

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

National Association of Realtors Congressional Fund

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="1225523.87"/>	<input type="text" value="1225523.87"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="8895816.87"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="16664.00"/>	<input type="text" value="10035050.89"/>
(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="8912480.87"/>	<input type="text" value="11260574.76"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="6995789.00"/>	<input type="text" value="9343882.89"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="1916691.87"/>	<input type="text" value="1916691.87"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

National Association of Realtors Congressional Fund

Report Covering the Period: From: / / To: / /

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).....	16664.00	10035050.89
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	16664.00	10035050.89
(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)	16664.00	10035050.89
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)).....▶	16664.00	10035050.89
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	16664.00	10035050.89

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	801744.00	1200615.89
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	801744.00	1200615.89
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)	6194045.00	8131881.00
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	10000.00
(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	10000.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	1386.00
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)) ..	6995789.00	9343882.89
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6995789.00	9343882.89

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	16664.00	10035050.89
34. Total Contribution Refunds (from Line 28(d))	0.00	10000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	16664.00	10025050.89
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	801744.00	1200615.89
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	801744.00	1200615.89

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA
Transaction ID :

In response to the FEC Request For Additional Information dated 1/10/17 regarding certain Schedule E description(s) as Consulting Services, we are amending our October monthly report (09/01/2016-09/30/2016) to clarify those descriptions. See the amended descriptions on pp. 26 and 29 through 37; and on p.25 (second item only); p. 27 (first item only); and p. 28 (second item only).

Form/Schedule:
Transaction ID:

**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 45
	<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	

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)
National Association of Realtors Congressional Fund

A. Multiple Listing Service of Roanoke Valley, Inc.

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

Mailing Address 4358 Starkey Road

City Roanoke	State VA	Zip Code 24018-0604
-----------------	-------------	------------------------

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 ▼
1300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016

Transaction ID : A196898445DFB4243A4E

Amount of Each Receipt this Period
1300.00

Memo Item

B. National Association Of REALTO, , , ,

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

Mailing Address 430 N Michigan Avenue

City Chicago	State IL	Zip Code 60611-4011
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Corporation	Occupation (for Individual) n/a
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
9758391.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016

Transaction ID : AD1584CB7989140468A3

Amount of Each Receipt this Period
13864.00

Memo Item

In-Kind: Administrative support and solicitation

C. REALTOR ASSOCIATION OF ACADIANA

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

Mailing Address 1819 W Pinhook Ste 115

City Lafayette	State LA	Zip Code 70508-3700
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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 ▼
1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016

Transaction ID : A5B15D427E92C40378C2

Amount of Each Receipt this Period
1500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	16664.00
TOTAL This Period (last page this line number only).....	16664.00

**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)
National Association of Realtors Congressional Fund

Full Name (Last, First, Middle Initial) A. 720 Strategies LLC		Date of Disbursement MM / DD / YYYY 09 / 23 / 2016	
Mailing Address 1111 19th St NW		FEC Identification Number C [] Transaction ID : B18523B315C Amount of Each Disbursement this Period [] 1750.00	
City Washington	State DC	Zip Code 20036-3603	Category/ Type []
Purpose of Disbursement Advance payment for online Ad costs		Memo Item <input type="checkbox"/>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Meath Media Group		Date of Disbursement MM / DD / YYYY 09 / 12 / 2016	
Mailing Address 4441 Kingle St., NW		FEC Identification Number C [] Transaction ID : B39F5184F69 Amount of Each Disbursement this Period [] 25000.00	
City Washington	State DC	Zip Code 20016-3578	Category/ Type []
Purpose of Disbursement Advance payment for online video production costs		Memo Item <input type="checkbox"/>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Meath Media Group		Date of Disbursement MM / DD / YYYY 09 / 23 / 2016	
Mailing Address 4441 Kingle St., NW		FEC Identification Number C [] Transaction ID : B6DF01EF1F Amount of Each Disbursement this Period [] 50000.00	
City Washington	State DC	Zip Code 20016-3578	Category/ Type []
Purpose of Disbursement Advance payment for online video production costs		Memo Item <input type="checkbox"/>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 76750.00
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

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NAME OF COMMITTEE (In Full)

National Association of Realtors Congressional Fund

Full Name (Last, First, Middle Initial)

A. National Association Of REALTO, ., ., .

Mailing Address 430 N Michigan Avenue

City
Chicago

State
IL

Zip Code
60611-4011

Purpose of Disbursement
In-Kind: Administrative support and solicitation

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	6

FEC Identification Number

C []
Transaction ID : BD08536FC6
Amount of Each Disbursement this Period
[] 13864.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Peter D Hart Research Associates Inc

Mailing Address 1724 Connecticut Ave NW

City
Washington

State
DC

Zip Code
20009-1103

Purpose of Disbursement
Trsr to Line 24 (See memo text for detailed explanation)

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C []
Transaction ID : B323F5196A0
Amount of Each Disbursement this Period
[] -30400.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Peter D Hart Research Associates Inc

Mailing Address 1724 Connecticut Ave NW

City
Washington

State
DC

Zip Code
20009-1103

Purpose of Disbursement
Trsr to Line 24 (See memo text for detailed explanation)

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C []
Transaction ID : B73192780F
Amount of Each Disbursement this Period
[] -30400.00

Memo Item

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

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

[]	-46936.00
[]	

**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)
National Association of Realtors Congressional Fund

A. Public Opinion Strategies, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 214 N Fayette St

City Alexandria State VA Zip Code 22314-2433

Purpose of Disbursement
Trsr to Line 24 (See memo text for detailed explanation)

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 21 / 2016

FEC Identification Number: C

Transaction ID : B200AF0BEE

Amount of Each Disbursement this Period: -31000.00

Memo Item

B. Public Opinion Strategies, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 214 N Fayette St

City Alexandria State VA Zip Code 22314-2433

Purpose of Disbursement
Trsr to Line 24 (See memo text for detailed explanation)

