

# 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

Humanity for Progress

ADDRESS (number and street) 400 Capitol Mall Ste 1545

Check if different than previously reported. (ACC)

Sacramento CA 95814

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

C C00619593  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 type="checkbox"/> General (12G)	<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> Convention (12C)	<input type="checkbox"/> Special (12S)	

Election on M M M / D D D / Y Y Y Y Y Y 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)
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Election on M M M / D D D / Y Y Y Y Y Y in the State of  

5. Covering Period M M M / D D D / Y Y Y Y Y Y 07 / 01 / 2016 through M M M / D D D / Y Y Y Y Y Y 09 / 30 / 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 Miller, Russell, , ,

Signature of Treasurer Miller, Russell, , , [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y 10 / 10 / 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**

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Page 2

Write or Type Committee Name

Humanity for Progress

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"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="29200.00"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="146255.00"/>	<input type="text" value="205455.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="175455.00"/>	<input type="text" value="205455.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="115908.82"/>	<input type="text" value="145908.82"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="59546.18"/>	<input type="text" value="59546.18"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="2007.81"/>	

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  
Humanity for Progress

Report Covering the Period: From: MM / DD / YYYY 07 / 01 / 2016 To: MM / DD / YYYY 09 / 30 / 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).....	145500.00	204700.00
(ii) Unitemized .....	755.00	755.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	146255.00	205455.00
(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) .....	146255.00	205455.00
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	0.00
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	0.00
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)).....▶	146255.00	205455.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	146255.00	205455.00

**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 .....	5908.82	5908.82
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	5908.82	5908.82
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) .....	110000.00	140000.00
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	0.00
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)) ..	115908.82	145908.82
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	115908.82	145908.82

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	146255.00	205455.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	146255.00	205455.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	5908.82	5908.82
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	5908.82	5908.82

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 27
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)  
**Humanity for Progress**

**A. Abt, Wendy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 19 Follen St  
 City Cambridge State MA Zip Code 02138  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) WPA, Inc. Occupation (for Individual) President  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  Calendar Year  
 Aggregate Year-to-Date **10000.00**

Date of Receipt **07 / 23 / 2016**  
**Transaction ID : 11AI-22**  
 Amount of Each Receipt this Period **10000.00**  
 Memo Item

**B. Brooks, James, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11100 Santa Monica Blvd Ste 400  
 City Los Angeles State CA Zip Code 90025  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Producer  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  Calendar Year  
 Aggregate Year-to-Date **5000.00**

Date of Receipt **09 / 15 / 2016**  
**Transaction ID : 11AI-51**  
 Amount of Each Receipt this Period **5000.00**  
 Memo Item

**C. Gochman, Molly, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 34 Greene St PH  
 City New York State NY Zip Code 10013  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Artist  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  Calendar Year  
 Aggregate Year-to-Date **10000.00**

Date of Receipt **09 / 20 / 2016**  
**Transaction ID : 11AI-53**  
 Amount of Each Receipt this Period **10000.00**  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>25000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 27
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Humanity for Progress**

**A. Gund, Agnes, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 765 Park Ave  
 City New York State NY Zip Code 10021  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Philanthropist  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  Calendar Year  
 Aggregate Year-to-Date **5000.00**

Date of Receipt **09 / 26 / 2016**  
**Transaction ID : 11AI-56**  
 Amount of Each Receipt this Period **5000.00**  
 Memo Item

**B. Harnisch, Ruth Ann, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8 Clairedale Dr  
 City Hampton Bays State NY Zip Code 11946  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) The Harnisch Foundation Occupation (for Individual) Founder & CEO  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  Calendar Year  
 Aggregate Year-to-Date **1500.00**

Date of Receipt **08 / 18 / 2016**  
**Transaction ID : 11AI-37-I**  
 Amount of Each Receipt this Period **1000.00**  
 Memo Item  
 Earmarked through ActBlue. Date recieved by conduit in memo record below.

