

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation Human Rights Campaign		3. FEC Identification Number C C90012626
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1640 Rhode Island Ave NW		
(c) City, State and ZIP Code Washington DC 20036		
2. Occupation and Name of Employer (for Individual Filers Only)		

4. TYPE OF REPORT (check appropriate boxes):

- (a) April 15 Quarterly Report
- July 15 Quarterly Report 24-Hour Report
- October 15 Quarterly Report 48-Hour Report
- January 31 Year-End Report

b) Is this Report an amendment? No Yes, it amends the report filed on / /

5. COVERING PERIOD:
 FROM / /
 THROUGH / /

6. TOTAL CONTRIBUTIONS.....
 7. 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 any political party committee or its agent.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM	SIGNATURE	DATE
James Rinefield	<i>James Rinefield</i>	02/29/2016

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

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Human Rights Campaign

Full Name (Last, First, Middle Initial) of Payee Human Rights Campaign		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 08 / 2015	
Mailing Address 1640 Rhode Island Ave NW		Amount 25.00	
City Washington	State DC	Zip Code 20036	
Purpose of Expenditure Email - staff time		Category/ Type	Transaction ID : D621140
Name of Federal Candidate Supported or Opposed by Expenditure: Rafael Edward Cruz		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: 00
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
		2028.96	

Full Name (Last, First, Middle Initial) of Payee Human Rights Campaign		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 08 / 2015	
Mailing Address 1640 Rhode Island Ave NW		Amount 25.00	
City Washington	State DC	Zip Code 20036	
Purpose of Expenditure Email - staff time		Category/ Type	Transaction ID : D621141
Name of Federal Candidate Supported or Opposed by Expenditure: Mike Huckabee		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
		2028.96	

Full Name (Last, First, Middle Initial) of Payee Human Rights Campaign		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 13 / 2015	
Mailing Address 1640 Rhode Island Ave NW		Amount 588.14	
City Washington	State DC	Zip Code 20036	
Purpose of Expenditure Email - staff time (Nationally disseminated email)		Category/ Type	Transaction ID : D621142
Name of Federal Candidate Supported or Opposed by Expenditure: Rafael Edward Cruz		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: 00
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
		2028.96	

(a) SUBTOTAL of Itemized Independent Expenditures.....	638.14
(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)
Human Rights Campaign

Full Name (Last, First, Middle Initial) of Payee Human Rights Campaign		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 13 / 2015	
Mailing Address 1640 Rhode Island Ave NW		Amount 588.14	
City Washington	State DC	Zip Code 20036	Transaction ID : D621143
Purpose of Expenditure Email - staff time (Nationally disseminated email)	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Mike Huckabee		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2028.96		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Human Rights Campaign		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 13 / 2015	
Mailing Address 1640 Rhode Island Ave NW		Amount 588.14	
City Washington	State DC	Zip Code 20036	Transaction ID : D621144
Purpose of Expenditure Email - staff time (Nationally disseminated email)	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Benjamin S. Carson Sr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 951.58		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee The Engage Group		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 13 / 2015	
Mailing Address 7160 Columbia Gateway Dr Ste 300		Amount 363.44	
City Columbia	State MD	Zip Code 21046	Transaction ID : D621146
Purpose of Expenditure Email development (Nationally disseminated email)	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rafael Edward Cruz		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2028.96		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	1539.72
(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)
Human Rights Campaign

Full Name (Last, First, Middle Initial) of Payee The Engage Group		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 13 / 2015	
Mailing Address 7160 Columbia Gateway Dr Ste 300		Amount 363.44	
City Columbia	State MD	Zip Code 21046	Transaction ID : D621147
Purpose of Expenditure Email development (Nationally disseminated email)	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Mike Huckabee		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2028.96		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee The Engage Group		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 13 / 2015	
Mailing Address 7160 Columbia Gateway Dr Ste 300		Amount 363.44	
City Columbia	State MD	Zip Code 21046	Transaction ID : D621148
Purpose of Expenditure Email development (Nationally disseminated email)	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Benjamin S. Carson Sr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 951.58		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

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

(a) SUBTOTAL of Itemized Independent Expenditures.....	726.88
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	2904.74