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 21 / 2016

FEC Identification Number: C

Transaction ID : B189801E509

Amount of Each Disbursement this Period: -31000.00

Memo Item

C. Public Opinion Strategies, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 214 N Fayette St

City Alexandria State VA Zip Code 22314-2433

Purpose of Disbursement
Trsr to Line 24 (See memo text for detailed explanation)

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 23 / 2016

FEC Identification Number: C

Transaction ID : B056CBA70C

Amount of Each Disbursement this Period: -43500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ -105500.00

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)
National Association of Realtors Congressional Fund

A. Public Opinion Strategies, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 214 N Fayette St

City Alexandria State VA Zip Code 22314-2433

Purpose of Disbursement
Trsr to Line 24 (See memo text for detailed explanation)

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 27 / 2016

FEC Identification Number: C

Transaction ID : BA4B79968F

Amount of Each Disbursement this Period: -37500.00

Memo Item

B. Strategic Partners & Media, Inc

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 480

City Arnold State MD Zip Code 21012-0480

Purpose of Disbursement
Advance payment for online and TV Ad production costs

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 07 / 2016

FEC Identification Number: C

Transaction ID : B9DCFF0683

Amount of Each Disbursement this Period: 914930.00

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	877430.00
TOTAL This Period (last page this line number only).....▶	801744.00

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Association of Realtors Congressional Fund	FEC IDENTIFICATION NUMBER ▼ C C00488742
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Check if 24-hour report 48-hour report ➤ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item 720 Strategies LLC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 07 / 2016
Mailing Address 1111 19th St NW	Amount 1750.00 Transaction ID : E475A721F560D4110A42 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
City Washington State DC Zip Code 20036-3603	
Purpose of Expenditure Website Landing Page costs Category/Type 	
Name of Federal Candidate: Curbelo, Carlos, L., Rep., <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 26 State: FL
Calendar Year-To-Date Per Election for Office Sought 26855.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item 720 Strategies LLC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 16 / 2016
Mailing Address 1111 19th St NW	Amount 1750.00 Transaction ID : EB4A9227D27414A03B49 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
City Washington State DC Zip Code 20036-3603	
Purpose of Expenditure Website Landing Page costs Category/Type 	
Name of Federal Candidate: Correa, Lou, , Rep., <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 46 State: CA
Calendar Year-To-Date Per Election for Office Sought 21960.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	3500.00
(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.

Riley, Thomas, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
02 / 01 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
National Association of Realtors Congressional Fund
FEC IDENTIFICATION NUMBER
C C00488742

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

Full Name of Payee: 720 Strategies LLC
Mailing Address: 1111 19th St NW
City: Washington State: DC Zip Code: 20036-3603
Purpose of Expenditure: Website Landing Page costs
Name of Federal Candidate: Valadao, David, G., Rep.
Amount: 1750.00
Transaction ID: EFC413C04F2084697BC9

Full Name of Payee: 720 Strategies LLC
Mailing Address: 1111 19th St NW
City: Washington State: DC Zip Code: 20036-3603
Purpose of Expenditure: Website Landing Page costs
Name of Federal Candidate: Portman, Rob, J., Sen.
Amount: 1750.00
Transaction ID: EA2D1D3B6B27F4882B70

(a) SUBTOTAL of Itemized Independent Expenditures: 3500.00
(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.

Riley, Thomas, ,

[Electronically Filed]

Date

02 / 01 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Association of Realtors Congressional Fund
FEC IDENTIFICATION NUMBER C C00488742

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

Full Name of Payee 720 Strategies LLC
Mailing Address 1111 19th St NW
City Washington State DC Zip Code 20036-3603
Purpose of Expenditure Website Landing Page costs
Category/Type
Date of Public Distribution/Dissemination 09/19/2016
Amount 1750.00
Transaction ID: E068C29E3446D44A0A17
Date of Disbursement or Obligation

Name of Federal Candidate: Gottheimer, Josh, , ,
Support Oppose
Office Sought: House Senate State: NJ
District: 05
Calendar Year-To-Date Per Election for Office Sought 24065.00
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee 720 Strategies LLC
Mailing Address 1111 19th St NW
City Washington State DC Zip Code 20036-3603
Purpose of Expenditure Website Landing Page costs
Category/Type
Date of Public Distribution/Dissemination 09/23/2016
Amount 1750.00
Transaction ID: E12FB09A4A6614314987
Date of Disbursement or Obligation

Name of Federal Candidate: Heck, Joe, , ,
Support Oppose
Office Sought: House Senate State: NV
District:
Calendar Year-To-Date Per Election for Office Sought 26855.00
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 3500.00
(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.

Riley, Thomas, , ,

[Electronically Filed]

Date

02/01/2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Association of Realtors Congressional Fund	FEC IDENTIFICATION NUMBER ▼ C C00488742
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item 720 Strategies LLC	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1111 19th St NW	Amount <input type="text"/> 1750.00 Transaction ID : EEBA5D705A7DC4D249F6 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City Washington State DC Zip Code 20036-3603	
Purpose of Expenditure Website Landing Page costs Category/Type <input type="text"/>	
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Coffman, Mike, , Rep.,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 06 State: CO
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 777521.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item 720 Strategies LLC	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1111 19th St NW	Amount <input type="text"/> 1750.00 Transaction ID : E3D7E4307F69D4097B6B Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City Washington State DC Zip Code 20036-3603	
Purpose of Expenditure Website Landing Page costs Category/Type <input type="text"/>	
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Paulsen, Erik, , Rep.,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 03 State: MN
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 1802.50	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 3500.00
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL 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.