**C. ActBlue**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 441146  
 City Somerville State MA Zip Code 02144  
 FEC ID number of contributing federal political committee. **C C00401224**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  Calendar Year  
 Aggregate Year-to-Date **18255.00**

Date of Receipt **08 / 12 / 2016**  
**Transaction ID : 11AI-37-I-MEMO**  
 Amount of Each Receipt this Period **1000.00**  
 Memo Item  
 Total earmarked through conduit, PAC limits not affected.

**SUBTOTAL** of Receipts This Page (optional)..... **6000.00**  
**TOTAL** This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 27
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Humanity for Progress**

**A. Harnisch, Ruth Ann, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8 Clairedale Dr  
 City Hampton Bays State NY Zip Code 11946  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) The Harnisch Foundation Occupation (for Individual) Founder & CEO  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  Calendar Year  
 Aggregate Year-to-Date **1500.00**

Date of Receipt **09 / 22 / 2016**  
**Transaction ID : 11AI-55-I**  
 Amount of Each Receipt this Period **500.00**  
 Memo Item  
 Earmarked through ActBlue. Date recieved by conduit in memo record below.

**B. ActBlue**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 441146  
 City Somerville State MA Zip Code 02144  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  Calendar Year  
 Aggregate Year-to-Date **18255.00**

Date of Receipt **09 / 14 / 2016**  
**Transaction ID : 11AI-55-I-MEMO**  
 Amount of Each Receipt this Period **500.00**  
 Memo Item  
 Total earmarked through conduit, PAC limits not affected.

**C. Lycke, Edith, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4730 Melissa Ln  
 City Dallas State TX Zip Code 75229  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NA Occupation (for Individual) Not Employed  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  Calendar Year  
 Aggregate Year-to-Date **250.00**

Date of Receipt **08 / 18 / 2016**  
**Transaction ID : 11AI-38-I**  
 Amount of Each Receipt this Period **250.00**  
 Memo Item  
 Earmarked through ActBlue. Date recieved by conduit in memo record below.

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>750.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 27
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Humanity for Progress**

**A. ActBlue**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 441146

City Somerville	State MA	Zip Code 02144
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FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual)	Occupation (for Individual)

Receipt For: 2016  
 Primary  General  
 Other (specify)  Calendar Year

Aggregate Year-to-Date ▼  
18255.00

Date of Receipt  
08 / 14 / 2016

**Transaction ID : 11AI-38-I-MEMO**

Amount of Each Receipt this Period  
250.00

Memo Item

Total earmarked through conduit, PAC limits not affected.

**B. Lee, Barbara, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 131 Mt Auburn St Ste 2

City Cambridge	State MA	Zip Code 02138
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self	Occupation (for Individual) Philanthropist
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Receipt For: 2016  
 Primary  General  
 Other (specify)  Calendar Year

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
08 / 11 / 2016

**Transaction ID : 11AI-34**

Amount of Each Receipt this Period  
5000.00

Memo Item

**C. Lurie, Dorothy, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25 Templar Pl

City Oakland	State CA	Zip Code 94618
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NA	Occupation (for Individual) Retired
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Receipt For: 2016  
 Primary  General  
 Other (specify)  Calendar Year

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
07 / 05 / 2016

**Transaction ID : 11AI-16**

Amount of Each Receipt this Period  
10000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	15000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Humanity for Progress**

**A. Mom's Organic Market, Inc.**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5612 Randolph Rd

City Rockville	State MD	Zip Code 20852
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)

Receipt For: 2016  
 Primary  General  
 Other (specify) **Calendar Year**

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2016

**Transaction ID : 11AI-15**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B. Newell, Margaret, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 29 Ballard Branch Rd

City Weaverville	State NC	Zip Code 28787
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NA	Occupation (for Individual) Retired
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Receipt For: 2016  
 Primary  General  
 Other (specify) **Calendar Year**

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

**Transaction ID : 11AI-44**

Amount of Each Receipt this Period  
500.00

Memo Item

**C. Newell, Margaret, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 29 Ballard Branch Rd

City Weaverville	State NC	Zip Code 28787
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NA	Occupation (for Individual) Retired
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Receipt For: 2016  
 Primary  General  
 Other (specify) **Calendar Year**

