

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations

1. (a) Name of Individual, Organization or Corporation AMERICANS FOR TAX REFORM		3. FEC Identification Number C C90011289
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 722 12TH STREET NW 4TH FLOOR		
(c) City, State and ZIP Code WASHINGTON DC 20005		
2. Corporate filers only	Is the filer a qualified nonprofit corporation? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Individual filers only	Name of Employer	Occupation

4. TYPE OF REPORT (check appropriate boxes):

(a) April 15 Quarterly Report
 July 15 Quarterly Report
 October 15 Quarterly Report
 January 31 Year-End Report

24-Hour Report
 48-Hour Report

b) Is this Report an amendment? Yes No

5. COVERING PERIOD: FROM

M M / D D / Y Y Y Y Y Y
 THROUGH
 M M / D D / Y Y Y Y Y Y

6. TOTAL CONTRIBUTIONS **0.00**

7. TOTAL INDEPENDENT EXPENDITURES **3599234.70**

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent. In addition, (if the independent expenditures reported herein were made by a corporation) I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM	SIGNATURE	DATE
Christopher Butler	<i>Christopher Butler</i> <i>[Electronically Filed]</i>	10/23/2012

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

For further information, contact:

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
AMERICANS FOR TAX REFORM

Full Name (Last, First, Middle Initial) of Payee Main Street Media Group		Date MM / DD / YYYY 10 / 22 / 2012
Mailing Address PO Box 25093		Amount 504405.72 Transaction ID : F57.4662
City Alexandria	State VA	
Zip Code 22313	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> President
Purpose of Expenditure Media Buy - TV		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: ALFRED J JR LAWSON		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 504405.72		

Full Name (Last, First, Middle Initial) of Payee Main Street Media Group		Date MM / DD / YYYY 10 / 22 / 2012
Mailing Address PO Box 25093		Amount 403562.25 Transaction ID : F57.4663
City Alexandria	State VA	
Zip Code 22313	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: GA <input type="checkbox"/> Senate District: 12 <input type="checkbox"/> President
Purpose of Expenditure Media Buy - TV & Cable		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN J. BARROW		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 823094.35		

Full Name (Last, First, Middle Initial) of Payee Main Street Media Group		Date MM / DD / YYYY 10 / 22 / 2012
Mailing Address PO Box 25093		Amount 1019109.55 Transaction ID : F57.4664
City Alexandria	State VA	
Zip Code 22313	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President
Purpose of Expenditure Media Buy - TV & Cable		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: CHARLES A WILSON		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 2097630.43		

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	1927077.52
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures	▶	
(carry total from last page forward to Line 7)		

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
AMERICANS FOR TAX REFORM

Full Name (Last, First, Middle Initial) of Payee Main Street Media Group		Date MM / DD / YYYY 10 / 22 / 2012
Mailing Address PO Box 25093		Amount 457352.35 Transaction ID : F57.4665
City Alexandria	State VA	
Zip Code 22313	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 12 <input type="checkbox"/> President
Purpose of Expenditure Media Buy - TV & Cable		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: MARK CRITZ		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 1928367.95		

Full Name (Last, First, Middle Initial) of Payee Main Street Media Group		Date MM / DD / YYYY 10 / 22 / 2012
Mailing Address PO Box 25093		Amount 483801.50 Transaction ID : F57.4666
City Alexandria	State VA	
Zip Code 22313	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 52 <input type="checkbox"/> President
Purpose of Expenditure Media Buy TV		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: SCOTT PETERS		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 1369053.75		

Full Name (Last, First, Middle Initial) of Payee Main Street Media Group		Date MM / DD / YYYY 10 / 22 / 2012
Mailing Address PO Box 25093		Amount 392236.39 Transaction ID : F57.4667
City Alexandria	State VA	
Zip Code 22313	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: CO <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Purpose of Expenditure Media Buy TV & Cable		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: SALVATORE II PACE		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 1158679.31		

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	1333390.24
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures	▶	
(carry total from last page forward to Line 7)		