Riley, Thomas, , ,

[Electronically Filed]

Date

/ /

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
National Association of Realtors Congressional Fund
FEC IDENTIFICATION NUMBER
C C00488742

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

Full Name of Payee: 720 Strategies LLC
Mailing Address: 1111 19th St NW
City: Washington, State: DC, Zip Code: 20036-3603
Purpose of Expenditure: Website Landing Page costs
Amount: 1750.00
Transaction ID: E08F41B5DC1ED4DA7AB1
Date of Disbursement or Obligation: 09/23/2016
Name of Federal Candidate: Dold, Robert, J., Rep., Jr.
Support: [X] Oppose: []
Office Sought: House [X] Senate [] President []
District: 10 State: IL
Disbursement For: General [X] Primary [] Other []
Amount: 449455.00

Full Name of Payee: Fenn Communications Group
Mailing Address: 2715 M St NW, Ste 150
City: Washington, State: DC, Zip Code: 20007-3733
Purpose of Expenditure: Online Ad Costs
Amount: 146000.00
Transaction ID: E1E36029500374983AB1
Date of Disbursement or Obligation: 09/20/2016
Name of Federal Candidate: Gottheimer, Josh, ,
Support: [X] Oppose: []
Office Sought: House [X] Senate [] President []
District: 05 State: NJ
Disbursement For: General [X] Primary [] Other []
Amount: 200465.00

(a) SUBTOTAL of Itemized Independent Expenditures: 147750.00
(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.

Riley, Thomas, ,

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02 / 01 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Association of Realtors Congressional Fund	FEC IDENTIFICATION NUMBER ▼ C C00488742
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item Fenn Communications Group	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 2715 M St NW Ste 150	Amount <input type="text"/> 590000.00 Transaction ID : E2BA0E07C584344DC8BA Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City Washington State DC Zip Code 20007-3733	
Purpose of Expenditure TV Ad buy & production costs Category/Type <input type="text"/>	
Name of Federal Candidate: Gottheimer, Josh, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 05 State: NJ
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 1320608.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item Fenn Communications Group	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 2715 M St NW Ste 150	Amount <input type="text"/> 97000.00 Transaction ID : E679A55DAA8EA4385B80 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City Washington State DC Zip Code 20007-3733	
Purpose of Expenditure Online Ad Costs Category/Type <input type="text"/>	
Name of Federal Candidate: Nolan, Rick, M., Rep., <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 08 State: MN
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 712545.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 687000.00
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL 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.

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
National Association of Realtors Congressional Fund
FEC IDENTIFICATION NUMBER
C C00488742

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

Full Name of Payee: Fenn Communications Group
Mailing Address: 2715 M St NW, Ste 150, Washington, DC, 20007-3733
Purpose of Expenditure: TV Ad buy & production costs
Name of Federal Candidate: Nolan, Rick, M., Rep., Support
Office Sought: House, District: 08, State: MN
Amount: 275000.00
Transaction ID: E0E9A2FFAE1584D188FF
Date of Disbursement or Obligation: 09/23/2016
Disbursement For: General 2016
Calendar Year-To-Date Per Election for Office Sought: 712545.00

Full Name of Payee: Majority Strategies
Mailing Address: 135 Professional Dr, Ste 104, Ponte Vedra Beach, FL, 32082-6277
Purpose of Expenditure: Direct Mail Costs
Name of Federal Candidate: Coffman, Mike, , Rep., Support
Office Sought: House, District: 06, State: CO
Amount: 260591.00
Transaction ID: EC186B8B002B74A55A98
Date of Disbursement or Obligation: 09/23/2016
Disbursement For: General 2016
Calendar Year-To-Date Per Election for Office Sought: 777521.00

(a) SUBTOTAL of Itemized Independent Expenditures: 535591.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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Riley, Thomas, ,

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Association of Realtors Congressional Fund
FEC IDENTIFICATION NUMBER C C00488742

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

Full Name of Payee Majority Strategies
Mailing Address 135 Professional Dr Ste 104
City Ponte Vedra Beach State FL Zip Code 32082-6277
Purpose of Expenditure Direct Mail Costs
Date of Public Distribution/Dissemination 09 / 28 / 2016
Amount 777041.00
Transaction ID : EA4FFD1A4E52C40C8824
Date of Disbursement or Obligation

Name of Federal Candidate: Portman, Rob, J., Sen., Support
Office Sought: Senate State: OH
Calendar Year-To-Date Per Election for Office Sought 974341.00
Disbursement For: General 2016

Full Name of Payee Majority Strategies
Mailing Address 135 Professional Dr Ste 104
City Ponte Vedra Beach State FL Zip Code 32082-6277
Purpose of Expenditure Direct Mail Costs
Date of Public Distribution/Dissemination 09 / 28 / 2016
Amount 300221.00
Transaction ID : EAD873E76C8ED466F990
Date of Disbursement or Obligation

Name of Federal Candidate: Dold, Robert, J., Rep., Jr. Support
Office Sought: House District: 10 State: IL
Calendar Year-To-Date Per Election for Office Sought 750411.00
Disbursement For: General 2016

(a) SUBTOTAL of Itemized Independent Expenditures 1077262.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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

NAME OF COMMITTEE (In Full) National Association of Realtors Congressional Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00488742 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Majority Strategies	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 09 / 28 / 2016 </div>						
Mailing Address 135 Professional Dr Ste 104	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">594729.00</div> Transaction ID : ECFFE3279DF954AEFB5D Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>						
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Ponte Vedra Beach</td> <td>FL</td> <td>32082-6277</td> </tr> </table>		City	State	Zip Code	Ponte Vedra Beach	FL	32082-6277
City		State	Zip Code				
Ponte Vedra Beach	FL	32082-6277					
Purpose of Expenditure Direct Mail Costs							
Name of Federal Candidate: Heck, Joe, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: <u>NV</u> <input type="checkbox"/> President						
Calendar Year-To-Date Per Election for Office Sought 1503924.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

Full Name of Payee <input type="checkbox"/> Memo Item Meath Media Group	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 09 / 07 / 2016 </div>						
Mailing Address 4441 Klingle St., NW	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">25000.00</div> Transaction ID : E9D826D1523094B25A23 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>						
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20016-3578</td> </tr> </table>		City	State	Zip Code	Washington	DC	20016-3578
City		State	Zip Code				
Washington	DC	20016-3578					
Purpose of Expenditure Online video production costs							
Name of Federal Candidate: Curbelo, Carlos, L., Rep., <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>26</u> State: <u>FL</u> <input type="checkbox"/> President						
Calendar Year-To-Date Per Election for Office Sought 26855.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">619729.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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.