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

**Transaction ID : 11AI-45**

Amount of Each Receipt this Period  
500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 27
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Humanity for Progress**

**A. Otting, Laura, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 56 Farlow Rd  
 City Newton State MA Zip Code 02458  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) NonProfit Professionals Advisory Group Occupation (for Individual) Founder  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  Calendar Year  
 Aggregate Year-to-Date 1000.00

Date of Receipt 07 / 12 / 2016  
**Transaction ID : 11AI-21**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. Polinger, Lorre, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3465 N Pines Way Ste 104  
 City Wilson State WY Zip Code 83014  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) Self Occupation (for Individual) Social Worker  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  Calendar Year  
 Aggregate Year-to-Date 1000.00

Date of Receipt 09 / 30 / 2016  
**Transaction ID : 11AI-58-I**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 Earmarked through ActBlue. Date recieved by conduit in memo record below.

**C. ActBlue**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 441146  
 City Somerville State MA Zip Code 02144  
 FEC ID number of contributing federal political committee. C C00401224  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  Calendar Year  
 Aggregate Year-to-Date 18255.00

Date of Receipt 09 / 23 / 2016  
**Transaction ID : 11AI-58-I-MEMO**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 Total earmarked through conduit, PAC limits not affected.

**SUBTOTAL** of Receipts This Page (optional)..... 2000.00  
**TOTAL** This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Humanity for Progress**

**A. Poss, Ellen, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 450 Warren St

City Brookline	State MA	Zip Code 02445
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NA	Occupation (for Individual) Retired
---	--

Receipt For: 2016  
 Primary  General  
 Other (specify) **Calendar Year**

Aggregate Year-to-Date **20000.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		10		2016

**Transaction ID : 11AI-32**

Amount of Each Receipt this Period  

20000.00
----------

 Memo Item

**B. Rafanelli Events Management, Inc.**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 867 Boylston St Fl 4

City Boston	State MA	Zip Code 02116
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For: 2016  
 Primary  General  
 Other (specify) **Calendar Year**

Aggregate Year-to-Date **5000.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2016

**Transaction ID : 11AI-35**

Amount of Each Receipt this Period  

5000.00
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 Memo Item

**C. Raphael, Catherine, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5859 Beacon St

City Pittsburgh	State PA	Zip Code 15217
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NA	Occupation (for Individual) Philanthropist
---	---

Receipt For: 2016  
 Primary  General  
 Other (specify) **Calendar Year**

Aggregate Year-to-Date **500.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		11		2016

**Transaction ID : 11AI-20**

Amount of Each Receipt this Period  

500.00
--------

 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>25500.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 13 OF 27  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**Humanity for Progress**

**A. Rees, Dennis, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 37 Sandy Hook Rd S  
 City Sarasota State FL Zip Code 34242  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) NA Occupation (for Individual) Retired  
 Receipt For: 2016  
 Primary  General  
 Other (specify) Calendar Year  
 Aggregate Year-to-Date 5000.00

Date of Receipt  
 08 / 11 / 2016  
**Transaction ID : 11AI-33**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item

**B. Rey, Lilli, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4 Windsor Dr  
 City Hillsborough State CA Zip Code 94010  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) NA Occupation (for Individual) Not Employed  
 Receipt For: 2016  
 Primary  General  
 Other (specify) Calendar Year  
 Aggregate Year-to-Date 1000.00

Date of Receipt  
 09 / 15 / 2016  
**Transaction ID : 11AI-52**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**C. Schaff, Barbara, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1111 Locust St # 4B  
 City Philadelphia State PA Zip Code 19107  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) NA Occupation (for Individual) Not Employed  
 Receipt For: 2016  
 Primary  General  
 Other (specify) Calendar Year  
 Aggregate Year-to-Date 250.00

Date of Receipt  
 08 / 04 / 2016  
**Transaction ID : 11AI-26-I**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
 Earmarked through ActBlue. Date recieved by conduit in memo record below.

