

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Edmonds Associates, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 0 8

Mailing Address
8221 Old Courthouse Road, Suite 2

Amount
48103.00

City State Zip Code
Vienna VA 22182

Transaction ID: 26745269
Office Sought: House State: _____
 Senate District: _____
 Presidential

Purpose of Expenditure Category/Type
TV Advertising 004

Name of Federal Candidate supported or Opposed by expenditure:
Barack Obama

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
7208858.51

Disbursement For: Primary General
 Other (specify) : _____
2008
[MEMO ITEM]
TV Advertising

Full Name (Last, First, Middle, Initial) of Payee
Edmonds Associates, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 0 8

Mailing Address
8221 Old Courthouse Road, Suite 2

Amount
52917.00

City State Zip Code
Vienna VA 22182

Transaction ID: 26745484
Office Sought: House State: _____
 Senate District: _____
 Presidential

Purpose of Expenditure Category/Type
TV Advertising 004

Name of Federal Candidate supported or Opposed by expenditure:
Barack Obama

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
7261775.51

Disbursement For: Primary General
 Other (specify) : _____
2008
[MEMO ITEM]
TV Advertising

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL 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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 6 / 2 9 / 2 0 1 0