Riley, Thomas, , , **[Electronically Filed]** Date M M / D D / Y Y Y Y Y Y
02 / 01 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Association of Realtors Congressional Fund
FEC IDENTIFICATION NUMBER C C00488742

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

Full Name of Payee Meath Media Group
Mailing Address 4441 Klingle St., NW
City Washington State DC Zip Code 20016-3578
Purpose of Expenditure Online video production costs
Name of Federal Candidate: Portman, Rob, J., Sen., Support
Office Sought: Senate State: OH
Disbursement For: General 2016
Amount 25000.00
Transaction ID: E9054352E5D9440AA9F5

Full Name of Payee Meath Media Group
Mailing Address 4441 Klingle St., NW
City Washington State DC Zip Code 20016-3578
Purpose of Expenditure Online video production costs
Name of Federal Candidate: Valadao, David, G., Rep., Support
Office Sought: House District: 21 State: CA
Disbursement For: General 2016
Amount 25000.00
Transaction ID: E2FBBB495AD484E87879

(a) SUBTOTAL of Itemized Independent Expenditures 50000.00
(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.

Riley, Thomas, ,

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Association of Realtors Congressional Fund
FEC IDENTIFICATION NUMBER C C00488742

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

Full Name of Payee Meath Media Group
Mailing Address 4441 Klingle St., NW
City Washington State DC Zip Code 20016-3578
Purpose of Expenditure Online video production costs
Name of Federal Candidate: Heck, Joe, , , Support
Office Sought: Senate State: NV
Calendar Year-To-Date Per Election for Office Sought 26855.00
Disbursement For: General 2016

Full Name of Payee Meath Media Group
Mailing Address 4441 Klingle St., NW
City Washington State DC Zip Code 20016-3578
Purpose of Expenditure Online video production costs
Name of Federal Candidate: Nolan, Rick, M., Rep., Support
Office Sought: House District: 08 State: MN
Calendar Year-To-Date Per Election for Office Sought 712545.00
Disbursement For: General 2016

(a) SUBTOTAL of Itemized Independent Expenditures 50000.00
(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.

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Association of Realtors Congressional Fund	FEC IDENTIFICATION NUMBER ▼ C C00488742
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Meath Media Group	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 29 / 2016
Mailing Address 4441 Klingle St., NW	Amount 25000.00 Transaction ID : ED4C5F49020E944EBBF0 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
City Washington State DC Zip Code 20016-3578	
Purpose of Expenditure Online video production costs Category/Type	
Name of Federal Candidate: Paulsen, Erik, , Rep., <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 03 State: MN
Calendar Year-To-Date Per Election for Office Sought 26907.50	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item Meath Media Group	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 30 / 2016
Mailing Address 4441 Klingle St., NW	Amount 25000.00 Transaction ID : E8A1E4952FC87462E81E Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
City Washington State DC Zip Code 20016-3578	
Purpose of Expenditure Online video production costs Category/Type	
Name of Federal Candidate: Blunt, Roy, D., Sen., <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: State: MO
Calendar Year-To-Date Per Election for Office Sought 26907.50	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	50000.00
(a) SUBTOTAL of Unitemized Independent Expenditures	
(a) TOTAL Independent Expenditures	

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Riley, Thomas, , ,

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M M / D D / Y Y Y Y Y Y
02 / 01 / 2017

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Association of Realtors Congressional Fund
FEC IDENTIFICATION NUMBER C C00488742

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

Full Name of Payee Meath Media Group
Mailing Address 4441 Klinge St., NW
City Washington State DC Zip Code 20016-3578
Purpose of Expenditure Online video production costs
Name of Federal Candidate: Coffman, Mike, , Rep., Support
Office Sought: House District: 06 State: CO
Calendar Year-To-Date Per Election for Office Sought 802626.00
Disbursement For: General 2016

Full Name of Payee National Association of REALTORS
Mailing Address 430 N Michigan Ave
City Chicago State IL Zip Code 60611-4011
Purpose of Expenditure Consulting: Design/strategic/compliance
Name of Federal Candidate: Curbelo, Carlos, L., Rep., Support
Office Sought: House District: 26 State: FL
Calendar Year-To-Date Per Election for Office Sought 26855.00
Disbursement For: General 2016

(a) SUBTOTAL of Itemized Independent Expenditures 25105.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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Riley, Thomas, , [Electronically Filed] Date 02 / 01 / 2017
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**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) National Association of Realtors Congressional Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00488742 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item National Association of REALTORS	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 09 / 16 / 2016 </div>						
Mailing Address 430 N Michigan Ave	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 210.00 </div> Transaction ID : E4BF2D3E5B5FF4FD6845 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>						
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Chicago</td> <td>IL</td> <td>60611-4011</td> </tr> </table>		City	State	Zip Code	Chicago	IL	60611-4011
City		State	Zip Code				
Chicago	IL	60611-4011					
Purpose of Expenditure Consulting: Design/strategic/compliance							
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Portman, Rob, J., Sen.,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: <u>OH</u>						
Calendar Year-To-Date Per Election for Office Sought 26960.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

Full Name of Payee <input type="checkbox"/> Memo Item National Association of REALTORS	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 09 / 16 / 2016 </div>						
Mailing Address 430 N Michigan Ave	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 210.00 </div> Transaction ID : E52CCFDCF84FF46EBAC Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>						
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Chicago</td> <td>IL</td> <td>60611-4011</td> </tr> </table>		City	State	Zip Code	Chicago	IL	60611-4011
City		State	Zip Code				
Chicago	IL	60611-4011					
Purpose of Expenditure Consulting: Design/strategic/compliance							
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Valadao, David, G., Rep.,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: <u>21</u> State: <u>CA</u>						
Calendar Year-To-Date Per Election for Office Sought 26960.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 420.00 </div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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Riley, Thomas, , ,