**SUBTOTAL** of Receipts This Page (optional)..... 3750.00  
**TOTAL** This Period (last page this line number only).....

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

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

FOR LINE NUMBER: PAGE 14 OF 27  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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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)  
**Humanity for Progress**

**A. ActBlue**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO Box 441146

City Somerville	State MA	Zip Code 02144
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual) Occupation (for Individual)

Receipt For: 2016  
 Primary  General  
 Other (specify)  Calendar Year

Aggregate Year-to-Date ▼  
18255.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
07 / 27 / 2016

**Transaction ID : 11AI-26-I-MEMO**

Amount of Each Receipt this Period  
250.00

Memo Item

Total earmarked through conduit, PAC limits not affected.

**B. Schley, Evander, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 6301 Porterdale Dr

City Malibu	State CA	Zip Code 90265
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)  
NA Not Employed

Receipt For: 2016  
 Primary  General  
 Other (specify)  Calendar Year

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 22 / 2016

**Transaction ID : 11AI-54-I**

Amount of Each Receipt this Period  
2500.00

Memo Item

Earmarked through ActBlue. Date recieved by conduit in memo record below.

**C. ActBlue**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO Box 441146

City Somerville	State MA	Zip Code 02144
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual) Occupation (for Individual)

Receipt For: 2016  
 Primary  General  
 Other (specify)  Calendar Year

Aggregate Year-to-Date ▼  
18255.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 15 / 2016

**Transaction ID : 11AI-54-I-MEMO**

Amount of Each Receipt this Period  
2500.00

Memo Item

Total earmarked through conduit, PAC limits not affected.

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 27
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 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)  
**Humanity for Progress**

**A. Sandler, Herbert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4 Embarcadero Ctr # 3150  
 City San Francisco State CA Zip Code 94111  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Philanthropist  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  Calendar Year  
 Aggregate Year-to-Date **20000.00**

Date of Receipt **09 / 12 / 2016**  
**Transaction ID : 11AI-47**  
 Amount of Each Receipt this Period **20000.00**  
 Memo Item

**B. Tolan, Carol, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3465 N Pines Way Ste 104  
 City Wilson State WY Zip Code 83014  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NA Occupation (for Individual) Not Employed  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  Calendar Year  
 Aggregate Year-to-Date **1000.00**

Date of Receipt **09 / 30 / 2016**  
**Transaction ID : 11AI-59-I**  
 Amount of Each Receipt this Period **1000.00**  
 Memo Item  
 Earmarked through ActBlue. Date recieved by conduit in memo record below.

**C. ActBlue**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 441146  
 City Somerville State MA Zip Code 02144  
 FEC ID number of contributing federal political committee. **C C00401224**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  Calendar Year  
 Aggregate Year-to-Date **18255.00**

Date of Receipt **09 / 22 / 2016**  
**Transaction ID : 11AI-59-I-MEMO**  
 Amount of Each Receipt this Period **1000.00**  
 Memo Item  
 Total earmarked through conduit, PAC limits not affected.

**SUBTOTAL** of Receipts This Page (optional)..... **21000.00**  
**TOTAL** This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 16 OF 27
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Humanity for Progress**

**A. Taylor, Mary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2724 Peachtree Rd NW # 1001  
 City Atlanta State GA Zip Code 30305  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NA Occupation (for Individual) Community Volunteer  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  Calendar Year  
 Aggregate Year-to-Date **20000.00**

Date of Receipt **08 / 24 / 2016**  
**Transaction ID : 11AI-39**  
 Amount of Each Receipt this Period **10000.00**  
 Memo Item

**B. Tucker, Karen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 Circuit Rd  
 City Chestnut Hill State MA Zip Code 02467  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Alosa Foundation Occupation (for Individual) Director  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  Calendar Year  
 Aggregate Year-to-Date **2000.00**

Date of Receipt **08 / 08 / 2016**  
**Transaction ID : 11AI-31**  
 Amount of Each Receipt this Period **2000.00**  
 Memo Item

**C. West, Millicent, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2134 Spring St  
 City Philadelphia State PA Zip Code 19103  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NA Occupation (for Individual) Retired  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  Calendar Year  
 Aggregate Year-to-Date **1000.00**

Date of Receipt **08 / 04 / 2016**  
**Transaction ID : 11AI-25-I**  
 Amount of Each Receipt this Period **1000.00**  
 Memo Item  
 Earmarked through ActBlue. Date recieved by conduit in memo record below.