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
AMERICANS FOR TAX REFORM

Full Name (Last, First, Middle Initial) of Payee Mentzer Media Services Inc.		Date MM / DD / YYYY 10 / 22 / 2012
Mailing Address 600 Fairmount Avenue, Ste. 306		Amount 264000.00 Transaction ID : F57.4668
City Towson	State MD	
Purpose of Expenditure TV Overlay Media Buy	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 21 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: WILLIAM OWENS		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 833794.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Olsen + Company, LP		Date MM / DD / YYYY 10 / 23 / 2012
Mailing Address 1609 Shoal Creek Boulevard #203		Amount 12154.68 Transaction ID : F57.4669
City Austin	State TX	
Purpose of Expenditure Mail Design/Layout, Printing, Production/Mail Services/Postage	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: ND <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: HEIDI HEITKAMP		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 120863.90		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Olsen + Company, LP		Date MM / DD / YYYY 10 / 23 / 2012
Mailing Address 1609 Shoal Creek Boulevard #203		Amount 15786.94 Transaction ID : F57.4670
City Austin	State TX	
Purpose of Expenditure Mail Design/Layout, Printing, Production/Mail Services/Postage	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: ND <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: HEIDI HEITKAMP		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 136650.84		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	291941.62
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures▶ (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
AMERICANS FOR TAX REFORM

Full Name (Last, First, Middle Initial) of Payee Olsen + Company, LP		Date MM / DD / YYYY 10 / 23 / 2012
Mailing Address 1609 Shoal Creek Boulevard #203		Amount 12741.85 Transaction ID : F57.4671
City Austin	State TX	
Zip Code 78701	Purpose of Expenditure Mail Design/Layout, Printing, Production/Mail Services/Postage	Office Sought: <input type="checkbox"/> House State: ND <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Category/Type 004	Name of Federal Candidate Supported or Opposed by Expenditure: HEIDI HEITKAMP	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 149392.69	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Olsen + Company, LP		Date MM / DD / YYYY 10 / 23 / 2012
Mailing Address 1609 Shoal Creek Boulevard #203		Amount 1856.44 Transaction ID : F57.4672
City Austin	State TX	
Zip Code 78701	Purpose of Expenditure Production/Mail Services/Postage	Office Sought: <input type="checkbox"/> House State: ND <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Category/Type 004	Name of Federal Candidate Supported or Opposed by Expenditure: HEIDI HEITKAMP	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 108709.22	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Rising Tide Media Group LLC		Date MM / DD / YYYY 10 / 22 / 2012
Mailing Address 226 South Fayette		Amount 13513.00 Transaction ID : F57.4673
City Alexandria	State VA	
Zip Code 22314	Purpose of Expenditure TB Production and e-Shipment	Office Sought: <input checked="" type="checkbox"/> House State: GA <input type="checkbox"/> Senate District: 12 <input type="checkbox"/> President
Category/Type 004	Name of Federal Candidate Supported or Opposed by Expenditure: JOHN J. BARROW	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 419532.10	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	28111.29
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
AMERICANS FOR TAX REFORM

Full Name (Last, First, Middle Initial) of Payee Rising Tide Media Group LLC		Date MM / DD / YYYY 10 / 22 / 2012
Mailing Address 226 South Fayette		Amount 11225.00 Transaction ID : F57.4676
City Alexandria	State VA	
Zip Code 22314	Category/Type 004	Office Sought: <input checked="" type="checkbox"/> House State: CO <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Purpose of Expenditure TV Production and e-Shipment		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: SALVATORE II PACE		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 1169904.31		

Full Name (Last, First, Middle Initial) of Payee UPGRADE FILMS		Date MM / DD / YYYY 10 / 22 / 2012
Mailing Address 3299 K Street NW, #200		Amount 7489.03 Transaction ID : F57.4674
City Washington	State DC	
Zip Code 20007	Category/Type 004	Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President
Purpose of Expenditure TV Spot Production		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: CHARLES A WILSON		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 1078520.88		

Full Name (Last, First, Middle Initial) of Payee		Date MM / DD / YYYY
Mailing Address		Amount
City	State	
Zip Code	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Purpose of Expenditure		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought		

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	18714.03
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	▶	3599234.70