAYERS UNION CAMPAIGN FUND

ADDRESS (number and street)

(Check if address is changed)

25 MASSACHUSETTS AVENUE NORTHWEST

SUITE 140

WASHINGTON DC 20001

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

PRESIDENT@NTU.ORG

Optional Second E-Mail Address

P.GALLIVAN@NTU.ORG

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE

3. FEC IDENTIFICATION NUMBER ▶

C00298141

4. IS THIS STATEMENT

NEW (N)

OR

X

AMENDED (A)

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

Type or Print Name of Treasurer

Richard R. Phillips

Signature of Treasurer



Date

08/12/2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office
Use
Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 06/2012)

1-800-424-9530

5. TYPE OF COMMITTEE

Candidate Committee:

- (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate _____

Candidate Party Affiliation	Office Sought:	House	Senate	President	State District
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- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

Party Committee:

- (d) This committee is a _____ (National, State or subordinate) committee of the _____ (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is at:

Corporation	Corporation w/o Capital Stock	Labor Organization
Membership Organization	Trade Association	Cooperative

In addition, this committee is a Lobbyist/Registrant PAC.

- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)

In addition, this committee is a Lobbyist/Registrant PAC.

In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1. _____ FEC ID number C
2. _____ FEC ID number C
3. _____ FEC ID number C
4. _____ FEC ID number C

20100808 08:00:00 AM

Write or Type Committee Name

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Mailing Address

CITY

STATE

ZIP CODE

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

Mailing Address

Title or Position

CITY

STATE

ZIP CODE

Telephone number

_____-_____-_____

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name
of Treasurer

RICHARD PHILLIPS

Mailing Address

2610 PARK AVENUE

MUSCATINE

CITY

STATE

ZIP CODE

Title or Position

TREASURER

Telephone number

800-334-8920

Full Name of Designated Agent

PATRICK GALIVAN

Mailing Address

25 MASSACHUSETTS AVENUE NORTHWEST
SUITE 1140
WASHINGTON D.C. 20001

CITY

STATE

ZIP CODE

Title or Position

OFFICE MANAGER / PAC ADMINISTRATOR

Telephone number

203-299-8661

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

[Empty line for Name of Bank, Depository, etc.]

Mailing Address

[Empty lines for Mailing Address]

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

[Empty line for Name of Bank, Depository, etc.]

Mailing Address

[Empty lines for Mailing Address]

CITY

STATE

ZIP CODE

NO. OF BANK DEPOSITORIES

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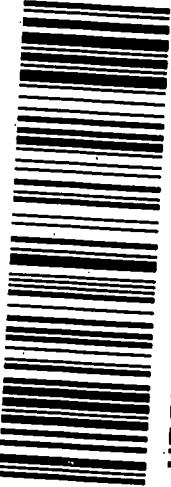
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The FEC added this page to the end of this filing to indicate how it was received.

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8/23/16

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PREPARER
(3/2015)



8/25/16
DATE PREPARED

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