**SUBTOTAL** of Receipts This Page (optional)..... **13000.00**  
**TOTAL** This Period (last page this line number only).....



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 17 OF 27
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Humanity for Progress**

**A. ActBlue**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 441146

City Somerville	State MA	Zip Code 02144
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual) Occupation (for Individual)

Receipt For: 2016  
 Primary  General  
 Other (specify)  Calendar Year

Aggregate Year-to-Date ▼  
18255.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	27	/	2016

**Transaction ID : 11AI-25-I-MEMO**

Amount of Each Receipt this Period  
1000.00

Memo Item

Total earmarked through conduit, PAC limits not affected.

**B. Williams, Constance, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 307 Brentford Rd

City Haverford	State PA	Zip Code 19041
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)  
NA Not Employed

Receipt For: 2016  
 Primary  General  
 Other (specify)  Calendar Year

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	06	/	2016

**Transaction ID : 11AI-46-I**

Amount of Each Receipt this Period  
10000.00

Memo Item

Earmarked through ActBlue. Date recieved by conduit in memo record below.

**C. ActBlue**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 441146

City Somerville	State MA	Zip Code 02144
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual) Occupation (for Individual)

Receipt For: 2016  
 Primary  General  
 Other (specify)  Calendar year

Aggregate Year-to-Date ▼  
18255.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	06	/	2016

**Transaction ID : 11AI-46-I-MEMO**

Amount of Each Receipt this Period  
10000.00

Memo Item

Total earmarked through conduit, PAC limits not affected.

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 27
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Humanity for Progress**

**A. Winograd, Carol, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 746 Esplanada Way  
 City Stanford State CA Zip Code 94305  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) NA Occupation (for Individual) Retired  
 Receipt For: 2016  
 Primary  General  
 Other (specify) Calendar Year  
 Aggregate Year-to-Date 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 07 / 2016  
**Transaction ID : 11AI-19**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

**B. Winograd, Terry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 746 Esplanada Way  
 City Stanford State CA Zip Code 94305  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) NA Occupation (for Individual) Retired  
 Receipt For: 2016  
 Primary  General  
 Other (specify) Calendar Year  
 Aggregate Year-to-Date 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 07 / 2016  
**Transaction ID : 11AI-18**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

**C. Wolf, Wendy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 224 Valley Ridge Rd  
 City Haverford State PA Zip Code 19041  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) NA Occupation (for Individual) Retired  
 Receipt For: 2016  
 Primary  General  
 Other (specify) Calendar Year  
 Aggregate Year-to-Date 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 05 / 2016  
**Transaction ID : 11AI-17**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	12500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 19 OF 27  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Humanity for Progress**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Wolf, Wendy, , ,

Mailing Address 224 Valley Ridge Rd

City Haverford	State PA	Zip Code 19041
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NA	Occupation (for Individual) Retired
---	--

Receipt For: 2016  
 Primary  General  
 Other (specify)  Calendar Year

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
09 / 26 / 2016

**Transaction ID : 11AI-57**

Amount of Each Receipt this Period  
2500.00

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	145500.00

**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)

<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)  
**Humanity for Progress**

Full Name (Last, First, Middle Initial)

**A. ActBlue**

Mailing Address PO Box 441146

City Somerville State MA Zip Code 02144

Purpose of Disbursement  
Merchant Service Fee

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement  
MM / DD / YYYY  
07 / 30 / 2016