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 Date M M / D D / Y Y Y Y Y Y
 02 / 01 / 2017

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
National Association of Realtors Congressional Fund
FEC IDENTIFICATION NUMBER
C C00488742

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

Full Name of Payee: National Association of REALTORS
Mailing Address: 430 N Michigan Ave
City: Chicago, State: IL, Zip Code: 60611-4011
Purpose of Expenditure: Consulting: Design/strategic/compliance
Category/Type:
Name of Federal Candidate: Correa, Lou, , Rep., Support
Office Sought: House, District: 46, State: CA
Calendar Year-To-Date Per Election for Office Sought: 21960.00
Disbursement For: General 2016
Transaction ID: E113B4BD2CF334A2CB36

Full Name of Payee: National Association of REALTORS
Mailing Address: 430 N Michigan Ave
City: Chicago, State: IL, Zip Code: 60611-4011
Purpose of Expenditure: Online video production costs
Category/Type:
Name of Federal Candidate: Correa, Lou, , Rep., Support
Office Sought: House, District: 46, State: CA
Calendar Year-To-Date Per Election for Office Sought: 21960.00
Disbursement For: General 2016
Transaction ID: E9E34DFCE942347CFB7A

(a) SUBTOTAL of Itemized Independent Expenditures: 20210.00
(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.

Riley, Thomas, ,

[Electronically Filed]

Date

02 / 01 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Association of Realtors Congressional Fund	FEC IDENTIFICATION NUMBER ▼ C C00488742
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item National Association of REALTORS		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 19 / 2016	
Mailing Address 430 N Michigan Ave		Amount 22000.00	
City Chicago	State IL	Zip Code 60611-4011	Transaction ID : EE87FB05736DB4EF4844
Purpose of Expenditure Online video production costs		Category/ Type	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
Name of Federal Candidate: Gottheimer, Josh, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 05 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NJ
Calendar Year-To-Date Per Election for Office Sought		24065.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item National Association of REALTORS		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 19 / 2016	
Mailing Address 430 N Michigan Ave		Amount 315.00	
City Chicago	State IL	Zip Code 60611-4011	Transaction ID : E07335D8F8EC647FEA13
Purpose of Expenditure Consulting: Design/strategic/compliance		Category/ Type	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
Name of Federal Candidate: Gottheimer, Josh, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 05 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NJ
Calendar Year-To-Date Per Election for Office Sought		24065.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	22315.00
(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.

Riley, Thomas, , , [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
02 / 01 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Association of Realtors Congressional Fund
FEC IDENTIFICATION NUMBER C C00488742

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

Full Name of Payee National Association of REALTORS
Mailing Address 430 N Michigan Ave
City Chicago State IL Zip Code 60611-4011
Purpose of Expenditure Consulting: Design/strategic/compliance
Name of Federal Candidate: Gottheimer, Josh, , , Support
Office Sought: House District: 05 State: NJ
Calendar Year-To-Date Per Election for Office Sought 1320608.00
Disbursement For: General 2016

Full Name of Payee National Association of REALTORS
Mailing Address 430 N Michigan Ave
City Chicago State IL Zip Code 60611-4011
Purpose of Expenditure Consulting: Design/strategic/compliance
Name of Federal Candidate: Gottheimer, Josh, , , Support
Office Sought: House District: 05 State: NJ
Calendar Year-To-Date Per Election for Office Sought 1320608.00
Disbursement For: General 2016

(a) SUBTOTAL of Itemized Independent Expenditures 1575.00
(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.

Riley, Thomas, , ,

[Electronically Filed]

Date

02 / 01 / 2017

Signature

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

NAME OF COMMITTEE (In Full) National Association of Realtors Congressional Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00488742 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item National Association of REALTORS		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 21 / 2016
Mailing Address 430 N Michigan Ave		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 630.00 </div>
City Chicago	State IL	
Zip Code 60611-4011	Transaction ID : ECC2A5528751941E397D Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y	
Purpose of Expenditure Consulting: Design/strategic/compliance		Category/Type
Name of Federal Candidate: Dold, Robert, J., Rep., Jr.		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 10 State: IL
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 447705.00 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item National Association of REALTORS		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 21 / 2016
Mailing Address 430 N Michigan Ave		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 525.00 </div>
City Chicago	State IL	
Zip Code 60611-4011	Transaction ID : EA72A97ED5F2E4EC98E1 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y	
Purpose of Expenditure Consulting: Design/strategic/compliance		Category/Type
Name of Federal Candidate: Coffman, Mike, , Rep.,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 06 State: CO
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 514025.00 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 1155.00 </div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 0.00 </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 1155.00 </div>

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.

Riley, Thomas, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
02 / 01 / 2017

Signature

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

NAME OF COMMITTEE (In Full) National Association of Realtors Congressional Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00488742 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item National Association of REALTORS		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 22 / 2016
Mailing Address 430 N Michigan Ave		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1050.00</div> Transaction ID : E39E72722B54643618AD Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
City Chicago	State IL	
Purpose of Expenditure Consulting: Design/strategic/compliance		Category/Type
Name of Federal Candidate: Nolan, Rick, M., Rep.,		Office Sought: <input checked="" type="checkbox"/> House District: 08 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MN
Calendar Year-To-Date Per Election for Office Sought ▶		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
313165.00		

Full Name of Payee <input type="checkbox"/> Memo Item National Association of REALTORS		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 23 / 2016
Mailing Address 430 N Michigan Ave		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1155.00</div> Transaction ID : E8D0355D55BE543EDAA5 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
City Chicago	State IL	
Purpose of Expenditure Consulting: Design/strategic/compliance		Category/Type
Name of Federal Candidate: Coffman, Mike, , Rep.,		Office Sought: <input checked="" type="checkbox"/> House District: 06 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CO
Calendar Year-To-Date Per Election for Office Sought ▶		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
777521.00		

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">2205.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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.

