

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

Independence USA PAC

ADDRESS (number and street) PO Box 1510

Check if different than previously reported. (ACC)

New York NY 10150

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

C C00532705

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

<input type="checkbox"/> Feb 20 (M2)	<input type="checkbox"/> May 20 (M5)	<input type="checkbox"/> Aug 20 (M8)	<input checked="" type="checkbox"/> Nov 20 (M11) (Non-Election Year Only)
<input type="checkbox"/> Mar 20 (M3)	<input type="checkbox"/> Jun 20 (M6)	<input type="checkbox"/> Sep 20 (M9)	<input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only)
<input type="checkbox"/> Apr 20 (M4)	<input type="checkbox"/> Jul 20 (M7)	<input type="checkbox"/> Oct 20 (M10)	<input type="checkbox"/> Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

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

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

(d) 30-Day POST-Election Report for the:

<input type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
----------------------------------------	---------------------------------------	----------------------------------------

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

5. Covering Period M M / D D / Y Y Y Y Y Y 10 / 01 / 2017 through M M / D D / Y Y Y Y Y Y 10 / 31 / 2017

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
 Type or Print Name of Treasurer Wolfson, Howard, , ,

Signature of Treasurer Wolfson, Howard, , , [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 11 / 20 / 2017

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Independence USA PAC

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="2017"/>	<input type="text"/>	<input type="text" value="4574.73"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="129276.72"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="0.00"/>	<input type="text" value="503395.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="129276.72"/>	<input type="text" value="507969.73"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="7024.25"/>	<input type="text" value="385717.26"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="122252.47"/>	<input type="text" value="122252.47"/>
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="3172.50"/>	

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

Independence USA PAC

Report Covering the Period: From: MM / DD / YYYY 10 / 01 / 2017 To: MM / DD / YYYY 10 / 31 / 2017

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).....	0.00	503395.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii).....▶	0.00	503395.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	0.00	503395.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	0.00	503395.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	0.00	503395.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	7024.25	370680.93
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	7024.25	370680.93
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)	0.00	15036.33
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	7024.25	385717.26
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7024.25	385717.26

DETAILED SUMMARY PAGE
of Disbursements

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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)	0.00	503395.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	503395.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	7024.25	370680.93
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	7024.25	370680.93

**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)
Independence USA PAC

Full Name (Last, First, Middle Initial)
A. Bank of America

Date of Disbursement: / /

Mailing Address: 114 W. 47th St.
6th Floor

City: New York State: NY Zip Code: 10036

Purpose of Disbursement: Bank fee
Candidate Name:

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

FEC Identification Number:
Transaction ID : **SB21B.5693**
Amount of Each Disbursement this Period:
 Memo Item

Full Name (Last, First, Middle Initial)
B. Connections Media LLC

Date of Disbursement: / /

Mailing Address: 1728 14th Street, NW
4th Floor

City: Washington State: DC Zip Code: 20009

Purpose of Disbursement: Website services
Candidate Name:

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

FEC Identification Number:
Transaction ID : **SB21B.5683**
Amount of Each Disbursement this Period:
 Memo Item

Full Name (Last, First, Middle Initial)
C. Connections Media LLC

Date of Disbursement: / /

Mailing Address: 1728 14th Street, NW
4th Floor

City: Washington State: DC Zip Code: 20009

Purpose of Disbursement: Website services
Candidate Name:

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

FEC Identification Number:
Transaction ID : **SB21B.5684**
Amount of Each Disbursement this Period:
 Memo Item

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

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Independence USA PAC

Full Name (Last, First, Middle Initial)

A. Geller & Co.

Mailing Address 909 Third Avenue

City
New York

State
NY

Zip Code
10022

Purpose of Disbursement
Financial advisory services

001

Category/
Type

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 Y
10 / 13 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.5685

Amount of Each Disbursement this Period

[REDACTED] 2144.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Geller & Co.