FEC Identification Number  
  
**Transaction ID : 21B-3**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. ActBlue**

Mailing Address PO Box 441146

City Somerville State MA Zip Code 02144

Purpose of Disbursement  
Merchant Service Fee

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement  
MM / DD / YYYY  
08 / 04 / 2016

FEC Identification Number  
  
**Transaction ID : 21B-4**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. ActBlue**

Mailing Address PO Box 441146

City Somerville State MA Zip Code 02144

Purpose of Disbursement  
Merchant Service Fee

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement  
MM / DD / YYYY  
08 / 14 / 2016

FEC Identification Number  
  
**Transaction ID : 21B-7**  
Amount of Each Disbursement this Period

Memo Item

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

**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

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)  
**Humanity for Progress**

Full Name (Last, First, Middle Initial)

**A. ActBlue**

Mailing Address PO Box 441146

City Somerville State MA Zip Code 02144

Purpose of Disbursement  
Merchant Service Fee

001

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 25 / 2016

FEC Identification Number

C [ ]

Transaction ID : 21B-10

Amount of Each Disbursement this Period

[ ] 0.20

Memo Item

Full Name (Last, First, Middle Initial)

**B. ActBlue**

Mailing Address PO Box 441146

City Somerville State MA Zip Code 02144

Purpose of Disbursement  
Merchant Service Fee

001

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 02 / 2016

FEC Identification Number

C [ ]

Transaction ID : 21B-11

Amount of Each Disbursement this Period

[ ] 1.98

Memo Item

Full Name (Last, First, Middle Initial)

**C. ActBlue**

Mailing Address PO Box 441146

City Somerville State MA Zip Code 02144

Purpose of Disbursement  
Merchant Service Fee

001

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 06 / 2016

FEC Identification Number

C [ ]

Transaction ID : 21B-13

Amount of Each Disbursement this Period

[ ] 395.00

Memo Item

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

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

[ ] 397.18

[ ]

**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)  
**Humanity for Progress**

**A. ActBlue**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 441146

City Somerville State MA Zip Code 02144

Purpose of Disbursement Merchant Service Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 12 / 2016

FEC Identification Number: C

Transaction ID : 21B-15

Amount of Each Disbursement this Period: 7.90

Memo Item

**B. ActBlue**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 441146

City Somerville State MA Zip Code 02144

Purpose of Disbursement Merchant Service Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 15 / 2016

FEC Identification Number: C

Transaction ID : 21B-16

Amount of Each Disbursement this Period: 39.50

Memo Item

**C. ActBlue**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 441146

City Somerville State MA Zip Code 02144

Purpose of Disbursement Merchant Service Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 22 / 2016

FEC Identification Number: C

Transaction ID : 21B-17

Amount of Each Disbursement this Period: 118.50

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 165.90

**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

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)  
**Humanity for Progress**

Full Name (Last, First, Middle Initial)

**A. ActBlue**

Mailing Address PO Box 441146

City Somerville State MA Zip Code 02144

Purpose of Disbursement  
Merchant Service Fee

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 21B-19**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Miller & Olson, LLP**

Mailing Address 20 Park Rd, Suite E

City Burlingame State CA Zip Code 94010

Purpose of Disbursement  
Legal and Accounting Services

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 21B-12**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Miller & Olson, LLP**

Mailing Address 20 Park Rd, Suite E

City Burlingame State CA Zip Code 94010

Purpose of Disbursement  
Legal and Accounting Services

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 21B-8**

Amount of Each Disbursement this Period

Memo Item

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

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

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 24 OF 27
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Humanity for Progress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Miller &amp; Olson, LLP</b>			Nature of Debt (Purpose): Legal and Accounting Services
Mailing Address 20 Park Rd, Suite E			
City Burlingame	State CA	Zip Code 94010	

Outstanding Balance Beginning This Period		Transaction ID : D10-55-V	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
2007.81	0.00	2007.81	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	2007.81
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	2007.81
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	2007.81