Riley, Thomas, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
02 / 01 / 2017

Signature

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

NAME OF COMMITTEE (In Full) National Association of Realtors Congressional Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00488742 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item National Association of REALTORS	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 23 / 2016						
Mailing Address 430 N Michigan Ave	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 105.00 </div> Transaction ID : E9999EC29CDCB4153AEF Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Chicago</td> <td>IL</td> <td>60611-4011</td> </tr> </table>		City	State	Zip Code	Chicago	IL	60611-4011
City		State	Zip Code				
Chicago	IL	60611-4011					
Purpose of Expenditure Consulting: Design/strategic/compliance							
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Portman, Rob, J., Sen.,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____ District: _____ State: OH						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 196565.00 </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

Full Name of Payee <input type="checkbox"/> Memo Item National Association of REALTORS	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 23 / 2016						
Mailing Address 430 N Michigan Ave	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 52.50 </div> Transaction ID : ED39DAB1A762B42FDAF Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Chicago</td> <td>IL</td> <td>60611-4011</td> </tr> </table>		City	State	Zip Code	Chicago	IL	60611-4011
City		State	Zip Code				
Chicago	IL	60611-4011					
Purpose of Expenditure Consulting: Design/strategic/compliance							
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Blunt, Roy, D., Sen.,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____ District: _____ State: MO						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 1802.50 </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 157.50 </div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y _____ </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y _____ </div>

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.

Riley, Thomas, , , **[Electronically Filed]** Date M M / D D / Y Y Y Y Y Y 02 / 01 / 2017
 Signature

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

NAME OF COMMITTEE (In Full) National Association of Realtors Congressional Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00488742 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item National Association of REALTORS			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 23 / 2016
Mailing Address 430 N Michigan Ave			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 105.00 </div> Transaction ID : E2AFDAE086ECF4128972
City Chicago	State IL	Zip Code 60611-4011	
Purpose of Expenditure Consulting: Design/strategic/compliance		Category/Type 	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
Name of Federal Candidate: Heck, Joe, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: NV
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 26855.00 </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item National Association of REALTORS			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 23 / 2016
Mailing Address 430 N Michigan Ave			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 630.00 </div> Transaction ID : EA3C8016FD10D4D9C96A
City Chicago	State IL	Zip Code 60611-4011	
Purpose of Expenditure Consulting: Design/strategic/compliance		Category/Type 	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
Name of Federal Candidate: Nolan, Rick, M., Rep.,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 08 State: MN
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 712545.00 </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 735.00 </div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y _____ </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y _____ </div>

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.

Riley, Thomas, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
02 / 01 / 2017

Signature

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

NAME OF COMMITTEE (In Full) National Association of Realtors Congressional Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00488742 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item National Association of REALTORS			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 23 / 2016
Mailing Address 430 N Michigan Ave			Amount M M M M . M M 52.50
City Chicago	State IL	Zip Code 60611-4011	Transaction ID : E9EB415495BAC4C85ADA Date of Disbursement or Obligation M M M M / D D D D / Y Y Y Y Y Y
Purpose of Expenditure Consulting: Design/strategic/compliance		Category/Type M M M M	Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Paulsen, Erik, , Rep.,
Calendar Year-To-Date Per Election for Office Sought M M M M . M M 1802.50		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President <input type="checkbox"/> State: MN	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶			

Full Name of Payee <input type="checkbox"/> Memo Item National Association of REALTORS			Date of Public Distribution/Dissemination M M M M / D D D D / Y Y Y Y Y Y 09 / 27 / 2016
Mailing Address 430 N Michigan Ave			Amount M M M M M M . M M 630.00
City Chicago	State IL	Zip Code 60611-4011	Transaction ID : E1CDB3FDC325F4FCA921 Date of Disbursement or Obligation M M M M / D D D D / Y Y Y Y Y Y
Purpose of Expenditure Consulting: Design/strategic/compliance		Category/Type M M M M	Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Heck, Joe, ,
Calendar Year-To-Date Per Election for Office Sought M M M M M M . M M 908460.00		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: NV <input type="checkbox"/> President <input type="checkbox"/> State:	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶			

(a) SUBTOTAL of Itemized Independent Expenditures ▶	M M M M . M M 682.50
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	M M M M . M M
(a) TOTAL Independent Expenditures ▶	M M M M . M M

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.

Signature Riley, Thomas, , , **[Electronically Filed]** Date M M / D D / Y Y Y Y Y Y 02 / 01 / 2017

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

NAME OF COMMITTEE (In Full) National Association of Realtors Congressional Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00488742 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item National Association of REALTORS			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 28 / 2016
Mailing Address 430 N Michigan Ave			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">735.00</div> Transaction ID : E60D470AB5BD24A57893 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
City Chicago	State IL	Zip Code 60611-4011	
Purpose of Expenditure Consulting: Design/strategic/compliance		Category/Type 	
Name of Federal Candidate: Dold, Robert, J., Rep., Jr.		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 10 State: IL
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">750411.00</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item National Association of REALTORS			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 28 / 2016
Mailing Address 430 N Michigan Ave			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">735.00</div> Transaction ID : EADE3036F296C4ED2818 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
City Chicago	State IL	Zip Code 60611-4011	
Purpose of Expenditure Consulting: Design/strategic/compliance		Category/Type 	
Name of Federal Candidate: Portman, Rob, J., Sen.,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: State: OH
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">974341.00</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">1470.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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.