Mailing Address 909 Third Avenue

City
New York

State
NY

Zip Code
10022

Purpose of Disbursement
Financial advisory services

001

Category/
Type

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 Y
10 / 13 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.5687

Amount of Each Disbursement this Period

[REDACTED] 2580.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Venable LLP

Mailing Address 600 Massachusetts Avenue, NW

City
Washington

State
DC

Zip Code
20001

Purpose of Disbursement
Legal fees

001

Category/
Type

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 Y
10 / 13 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.5689

Amount of Each Disbursement this Period

[REDACTED] 924.00

Memo Item

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

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

[REDACTED] 5648.00

[REDACTED]

**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)
Independence USA PAC

Full Name (Last, First, Middle Initial)

A. Venable LLP

Mailing Address 600 Massachusetts Avenue, NW

City Washington State DC Zip Code 20001

Purpose of Disbursement
Legal fees

Category/
Type

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 Y Y
10 / 13 / 2017

FEC Identification Number

Transaction ID : SB21B.5690
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

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 Y Y

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

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 Y Y

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

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

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

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 9 OF 12
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Independence USA PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Connections Media LLC			Nature of Debt (Purpose): Website services
Mailing Address 1728 14th Street, NW 4th Floor			
City Washington	State DC	Zip Code 20009	

Outstanding Balance Beginning This Period 400.00	Transaction ID : SD10.5665	
Amount Incurred This Period 0.00	Payment This Period 400.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Connections Media LLC			Nature of Debt (Purpose): Website services
Mailing Address 1728 14th Street, NW 4th Floor			
City Washington	State DC	Zip Code 20009	

Outstanding Balance Beginning This Period 400.00	Transaction ID : SD10.5673	
Amount Incurred This Period 0.00	Payment This Period 400.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Connections Media LLC			Nature of Debt (Purpose): Website services
Mailing Address 1728 14th Street, NW 4th Floor			
City Washington	State DC	Zip Code 20009	

Outstanding Balance Beginning This Period 400.00	Transaction ID : SD10.5681	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 400.00

1) SUBTOTALS This Period This Page (optional)..... ▶	400.00
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 10 OF 12
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)
Independence USA PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Connections Media LLC			Nature of Debt (Purpose): Website services
Mailing Address 1728 14th Street, NW 4th Floor			
City Washington	State DC	Zip Code 20009	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.5692	
Amount Incurred This Period 400.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 400.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Geller & Co.			Nature of Debt (Purpose): Financial advisory services
Mailing Address 909 Third Avenue			
City New York	State NY	Zip Code 10022	

Outstanding Balance Beginning This Period 2144.00	Transaction ID : SD10.5678	
Amount Incurred This Period 0.00	Payment This Period 2144.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Geller & Co.			Nature of Debt (Purpose): Financial advisory services
Mailing Address 909 Third Avenue			
City New York	State NY	Zip Code 10022	

Outstanding Balance Beginning This Period 2580.00	Transaction ID : SD10.5680	
Amount Incurred This Period 0.00	Payment This Period 2580.00	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional)..... ▶	400.00
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 11 OF 12
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Independence USA PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Geller & Co.			Nature of Debt (Purpose): Financial advisory services
Mailing Address 909 Third Avenue			
City New York	State NY	Zip Code 10022	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.5697	
Amount Incurred This Period 1906.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1906.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor United States Postal Service			Nature of Debt (Purpose): P.O. Box renewal fee
Mailing Address 909 3RD AVE OFC			
City NEW YORK	State NY	Zip Code 10022	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.5694	
Amount Incurred This Period 90.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 90.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Venable LLP			Nature of Debt (Purpose): Legal fees
Mailing Address 600 Massachusetts Avenue, NW			
City Washington	State DC	Zip Code 20001	

Outstanding Balance Beginning This Period 924.00	Transaction ID : SD10.5672	
Amount Incurred This Period 0.00	Payment This Period 924.00	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional)..... ▶	1996.00
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 12 OF 12
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)
Independence USA PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Venable LLP			Nature of Debt (Purpose): Legal fees
Mailing Address 600 Massachusetts Avenue, NW			
City Washington	State DC	Zip Code 20001	

Outstanding Balance Beginning This Period <input type="text" value="266.50"/>	Transaction ID : SD10.5679	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="266.50"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Venable LLP			Nature of Debt (Purpose): Legal fees
Mailing Address 600 Massachusetts Avenue, NW			
City Washington	State DC	Zip Code 20001	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID : SD10.5691	
Amount Incurred This Period <input type="text" value="376.50"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="376.50"/>

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

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="376.50"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="3172.50"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="3172.50"/>