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

NAME OF COMMITTEE (In Full) <b>Humanity for Progress</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00619593
---	--

Check if  24-hour report  48-hour report  New report Amends report filed on  /  /

Full Name of Payee <input type="checkbox"/> Memo Item <b>Art Not War</b>			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address <b>93 1st Place #4</b>			Amount <input type="text"/>		
City <b>Brooklyn</b>	State <b>NY</b>	Zip Code <b>11231</b>	<b>Transaction ID : E-2</b>		
Purpose of Expenditure <b>Social Media Communication</b>		Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: <b>Clinton, Hillary, , ,</b>			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <input type="checkbox"/> Memo Item <b>Art Not War</b>			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address <b>93 1st Place #4</b>			Amount <input type="text"/>		
City <b>Brooklyn</b>	State <b>NY</b>	Zip Code <b>11231</b>	<b>Transaction ID : E-5</b>		
Purpose of Expenditure <b>Social Media Communication</b>		Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: <b>Clinton, Hillary, , ,</b>			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____		

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<input type="text"/>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<input type="text"/>
<b>(a) TOTAL</b> Independent Expenditures .....	<input type="text"/>

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.

*Miller, Russell, , ,*

**[Electronically Filed]**

Date

/  /

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Humanity for Progress
FEC IDENTIFICATION NUMBER
C 00619593

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: Art Not War
Mailing Address: 93 1st Place #4
City: Brooklyn, State: NY, Zip Code: 11231
Purpose of Expenditure: Social Media Communications
Category/Type: 004
Date of Public Distribution/Dissemination: 08/24/2016
Amount: 30000.00
Transaction ID: E-9
Date of Disbursement or Obligation: 08/24/2016

Name of Federal Candidate: Clinton, Hillary, ,
Support [checked] Oppose [ ]
Office Sought: President [checked] House [ ] Senate [ ]
Disbursement For: Primary [ ] General [checked] Other [ ]

Full Name of Payee: Art Not War
Mailing Address: 93 1st Place #4
City: Brooklyn, State: NY, Zip Code: 11231
Purpose of Expenditure: Social Media Communications
Category/Type: 004
Date of Public Distribution/Dissemination: 09/06/2016
Amount: 12000.00
Transaction ID: E-14
Date of Disbursement or Obligation: 09/06/2016

Name of Federal Candidate: Clinton, Hillary, ,
Support [checked] Oppose [ ]
Office Sought: President [checked] House [ ] Senate [ ]
Disbursement For: Primary [ ] General [checked] Other [ ]

(a) SUBTOTAL of Itemized Independent Expenditures: 42000.00
(a) SUBTOTAL of Unitemized Independent Expenditures:
(a) 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.

Miller, Russell, ,

[Electronically Filed]

Date

10 / 10 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Humanity for Progress
FEC IDENTIFICATION NUMBER
C C00619593

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
Art Not War
Mailing Address
93 1st Place #4
City
Brooklyn State
NY Zip Code
11231
Purpose of Expenditure
Social Media Communications
Category/Type
004
Date of Public Distribution/Dissemination
09 / 23 / 2016
Amount
8000.00
Transaction ID : E-18
Date of Disbursement or Obligation
09 / 23 / 2016

Name of Federal Candidate:
Clinton, Hillary, ,
Support
Office Sought:
President
Disbursement For:
General
Calendar Year-To-Date
Per Election for Office Sought
140000.00

Full Name of Payee
Mailing Address
City
State
Zip Code
Purpose of Expenditure
Category/Type
Date of Public Distribution/Dissemination
Amount
Date of Disbursement or Obligation

Name of Federal Candidate:
Support
Office Sought:
House
District:
President
Senate
State:
Disbursement For:
Primary
General
Other (specify)
Calendar Year-To-Date
Per Election for Office Sought

Table with 2 columns: Description and Amount.
(a) SUBTOTAL of Itemized Independent Expenditures 8000.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures 110000.00

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Miller, Russell, ,

[Electronically Filed]

Date

10 / 10 / 2016

Signature