Riley, Thomas, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
02 / 01 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Association of Realtors Congressional Fund
FEC IDENTIFICATION NUMBER C C00488742

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

Full Name of Payee National Association of REALTORS
Mailing Address 430 N Michigan Ave
City Chicago State IL Zip Code 60611-4011
Purpose of Expenditure Consulting: Design/strategic/compliance
Name of Federal Candidate: Heck, Joe, , , Support
Office Sought: Senate State: NV
Calendar Year-To-Date Per Election for Office Sought 1503924.00
Disbursement For: General 2016

Full Name of Payee National Association of REALTORS
Mailing Address 430 N Michigan Ave
City Chicago State IL Zip Code 60611-4011
Purpose of Expenditure Consulting: Design/strategic/compliance
Name of Federal Candidate: Paulsen, Erik, , Rep., Support
Office Sought: House District: 03 State: MN
Calendar Year-To-Date Per Election for Office Sought 26907.50
Disbursement For: General 2016

(a) SUBTOTAL of Itemized Independent Expenditures 840.00
(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.

Riley, Thomas, , ,

[Electronically Filed]

Date

02 / 01 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
National Association of Realtors Congressional Fund
FEC IDENTIFICATION NUMBER
C C00488742

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

Full Name of Payee: National Association of REALTORS
Mailing Address: 430 N Michigan Ave
City: Chicago, State: IL, Zip Code: 60611-4011
Purpose of Expenditure: Consulting: Design/strategic/compliance
Name of Federal Candidate: Blunt, Roy, D., Sen., Support
Office Sought: Senate, State: MO
Amount: 105.00
Transaction ID: E648D39C501C84FFB856
Date of Disbursement or Obligation: 09/30/2016
Disbursement For: General
Calendar Year-To-Date Per Election for Office Sought: 26907.50

Full Name of Payee: National Association of REALTORS
Mailing Address: 430 N Michigan Ave
City: Chicago, State: IL, Zip Code: 60611-4011
Purpose of Expenditure: Consulting: Design/strategic/compliance
Name of Federal Candidate: Coffman, Mike, , Rep., Support
Office Sought: House, State: CO
Amount: 105.00
Transaction ID: E68769C4154664D30A1C
Date of Disbursement or Obligation: 09/30/2016
Disbursement For: General
Calendar Year-To-Date Per Election for Office Sought: 802626.00

(a) SUBTOTAL of Itemized Independent Expenditures: 210.00
(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.

Riley, Thomas, ,

[Electronically Filed]

Date

02 / 01 / 2017

Signature

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

NAME OF COMMITTEE (In Full) National Association of Realtors Congressional Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00488742 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Peter D Hart Research Associates Inc		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 20 / 2016
Mailing Address 1724 Connecticut Ave NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 30400.00 </div>
City Washington State DC Zip Code 20009-1103		
Purpose of Expenditure Polling expenses		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Gottheimer, Josh, , ,		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 05 State: NJ
Calendar Year-To-Date Per Election for Office Sought 200465.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item Peter D Hart Research Associates Inc		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 22 / 2016
Mailing Address 1724 Connecticut Ave NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 30400.00 </div>
City Washington State DC Zip Code 20009-1103		
Purpose of Expenditure Polling expenses		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Nolan, Rick, M., Rep.,		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 08 State: MN
Calendar Year-To-Date Per Election for Office Sought 313165.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 60800.00 </div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 0.00 </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 60800.00 </div>

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.

Riley, Thomas, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 02 / 01 / 2017

Signature

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

NAME OF COMMITTEE (In Full) National Association of Realtors Congressional Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00488742 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Public Opinion Strategies, LLC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 21 / 2016		
Mailing Address 214 N Fayette St			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"> 31000.00 </div>		
City Alexandria	State VA	Zip Code 22314-2433			
Purpose of Expenditure Polling expenses		Category/Type 	Transaction ID : EC1E1BAAD6AA446B384! Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y		
Name of Federal Candidate: Dold, Robert, J., Rep., Jr.			Office Sought: <input checked="" type="checkbox"/> House District: <u>10</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>IL</u>		
Calendar Year-To-Date Per Election for Office Sought 447705.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <input type="checkbox"/> Memo Item Public Opinion Strategies, LLC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 21 / 2016		
Mailing Address 214 N Fayette St			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"> 31000.00 </div>		
City Alexandria	State VA	Zip Code 22314-2433			
Purpose of Expenditure Polling expenses		Category/Type 	Transaction ID : E2BE9E61AA2654BBF8F1 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y		
Name of Federal Candidate: Coffman, Mike, , Rep.,			Office Sought: <input checked="" type="checkbox"/> House District: <u>06</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>CO</u>		
Calendar Year-To-Date Per Election for Office Sought 514025.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">62000.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"> </div>

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.

Riley, Thomas, , **[Electronically Filed]** Date M M / D D / Y Y Y Y Y Y
 Signature 02 / 01 / 2017

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

NAME OF COMMITTEE (In Full) National Association of Realtors Congressional Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00488742 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Public Opinion Strategies, LLC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 23 / 2016
Mailing Address 214 N Fayette St			Amount M M M M / D D D D / Y Y Y Y Y Y 43500.00
City Alexandria	State VA	Zip Code 22314-2433	Transaction ID : EF197C327DACF43EF8D9 Date of Disbursement or Obligation M M M M / D D D D / Y Y Y Y Y Y
Purpose of Expenditure Polling expenses		Category/Type 	Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Portman, Rob, J., Sen.,
Calendar Year-To-Date Per Election for Office Sought 196565.00		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶ State: OH	

Full Name of Payee <input type="checkbox"/> Memo Item Public Opinion Strategies, LLC			Date of Public Distribution/Dissemination M M M M / D D D D / Y Y Y Y Y Y 09 / 27 / 2016
Mailing Address 214 N Fayette St			Amount M M M M / D D D D / Y Y Y Y Y Y 37500.00
City Alexandria	State VA	Zip Code 22314-2433	Transaction ID : E4FD2AA9AC0034982AFC Date of Disbursement or Obligation M M M M / D D D D / Y Y Y Y Y Y
Purpose of Expenditure Polling expenses		Category/Type 	Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Heck, Joe, , ,
Calendar Year-To-Date Per Election for Office Sought 908460.00		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶ State: NV	

(a) SUBTOTAL of Itemized Independent Expenditures ▶	 81000.00
(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.

Riley, Thomas, , ,

[Electronically Filed]

Date

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 02 / 01 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Association of Realtors Congressional Fund
FEC IDENTIFICATION NUMBER C C00488742

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

Full Name of Payee Strategic Partners & Media, Inc
Mailing Address PO Box 480
City Arnold State MD Zip Code 21012-0480
Purpose of Expenditure Online Ad buy and production costs
Name of Federal Candidate: Coffman, Mike, , Rep., Support
Office Sought: House District: 06 State: CO
Calendar Year-To-Date Per Election for Office Sought 514025.00
Disbursement For: General 2016

Full Name of Payee Strategic Partners & Media, Inc
Mailing Address PO Box 480
City Arnold State MD Zip Code 21012-0480
Purpose of Expenditure TV Ad buy & production costs
Name of Federal Candidate: Dold, Robert, J., Rep., Jr. Support
Office Sought: House District: 10 State: IL
Calendar Year-To-Date Per Election for Office Sought 447705.00
Disbursement For: General 2016

(a) SUBTOTAL of Itemized Independent Expenditures 416075.00
(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.

Riley, Thomas, , ,

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Date

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Association of Realtors Congressional Fund
FEC IDENTIFICATION NUMBER C C00488742

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

Full Name of Payee Strategic Partners & Media, Inc
Mailing Address PO Box 480
City Arnold State MD Zip Code 21012-0480
Purpose of Expenditure Online Ad buy and production costs
Name of Federal Candidate: Dold, Robert, J., Rep., Jr.
Office Sought: House District: 10 State: IL
Disbursement For: General 2016
Amount 61000.00
Transaction ID: EC0260831639E41D1A9A

Full Name of Payee Strategic Partners & Media, Inc
Mailing Address PO Box 480
City Arnold State MD Zip Code 21012-0480
Purpose of Expenditure TV Ad buy & production costs
Name of Federal Candidate: Coffman, Mike, , Rep.,
Office Sought: House District: 06 State: CO
Disbursement For: General 2016
Amount 421500.00
Transaction ID: E95FA6D5FCB014CAEA1

(a) SUBTOTAL of Itemized Independent Expenditures 482500.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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Riley, Thomas, ,

[Electronically Filed]

Date 02 / 01 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Association of Realtors Congressional Fund
FEC IDENTIFICATION NUMBER C C00488742

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

Full Name of Payee Strategic Partners & Media, Inc
Mailing Address PO Box 480
City Arnold State MD Zip Code 21012-0480
Purpose of Expenditure Online Ad buy and production costs
Date of Public Distribution/Dissemination 09/23/2016
Amount 126000.00
Transaction ID : ECCCBFB86413149C1A15
Date of Disbursement or Obligation

Name of Federal Candidate: Portman, Rob, J., Sen., Support
Office Sought: Senate State: OH
Calendar Year-To-Date Per Election for Office Sought 196565.00
Disbursement For: General 2016

Full Name of Payee Strategic Partners & Media, Inc
Mailing Address PO Box 480
City Arnold State MD Zip Code 21012-0480
Purpose of Expenditure Online Ad buy and production costs
Date of Public Distribution/Dissemination 09/27/2016
Amount 101000.00
Transaction ID : E920B613425CE44689F7
Date of Disbursement or Obligation

Name of Federal Candidate: Heck, Joe, , Support
Office Sought: Senate State: NV
Calendar Year-To-Date Per Election for Office Sought 908460.00
Disbursement For: General 2016

(a) SUBTOTAL of Itemized Independent Expenditures 227000.00
(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.

Riley, Thomas, ,

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Date

02/01/2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Association of Realtors Congressional Fund
FEC IDENTIFICATION NUMBER C C00488742

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

Full Name of Payee Strategic Partners & Media, Inc
Mailing Address PO Box 480
City Arnold State MD Zip Code 21012-0480
Purpose of Expenditure TV Ad buy & production costs
Name of Federal Candidate: Heck, Joe, , , Support
Office Sought: Senate State: NV
Calendar Year-To-Date Per Election for Office Sought 908460.00
Disbursement For: General 2016

Full Name of Payee Terris Barnes & Walters
Mailing Address 400 Montgomery St Ste 900
City San Francisco State CA Zip Code 94104-1223
Purpose of Expenditure Direct Mail Costs
Name of Federal Candidate: Gottheimer, Josh, , , Support
Office Sought: House District: 05 State: NJ
Calendar Year-To-Date Per Election for Office Sought 1320608.00
Disbursement For: General 2016

(a) SUBTOTAL of Itemized Independent Expenditures 1271043.00
(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.

Riley, Thomas, , ,

[Electronically Filed]

Date

02 / 01 / 2017

Signature

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

NAME OF COMMITTEE (In Full) National Association of Realtors Congressional Fund	FEC IDENTIFICATION NUMBER ▼ C C00488742
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Check if 24-hour report 48-hour report ➤ New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item Terris Barnes & Walters	Date of Public Distribution/Dissemination <input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYYYY"/> 09 / 22 / 2016
Mailing Address 400 Montgomery St Ste 900	Amount <input type="text" value="281715.00"/> 281715.00
City San Francisco State CA Zip Code 94104-1223	
Purpose of Expenditure Direct Mail Costs Category/Type <input type="text"/>	
Name of Federal Candidate: Nolan, Rick, M., Rep., <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 08 State: MN
Calendar Year-To-Date Per Election for Office Sought <input type="text" value="313165.00"/>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYYYY"/>
Mailing Address	Amount <input type="text"/>
City State Zip Code	
Purpose of Expenditure Category/Type <input type="text"/>	
Name of Federal Candidate: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: State:
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text" value="281715.00"/>
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text" value="6194045.00"/>

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.

Riley, Thomas, , **[Electronically Filed]**
Signature Date / /
02 / 01 / 2017